

Trinity Health ACO Policy No. 08

EFFECTIVE DATE: June 1, 2016

POLICY TITLE:

Beneficiary Notifications

REVIEW BY: May 30, 2019

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POLICY

Trinity Health ACO will comply with the Centers for Medicare and Medicaid Services ("CMS") Beneficiary notification requirements under the Next Generation ACO ("NGACO") Model.

PROCEDURE

1. Beneficiary Notification

- a. Within 30 days of receiving from CMS the NGACO beneficiary alignment list for a Performance Year, Trinity Health ACO will provide Beneficiaries notice in writing that they have been aligned to the ACO for the Performance Year.
- b. Chapters will provide required notice to Beneficiaries by electronic email or U.S. postal mail.
- c. Trinity Health ACO will use the template notification letter provided by CMS. The template notification letter will only be modified to the extent explicitly permitted by CMS.
- d. The final notification letter will be submitted by Trinity Health ACO to CMS for review and approval in accordance with Policy No. 6 *Descriptive ACO Materials and Activities* before the letter is sent to Beneficiaries.

2. Beneficiary Data Sharing

- a. Beneficiary Rights to Opt-Out of Data Sharing
 - i. Trinity Health ACO and its Participants and Preferred Providers will provide Beneficiaries who inquire about and wish to modify their data sharing preferences with information about how to change their preferences by contacting 1-800-MEDICARE. This information will be provided through use of a CMS approved flyer or through telephone guidance.

- ii. Trinity Health ACO will allow Beneficiaries to reverse their prior data sharing preferences at any time by contacting 1-800-MEDICARE.
- iii. Trinity Health ACO and its Chapters, Participants and Preferred Providers may contact a Beneficiary who has elected to decline data sharing no more than once per Performance Year to provide information regarding data sharing. Such contacts include mailings, phone calls, electronic communications, or other methods of communicating with Beneficiaries outside of a clinical setting. This restriction does not apply to information shared in a clinical setting.
- iv. Any written materials provided to Beneficiaries under this section must comply with Trinity Health ACO Policy No. 06 *Descriptive ACO Materials and Activities*.

b. Beneficiary Substance Abuse Data Opt-In

- I. Trinity Health ACO and its Chapters, Participants and Preferred Providers may inform each newly-aligned Beneficiary of the following:
 - a. That he/she may elect to allow Trinity Health ACO to receive Beneficiary-level data regarding the utilization of substance abuse services;
 - b. How the Beneficiary can make this election; and
 - c. That 1-800-MEDICARE will answer questions regarding data sharing of substance abuse services.
- ii. Beneficiaries may opt-in to substance abuse data sharing only by submitting a CMS-approved substance abuse opt-in form to Trinity Health ACO.
 - The opt-in form may only be modified to the extent explicitly permitted by CMS;
 - II. Chapters will provide the opt-in form to Beneficiaries by electronic email or U.S. postal mail;
 - III. Trinity Health support services will notify CMS of Beneficiary opt-in elections through electronic submission to CMS of the beneficiary alignment template or as otherwise instructed by CMS.
- iii. Any written materials provided to Beneficiaries under this section must comply with Trinity Health ACO Policy No. 06 *Descriptive ACO Materials and Activities*.

3. Coordinated Care Reward

a. Trinity Health ACO and its Chapters, Participants and Preferred Providers will provide an accurate and current list of Participants and Preferred Providers upon any Beneficiary's

inquiry about the Coordinated Care Reward. The list may be provided in hardcopy or by referring the Beneficiary to the Trinity Health ACO website.

- b. Trinity Health ACO and its Chapters, Participants and Preferred Providers will direct Beneficiaries to 1-800-MEDICARE to obtain additional information about the Coordinated Care Reward.
- c. Trinity Health ACO and its Chapters, Participants and Preferred Providers may communicate in writing with NGACO Beneficiaries regarding the Coordinated Care Reward. Any such writing must comply with Trinity Health ACO Policy No. 06 *Descriptive ACO Materials and Activities*.
- d. Any communication with Beneficiaries regarding the Coordinated Care Reward must clearly convey that CMS is solely responsible for the terms and payment of the reward and the reward does not limit the Beneficiaries' freedom of choice of Medicare providers and suppliers.
- e. Trinity Health ACO and its Chapters, Participants, Preferred Providers and any other individuals or entities performing services related to Trinity Health ACO activities are prohibited from providing gifts or other payments to Beneficiaries as inducements for receiving the Coordinated Care Reward or to influence a Next Generation Beneficiary's decision to qualify for the Coordinated Care Reward. Please see Trinity Health ACO Policy No.04 Beneficiary Inducements for more information.

DEFINITIONS

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.

Chapters mean those organizations participating in Trinity Health ACO and those physicians and providers located in proximity to a participating organization that have signed a Participation Agreement with Trinity Health ACO.

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.

POLICY CONTACT

For questions regarding this policy, please contact the Trinity Health ACO Support Services or Care Management Teams.

RELATED PROCEDURES AND OTHER MATERIALS

- NGACO Model Participation Agreement Section V.D. Beneficiary Notifications
- NGACO Model Participation Agreement Section VI.C. Beneficiary Rights to Opt Out of Data Sharing
- NGACO Model Participation Agreement Section VI.D. Beneficiary Substance Abuse Data Opt In
- Trinity Health ACO Policy No. 04 Beneficiary Inducements
- Trinity Health ACO Policy No. 06 Descriptive ACO Materials and Activities

APPROVALS

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

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