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Sent: Friday, November 16, 2018 9:33 AM
To: ASPE SES IMPACT Study (OS/ASPE)
Cc: Marieva Hiraldo Espada
Subject: Response to Request for Information

Good morning,

Greetings from MMM Healthcare. Below you will find our comments regarding the approaches to improve care for Medicare beneficiaries with social risk factors.

Taking in consideration the social risk factors of our membership, Quality Management (QM) provides preventive screening services to members with transportation issues at their home-vicinity thru the Preventour initiative. The Health Plan is closing the gaps in care for these members by assembling clinics at the PCP's medical offices at rural areas; this initiative impact these non-compliant members without the need to drive long distance to metro areas considering some of them don't drive or does not have transportation for area metro.

Also, last year we started providing screening services at the member's home considering some of them are homebound or with temporary mobility issues (fractures of big bones). Both the clinics and the home visits, are properly coordinate by a HP's Call Center representative and notify to the members; at the clinics there are well trained employees including nurses and Health Educators, and specialized vendors that are properly identify as HP's employees. The participation is 100% Voluntary; and most of the members are to participate ones the benefits are properly explained; once at the clinics or at their home, a consent is signed. All documents/results are keep well filed and treated according to HIPAA confidentially; results are share with the member's PCPs for reference and treatment as needed.

The following services has been provided at this initiative: Eye exam for Diabetics, Spirometry for COPD patients, DEXA for osteoporosis, pain screening and BMI. The services rendered by this initiative could be changed/added taking in consideration the membership needs as well as their social risk factors; and we can add laboratories, mammograms, Mental Health Interventions, Pharmacist evaluations, based on the membership needs. All related costs for the services provided is covered by the Health Plan. Also in any of the two scenarios, the HP's employees could be more proactive and made referrals to our Clinical and Social Services Programs or calls to PCPs/family members and in case of a true health emergency, call ambulance for transportation to hospital. This Initiative has been in place for the last 8 years and has help us outreached approximately 7,000 members per year and the closing of 10,000 gaps in care for the members served.

In addition, QM identified the social risk factors of the members served thru our Quality Outreach Call Center's representative that is responsible of doing outbound invitational calls for the preventive clinics at Preventour. If during these calls, the representative identified any members with some limitations under #4 or #5, the approach for the delivery of services is changed to coordinate a home-visit and/or addressed properly any other needed service as stated above.

Currently the only other method for the identification of the social risk factors of members touched by QM are the HOS initiative that provide every two years members data info with relevant social info. These databases are shared with the Clinical Program Units to address and implement strategies.

Thanks,

Carlos A. Puig

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