



Medicare-Medicaid Plan (MMP)
Provider and Pharmacy
Directory Monitoring
Technical Assistance Call

Vanessa Duran and Teri Bolinger September 7, 2016

### **Agenda**

- Welcome, Introductions, and Objectives
- Overview of CY 2016 Directory Monitoring
- Requirements, Scoring, and Identified Gaps
- CY 2017 Directory Monitoring
- MMP Best Practices and Feedback on CY 2016 Monitoring
- Questions and Answers (Q&A)

### **Objectives**

- Convey importance of this effort within not only MMCO but also the broader CMS landscape
- Provide high-level information about lessons learned
- Illustrate areas where gaps relative to contractual requirements remain
- Obtain feedback from MMPs about their best practices and barriers to compliance
- Discuss future technical assistance and monitoring efforts

# Overview of CY 2016 Directory Monitoring (1 of 3)

- Fall 2014: Reviewed and compared content of existing MMP three-way contracts and Provider and Pharmacy Directories
- **February 2015**: Issued a survey and request for comments on CY 2015 Directory requirements
- April 2015: Issued HPMS memo along with national CY 2016 Provider Directory model
- Spring 2015: Worked with states and MMPs to customize and issue state-specific CY 2016 Directories

# Overview of CY 2016 Directory Monitoring (2 of 3)

- Fall 2015: Leveraged existing oversight and monitoring resources to develop standardized, state-specific review tools
- October 2015 March 2016: Reviewed all operational MMPs' Directories and issued HPMS memo update
- May August 2016: Issued monitoring results letters, released HPMS memo update, and addressed inquiries
- September 2016: Provide additional technical assistance

# Overview of CY 2016 Directory Monitoring (3 of 3)

- Focused on evaluating the presence of information most relevant to beneficiaries when choosing providers
- Weighted elements on a scale of 0 to 5 based on their level of importance to beneficiaries (see Slide 7)
- Reviewed elements evidenced in fully populated provider listings section by section
- Excluded requirements or whole sections already considered during the original marketing materials review

# Requirements, Scoring, and Identified Gaps (1 of 8)

Score/Weight	Description of Score/Weight
0	Optional requirements; no impact on member.
1	Requirements that do not impact a member's ability to read/interpret information in the directory (e.g., Plan Marketing ID number on materials).
2	Requirements that may have a moderate impact on a member's ability to read/interpret information in the directory (e.g., Does the plan show the total number of each type of provider (e.g., PCP, specialist, hospital, etc.)? Does the plan include licensing information (e.g., license number, NPI)? Does the plan indicate how types of pharmacies can be identified and located relative to organizational format?).
3	Statements or disclaimers that provide important information to the member (e.g., Does the plan indicate when a pharmacy is not available to all members? Does the plan describe how an enrollee can find a network provider nearest his or her home relative to the organizational format used in the Directory?) and elements related to the inclusion of legends or keys.
4	Requirements that have a significant impact on a member's ability to read/interpret information in the directory (e.g., Does the plan describe in detail the process of choosing a Primary Care Provider [PCP]?). This includes elements related to referrals, language, alternate formats, cultural competence, public transportation, accessibility accommodations, TTY/TDD options, and days and hours of operation.
5	Required elements that contain essential information for the member (e.g., Does the plan list and define all the pharmacy types in its network [e.g., Plan, Mail Order, Home Infusion, Long-term care (LTC), Indian Health Services/Tribal/Urban Indian Health Program (I/T/U)]? Does the plan include all required fields in its provider listing (i.e., type of provider, county, city, neighborhood/ZIP code, provider)?).

# Requirements, Scoring, and Identified Gaps (2 of 8)

### Six Least Frequently Satisfied Provider and Pharmacy Directory Monitoring Elements

- Listing specific areas or conditions, beyond provider specialty, in which a provider has training or experience treating
- Providing pharmacy phone number (including TTY/TDD where required) or days and hours of operation
- Listing non-English languages spoken onsite or mentioning access to translation services for facilities and facility-based support providers
- Indicating whether the provider's location is accessible by public transportation
- Including all network provider types, support providers, and supplemental benefits offered
- Indicating if a provider has completed cultural competence training

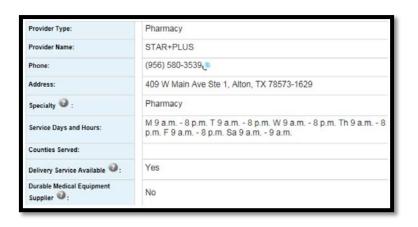
# Requirements, Scoring, and Identified Gaps (3 of 8)

 Listing specific areas or conditions, beyond provider specialty, in which a provider has training or experience treating

BARRAH, BENJAMIN MD		
Board Certified: Internal Medicine		
FULTON MEDICAL PLAZA, PC		
1545 Atlantic Ave		
Brooklyn, NY 11213		
(718) 622-2525 ♦ ₺ ₺ ₺		
⊕ ADA+		
NPI*: 1194873273		
M,T,W,Th,F 09:30A-06:00P		
SPANISH		
Special skill/expertise: Physical		
Disabilities, HIV/AIDS, ESRD		
Gender: M		
Gender, M		

# Requirements, Scoring, and Identified Gaps (4 of 8)

 Providing pharmacy phone number (including TTY/TDD where required) or days and hours of operation



# NB RX PHARMACY 1707 Kings Hwy Brooklyn, NY 11229 (718) 998-0518 ✓ TTY/TDD: 711 NPI\*: 1952604142 M-F 9:00A-6:00P Sa 10:00A-5:00P Su 10:00A-5:00P

### Requirements, Scoring, and Identified Gaps (5 of 8)

3. Listing non-English languages spoken onsite or mentioning access to translation services for facilities and facility-based support providers

### Palo Alto

Stanford Medical Center 🛢 🗀 300 Pasteur Dr Palo Alto, CA 94305 (650) 723-4000 NPI # 1871543215 Hours: Open 24 Hrs-7 Days Languages: Spanish, Vietnamese, Tagalog, Chinese & Accessibility: Basic P,EB,IB,R,E,T

### KINGS HARBOR MULTICARE CENTER 2000 E Gun HI Rd Bronx, NY 10469

(718) 405-3555 🔷 🖔

NPI\*: 1952395626 24/7

ALBANIAN, ARABIC, DUTCH, FARSI, FILIPINO, FRENCH, GREEK, HINDI, HUNGARIAN, IGBO, ITALIAN, JAPANESE,

KOREAN, TWI

Special skill/expertise: ESRD

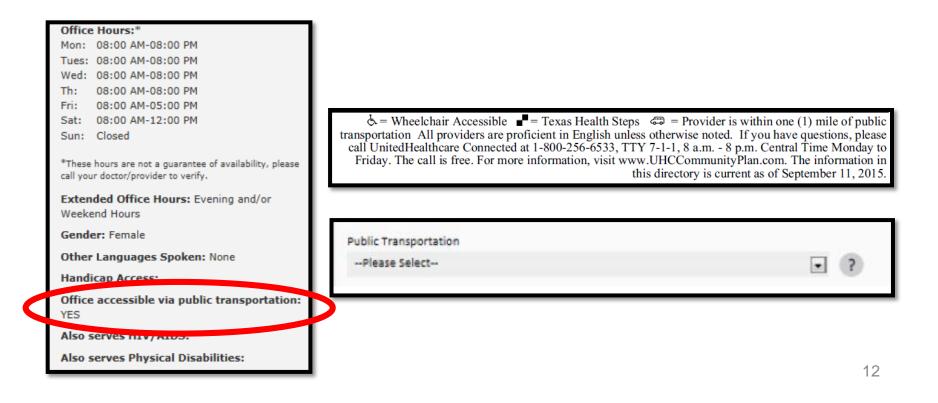
Public transportation is accessible unless indicated

- Provider not accessible by public transportation
- Handicapped accessible Exam room
- Handicapped accessible Equipment
- Handicapped accessible wheel chair
- Interpretative services in office

SWH Interpretive services available upon request

### Requirements, Scoring, and Identified Gaps (6 of 8)

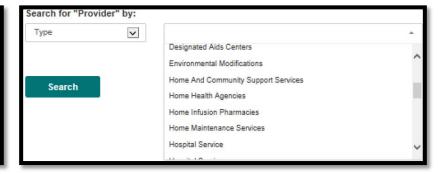
4. Indicating whether the provider's location is accessible by public transportation



# Requirements, Scoring, and Identified Gaps (7 of 8)

5. Including all network provider types, support providers, and supplemental benefits offered

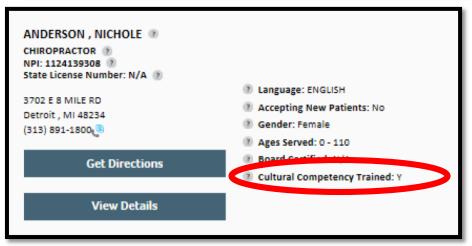
# List of network providers This Directory of *Tufts Health Unify*'s network providers contains: • Health care professionals including primary care providers, specialists, behavioral health providers, dental service providers, and vision service providers; • Facilities including hospitals, nursing facilities, and behavioral health facilities; and • Support providers including long-term services and supports (LTSS) (e.g., adult day health) and community support services (e.g., peer supports)



# Requirements, Scoring, and Identified Gaps (8 of 8)

6. Indicating if a provider has completed cultural competence training

CareMore offers on-going cultural competency trainings to ALL contracted providers.



(718) 972-1777 ◆ ₺ cm
NPI\*: 1114968385
Su 08:00A-12:00P M,T,Th,F,Sa
10:00A-06:00P
BURMESE, CHINESE
Gender: M
Hospital Affiliations: LUTHERAN
MEDICAL CENTER

### **CY 2017 Directory Monitoring**

• Fall 2016: Monitoring of CY 2017 Directories

### • Focus:

- Progress and improvement since CY 2016 monitoring
- Largest remaining gaps
- Additional opportunities for collaboration and technical assistance

### MMP Best Practices and Feedback on CY 2016 Monitoring (1 of 2)

- MMCO invited highest-scoring MMPs to comment on experience and provide examples (e.g., provider and pharmacy engagement strategy, data collection)
- The following MMPs will share insights and practices:
  - Caresource (OH)
  - IEHP Health Access (CA)
  - Humana Health Plan, Inc. (IL)

### MMP Best Practices and Feedback on CY 2016 Monitoring (2 of 2)

- What challenges do MMPs face in creating and maintaining compliant directories?
- How have MMPs begun to address those challenges (e.g., process and system improvements)?
- What additional insights have MMPs gained as a result of monitoring and subsequent improvements?

### **Questions and Answers (Q&A)**

- Participants are encouraged to ask questions about:
  - CY 2016 or CY 2017 monitoring
  - Timelines
  - Future technical assistance
  - Other

 Submit any additional questions to MMCO at <u>MMCOCapsModel@cms.hhs.gov</u>