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

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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)?).

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

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

Special Skills and Experience:

Nerve Disorders

Special Skills and Experience:

HIV/AIDS

Special Services Offered: Mental Health Rehabilitation Services, Mental Health Targeted Case Management

BARRAH, BENJAMIN MD
Board Certified: Internal Medicine
FULTON MEDICAL PLAZA, PC
1545 Atlantic Ave
Brooklyn, NY 11213
(718) 622-2525 ◆ ♿ Ⓔ ㉑
🌐 ADA+
NPI*: 1194873273
M,T,W,Th,F 09:30A-06:00P
SPANISH
Special skill/expertise: Physical
Disabilities, HIV/AIDS, ESRD
Gender: M

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

Provider Type:	Pharmacy
Provider Name:	STAR+PLUS
Phone:	(956) 580-3539
Address:	409 W Main Ave Ste 1, Alton, TX 78573-1629
Specialty ⓘ :	Pharmacy
Service Days and Hours:	M 9 a.m. - 8 p.m. T 9 a.m. - 8 p.m. W 9 a.m. - 8 p.m. Th 9 a.m. - 8 p.m. F 9 a.m. - 8 p.m. Sa 9 a.m. - 9 a.m.
Counties Served:	
Delivery Service Available ⓘ :	Yes
Durable Medical Equipment Supplier ⓘ :	No

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

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 Hl Rd
Bronx, NY 10469
(718) 405-3555 ◆ ♿ Ⓔ ⒠ 🌐
ADA+
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

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

Office Hours:*

Mon: 08:00 AM-08:00 PM
Tues: 08:00 AM-08:00 PM
Wed: 08:00 AM-08:00 PM
Th: 08:00 AM-08:00 PM
Fri: 08:00 AM-05:00 PM
Sat: 08:00 AM-12:00 PM
Sun: Closed

*These hours are not a guarantee of availability, please call your doctor/provider to verify.

Extended Office Hours: Evening and/or Weekend Hours

Gender: Female

Other Languages Spoken: None

Handicap Access:

Office accessible via public transportation:
YES

Also serves HIV/AIDS:

Also serves Physical Disabilities:

♿ = Wheelchair Accessible ◼ = Texas Health Steps = Provider is within one (1) mile of public transportation All providers are proficient in English unless otherwise noted. If you have questions, please call UnitedHealthcare Connected at 1-800-256-6533, TTY 7-1-1, 8 a.m. - 8 p.m. Central Time Monday to Friday. The call is free. For more information, visit www.UHCCommunityPlan.com. The information in this directory is current as of September 11, 2015.

Public Transportation

--Please Select--

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)

Search for "Provider" by:

Type

Search

- Designated Aids Centers
- Environmental Modifications
- Home And Community Support Services
- Home Health Agencies
- Home Infusion Pharmacies
- Home Maintenance Services
- Hospital Service

6. Indicating if a provider has completed cultural competence training

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 MMCOCapsModel@cms.hhs.gov