

NEXT GENERATION ACO

Beneficiary Frequently Asked Questions – 2019



1. As a Medicare beneficiary, how do I know if I am in the Next Generation ACO?

A letter approved by the Centers for Medicare and Medicaid Services will be mailed by the ACO to all beneficiaries in mid-March. This letter provides information on the ACO, explains additional Medicare programs available to eligible beneficiaries, encourages an Annual Wellness Visit, and lists contact information for any questions. If you do not receive a letter, contact Medicare directly.

2. Why is my physician part of NW Momentum Health Partners (NWMHP) ACO?

NWMHP partnered with Catalyst Medical Group and St. Joseph Regional Medical Center, whom are voluntarily taking part in the Next Generation ACO Model. The goal is to provide better quality care for patients while reducing unnecessary healthcare costs.

All participating healthcare providers under NWMHP are committed to the needs and preferences of their Medicare beneficiaries. All Next Generation ACO beneficiaries have access to care management services, including support locating local providers, coordination of services, assistance in managing complex medical conditions, and much more.

3. Will my Medicare coverage change?

No. Your Medicare coverage will not change.

4. Can I still see my doctor?

Yes. Patients will not see changes in their original Medicare benefits and will keep their freedom to see any Medicare provider.

5. How do I know if my doctor is partnering with NW Momentum Health Partners ACO?

A list of all physicians and healthcare providers in the ACO can be found online at www.NWMomentumHealthACO.com.

6. What is an Annual Wellness Visit (AWV)?

An Annual Wellness Visit is meant to provide an opportunity to discuss conditions and medications with a doctor. An AWV isn't a physical; it's a distinct visit that can be received once a year, which jump-starts the conversation about your health. Such visits have been shown to improve health care for beneficiaries.

7. As part of the ACO, what benefits may I access?

Eligible beneficiaries have access to benefit enhancements, pending provider participation, including:

- **Telehealth:** A way to visit a doctor or certain specialists using technology, such as a computer or smart phone.
- **Nursing Homes:** Medicare typically covers care in a skilled nursing home if you stay in the hospital for at least three days before your admission. Medicare allows our network of doctors to admit into certain nursing homes at any time - regardless of the 3-day hospital stay.
- **Home Visits after Hospital Stays:** For beneficiaries that do not qualify for home health services, Medicare allows NWMHP to dispatch nurses and other skilled staff to homes - up to nine times - after hospital discharge.
- **Home Visits to Prevent Hospital Stays:** For beneficiaries that do not qualify for home health services, Medicare allows NWMHP to send doctors or nurses to your home to help manage healthcare needs.
- **Reduced or Eliminated Out-of-Pocket Expenses:** Reduce or eliminate your costs for some Medicare Part B services.
- **Rewards for Participation in Programs:** Eligible beneficiaries may qualify for gift cards of their choosing based on their participation in care management.

8. What if I do not want to participate in the Next Generation ACO program?

Beneficiaries may contact Medicare directly at 1-800-MEDICARE (1-800-633-4227; TTY users can call 1-877-486-2048) or learn more about this Medicare model at www.innovation.cms.gov/initiatives/Next-Generation-ACO-Model/.

Medicare

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NW Momentum Health Partners

<insert name>, <insert title>
<phone> | <email>