



EFFECTIVE DATE: *June 1, 2016*

POLICY TITLE:

Availability of Medically Necessary Services

REVIEW BY: *May 30, 2019*

POLICY

Trinity Health ACO is committed to improving health, enhancing quality of care, and lowering the costs of health care services provided to Medicare patients. Trinity Health ACO and its Participants and Preferred Providers will not engage in any practice or activity that would reasonably be expected to have the effect of denying or discouraging the provision of Medically Necessary and Covered Services to Medicare Beneficiaries. Similarly, Trinity Health ACO will not engage in any practice or activity to avoid providing Medically Necessary and Covered Services to At-Risk Beneficiaries.

DEFINITIONS

At-Risk Beneficiary means a beneficiary who: (1) has a high risk score on the CMS-HCC risk adjustment model; (2) is considered high cost due to having two or more hospitalizations or emergency room visits each year; (3) is dually eligible for Medicare and Medicaid; (4) has a high utilization pattern; (5) has one or more chronic conditions; (6) has had a recent diagnosis that is expected to result in increased cost; (7) is entitled to Medicare or Medicaid because of disability; (8) is diagnosed with a mental health or substance abuse disorder; or (9) meets such other criteria as specified in writing by the Centers for Medicare and Medicaid Services.

Beneficiary means an individual enrolled in Medicare who is aligned to the ACO for a given performance year during the term of the NGACO Model Participation Agreement.

Covered Services means the scope of health care benefits for which payment is available under Medicare Parts A and B.

Medically Necessary means reasonable and necessary as determined in accordance with 1862(a) of the Social Security Act.

Participants means a Medicare enrolled provider or supplier that is identified on the required Participant List and, pursuant to a written agreement, has agreed to participate in Trinity Health ACO.

Participant List means the list that identifies each Participant that is approved by CMS for participation in Trinity Health ACO, as updated from time to time in accordance with the NGACO Model Participation Agreement.

Preferred Provider means an individual or entity that is a Medicare enrolled provider or a supplier that is identified on the Preferred Provider List and, pursuant to a written agreement, has agreed to participate in Trinity Health ACO.

Preferred Provider List means the list of Preferred Providers that are approved by CMS for participation in Trinity Health ACO, as updated from time to time in accordance with the NGACO Model Participation Agreement.

RESPONSIBLE DEPARTMENT

Further guidance concerning this Policy may be obtained from the TH ACO Integrity and Compliance or Legal Departments.

RELATED PROCEDURES AND OTHER MATERIALS

- NGACO Model Participation Agreement section V.F. *Availability of Services*

APPROVALS

Initial Approval: Trinity Health ACO Leadership & Operations Team – May 26, 2016

Subsequent Review/Revision(s): *[insert dates of all subsequent reviews/revisions]*