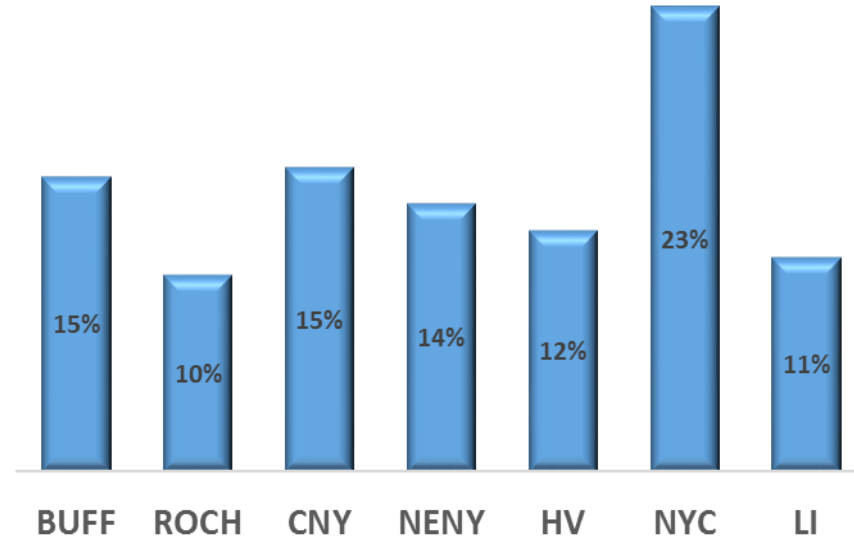


Nursing Home Experience with MLTC

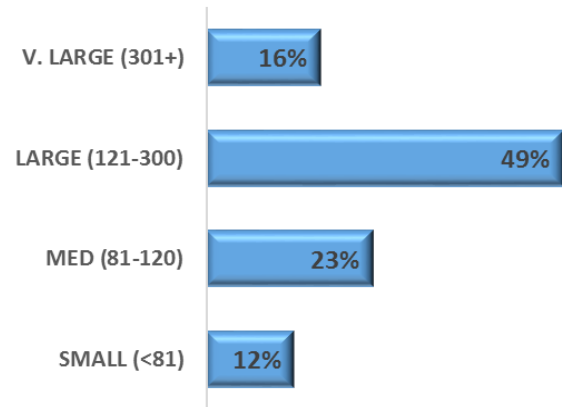
*An Analysis of Survey Responses from a Joint Survey of LeadingAge
New York and New York State Health Facilities Association
(NYSHFA) Nursing Home Members*

The 222 survey participants represent over a third of the nursing homes in the state: 97 LeadingAge NY members and 125 NYSHFA members completed the survey. The results represent all regions of the state as well as all sponsor types and facility size.

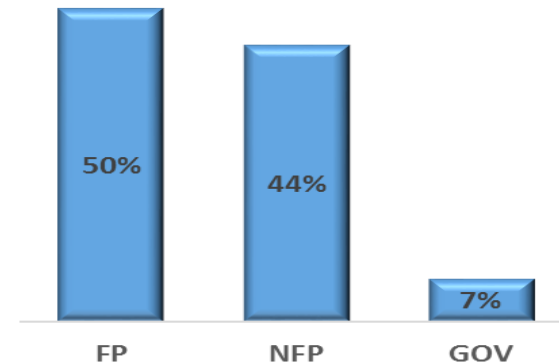
Respondents by Region (n=222)



Respondents by Size (n=222)



Respondents by Sponsor (n=222)

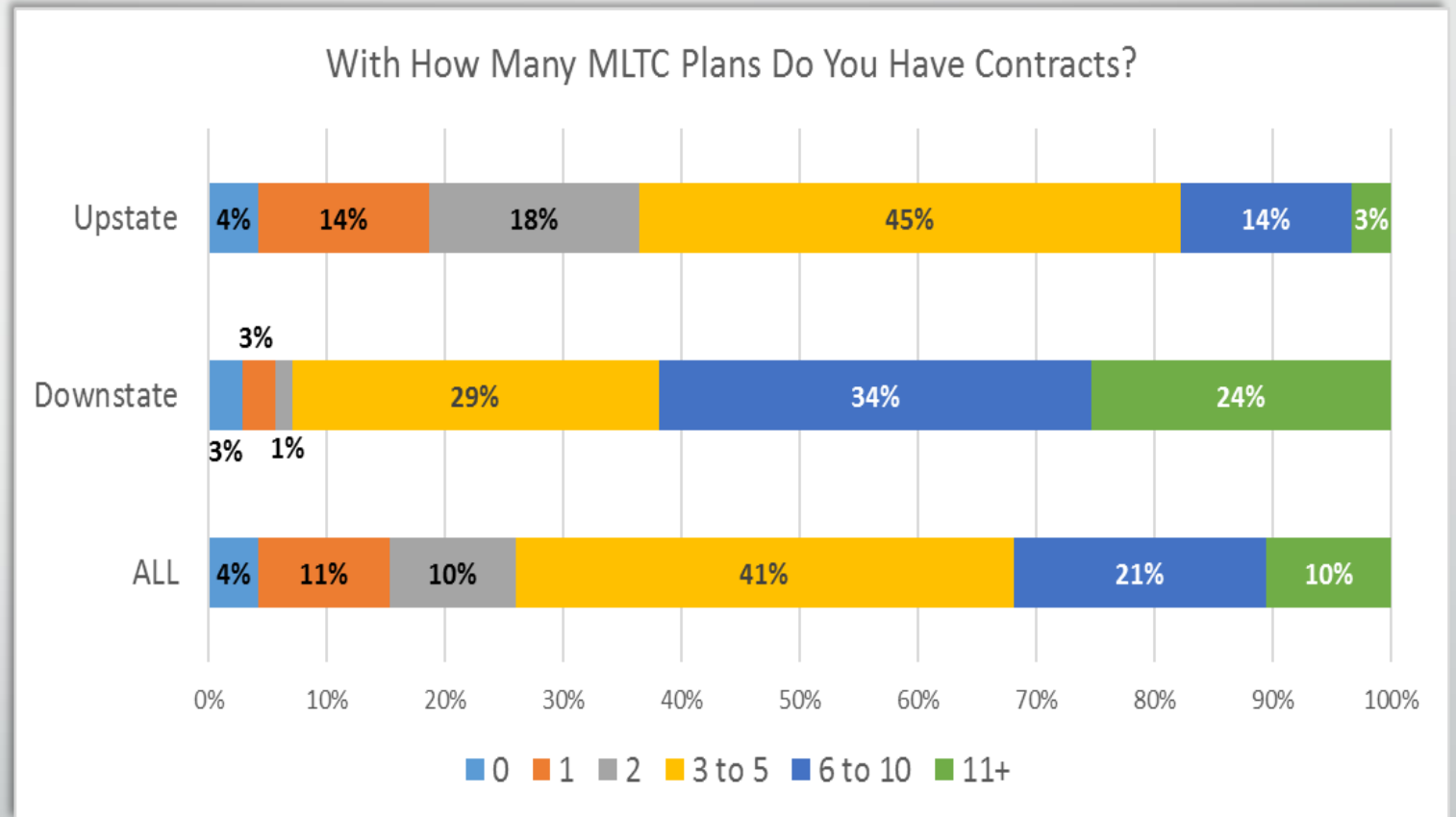


Number of Contracts

The survey asked participants to indicate the number of Single-Capitation MLTC plans with which their nursing home has a network provider contract. We requested that only contracts with single capitation MLTC plans be counted (i.e., contracts with PACE, Medicaid Advantage Plus, FIDA or Mainstream Medicaid managed care plans are excluded). We looked at statewide results as well as upstate and downstate breakouts.

Four percent of upstate survey participants and three percent of downstate participants reported having no contracts; 32 percent upstate and four percent downstate have one or two.

Only 17 percent upstate have more than 5 five contracts; the downstate percentage is 58.

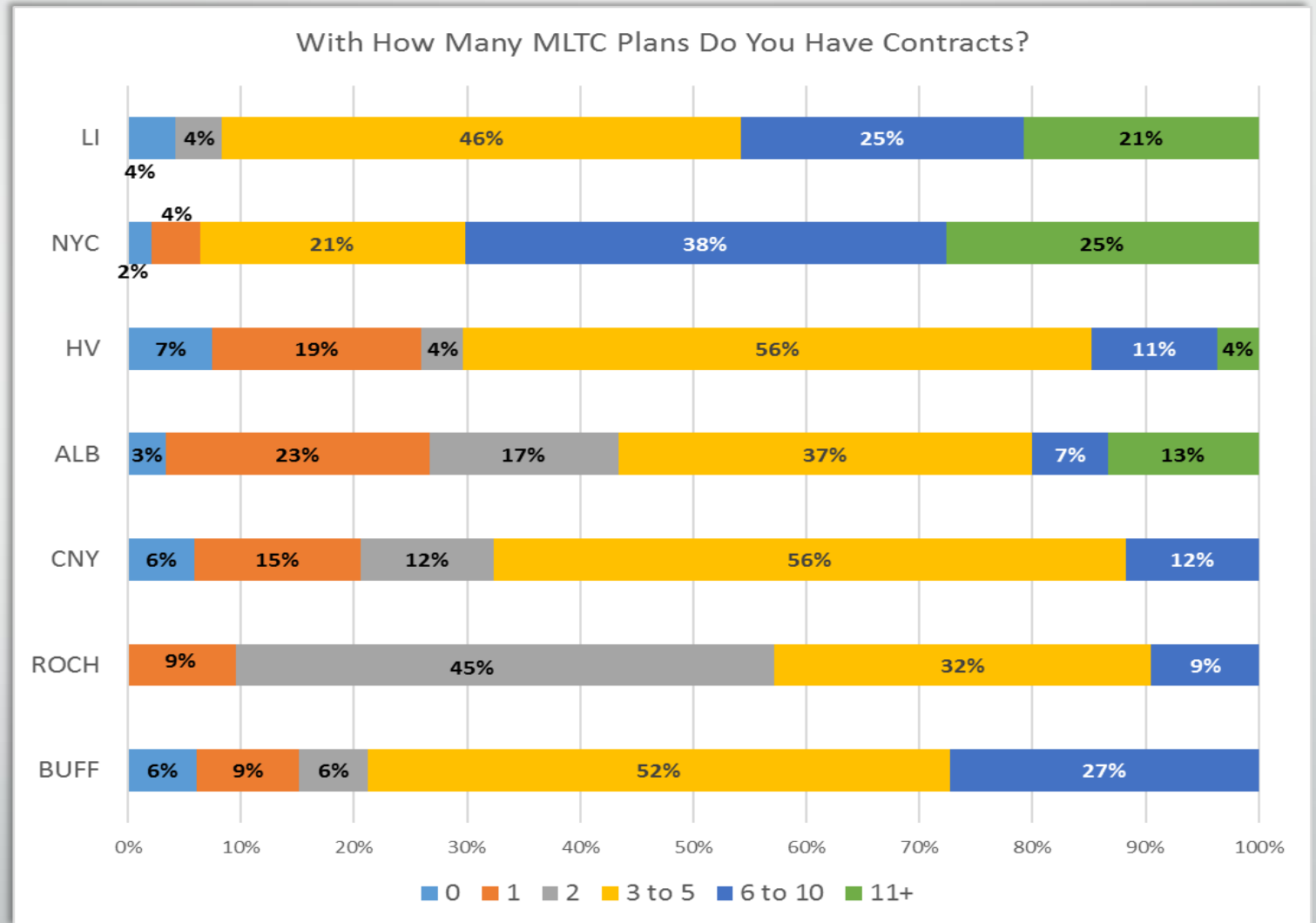


Note: Totals in graphs may be lower than 100% because n/a responses are not shown

Number of Contracts

We broke down the data based on the seven regions that the Department of Health uses to see whether there were regional differences other than those based on the upstate/downstate divide.

The data showed some regional differences with the Albany and Hudson Valley Regions having the highest percentage of homes with fewer than two contracts.

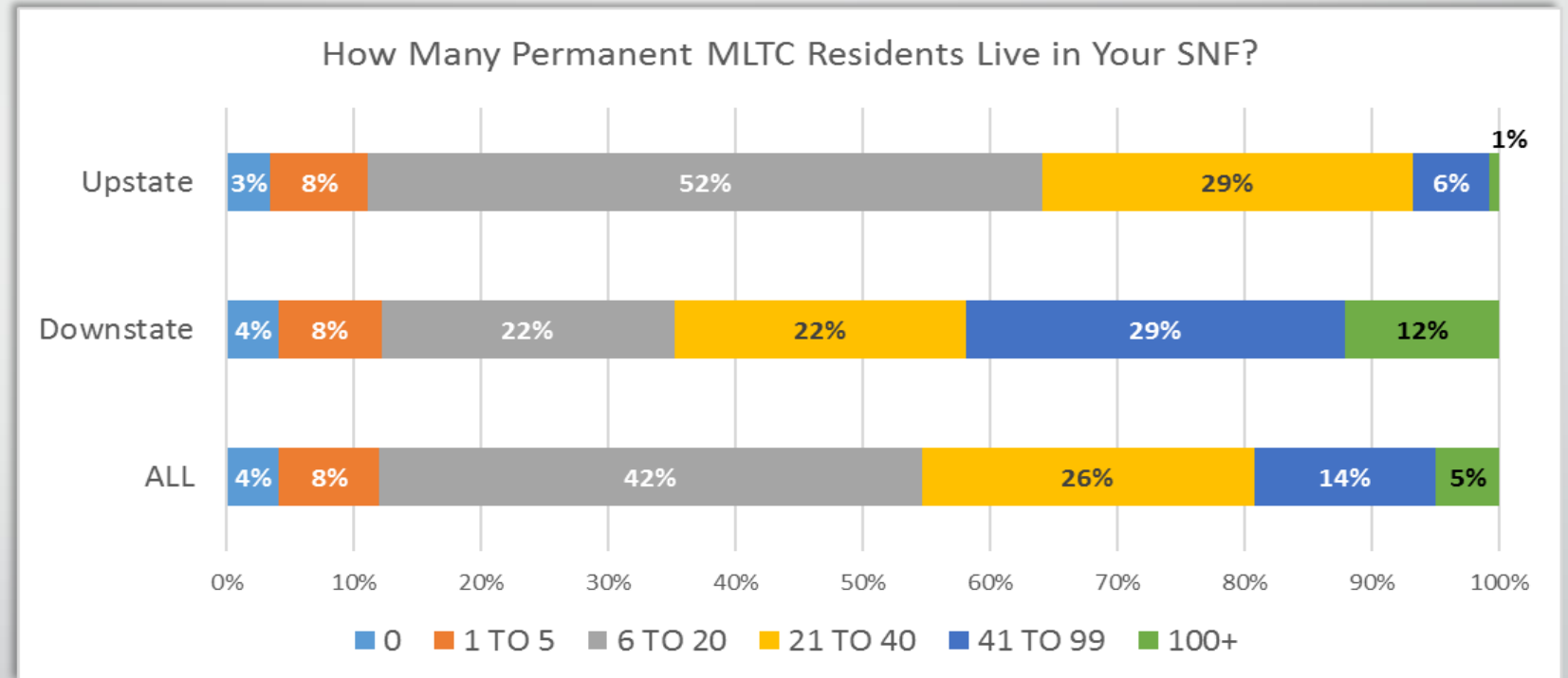


Number of MLTC Residents

The survey asked participants to indicate the number of their permanent residents enrolled in MLTC. The chart below indicates the percentage of permanent MLTC residents that fall within a range of values. The results are divided between upstate, downstate, and statewide respondents.

63 percent of upstate homes have 20 or fewer MLTC residents while the majority have between 6 and 20.

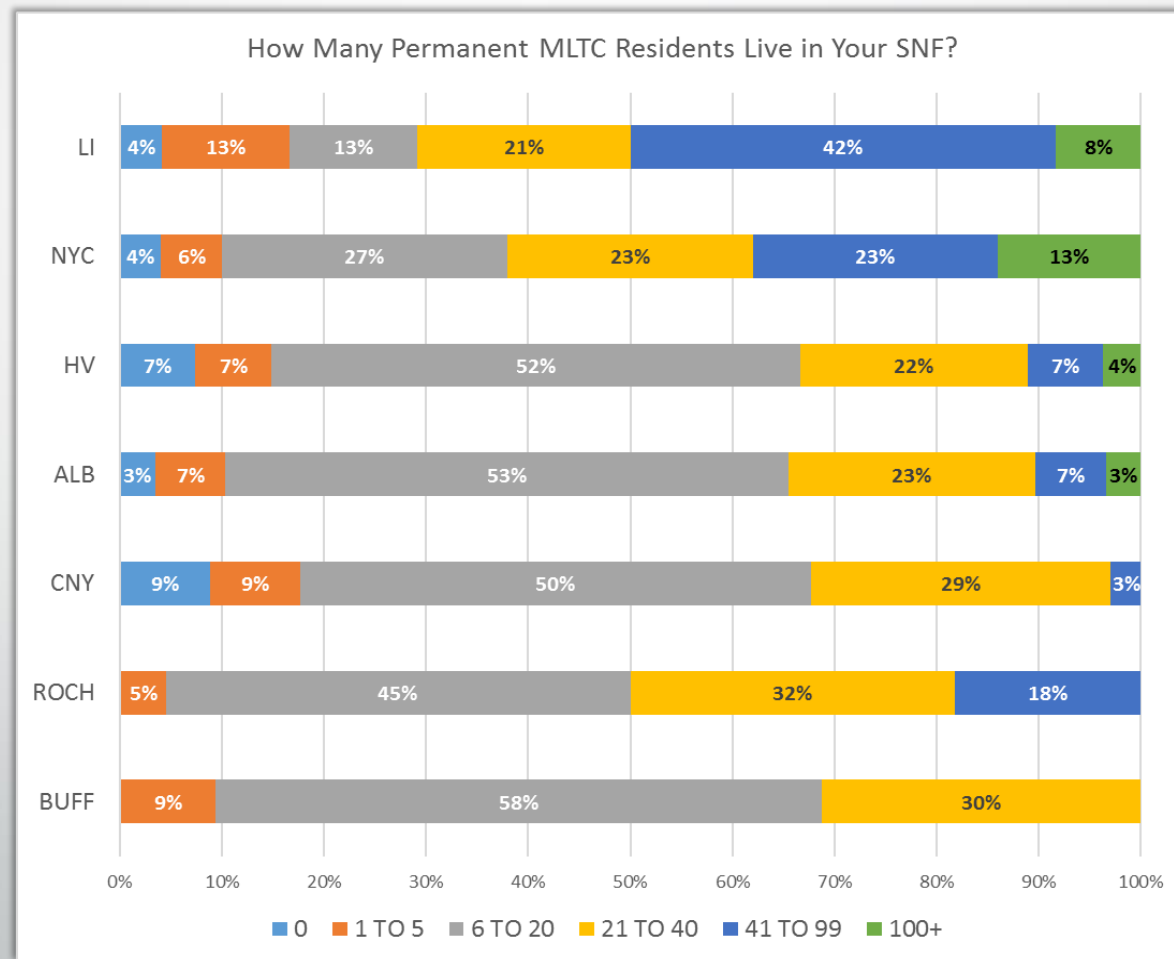
41 percent of downstate homes have 41 or more residents while 12 percent have 100 or more



Number of MLTC Residents

While the upstate/downstate divide was most stark, there was regional variation upstate. (Some was likely due to facility size but because survey respondents were allowed to participate anonymously, we did not collect exact bed counts making it not possible to calculate percent of residents enrolled in managed care.)

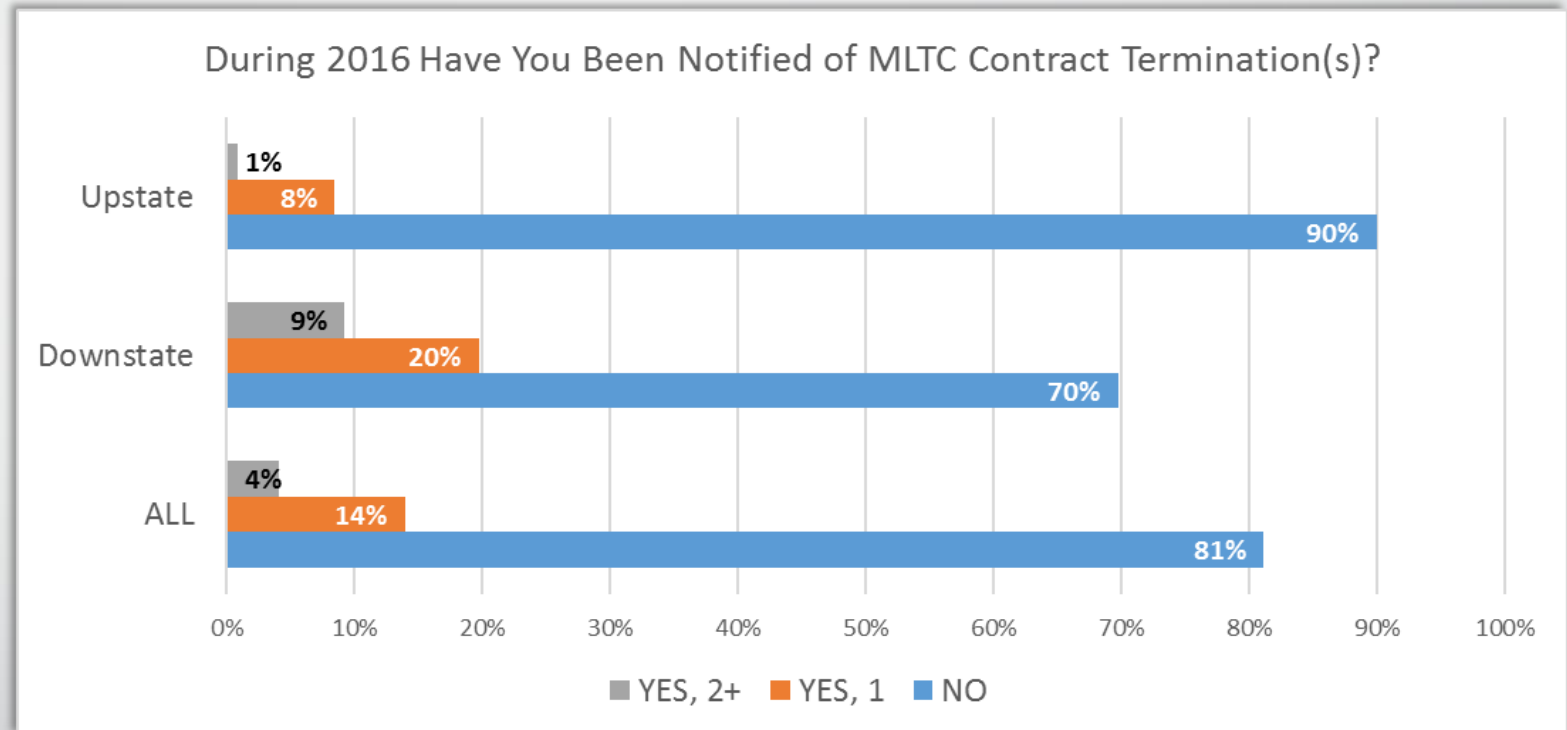
The primary regional variances occurred in Buffalo homes, none of which reported more than 40 MLTC residents, while 18 percent of Rochester homes had 41 or more MLTC residents.



Contract Terminations

To gauge the prevalence of network narrowing that some members have experienced participants were asked if they received any notification in 2016 of MLTC contract termination or non-renewal.

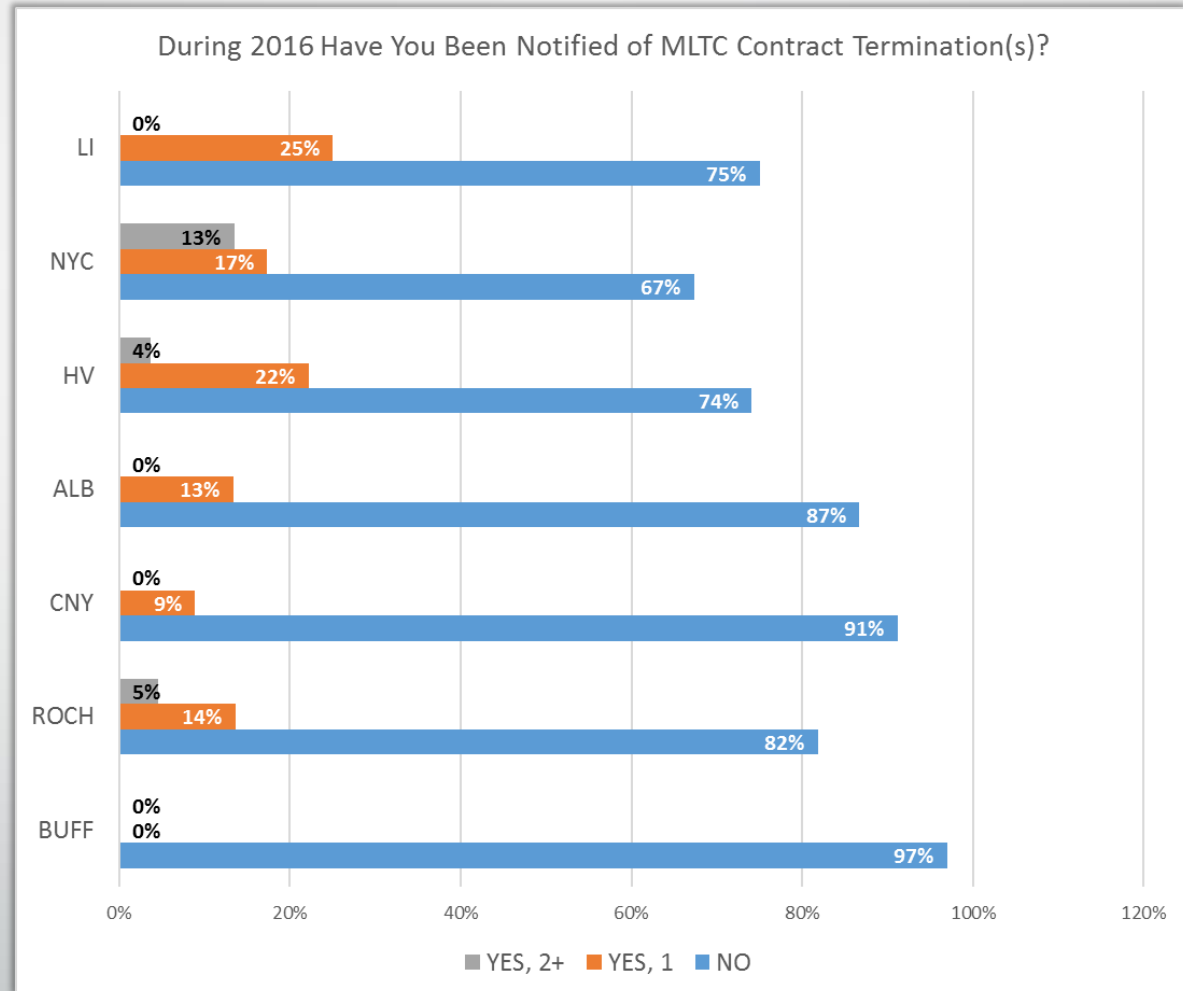
Statewide, 18% of homes reported having been notified of contract non-renewals or had contracts cancelled while only 4 percent reported more than one instance. Downstate, almost 30 percent of homes had experienced contract non-renewal while downstate the rate was 9 percent.



Contract Terminations

There were some regional variation in reported contract non-renewals, with no Buffalo participants reporting terminations.

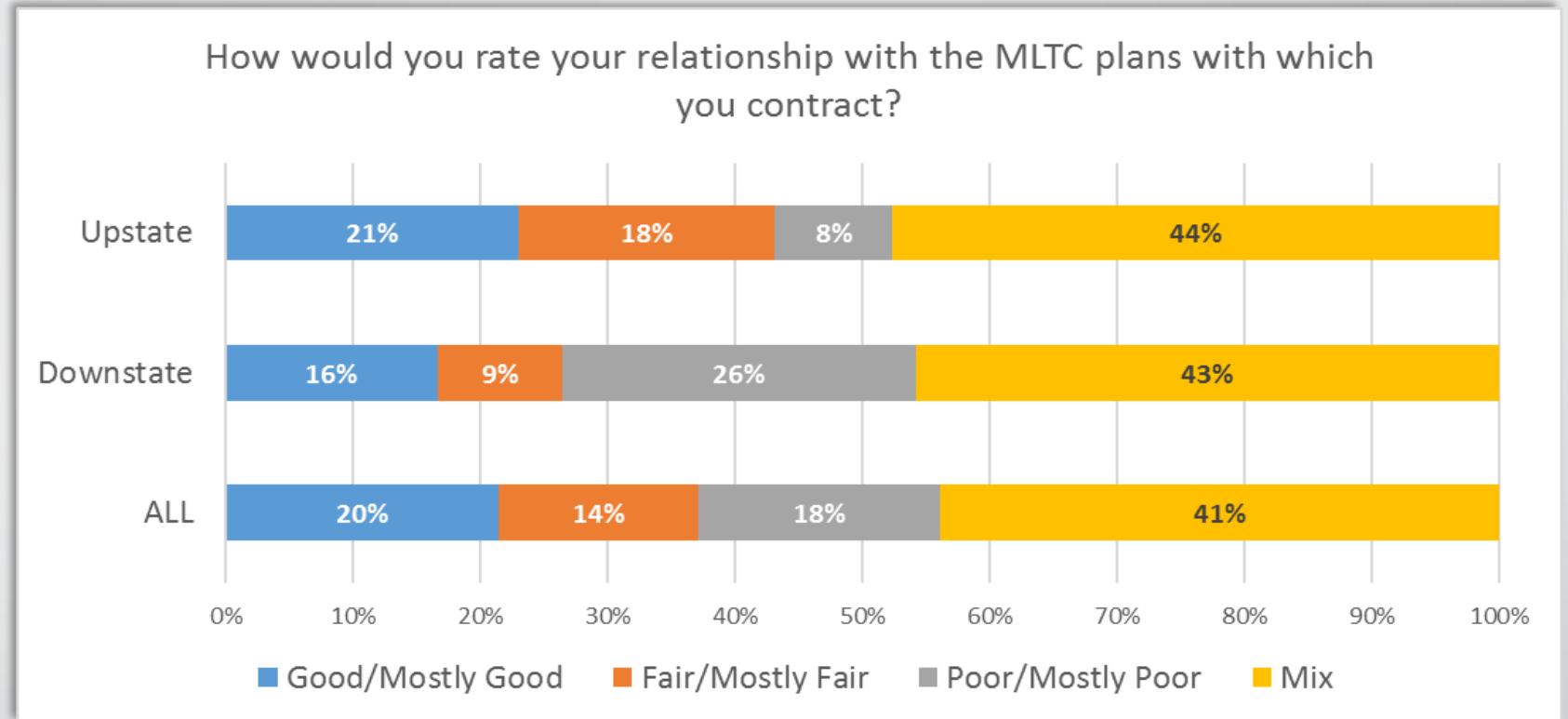
One noticeable regional variation occurred when comparing Rochester to the rest of upstate NY. Rochester's 19% MLTC contract termination rate was above the upstate average of 9%.



MLTC Plan Relationship

Survey respondents were asked to rate their existing relationships with MLTC plans. Not surprisingly, the most common response was that relationships varied by plan.

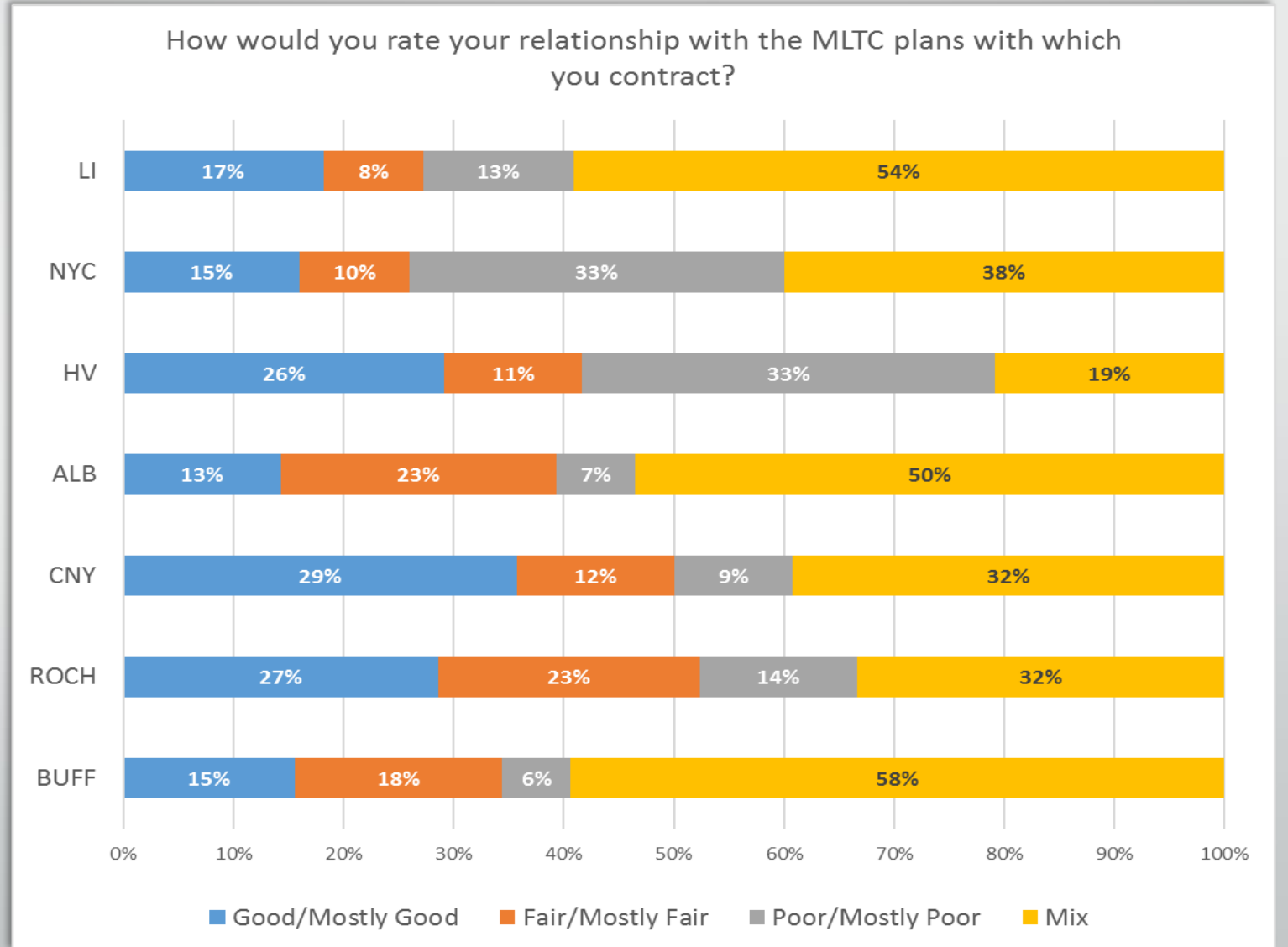
Upstate homes reported better overall relationships with plans with 1/5 of participants reporting good or mostly good, slightly more good upstate. Of downstate homes, 26 percent reported primarily poor relationships.



MLTC Plan Relationship

The graph below displays the regional breakdown of MLTC plan relationships in each of the Department of Health's seven regions.

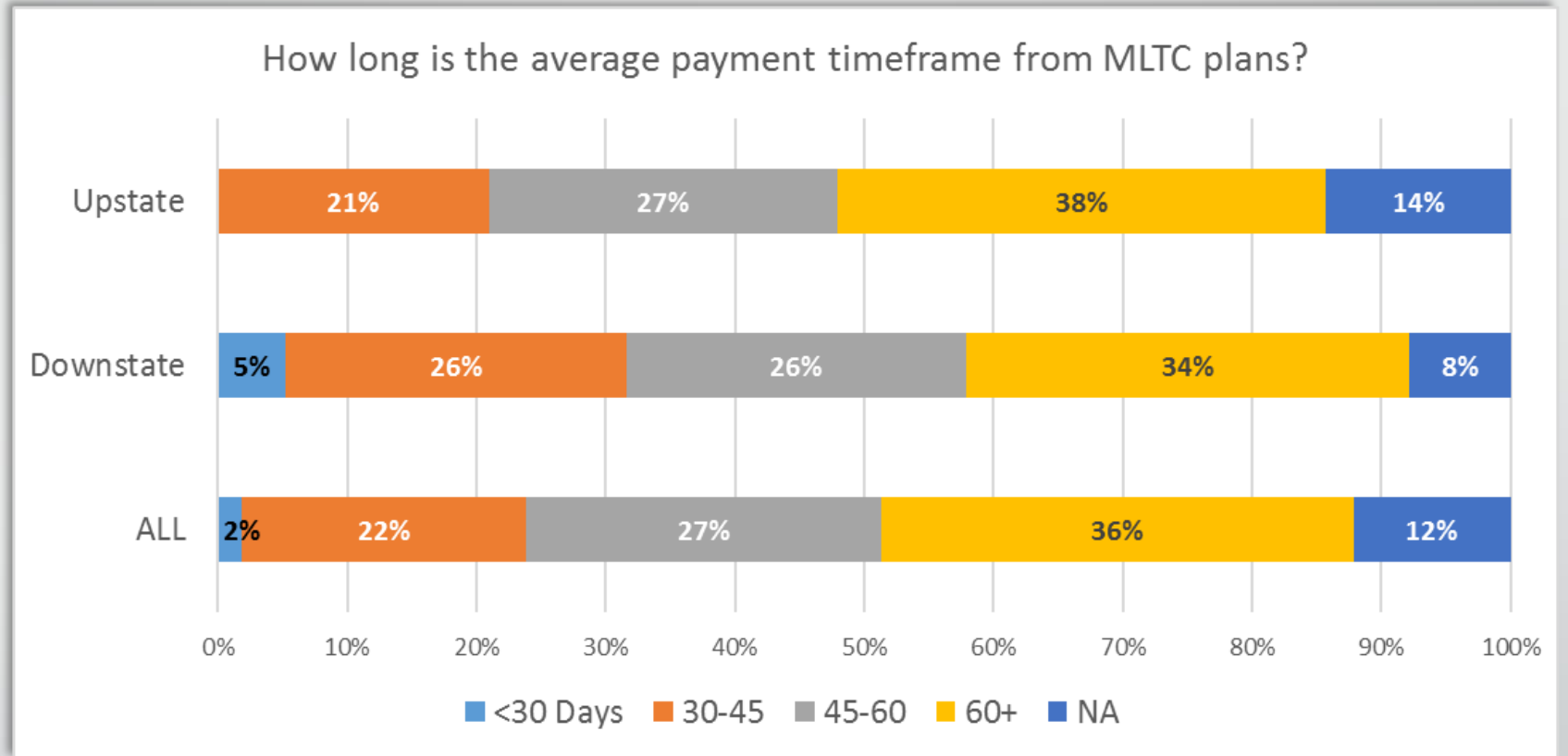
The regional MLTC plan relationship chart shows Long Island's nursing homes reporting better plan relationship than their NYC neighbors.



Payment Timeframes

Survey respondents were asked to indicate the average payment timeframes of clean claims.

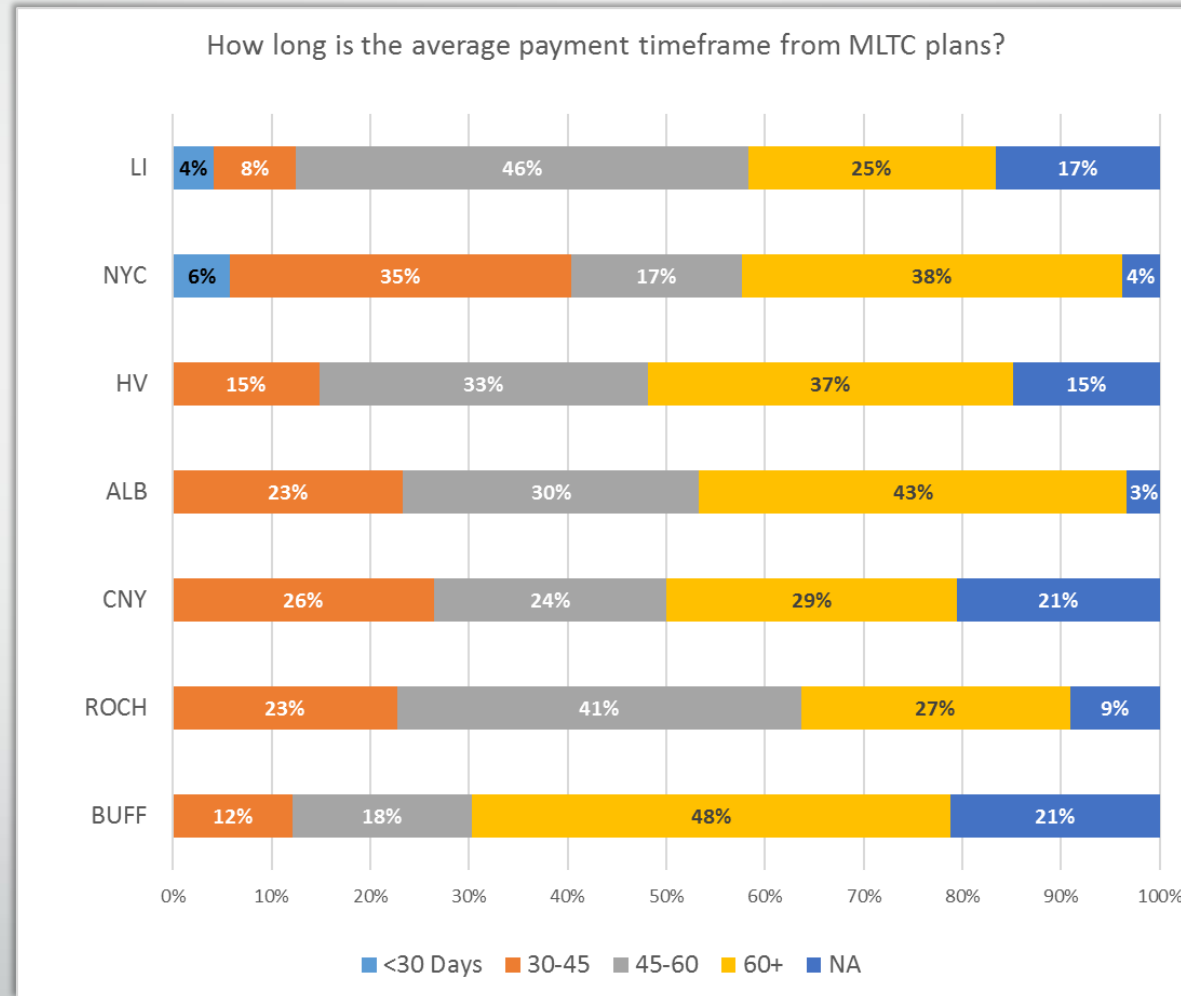
5 percent of downstate participants reported payment shorter than 30 days; 38 percent upstate said longer than 60 days; 34 percent downstate. These rates were similar upstate and downstate.



Payment Timeframes

The graph below is a regional representation of survey respondents' estimated average payment timeframes from MLTC plans of clean claims.

Survey participants reported similar payment timeframes throughout the state.



Primary Concerns

Survey respondents were asked to identify their two largest concerns regarding their experiences with managed care. The most frequently cited responses are shown below.

Payment Delay	44.0%
Admin Burden	39.2%
Authorizations	38.6%
Rate Adequacy	15.7%
NAMI	13.3%
No Contract	5.4%

Comments

Survey participants were invited to make other comments and sample comments are copied below. While administrative and cash flow concerns were the most common, some did make favorable comments regarding specific plans.

- *Not only have we not seen any benefit to the patient or providers, we believe that this program is inefficient, is poorly managed, and puts patient care at risk.*
- *We are several months behind with multiple residents and multiple plans even though we submit clean claims. This is creating a cash flow issue for our facility.*
- *X plan seems to be working very well. Good customer service and processing of claims.*
- *Managed Care will put a number of facilities out of business by crippling cash flow*
- *This has been a nightmare for our residents, families and us.*
- *There is now additional staff time required by both clinical and non-clinical staff working with managed care companies. Precertification is required and often additional clinical documentation is requested regarding enrollees. Unlike fee for service managed care residents enrollees are similar to those on Part A services now with addition administrative workload.*