Normative Letter 20-0605

June 5, 2020

To: Managed Care Organizations (MCOs) contracted to offer services under the Government Health Plan Program (Vital)

Re: High Cost High Needs (HCHN) Registry Report

ASES has received and evaluated concerns raised by the above managed care organizations (MCOs) contracted under the Vital program, related to the percentage of membership included in the initial register for High Cost High Needs. Those cases remain pending for qualification for a period no more than six months. This qualification must be based on claims as defined in Attachment 28 of the Contract between ASES and the MCOs for the Provision of Physical and Behavioral Health Services under Vital Program. However, by the situation of the COVID-19 this process has been impacted.

Section 18.2.2.8 of the Contract states: The Contractor shall submit a monthly HCHN Registry Report for ASES to process monthly PMPM Payments. The report shall provide information on all HCHN Enrollees that are identified by the Contractor following the procedures established in Attachment 28 to this Contract. ASES will perform a retroactive review of the conditions identified by Enrollee utilizing the monthly claims data submitted by the Contractor to ASES. If the data does not support the identified condition(s), ASES may retroactively recoup the difference in PMPM Payment.

On the other hand, as specified in Attachment 28, the Contractor shall present, by the 15th day of each month, a HCHN Registry Report containing a roster of all enrollees and the HCHN conditions diagnosed, per the data layout contained in the Standard Operating Procedure for HCHN.
The Standard Operating Procedures Version I for High Cost High Need, responsible parties ASES and MCOs states:

[...] the Contractor may request the registry of qualifying enrollees through the submission of certifications of diagnosis and treatment plan or an inpatient admission. All of these constitute valid alternate methods for the initial registration of new cases for which a validity period of six (6) months from the month following the reporting month will be granted. During that period the case must be certified through an encounter identified by the ASES actuaries in order to extend such validity period to twelve (12) months from the encounter diagnosis date.

After careful review, ASES finds that resolution of this current situation requires further collaboration between ASES and the MCOs. As such, enforcement of the requirement of certification through an encounter during the period of (6) months in order to extend such certification to 12 months, shall be suspended for premium payment of June 15, 2020. Be advised that this waiver should be applied to beneficiaries included in the initial registry with due date on May 2020. In the case that ASES determines that the member should not have been enrolled into a HCHN rate cell, premium will be retroactively recovered in the amount equal to the difference of the HCHN premium and the corresponding lower hierarchy HCHN premium, dual, virtual coverage or Age Gender premium, for each eligible month.

Cordially,

[Signature]

Jorge E. Galva, JD, MHA
Executive Director