

WELCOME!

Simpra Advantage will be live as of 1/1/2018!

Right now we are busy enrolling members and making sure that everything is ready to go for our plan launch. As a PCP for Simpra Advantage, we have some helpful information for you and a few action items to complete for a smooth start.

Simpra Advantage PPO SNP is a Medicare Advantage Institutional Special Needs Plan designed to improve care for the residents living in one of our contracted Nursing Facilities. Our Members are all institutionalized Medicare beneficiaries who reside (or expect to reside) in a Center for 90 days or longer.

We are a **provider-owned plan**, with strong local roots and a commitment to our Alabama Members and the network of physicians, hospitals, and other healthcare professionals who take care of our Members. We welcome your feedback on things that we are doing well, ideas for improving our plan, or areas where we may improve.

Contact Us:

Phone: (844) 637-4770

- Option 1 Member Services
- Option 2 Enrollment Services
- Option 3 Utilization Management
- Option 4 Provider Services
- Option 5 Provider Enrollment

Fax: (800) 547-6503

Mail: PO Box 2190
Glen Allen, Virginia 23058-5849

Mail (Claims):
Simpra Advantage
PO Box 908
Addison, TX 75001-0908

Compliance:

Phone: 844-317-9059
Email: compliance@simpra.com

Simpra Advantage goes Live January 1, 2018!

Take the following steps to ensure a smooth start:

<p>STEP 1: Review our Model of Care</p>	<p>Learn about the services, care coordination, and extra support we provide for our Members and physician partners.</p> <p>Review our Model of Care at: http://simpra.com/wp-content/uploads/documents/SIMPRA_Model-of-Care-Training.pptx</p>
<p>STEP 2: Electronic Billing and Payment</p>	<p>You can submit claims through your clearinghouse. Just ask for the payers.</p> <p>Download a companion guide at: http://exchangeedi.com/quick-links</p> <p style="text-align: center;">Our Payer ID is: SIMPRA Advantage – SIM01</p> <p>You can also receive payment electronically. An EFT Form is included in this packet, for your convenience. Please complete the form and fax it to us at 1 (800) 547-6503</p>
<p>STEP 3: Setup your office staff on our Provider Portal</p>	<p>Simpra Advantage has a Provider Portal that allows you to submit authorization requests, inquire on the status of an authorization or claim, and verify member eligibility/benefit utilization.</p> <p>Get connected here: https://planprovportal.align-360.com/ez-net60SIMPRA/login.aspx</p> <p>Training for the Provider Portal is offered the last Friday of each month. Contact Provider Services to obtain the information to join the training.</p>
<p>STEP 4: Be compliant</p>	<p>CMS requires all providers to complete Fraud, Waste and Abuse Training. Additionally, Simpra Advantage has a Standards of Conduct for all Providers and Vendors.</p> <p>Complete the CMS Compliance Training here: https://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNProducts/ProviderCompliance.html</p> <p>Read and Acknowledge the Standards of Conduct here: http://simpra.com/wp-content/uploads/documents/SIMPRA_Standards-of-Conduct.pdf</p>
<p>STEP 5: Understand our Authorization Process</p>	<p>Prior authorization is designed to promote the utilization of medically necessary services, to prevent unanticipated denials of coverage, to ensure that participating providers are utilized, and that all services are provided at the appropriate level of care for the member’s needs. Primary Care Physicians and Nurse Practitioners are actively involved with all referrals and treatment recommendations and should be notified of recommendations prior to submitting requests for prior authorization.</p> <p>A complete list of services that require authorization can be found on the website here:</p> <p>DSNP: http://simpra.com/wp-content/uploads/documents/SIMPRA_Services_Prior_Authorization_DSNP.pdf</p> <p>ISNP:</p>

	<p>http://simpra.com/wp-content/uploads/documents/SIMPRA_Services_Prior_Authorization_ISNP.pdf</p> <p>Rx: http://simpra.com/wp-content/uploads/documents/SIMPRA_Prescription-UM-Prior-Authorization-Criteria.pdf</p>
<p>STEP 6: Learn More!</p>	<p>The Simpra Advantage Provider Manual is an easy reference document for all things related to the Plan - Member Rights, Provider Responsibilities, Claims Payment, Appeals and Grievances, Utilization Review, and more.</p> <p>Read the manual and Print a copy for your office here http://simpra.com/wp-content/uploads/documents/SIMPRA_Provider-Manual.pdf</p>

Please contact us with your questions: (844) 637-4770

Physician Responsibilities

- You must treat Simpra Advantage customers the same as all other patients in your practice, regardless of the type or amount of reimbursement.
- You may not balance bill a customer for providing services that are covered by Simpra Advantage. This excludes the collection of standard copays. You may bill a customer for a procedure that is not a covered benefit if you have followed the appropriate procedures outlined in the Claims section of Provider Manual.

Provision of Healthcare Services

Participating providers shall provide health care services to all customers, consistent with the benefits covered in their policy, without regard to race, ethnicity, national origin, religion, sex, age, mental or physical disability or medical condition, sexual orientation, claims experience, medical history, evidence of insurability (including conditions arising out of acts of domestic violence), genetic information, source of payment, or any other bases deemed unlawful under federal, state, or local law.

Participating providers shall provide covered services in a culturally competent manner to all customers by making a particular effort to ensure those with limited English proficiency or reading skills, diverse cultural and ethnic backgrounds, and physical or mental disabilities receive the health care to which they are entitled. Examples of how a provider can meet these requirements include but are not limited to: translator services, interpreter services, teletypewriters or TTY (text telephone or teletypewriter phone) connection.

Simpra Advantage offers interpreter services and other accommodations for the hearing-impaired. Translator services are made available for non-English speaking or Limited English Proficient (LEP) customers. Providers can call Simpra Advantage customer service at: (844) 637-4770 to assist with translator and TTY services if these services are not available in their office location.

Simpra Advantage Contracted Hospitals are listed below, Notify Plan of ALL ER or Hospitalizations: (844) 637-4770

Full Name	Add1	City	ST	Zip
Pickens County Medical Center	241 Robert K. Wilson Dr.	Carrollton	AL	35447
Brookwood Medical Center	2016 Brookwood Medical Center Drive	Birmingham	AL	35209
BBH PBMC, LLC, d/b/a Princeton Baptist Medical Center	701 Princeton Avenue Southwest	Birmingham	AL	35211
BBH CBMC, LLC, d/b/a Citizens Baptist Medical Center	604 Stone Avenue	Talladega	AL	35160
BBH SBMC, LLC, d/b/a Shelby Baptist Medical Center	1000 First St. North	Alabaster	AL	35007
BBH WBMC, LLC, d/b/a Walker Baptist Medical Center	3400 US-78 East	Jasper	AL	35501
Sacred Heart Hospital on the Gulf	3801 East Highway 98	Port St. Joe	FL	32456
Sacred Heart Hospital on the Emerald Coast	7800 US-98 West	Destin	FL	32550
Sacred Heart Hospital	5151 North 9th Avenue	Pensacola	FL	32504
Providence Hospital	6801 Airport Boulevard	Mobile	AL	36608
Christina Morelock	4451 Bayou Boulevard	Pensacola	FL	32503
Evergreen Medical Center, LLC	101 Crestview Avenue	Evergreen	AL	36401
Huntsville Hospital	101 Sivley Road Southwest	Huntsville	AL	35801
Madison Hospital	8375 Highway 72 West	Madison	AL	35758
Helen Keller Hospital	1300 South Montgomery Avenue	Sheffield	AL	35660
Red Bay Hospital	211 Hospital Road	Red Bay	AL	35582
Decatur Morgan Hospital	1201 7th Street Southeast	Decatur	AL	35601
Decatur Morgan Hospital- Parkway Campus	1874 Beltline Road Southwest	Decatur	AL	35601
Athens Limestone Hospital	700 West Market Street	Athens	AL	35611
Lawrence Medical Center	202 Hospital Street	Moulton	AL	35650
J Paul Jones Hospital	317 McWilliams Avenue	Camden	AL	36726
Lakeland Community Hospital, Inc.	42024 Alabama 195	Haleyville	AL	35565
Russellville Hospital, Inc	15155 Highway 43	Russellville	AL	35653
Northwest Medical Center, Inc	1530 AL-43	Winfield	AL	35594
Jackson Hospital and Clinic	1725 Pine Street	Montgomery	AL	36106
St Vincent's Blount	150 Gilbreath Drive	Oneonta	AL	35121
St Vincent's Birmingham	810 Saint Vincents Drive	Birmingham	AL	35205
Saint Vincent's Saint Clair	7063 Veterans Parkway	Pell City	AL	35125
Wiregrass Medical Center	1200 West Maple Avenue	Geneva	AL	36340

H.C. Watkins Memorial Hospital	605 South Archusa Avenue	Quitman	MS	39355
Choctaw General Hospital	401 Vanity Fair Lane	Butler	AL	36904
John C. Stennis Memorial Hospital	14365 Highway 16 West	DeKalb	MS	39328
Rush Foundation Hospital	1314 19th Avenue	Meridian	MS	39301
Northport Medical Center	2700 Hospital Drive	Northport	AL	35476
D.C.H. Regional Medical Center	809 University Boulevard East	Tuscaloosa	AL	35401
Fayette Medical Center	1653 Temple Avenue North	Fayette	AL	35555
Dale Medical Center	126 Hospital Avenue	Ozark	AL	36360
Hale County Hospital	508 Greene Street	Greensboro	AL	36744
Clay County Healthcare Authority	57 Floyd Springs Road	Ashland	AL	36251
Monroe County Hospital	2016 South Alabama Avenue	Monroeville	AL	36460
Marshall Medical Center North	8000 Alabama Highway 69	Guntersville	AL	35976
Marshall Medical Center South	2505 United States Highway 431 North	Boaz	AL	35957
GRANDVIEW MEDICAL CENTER	3690 Grandview Parkway	Birmingham	AL	35243
QHG of Enterprise, Inc	400 North Edwards Street	Enterprise	AL	36330
Triad of Alabama, LLC dba Flowers Hospital	4370 West Main Street	Dothan	AL	36305
Crestwood Healthcare LP dba Crestwood Medical Center	One Hospital Drive Southwest	Huntsville	AL	35801
Cullman Regional Medical Center	1912 Alabama Highway 157	Cullman	AL	35058
East Alabama Health Care Authority	2000 Pepperell Parkway	Opelika	AL	36801
EAMC-Lanier	1806 44th Street	Valley	AL	36854
Community Hospital	805 Friendship Road	Tallasse	AL	36078
Bryan Whitfield Memorial Hospital	105 US Highway 80 East	Demopolis	AL	36732
Atmore Community Hospital	401 Medical Park Drive	Atmore	AL	36502
North Baldwin Infirmary	1815 Hand Avenue	Bay Minette	AL	36507
Thomas Hospital	750 Morphy Avenue	Fairhope	AL	36532
Centre Hospital Corporation dba Cherokee Medical Center	400 Northwood Drive	Centre	AL	35960
Fort Payne Hospital Corporation dba Dekalb Regional Medical Center	200 Medical Center Drive	Fort Payne	AL	35968
Greenville Hospital Corp dba LV Stabler Memorial Hospital	29 LV Stabler Drive	Greenville	AL	36037
Foley Hospital Corporation dba South Baldwin Regional Medical Center	1613 North McKenzie Street	Foley	AL	36535
Stringfellow Memorial Hospital	301 East 18th Street	Anniston	AL	36207
Gadsden Regional Medical Center	1007 Goodyear Avenue	Gadsden	AL	35903
Grove Hill Memorial Hospital	295 South Jackson Street	Grove Hill	AL	36451
Eliza Coffee Memorial Hospital	205 Maregno Street	Florence	AL	35630
Shoals Hospital	201 West Avalon Avenue	Muscle Shoals	AL	35661
St. Francis Hospital	2122 Manchester Expressway	Columbus	GA	31904
Andalusia Regional Hospital	849 South Three Notch Street	Andalusia	AL	36420
Vaughan Regional Medical Center	1015 Medical Center Parkway	Selma	AL	36701
Coosa Valley Medical Center	315 West Hickory Street	Sylacauga	AL	35150
South Central Regional Medical Center	1220 Jefferson Street	Laurel	MS	39440

Erlanger Health System	975 East Third Street	Chattanooga	TN	37403
Mobile Infirmiry Medical Center	5 Mobile Infirmiry Circle	Mobile	AL	36607

2018 Plan Model of Care Summary

Simpra Advantage’s Model of Care employs best practices and industry innovations such as the PCP-Nurse Practitioner care team providing onsite, center-based primary health care support; a risk-assessment tool designed for a geriatric, nursing center patient population; a comprehensive history and physical assessment that drives an Individualized Care Plan (ICP); a care management platform that helps identify needed preventive health/HEDIS services, ensures the use of evidence based guidelines, and facilitates care team communications for care coordination; and frequent face-to-face member and caregiver/family member interactions that identify member care preferences and allow time for important care decision discussions and counseling.

The Model of Care facilitates the early assessment and identification of health risks and major changes in the health status of members with complex care needs, and the coordination of care to improve members overall health. Simpra Advantage’s Institutional Special Needs Plan (I-SNP) Model of Care has the following goals:

- Improve access to medical, mental health, and social services;
- Improve access to affordable care;
- Improve coordination of care through an identified point of contact;
- Improve transitions of care across healthcare settings and providers;
- Improve access to preventive health services;
- Assure appropriate utilization of services; and
- Improve member health outcomes.

Importantly, the Model of Care focuses on the individual I-SNP member. I-SNP members receive a comprehensive health risk assessment initially and annually thereafter. Based on this assessment, an individualized care plan is developed, based on evidenced-based clinical protocols. An interdisciplinary care team, which includes practitioners of various disciplines and specialties based on the needs of the member, is responsible for care management. The member may participate in this process, as well as all of their healthcare providers. The individual care plan is stored centrally so that it can be shared with all members of the Interdisciplinary Care Team, as indicated. All providers are encouraged to participate in the I-SNP Model of Care and Interdisciplinary Care Teams.

Simpra Advantage uses a data-driven process for identifying the frail/disabled, multiple chronic illnesses and those at the end of life. Risk stratification and protocols for intervention around care coordination, barriers to care, primary care givers, education, early detection, and symptom management are also components of the Model of Care. Based on the needs of Plan members, a specialized provider network is available to assure appropriate access to care, complementing each member’s primary care provider.

The PCP is an important and unique part of Simpra Advantage’s provider network. A PCP is a physician who is (1) contracted with Simpra Advantage, (2) licensed to practice allopathic (MD) or osteopathic (DO) medicine, and (3) is responsible for providing primary care services for Simpra Advantage members in the centers or Skilled

Nursing Facility (SNF) setting, including coordination and management of the delivery of all covered services.

The Simpra Advantage PCP model ensures that every member has direct access to primary care services onsite in the center and that the member's primary care physician PCP has experience understanding the special needs of center residents. PCPs provide regular patient care services in the center, working to streamline care and minimize the need for transfers out of the center for ambulatory services. They work directly with the Simpra Advantage Nurse Practitioners to provide and oversee all aspects of member care including evaluating, recommending or providing treatments to optimize health status. When possible and clinically appropriate, PCPs may decide to treat some acute exacerbations or conditions in place in the center rather than transferring the member to an external site of care, such as an acute care hospital or emergency room.

Under the Simpra Advantage Plan, all specialist referrals and certain diagnostic tests require a referral to be obtained from a PCP prior to engaging the specialist or performing the diagnostic test.

All members are encouraged to choose or designate a PCP at enrollment. Simpra Advantage members will select their PCP from the list of PCPs maintained and published by Simpra Advantage. Members are able to change their PCP at any time. Physicians contracted as PCPs and available to be chosen as a primary care physician with Simpra Advantage are clearly identified in Simpra Advantage's member materials, including the Provider Directory as credentialed at time of publication.

Simpra Advantage's evidenced-based Model of Care includes the following components:

- The clinical team provides integrated health care management with a strong primary and preventive care focus to treat acute and chronic conditions.
- All members receive a comprehensive history and physical exam and care plan within 60 days of enrollment and comprehensive visits from a Nurse Practitioner at least once a month, thereafter.
- Nurse Practitioners utilize a health risk assessment tool that rates each member's medical condition as low, moderate, or high.
- Risk scores dictate the Nurse Practitioner's clinical visit/monitoring schedule.
- A risk score framework is used at each clinical visit/monitoring and tracked over time.
- An individualized plan of care with goals and measurable outcomes specific to the targeted special needs of each member is developed.
- An Interdisciplinary Care Team is formed for each member.
- Access to a specialized provider network having expertise pertinent to the targeted special needs of the member population.
- A medication therapy management program.
- Demonstrated cultural competency among staff and providers.
- Members and their caregivers/families when appropriate, engaged in decision making at all times.
- Member and caregiver/family, when appropriate, participation in Plan policy and operations through surveys and formal feedback.

Execution of the I-SNP Model of Care is supported by systems and processes aimed at sharing information between the Plan, healthcare providers, and the member. The I-SNP Model of Care includes periodic analysis of effectiveness, and all activities are supported by the Quality Improvement Program.

EFT/ACH REQUEST FORM

General Information:

Requested Effective Date:

Provider Name:

Provider Contact Name:

Contact Phone #:

Contact Email:

Tax ID Number:

Billing/Pay to NPI:

Bank Information:

ACH Routing Number (ABA#):

Bank Account Number:

Bank Name:

Bank Address:

*Effective no later than June 1, 2011 plans are prohibited from making payments for Medicaid covered items or services to any financial institution or entity, such as provider bank accounts or business agents, located outside of the United States, District of Columbia, Puerto Rico, the Virgin Islands, Guam, the northern Mariana Islands and American Samoa.

Comments/Notes:

Form Completed By: Date:

(1) Minimum of 30 days is needed to process a request