



# Network News

**Welcome!** by Jose Guethon, MD MBA, President & COO

## Welcome to MetCare.

I am pleased to introduce our physician newsletter which will be published quarterly and circulated by email. You may also find it on the MetCare website. As organizations grow (and boy have we grown), communication becomes a key success factor. We must stay in touch and do so frequently. Thus the purpose of these newsletters is to provide you with important information which impacts our industry, our business relationship, and our customers. I hope you will find it informative and helpful. In this first edition, I want to help you understand MetCare's role and relationship to Humana and physicians.

## Who is MetCare?

MetCare of Florida is a primary care network of over 400 physicians serving more than 35,000 Medicare HMO lives in 19 counties. We also own and operate a multi-site internal medicine group practice with nine medical offices from Bunnell to Plantation.

## What is an MSO?

MetCare is an MSO (Management Service Organization) or PSN (Provider Service Organization). An MSO is an entity that has a contract with a payer(s) and contracts with physicians for the delivery of care. In our case, we are contracted with Humana who operates three Medicare Advantage Plans (CarePlus, AdvantageCare, and Humana Gold+). Through this agreement, MetCare receives a fixed capitation on a Per Member, Per Month basis and is at risk for all medical claims. MetCare in turn contracts with physicians on a FFS or capitation basis, but assumes the financial risk so you don't have to.

Humana, the MA plan, handles credentialing, processes claims, operates a customer service center, handles quality and grievances, and of course performs the sales, marketing, and enrollment functions. **They service their members.** MetCare, the MSO, handles hospital discharge planning, prior authorization, and utilization manage-

ment. We will work with you to facilitate care and manage the risk. **We serve you and your staff.**

## What is MetCare's Philosophy?

Our philosophy of care is a reflection of our Mission statement: "To deliver the very best medical care and service to every customer, every time." Thus we want to work with physicians who will work with us as partners and work with physicians who appreciate that the care of the elderly requires a different clinical approach.

Over the next few weeks we plan to hold more face-to-face meetings with our medical directors and provider reps. The meetings will be important so we can share with you a few important office procedures and "systems" that we have developed to better care for seniors and thus better manage the risk.

I would also encourage you to visit our website [www.MetCare.com](http://www.MetCare.com) for a number of resources for physicians: Clinical Guidelines, referral and prior auth forms, Medicare coverage guidelines, and our Health Library, which is an interactive patient education tool.

MetCare of Florida, Inc.

Providing the very best medical care and service to every customer, every time.

250 South Australian Avenue  
Suite 400

West Palm Beach, FL 33401

Phone: 561-805-8500

Fax: 561-805-8501

E-mail:

[providerrelations@MetCare.com](mailto:providerrelations@MetCare.com)

## More About Us . . .

**Metropolitan Health Networks, Inc. ("MetCare") is a leading provider of health care services to people with Medicare in Florida. We care for approximately 35,000 customers in 19 counties in South and Central Florida.**

**Founded in 1996, our team of physician, professionals, and associates are dedicated to serving our customers with the highest standards of medical treatment and personal service.**



## MRA- HCC Coding: Medicare Risk Adjustment Methodology

By Julia Santiago, RN OCN CPC



The goal of Risk Adjustment is accurate and appropriate reimbursement for the care of Medicare Advantage members. Reimbursement is adjusted based on the members' health status. This is a true reflection of the disease status of any given population of Medicare Advantage members and is important for those members who have a greater number of costly diseases.

### The CMS HCC Model

The CMS (Center for Medicare and Medicaid Services) HCC (Hierarchical Condition Category) model is made up of 70 condition categories. These disease groups contain major diseases, typically costly chronic diseases that are broadly organized into body systems. The HCC code assigned is determined by the ICD-9 diagnosis codes submitted on encounter and documented in the medical record.

The CMS HCC model incorporates disease hierarchies. The most severe manifesta-

**Example:** HCC 108: Chronic Obstructive Pulmonary Diseases. This HCC would apply to any member who has documentation to that is supportive of the following ICD-9 diagnoses:  
 496 COPD  
 492.8 Emphysema NOS  
 491.0 Simple Chronic Bronchitis  
 491.20 Obstructive Chronic Bronchitis w/o exacerbation  
 In total there are 19 qualifying ICD-9 diagnoses in HCC 108.

tion of a disease always outranks a less severe manifestation. The member who has progressed from an uncomplicated diabetic to one with renal disease is now recognized by CMS for the more

**Example:**  
 HCC 19: Diabetes uncomplicated  
 250.0x Uncomplicated Diabetes

HCC15: Diabetes with Renal or Peripheral Circulatory complication  
 250.4x Diabetes with Renal Manifestation  
 HCC 15

severe manifestation of nephropathy and is assigned HCC 15.

### The CMS HCC Model is Additive

The Risk Score calculated by CMS on each member is based on the cumulative result of that member's HCC diagnoses. This is an accurate picture that reflects and takes into account comorbidities. (see Exhibit 1).

Obtaining and submitting to CMS, accurate and complete diagnosis data on each member (patient) at least twice annually is key. Utilizing ICD-9 diagnoses that are documented and coded on each face-to-face encounter, and mapping them to the appropriate HCC group ensures CMS recognition of the members' health status.

The METCARE MRA Department is always available for any questions you might have on Risk Adjustment and HCC management.

"The Risk Score calculated by CMS on each member is based on the cumulative result of that member's HCC diagnoses."

For more information, contact Jean Delva at:

561-805-8500  
 jdelva@MetCare.com

Exhibit 1



ICD-9 DIAGNOSIS	HCC GROUP CODE	HCC WEIGHT
250.40 DM with renal manifestation	15	0.508
585.4 Stage 4 renal disease	131	0.368
412 Old MI	83	0.244
<b>Total individual score</b>		<b>1.12</b>



By Patti Gardner

Welcome to the FirstTouch Program, our latest initiative to support our Mission Statement “to provide the best medical care and service to every customer, every time.” The FirstTouch program is just as the name states – the first touch to any new customer. We launched FirstTouch in mid-April and are receiving very positive feedback to date. This program is aimed at a positive first impression for all dealings with any MetCare office and will serve to:

- **Welcome and introduce new customers to MetCare as an organization focused on providing extraordinary service**
- **Ensure delivery of the welcome letter and packet**
- **Schedule the customers’ New Patient Appointment – critical to quality care delivery and appropriate associated funding**
- **Early identification of patients with translation, transportation or other special needs**

Customers are surveyed during a follow-up call after their first appointment to ensure their experience was positive. If any issues are uncovered, they are addressed quickly.

This is just the beginning. We look forward to sharing more feedback on this program in future newsletters. At this time, the FirstTouch program is aimed at MetCare’s wholly-owned centers and we plan to offer it to affiliated practices in the future.

## Meet our Medical Directors

### Barry Stone, MD



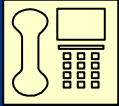
Barry is the Associate Medical Director for MetCare’s South Florida and Coastal Florida markets.

Barry joined MetCare in June 2008. Previously, he was chief medical officer at Florida Medical Center in Fort Lauderdale where he was a leader in development and implementation of utilization review, peer review, and performance improvement processes. He served as the chief medical officer for MDVIP, a concierge physician medical company, recruiting outstanding and talented physicians contracting with the company.

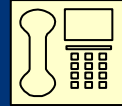
Barry relocated to South Florida in 1981 after completing his medical degree at SUNY-Upstate Medical Center in Syracuse, New York. He completed his internship and residency in internal medicine and a fellowship in gastroenterology (GI) at University of Miami, Jackson Memorial Hospital (UM/JMH). He remained on the teaching staff at UM/JMH, providing instruction to the GI fellowship program in the area of advanced biliary endoscopic techniques, while developing his private GI practice in Boca Raton.

Contact Barry at:

561-805-8500  
bstone@MetCare.com



# Metcare Team Directory



Name	Title	Extension Number
Brooke Calatrava	Provider Rep	1249
Patti Gardner	Market Manager	1217
William McCoy, MD	Associate Medical Director	1250
Robert Ornes, Jr., LPN	Nurse Manager	1224
Maria Salomon	Provider Rep	1245
Lucille Soltesz, RN	VP Clinical Risk Mgmt.	1253
Barry Stone, MD	Associate Medical Director	1210
Maria Xirau	Senior VP Operations	1218
Hymin Zucker, MD	Chief Medical Officer	1203



MetCare of Florida, Inc.  
 250 South Australian Avenue, Suite 400  
 West Palm Beach, FL 33401

Telephone: 561-805-8500  
 Fax: 561-805-8501