

## II. Why do I need to work with health plans?

Skilled nursing facilities and other post-acute housing and service providers need to work more closely with health plans for the following reasons:

1. Over 17 % of seniors in Iowa select a health plan that offers a Medicare Advantage product that includes coverage for skilled nursing home care (SNF-A benefits) as well as home care and other services your organization may provide. Last year, the number of Iowa Medicare beneficiaries choosing Medicare Advantage products grew by more than 20% and will likely continue to grow.

2. Alternative Payment Models (APM) such as bundled payments for hip and knee replacements, pay for performance, ACOs and value based purchasing. Coming together as a group to leverage our market presence with both payors and hospital partners will ensure our sustainability as the health care system changes.

3. Health plans have expressed a strong preference to working with collaborative organizations, such as IASN, rather than with individual facilities.

### *How does my organization join IASN?*

Facilities need to submit an Operating-Participation Agreement and necessary documentation verifying criteria for membership to the IASN offices.

#### **Contact Information Iowa Aging Services Network**

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#### What is the cost to join?

Flat fee of \$1,000 to cover basic administrative costs, and a user fee based on a per bed/or unit costs . For the first year, the annual user fee would be \$75 per nursing home bed, \$10 per assisted living bed, \$7.50 per bed for residential care facility and \$5 per licensed capacity for adult day. There is no facility fee for assisted living or adult day if it is part of a continuum of care.



*Iowa Aging Services Network*

*Iowa Aging Services Network is a member-driven, strategic initiative to help LeadingAge Iowa members navigate the changes to Medicaid Managed Care and Medicare Advantage Plans and better position members for the future.*

### III. What are the benefits of joining IASN?

1. Greater leverage in negotiating higher rates and other payment arrangements, such as pay for performance plans, with health plans. Stand alone facilities have less ability to negotiate and influence these rates and plans.
2. Educational and other resources to help your facility staff better understand how to maximize the payment components of the contracts, and to learn from other members regarding adoption of best practices and improving performance metrics.
3. Innovative funding opportunities.
4. Expanded opportunities to accept more post-acute patients from hospitals as a result of contracts with multiple health plans. Health plans may be reluctant to contract with a single facility, but will be more receptive to a Network.

### IV. What services will IASN provide?

IASN has contracted with Strategic Health Care who will be responsible for contract negotiations, health systems relationships and educational resources for member facilities; credentialing and administrative support.

### V. What will be my responsibilities as an IASN member?

1. Adhere to contracts negotiated by the Network.
2. Submit necessary credentialing information.
3. Submit claims pursuant to health plan requirements.
4. Submit cost and performance data as required by Network.

### VII. What are the potential cost benefit /return on my investment for joining IASN?

Senior service health organizations need to contract with health plans to be able to serve residents and patients that are covered under Medicaid or who have selected a Medicare Advantage product for their Medicare benefits.

IASN offers a cost efficient way to

- \* Maximize reimbursement and obtain pay for performance plans.
- \* Achieve higher reimbursement rates negotiated by the Network versus a facility that negotiates as a single entity.
- \* Expand transitional care/short term admissions.
- \* Negotiate payment incentives tied to quality and utilization incentives.



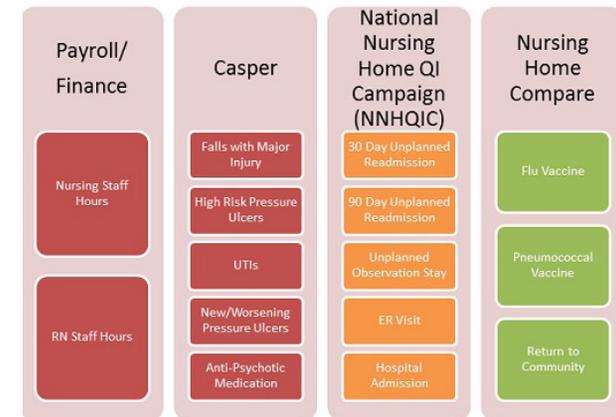
### IASN Quality Program Overview 2017

The Iowa Aging Services Network (IASN) was created to drive quality practices, outcomes and payments.

Factors that were considered:

- \* Key measures that payors care most about
- \* Need for value based contracts
- \* Factors that demonstrate quality
- \* Reduce administrative cost and effort
- \* Bring together relevant and efficient ways of demonstrating quality to payors

### Quality Measures



-  Data entry in cPMT required
-  Use NNHQIC, no duplicating entry if signed data use agreement
-  No data entry required