Health care reform has everybody buzzing. Do not let it sting you! Your participation with Accountable Health Care IPA adds value. Here are some changes you should look for:

**MEDI-CAL EXPANSION**

Starting January 1, 2013, legislators approved changes in the laws to expand coverage for qualified individuals or families. In Los Angeles County, eligibles can join either LA Care Health Plan or Health Net and their plan partners.

**HEALTHY FAMILIES PROGRAM TRANSITION TO MEDI-CAL**

The Healthy Families to Medi-Cal transition initiated in January of this year is expected for completion by September 30, 2013. During this time your members health care coverage and eligibility are the same requirements today as they are under the Healthy Families program. During this time transitioned members will remain in one of the new transition aid codes (H1, H2, H3, H4 & H5) until the county makes an eligibility determination for Medi-Cal. Visit http://www.dhcs.ca.gov/services/pages/healthyfamiliestransition.aspx.

**COORDINATE CARE INITIATIVE**

This California initiative is a step toward transforming the Medi-Cal care delivery system to coordinate care. It is touted to better serve the state’s low-income seniors and persons with disabilities (SPDs). There are two components to the initiative:

1) Cal Medi-Connect is new voluntary three year demonstration health program for hundreds of thousands of elderly and disabled adults. Through approvals from the federal government, this program will be available to people in eight counties who are covered by both Medi-Cal and Medicare. State officials said the new program will offer more coordinated services for the high needs and high cost consumers of health care. The program will start phasing in enrollment in 2014. The eight counties in the Cal MediConnect program will include Alameda, Los Angeles, Orange, Riverside, San Bernardino, San Diego, San Mateo and Santa Clara.

2) Managed Medi-Cal Long-Term Support and Services (LTTS) will require nearly all Medi-Cal beneficiaries to join a Medi-Cal managed care health plan, including dual eligibles and beneficiaries age 21 and older. Visit http://www.calduals.org/.

**“COVERED CALIFORNIA” IS THE HEALTH CARE EXCHANGE**

Covered California is the state’s marketplace for the Patient Protection and Affordable Care Act. It’s the state’s “health exchange” and charged with creating a new health insurance marketplace in which individuals and small businesses can get access to affordable health insurance plans. According to its website, the coverage is due to start 2014. Through certified counselors, individuals will be helped to compare health insurance plans and choose that plan that works best for their health needs and budget. Small businesses will be able to purchase health insurance and offer employees plan selection and may qualify for federal tax credits. Covered California is overseen by a five-member board appointed by the Governor and the Legislature. Visit www.CoveredCA.com.

For more information on the entire reforms go to http://www.whitehouse.gov/.
Accountable Health Care IPA is excited to inform you that incentives are reimbursed for each annual physical exam performed for members enrolled in a Medicare Health plan effective May 1, 2013 as follows:

Medicare Health Plans pay medical groups and IPAs capitation based on the conditions and risk adjustment scores reported. In order for us to maintain competitive capitation rates paid to physicians, we need your assistance in providing complete physical examinations for your members annually.

Physicians must report all conditions of the member and document the progress notes clearly and legibly. Additionally physicians’ evaluation and treatment of their patients’ conditions must report the ICD-9-CM diagnosis codes to highest level of specificity. Completing an annual exam for Medicare patients is imperative, as the diagnoses from the prior year do not automatically continue to the next health status assessment. This can lead to inconsistent reporting of the member’s condition, and lead to lower capitation.

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<tr>
<th>Health Plan</th>
<th>Health Plan Incentive</th>
<th>Accountable Incentive</th>
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<tr>
<td>Care 1st</td>
<td><strong>Encounter data incentive</strong></td>
<td>$125</td>
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<tr>
<td></td>
<td>Medicare/SNP - $30 per valid submission</td>
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<td>Medicare - $20 per valid submission</td>
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<td>Citizens Choice</td>
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*Submission forms and deadlines vary by health plan. Please contact a Provider Service Coordinator for further details.

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Encounter data is used by health plans to track utilization of services by members. Through encounter data tracking, health plans can determine: pharmacy patterns, prevalence of diseases, co-morbidities, and member’s utilization patterns of certain medical services. Health plans require that our physicians are evaluating their members at least 3.5 times a year to participate in most incentive programs. As of the moment we are not meeting the minimum criteria requirement. From a broader perspective, complete and timely encounter data submission allows for health plans to have an accurate picture of the range and intensity of services provided to our members. By having our providers submit encounter data we are able to better assess members’ utilization of services and determine correct capitation rates to our providers.

Data captured in such submissions is calculated to meet HEDIS, STARS and Risk Adjustment clinical guidelines. AHCIPA offers $1.00 for Medi-Cal line of business and a $2.00 for Medicare and Commercial lines of business per encounter data submission if received by AHCIPA within 30 days of service. Approved methods are via AHCIPA web-portal or an AHCIPA Super Bill. By having this data we can continue our efforts to provide the most competitive capitation available.
Summer time brings out the warmth and best in all of us. For many years, Dr. Jayatilaka has been community oriented and so, when it came to community needs, he reached out and supported various community endeavors. This past year he continued in the Accountable Health Care IPA tradition and contributed to the success of local quality health care initiatives.

At Accountable Health Care IPA, quality care does not stop with their premier contracted network. Seeking to make a difference in the everyday lives of citizens in various communities, Dr. Jayatilaka contributes to the community through donations to community organizations such as the John Wesley Community Health Institute. Their clinics are located in Downtown and the City of Bell. They provide care to homeless persons throughout Los Angeles County. They have a total of 75 beds for persons to recover from illness, operation, or injury.

MARK WRIGHT
With over 20 years of financial and regulatory healthcare experience, Mark Wright, has been named President of Accountable Health Care IPA. From 2000 to 2010 Mark Wright served as Chief, Division of Financial Oversight with the California Department of Managed Health Care and as Supervising Examiner/Chief Examiner from 1989 to 2000. Wright, will oversee daily operations including: utilization management, finance, and claims processing departments. With health care reform driving many of the changes to the health delivery system, Mark Wright’s expertise will help ensure that Accountable is better prepared for those changes while enhancing the service we provide to our contract physicians.

MICHELLE BUI
Michelle Bui joined our team as our new Chief Operations Officer in early December 2012. She will oversee and have direct responsibilities over each of the management departments at Accountable Health Care IPA. Michelle comes to us with more than 18 years of experience in managed care administration, operations and management positions at various health plans and MSOs that include Universal Care Health Plan, Care 1st Health Plan, Humana Inc., HealthSmart MSO and Coast Healthcare Management Services. She also has 8 years of healthcare technology experience in designing and developing integrated solutions around PMS/EMR and eRx applications for clients within and beyond California.

JOHN ERNSBERGER, MD
Dr. Ernsberger joined Accountable Health Care IPA as of November 2012 as Chief Medical Officer. As a key member of our executive team, Dr. Ernsberger will lead our utilization management, quality initiatives and care coordination process while collaborating with our network of primary and specialty care physicians in Southern California. He comes to us with more than 25 years of experience as a physician and medical group leader in Southern California. Most recently, Dr. Ernsberger has served in executive positions at Affiliated Physicians of Orange County, Monarch Health Care, Inland Health Organization and American Health, Inc. He is a graduate of UCLA and the University of Rome Faculty of Medicine and Surgery, where he received his medical degree in 1984.

DENISE PEREZ
Denise Perez is the latest addition to Accountable Health Care IPA’s administrative team. With over 19 years of claims experience Denise joins us as our new Senior Director of Claims Operations. Her extensive administrative background includes working for a Health Plan and MSO, Universal Care Health Plan and HealthSmart, MSO Inc. Denise’s strength includes system integration and implementation of new technology and inter-departmental communication. Her primary focus is federal, state, and health plan level regulatory compliance and system improvement. We look forward to Denise’s integration into our Accountable Health Care IPA family and are confident that her expertise and experience will contribute to the continued success of Accountable Health Care IPA.

DARLENE SCHOGEL
Darlene Schoigel joined Accountable Health Care IPA as Director of Client Services in January 2013. Darlene oversees eligibility, capitation, customer services, provider services and business development departments. Darlene comes to us with more than 19 years of experience in manage care administration and management positions at health plans and MSOs that include Universal Care Health Plan and HealthSmart MSO.
Finding the right health insurance can be a stressful and time-consuming task. When you work with a Health Plan Advisor (HPA), you benefit from working with a licensed professional who will educate and advise you on the right medical coverage, based on your individual health situation like:

- Network of Doctors
- Specialists
- Prescription Drugs
- Dental
- Hospitals

Your HPA will help you compare your needs with the Health Plans available, at NO COST to you.

**When to meet with a Health Plan Advisor?**

Health Plan Advisors (HPA) are available for questions or concerns on your benefits or Health Plan coverage. An HPA can introduce Medicare Health Plans and assist with enrollment. In addition, all Medicare beneficiaries participate in what is called Annual Enrollment Period (AEP), which runs October 15 through December 7. This is a time to evaluate your medical needs and make any necessary plan changes for the next year. Health Plan Advisors are available through South Bay Health and Insurance Services (SBHIS), a trusted resource through Accountable IPA. SBHIS Health Plan Advisors are available to discuss your options over the phone or in person, and in your language. To speak to a representative today, call SBHIS offices at 1-888-727-7789.

**JAR INSURANCE SERVICES**

Jaime Rosales is the founder and CEO of JAR Insurance Services. It’s that time of year! With the enrollment season right around the corner you have to ask yourself, am I ready? It has been my experience working with health plans, Medical Groups, and those needing health care insurance coverage that preparation doesn’t happen a couple of months before the final hour, but requires planning throughout the year.

An FMO with over 20 years of experience specializing in the managed care arena, JAR Insurance Services provides guidance on MAPD Medicare Health Plans, Covered California, Dual Demonstration and most importantly CMS compliance regulations.

JAR Insurance Services is happy to continue our relationship with Accountable IPA. Our team is committed to providing Accountable with managed care enrollment, commercial and life insurance services. Please look to us as your informational resource to stay current on issues within the managed care industry.

We welcome you to contact us with any questions or concerns. You may reach Jaime Rosales at 1-877-391-9988, or by email at jrosales@jaragent.com

**ACCOUNTABLE HEALTH CARE IPA**

**ITS NEWEST PROVIDERS**

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- Vellore Bhupathy, M.D.
- David M. Charchian, M.D.
- Edgar A. Chavez, M.D.
- Hung Che, M.D.
- Samuel K. Chung, M.D.
- Stevan R. Clark, M.D.
- Richard Doyan, M.D.
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- Vivian, M. Gindi, M.D.
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- Jasmin A. Villatoro, M.D.
- Herach Yadegarian, M.D.
- Amal Y. Zaky, M.D.

**ACCOUNTABLE HEALTH CARE IPA**

**COMMITTED TO PROVIDER SERVICES**

If you have questions, comments or suggestions regarding the content of this newsletter, please feel free to contact your assigned Provider Services Representative.

**Provider Services Representative**

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- **Helen Nguyen**
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