CMS Medicare Managed Care Auditing Report

Auditing Review Results (Initial Report)-Public Website Version

Date Report Generated: 9/30/2008

Category: All, Element: All, Finding:NOT MET, Reviewer:All

Findings: NOT MET

Review ID: 11057

Region: 02 New York

Contract Number / Name: H6334 NY HOTEL TRADES COUNCIL and HOTEL ASSN OF NYC

Auditing Guide Version: HCPP Monitoring Guide
Auditing Element: MR03
Review Type: Routine
Review Status: Confirmed
MCO Response Received Date:05/07/2008
Element Accepted Date: 06/05/2008
Element Release Date: 06/05/2008
CAP Released Date:06/05/2008

Visit Start Date: 2/4/2008
Exit Conference Date: 02/05/2008
Date Report Issued: 03/21/2008
Date Report Due: 03/21/2008
CAP Accepted Date:06/05/2008
Audit Closed Date: 06/05/2008
Element Projected Completion Date:05/25/2008
MCO Response Due Date: 05/05/2008

Requirement:

Disclosure of Required Information to Beneficiaries - The HCPP provides prospective enrollees adequate written descriptions of its rules, procedures, benefits, fees and other charges, services, Evidence of Coverage (EOC), and other necessary information for the beneficiary at the time of enrollment.

Deficiencies:

The method of Disclosure of Required Information to prospective enrollees was cumbersome and unclear. It was not easy for the potential enrollee to clearly and readily understand substantial changes in coverage, cost sharing and processes when transitioning from regular employee Hotel Trades coverage to Medicare retiree Hotel Trades coverage, especially in the context of member CONTINUING coverage with the SAME organization. The Hotel Trades equivalent of the MA plan Summary of Benefits (SB) and the MA plan Explanation of Coverage (EOC) consisted of a package of materials as follows: Summary Plan Description for all members (pre- and post-retirement and Medicare eligibility), Retiree Health Coverage Options (5 pages when eligible for retirement and/or Medicare), Medical Acknowledgement Form (1 page when retiring) and Part A and B Coverage Comparison 2008 (13 pages when Medicare eligible). Nor was it expressly stated in writing for the prospective enrollee that all four documents must be combined for a complete explanation of coverage. Even if a Medicare eligible retiree had all four document at hand, the Medicare eligible retiree did not have as clear, concise and simple an explanation of coverage, cost sharing and procedures as the retiree would have from a standard MA template SB and EOC.

Corrective Action Required:

Hotel Trades must develop a single-document EOC-equivalent that makes clear to the Medicare-eligible retiree the new and complete terms of coverage, cost sharing and procedures when the retiree transitions to Medicare coverage under the Hotel Trades HCPP. This should include some minimal explanation of the differences in appeal procedures (depending on whether the service involved was plan-covered or was Medicare FFS) and how the member will know which appeal procedure to use. Hotel Trades should have policy and procedures on how and when it ensures this information is presented to prospective Medicare-eligible retirees and how it is updated for Medicare enrollees. NOTE: Since the exit conference, Hotel Trades has submitted to CMS (rec'd 2/22/08) a new SB-type document with an extra column to show coverage differences before and after retirement/Medicare.

CMS Medicare Managed Care Auditing Report

Auditing Review Results (Initial Report)-Public Website Version

Date Report Generated: 9/30/2008

Category: All, Element: All, Finding:NOT MET, Reviewer:All

Findings: NOT MET

Review ID: 11057

Region: 02 New York

Contract Number / Name: H6334 NY HOTEL TRADES COUNCIL and HOTEL ASSN OF NYC

Auditing Guide Version: HCPP Monitoring Guide
Auditing Element: OC07
Review Type: Routine
Review Status: Confirmed
MCO Response Received Date: 05/07/2008
Element Accepted Date: 06/05/2008
Element Release Date: 06/05/2008
CAP Released Date: 06/05/2008

Visit Start Date: 2/4/2008
Exit Conference Date: 02/05/2008
Date Report Issued: 03/21/2008
Date Report Due: 03/21/2008
CAP Accepted Date: 06/05/2008
Audit Closed Date: 06/05/2008
Element Projected Completion Date: 04/24/2008
MCO Response Due Date: 05/05/2008

Requirement:

Medicare Secondary Payer (Claims) - The HCPP has procedures to identify payers which are primary to Medicare, determine the amounts payable, and coordinate benefits. (CMS may not reimburse an organization for services to the extent that Medicare is not the primary payer.)

Deficiencies:

The element is NOT MET. Hotel Trades does NOT have written policies and procedures (P and P) which ensure that claims involving coordination of benefits with liable parties other than Hotel Trades and Medicare (State or Federal workers compensation, EGHP, automobile, medical, no-fault insurance, other liability, and self-insured plan) are identified and that Hotel Trades pays correctly after the the other liable parties' obligations have been taken into account. Note: Hotel Trades has a P and P (OC-07) to ensure that Medicare FFS is not held liable by OON providers for Hotel Trades' obligations. But there are actually no legitimate secondary payer situations treated here. It's either Hotel Trades alone or Medicare FFS alone. One would not be secondary to the other.

Corrective Action Required:

Hotel Trades must develop and implement P and P for identifying and dealing with situations where another party (not Hotel Trades and not Medicare FFS) has the first liability to pay. Hotel Trades should submit a CAP showing when the P and P will be completed and submitted to CMS and showing when and how Hotel Trades will ensure the procedures have been implemented.