



## 2018 HOUSE CALL PROGRAM LAUNCHED

### PROGRAM COMPLEMENTS MEDICARE ADVANTAGE MEMBERS' RELATIONSHIPS WITH THEIR PCPs

Highmark launched its House Call program during January 2018. This program, offered at no cost to Medicare Advantage members, provides an in-home visit by a nurse practitioner to conduct a general health assessment. The program helps members who have chronic conditions, or are frail and at-risk for further health complications, to better understand their conditions and how they can access the resources they need. Last year, more than 40,000 Medicare Advantage members received House Call visits. The program has been in place for Highmark's Medicare Advantage members since 2011.

#### HOW THE PROGRAM WORKS

Using claims data, Highmark identifies members with chronic conditions and those who may be disengaged from their normal care routines. Highmark has contracted with two vendors, Matrix Medical Network and Advance Health, to administer the program. Their representatives visit eligible Highmark members in their homes to perform the health assessments at no cost to the member.

Each visit lasts approximately one hour and focuses on four primary areas:

- Checking the member's current health status
- Reviewing the member's current medications, screening exams, and vaccinations
- Answering any health-related questions
- Helping to ensure that the member's medical history is accurate and up-to-date with complete documentation

As a result of the assessment being conducted in the member's home, it can bring to light issues that may be difficult to detect in a clinical setting, such as fall risk, home safety, and medication adherence, along with dietary and nutrition concerns. The setting also benefits members who feel more comfortable discussing health issues or concerns at their homes.

Recommendations from the visit are provided to the member, and a summary of the visit is mailed to his or her primary care physician (PCP) or a provider specified by the member. After the assessment, the member is strongly encouraged to follow up with the PCP or provider to discuss the findings.

*(Continued)*

**Note:** The House Call program **does not** replace or bypass the member's relationship with his or her PCP. Rather, the program is intended to complement the PCP-member relationship and to reinforce the importance of regular preventive care. Additionally, Matrix Medical Network and Advance Health **do not** perform or bill for routine physicals or annual wellness visits. No treatment is provided during a House Call.

*(Continued)*



# Highmark's House Call Health Assessment Program

## FREQUENTLY ASKED QUESTIONS

Updated December 2017

### **1. Why does Highmark arrange House Call Health Assessments?**

The program helps members who have chronic conditions or are at risk for further health complications better understand their conditions and how they can access the resources they need. The House Call program does not generate any cost for the member. Highmark's House Call Program provides an in-home health assessment for the member. The in-home assessment secures a unique perspective on a member's health profile by collecting risk and quality related data. This program serves to enhance communications between the member, their primary care physician, and the Health Plan. These assessments support Highmark's quality of care improvement activities through the Stars Program.

### **2. How or why are members identified for the House Call Program?**

Highmark attempts to identify members who may be unable to get to their PCP's office or have not seen their PCP in some time.

### **3. How do I tell my patients to sign up?**

Highmark Medicare Advantage members can call the Member Service number on the back of their health insurance card and notify the Highmark representative that they would like to schedule a House Call. The Highmark representative will support efforts to coordinate a House Call visit for the member with the appropriate vendor. Highmark's Affordable Care Act members will receive direct outreach from the vendor if they have been identified to receive a House Call visit.

### **4. What is the cost to the patient for a House Call?**

House Call activities do not generate any cost for the member or draw from their benefits. In addition, there is no cost to the member for laboratory services. Results from the laboratory testing will be shared with the PCP.

### **5. How does a physician know which members have had a House Call?**

If the member has an identified PCP, the House Call vendor will send correspondence to the PCP before a House Call visit. Following the completion of a visit, the member's PCP will receive a summary report and results from any tests completed during the House Call. After the completed House Call, the member will receive a health summary report. The member is encouraged to review this summary report with their physician.

*(Continued)*

**6. If a practice has members who have chronic conditions that have not yet been reported in the current year, can they submit patient names to the House Call program?**

Those members are most likely already receiving outreach from the House Call vendors. The most effective way for a physician to support the House Call program would be to recommend the House Call to their patients and advise them to call Highmark to schedule a House Call.

**7. Should Highmark already have all this information?**

CMS requires new confirmation of a member's risk profile information annually. In addition, data that does not relate directly to a procedure, such as diagnosis codes or underlying conditions, can be lost in the claims process. The House Call program also offers the opportunity to capture social and environmental factors that cannot be observed in an office setting.

**8. If a member receives a House Call and the PCP subsequently conducts an Annual Wellness Visit (AWV), will the AWV claim be denied?**

No, the House Call and laboratory services from any in-home specimen collections will not interfere with any claims submitted by the member's regular providers. In fact, Highmark encourages members to schedule an enhanced AWV with their PCP after completing a House Call.

**9. I just received an Unconfirmed Diagnosis Code (UDC) report. How is my UDC response affected if those members have a House Call?**

Highmark appreciates your participation in the UDC Program project. Completing a House Call will not interfere with payments for your UDC activities.

**10. Are the House Calls submitted to Highmark in claims?**

Highmark has implemented a supplemental file process in place of direct claims submission for the House Call program. Physicians will receive credit in the Medicare Advantage Incentive Program for Stars gaps closed by specimen collection during the House Call. The House Call vendors capture and report CPT or HCPCS procedure codes as well as quality measures and test codes. After claims are submitted, House Call supplemental data may be submitted as claims to support the resolution of Stars quality measures.

**11. A patient called asking if this was too good to be true. Could it be a scam?**

We have to be safe these days, and there are some for-profit companies performing in-home assessments. The Highmark House Call is a valid program with Highmark's full support. Highmark has contracted with two providers of in-home health assessments during 2018: Matrix Medical Network and Advance Health. Highmark has engaged vendors to complete House Calls since 2011 and approximately 350,000 visits have been completed to date. Both Matrix Medical Network and Advance Health practitioners will present identification at the time of their visit with the member.

*(Continued)*

## **12. Could the House Call disrupt or interfere with the member's existing plan of care?**

The House Call visit will not interfere with an existing plan of care; the scope of service during a House Call does not include treatment.

## **13. What if the PCP does not agree with the findings of the House Call?**

That is important feedback to provide to Highmark. The provider can report the issue to Provider Service, and it will be forwarded to the appropriate team.

## **14. Are House Calls inappropriate due to privacy concerns?**

The contracts between Highmark and the House Call vendors include all necessary confidentiality provisions including, but not limited to, language regarding the use and disclosure of Protected Health Information (PHI) as mandated by the Health Insurance Portability and Accountability Act of 1996 (HIPAA). The disclosure of any clinical information to Matrix Medical Network or Advance Health is appropriate and permitted by law.

## **15. What if a Skilled Nursing Facility, Long-Term Acute Care facility, or Inpatient Rehabilitation Facility doesn't have the time or resources to obtain consent and the attending physician is not available?**

No action is required on the part of the facility except to allow the House Call clinician access to the Highmark member and his or her medical chart. The clinician will follow their established process to gain consent and complete the assessment. If the facility has additional requirements, the clinician will cooperate to the best of his or her ability.

## **16. Our residents or patients already receive a full spectrum of services. Is there any need for a Matrix Medical Network or Advance Health assessment?**

CMS requires that Medicare Advantage plans submit detailed annual documentation on the health status of their Medicare Advantage members. This program helps Highmark satisfy CMS requirements and supports our own ongoing quality and medical management initiatives.

The House Call is provided as a value-added service for Highmark's members and serves to assist Highmark members and their physicians in ensuring the performance of preventive services. The physician, upon receipt of the member's assessment and test results, is encouraged to follow up with the member. Highmark does not render medical advice, treatment, or diagnosis.