ATRIO™
HEALTH PLANS

SPECIAL NEEDS PLAN (SNP)

Model of Care Training 2019

Updated: December 2018

OBJECTIVES

- SNP Background
- ATRIO Model of Care
- Reference Material

SPECIAL NEEDS PLAN (SNP)

ATRIO Health Plans is a Medicare Advantage health plan that offers a dual eligible special needs plan (D-SNP). A D-SNP enrolls beneficiaries who are entitled to both Medicare (Title XVIII) and Medical Assistance from a State Plan under Title XIX (Medicaid), and offer the opportunity of enhanced benefits by combining those available through Medicare and Medicaid.

Each plan who offers a SNP plan is federally required by Centers for Medicaid and Medicare Services (CMS) to provide specific components to management of care and provided services to this high risk population. These (4) elements are a standard requirement for each health plan. The implementation of these elements is up to the plan, and generated as a model of care (MOC) agreement with CMS.

- MOC 1: Description of SNP Population (General Population)
- MOC 2: Care Coordination*
- MOC 3: Provider Network*
- MOC 4: MOC Quality Measurement and Performance Improvement

* Provider related elements

ATRIO MODEL OF CARE (MOC)

The two following MOCs require Provider interaction and education:

MOC 2: Care Coordination*

Regulations at 42 CFR §422.101(f)(ii)-(v) and 42 CFR §422.152(g)(2)(vii)-(x) require all SNPs to coordinate the delivery of care, and measure the effectiveness of the MOC delivery of care coordination. Care coordination helps ensure that SNP beneficiaries' health care needs, preferences for health services and information sharing across health care staff and facilities are met over time.

- Health Risk Assessments
- Individual Care Plans
- Interdisciplinary Care Teams
- Transition Care Protocols

MOC 3: Provider Network*

The SNP provider network is a network of health care providers who are contracted to provide health care services to SNP beneficiaries. SNPs must ensure that their MOC identifies, fully describes and implements the following elements for their SNP provider networks.

- MOC Training for the Provider Network

MOC 2 – CARE COORDINATION

MOC 2, Element B (direct) – Health Risk Assessment

ATRIO – Is required to obtain a health risk assessment (HRA) on every SNP member within 90-days of enrollment and within 365 days annually thereafter. Responses from the HRA identify health related problems, or access to care for each member. ATRIO uses these problems to develop *care plan* goals which will ideally drive the beneficiary's level of independence to a self-manage stage.

Members have the right to refuse an HRA, When they do, CMS still requires a health-related general assessment. ATRIO uses data from claims, HEDIS gaps and prior authorizations to create this assessment.

Providers – Assist with annual appointments and preventive care screenings
Assist with closing gaps in care
Submit claims as soon possible after appointments

Regulations at 42 CFR §422.101(f)(i); 42 CFR §422.152(g)(2)(iv) require that all SNPs conduct a Health Risk Assessment for each individual enrolled in the SNP.

MOC 2 – CARE COORDINATION

MOC 2, Element C (direct) – Individualized Care Plan

ATRIO – Uses HRAs and General Assessments to create Individualized Care Plans (ICPs) for each SNP member. An ATRIO nurse case manager (NCM) reviews the assessment with the beneficiary to develop obtainable and measureable goals and objectives.

ATRIO is required to share the ICPs (creation, updates and modifications) with, at a minimum the beneficiary and the primary care provider (PCP).

Providers – Review care plans
- provide feedback, or
- help identify barriers to goals

Regulations at **42 CFR §422.101(f)(ii); 42 CFR §422.152(g)(2)(iv)** stipulate that all SNPs must develop and implement an ICP for each individual enrolled in the SNP

MOC 2 – CARE COORDINATION

MOC 2, Element D (direct) – Interdisciplinary Care Team

ATRIO – Discusses with the beneficiary the requirement to share the care plan with other professionals or representatives, who can assist with developing goals or conquer barriers; an Interdisciplinary Care Team (ICT). CMS expects, at a minimum, the beneficiary's PCP will participate. In the NCM/beneficiary conversation. The beneficiary may opt-out of other participant involvement.

ATRIO will share the care plan with the agreed upon member(s) of the ICT and allow a specified time for feedback. After goals/objectives are agreed upon, the final care plan will shared as well as any updates and/or modifications to the care plan as they occur.

Providers – Review care plans

- provide feedback, or
- help identify barriers to goals
- identify measurements which can be handled within your scope; provide follow-up to those measures (i.e. end of year blood pressure measurements)

Regulations at **42 CFR §422.101(f)(iii); 42 CFR §422.152(g)(2)(iv)** require all SNPs to use an ICT in the management of care for each individual enrolled in the SNP.

MOC 2 – CARE COORDINATION

MOC 2, Element E (direct) – Care Transition Protocols

ATRIO – assists in coordinating a smooth and safe transition of care (TOC) and ensures follow-up appointments, services, medication reconciliation and other beneficiary needs are met when a transition from home to health care setting has been identified. ATRIO involves providers to optimize support to the beneficiary and minimize complications related to care setting transitions, and facility (hospital/skilled nursing facility) admissions and readmissions.

Health care setting: includes home, home health care, acute care, skilled nursing facility, custodial nursing facility, rehabilitation facility and outpatient/ambulatory care/surgery centers.

Providers –

- Review TOC care plan
  - provide feedback, or
  - help identify barriers to goals;
  - respond within timeframes
- Assist with post-discharge medication reconciliation (BC:)
- Use clinical practice guidelines for transition protocols

Regulations at **42 CFR §422.101(f)(2)(iii-v); 42 CFR §422.152(g)(2)(vii-x)** require all SNPs to coordinate the delivery of care.

MOC 3 – CARE COORDINATION

MOC 3, Element C (direct) – MOC Training for the Provider Network

ATRIO – ATRIO regards the primary care provider (PCP) as the expert in determining the health care needs of the SNP beneficiary. Each SNP member is required to have an identified PCP and our SAC NCMs, Customer Service Representatives and Provider Relations staff make special effort to match SNP members with a PCP they can be most aligned and satisfied with.

CMS requires initial and annual SNP MOC training for network providers and out-of-network providers seen by beneficiaries *on a routine basis*. ATRIO acknowledges the busy schedules of it's contracted/non-contracted providers and has tried to outline expectations clearly as well as provide the training and attestation in an efficient manner that also meets CMS's requirements.

Providers – Review training annually
Provide attestation annually
Notify ATRIO when issues arise and training cannot be completed

Regulations at **42 CFR§422.101(f)(2)(ii)** require that SNPs conduct MOC training for their network of providers.

OTHER REASONS FOR INTERACTION

Here are other programs offered where your feedback may be requested:

- CHE programs (Comprehensive Home Evaluations)
- CCM program (Complex Case Management)
- QIPs (Quality Improvement Programs)
- CCIP (Chronic Care Improvement Program)
- Medication Therapy Management
- Overutilization of Opioids Pharmaceutical Program
- CCSMP/Living Health Program (Chronic Care Self-Management Program)

FOR YOUR REFERENCE:

- To obtain a full copy of ATRIO's SNP MOC and any questions please contact ATRIO Medical Management by ATRIO's Customer Service Line: 1-877-672-8620.

- Any suspected issues of non-compliance or fraud, waste and abuse should be reported immediately to ATRIO Compliance at compliance@atriohp.com

- **ATTENTION PROVIDERS** - Please proceed to the following slide for your training attestation.

    - Print and return the attestation to: fax: 866-500-8773
      email: atrio_attestation@atriohp.com

    - Sign electronically: https://www.atriohp.com/Model-of-Care-Provider-Attestation.aspx

Thank you for the care you provide ATRIO SNP members!

SNP MOC Training Attestation

I _____, hereby attest I have reviewed ATRIO Health Plan's Model of Care training which completes the annual requirement. I also understand this is an annual training required of me by the Centers for Medicare and Medicaid Services (CMS) for all Medicare Advantage Special Needs Plan contracted and non-contracted staff participating in the care coordination of ATRIOs SNP members. I understand the Model of Care for our SNP members and my role in improving health outcomes for our most vulnerable population.

_____
Agency/SAC/Clinic

_____
Printed Name

_____ _____
Signature Date

_____
County

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- Any suspected issues of non-compliance or fraud, waste and abuse should be reported immediately to ATRIO Compliance at compliance@atriohp.com.
- Please return signed attestations to: atrio_attestation@atriohp.com

Please retain for your records for proof of training upon request.