

Claims & Underwriting



What's the Right Time and Place for an Alternate Plan of Care?



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- Overview of the pre-conference survey on APOC practices.

For each question on the survey we will:

- Poll the audience for their responses
- Compare audience responses to pre-conference survey results
- The panel will discuss the issues/procedures presented in each question

Pre-conference Survey



- 10 questions in all
- Designed to poll the industry on current administrative practices
- 19 respondents
- Responses were provided anonymously

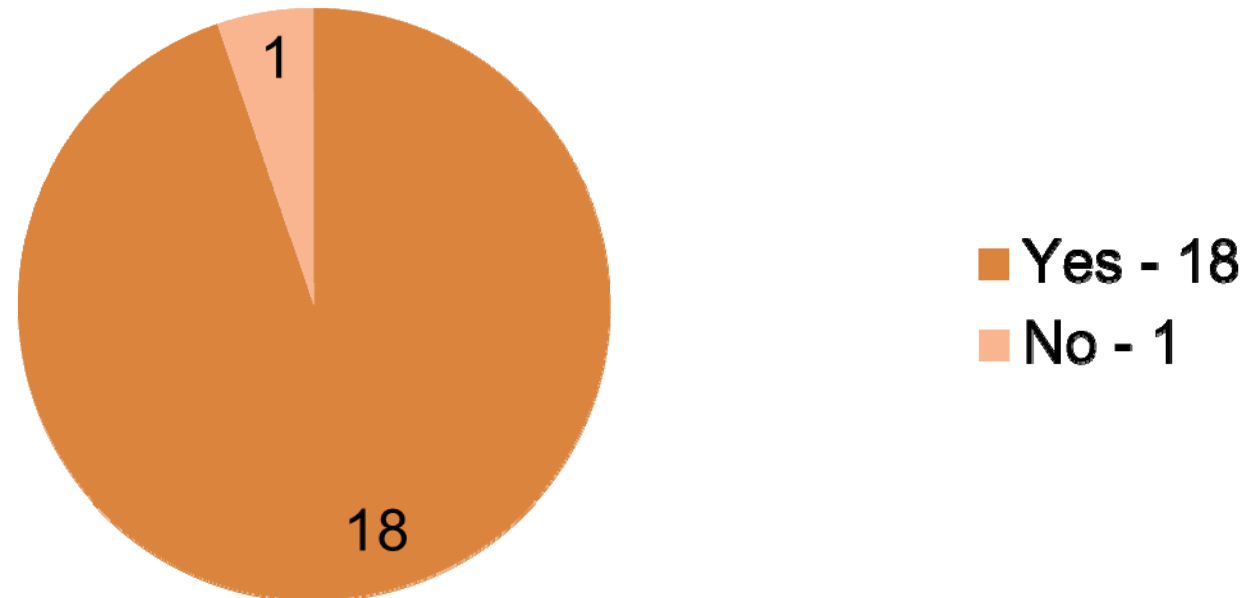
Question #1



Do some or all of your LTC policy forms contain Alternate Plan of Care (APOC) provisions?

- Yes or No

Do Your Plans have APOC Provisions?



Question #2



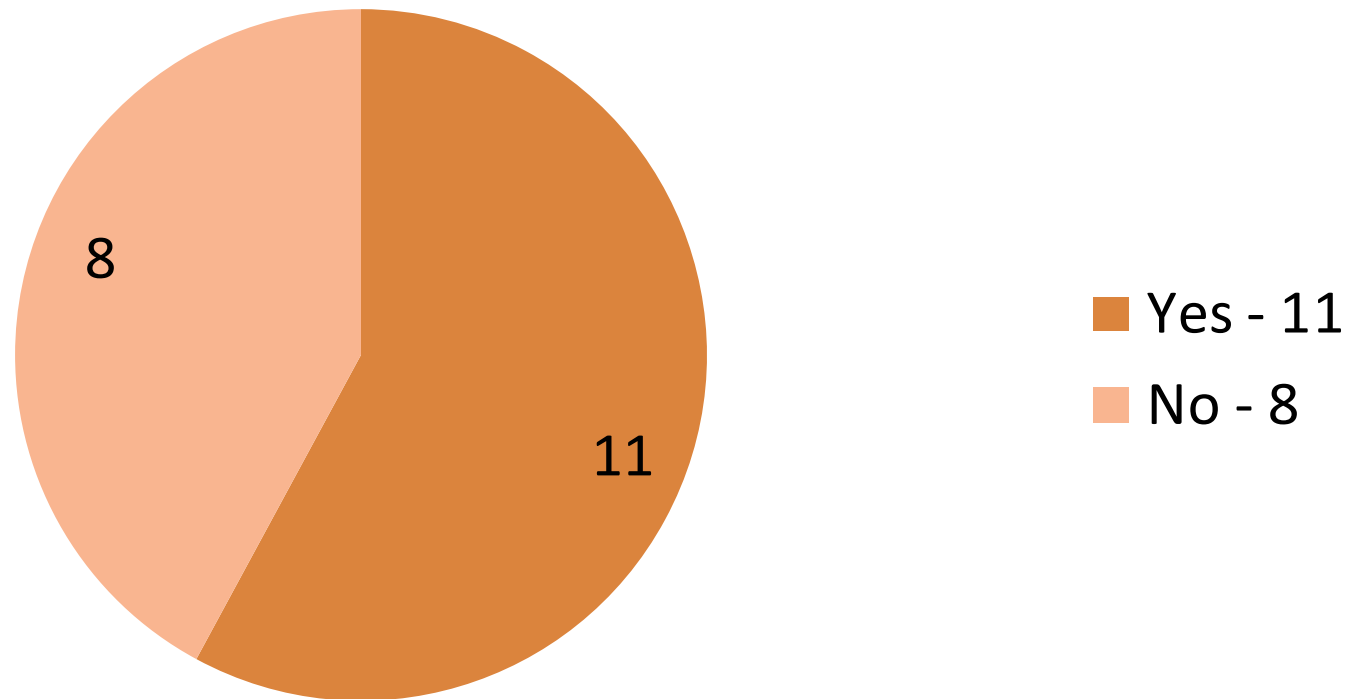
Do you have published criteria (in the policy, rider or as a policy addendum or in marketing material) that explain to policyholders what will be covered under the APOC provision?

– Yes or No

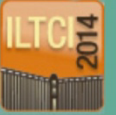
Question #2



Do you have published criteria that explain to policyholders what will be covered under the APOC Provision?



Question #3



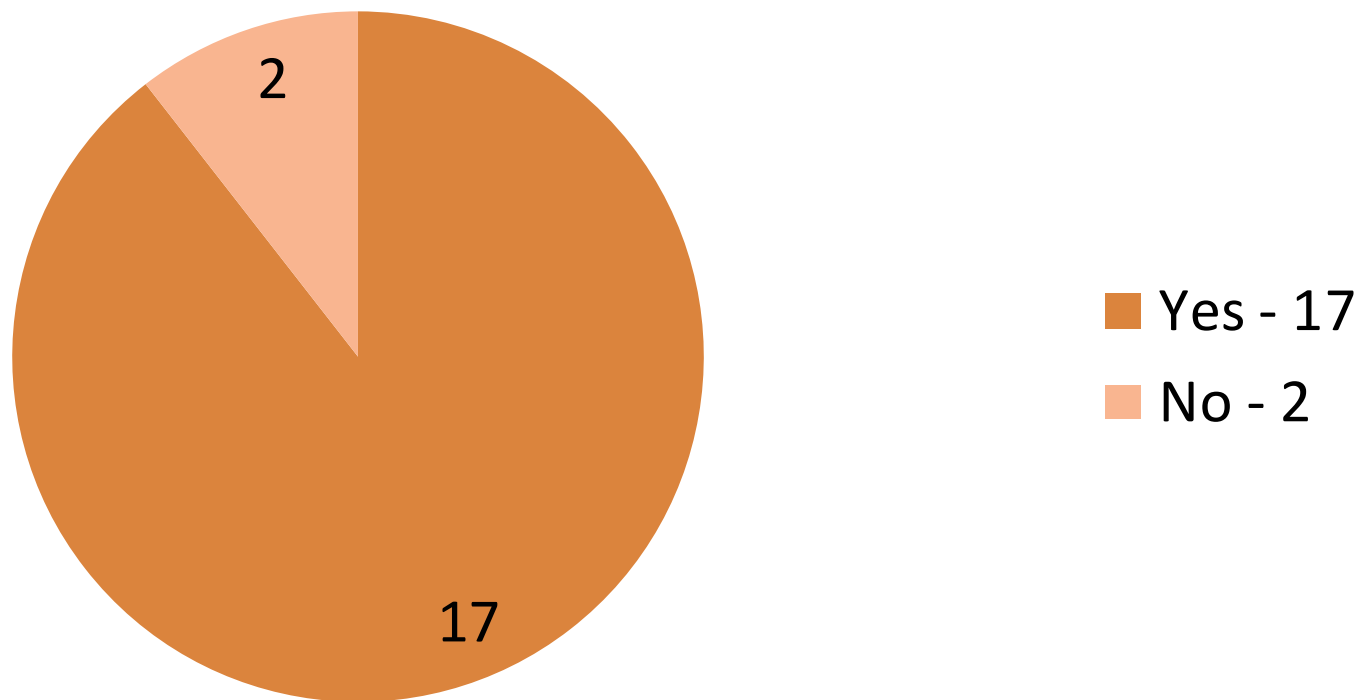
Does your company have written protocols that guide your evaluation of APOC requests?

– Yes or No

Question #3



Does your company have written protocols that guide evaluation of APOC requests?



Question #4



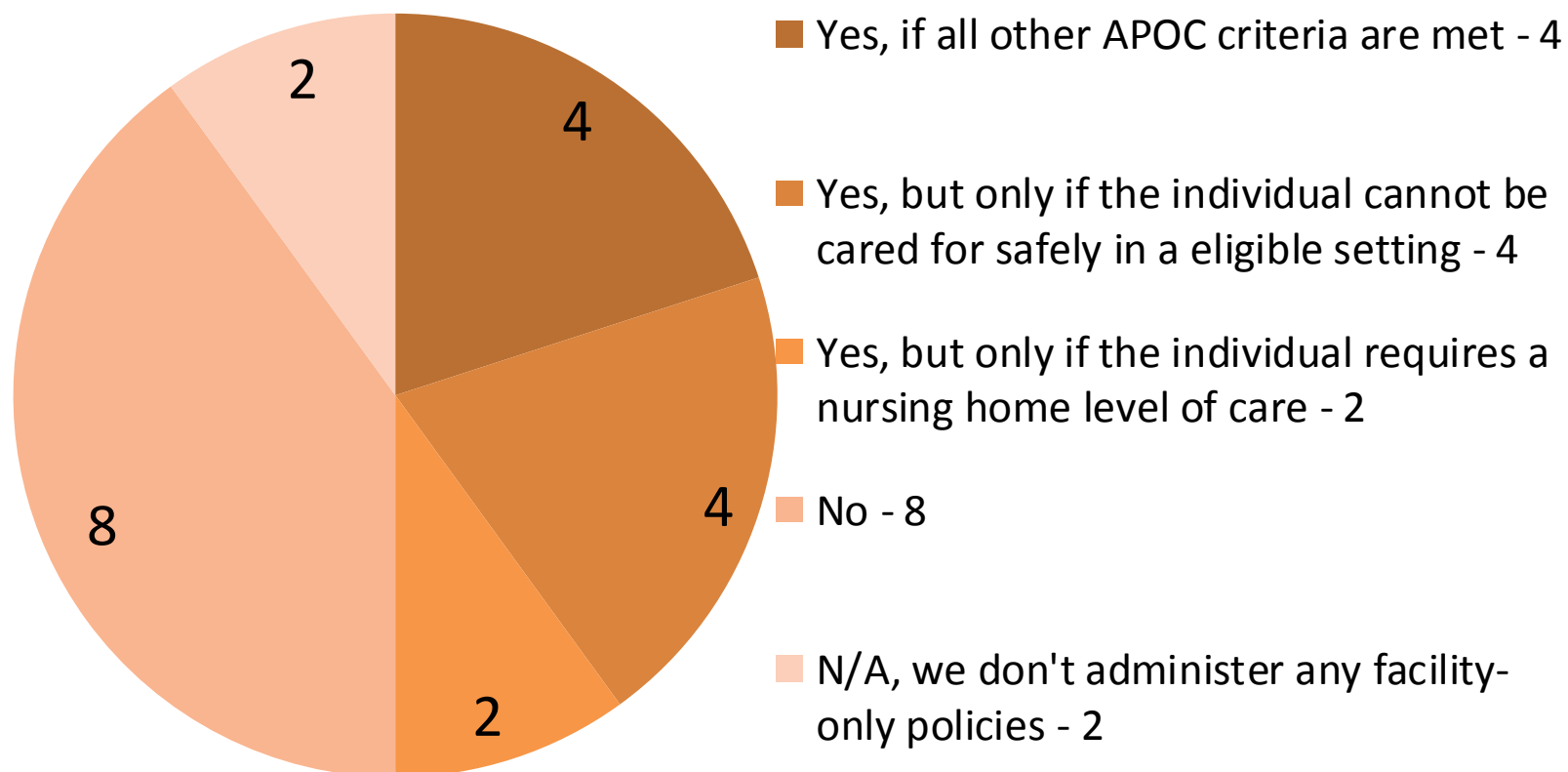
Under an LTC policy that provides coverage of facility-based care only, do you approve requests for APOC for LTC services provided at home?

- Yes, if all other APOC criteria are met
- Yes, but only if the individual cannot be cared for safely in an eligible facility
- Yes, but only if the individual requires a nursing home level of care
- No
- n/a, we don't administer any facility-only policies

Question #4



Under an LTC policy that provides coverage of facility-based care only, do you approve requests for APOC for LTC services provided at home (some respondents gave more than one answer)?



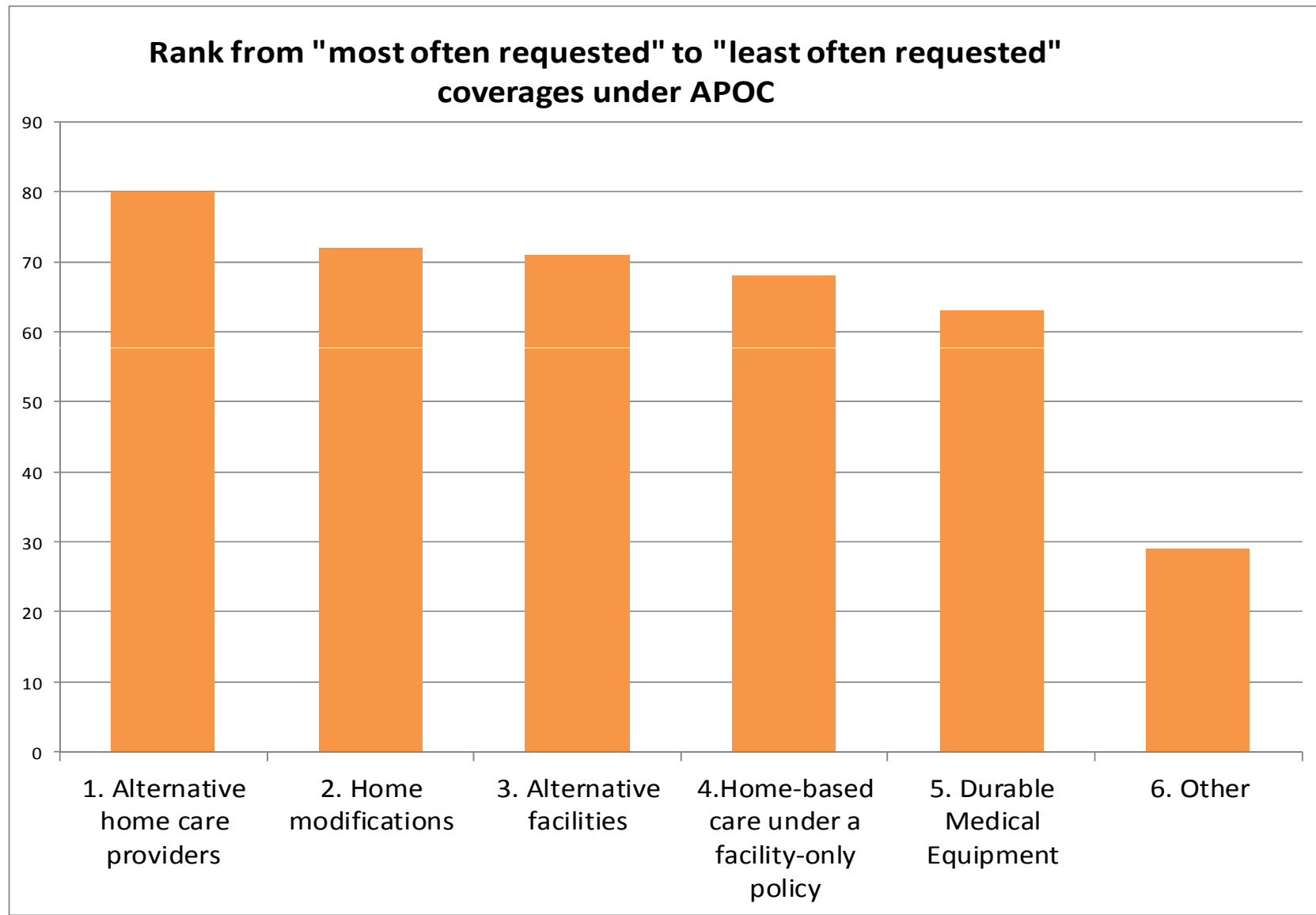
Question #5



Rank the following from “most often requested” to “least often requested” coverages under APOC:

- Alternative facility
- Alternative home care provider
- Home-based care on a facility-only policy
- Durable Medical Equipment
- Home modifications
- Other

Question #5



Question #6



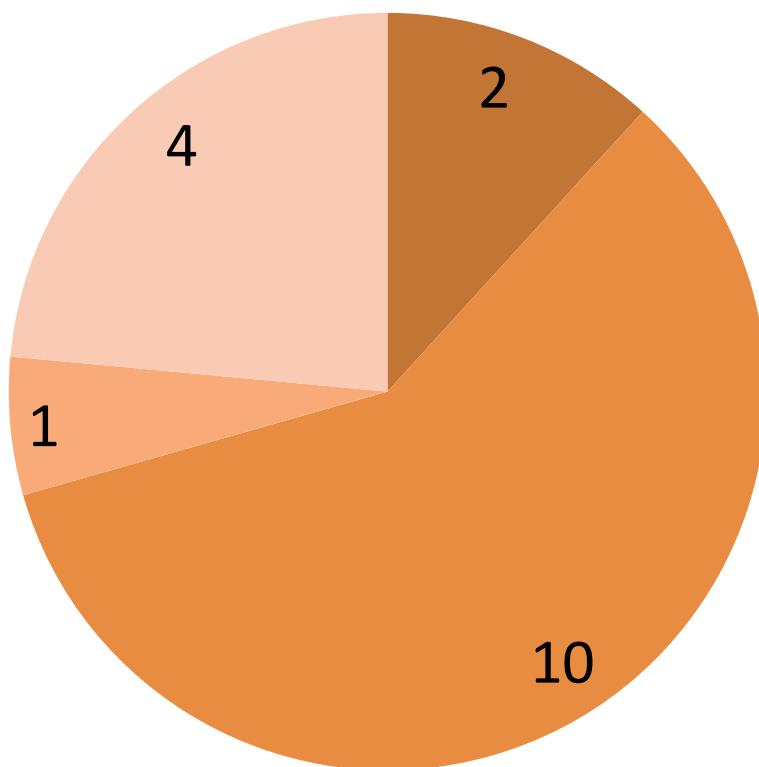
If “cost effectiveness” is a criterion for coverage under the APOC provision, indicate for whom it must be cost effective.

- Policyholder
- Carrier
- Policy has criterion, but we don’t enforce it
- Other (specify)

Question #6

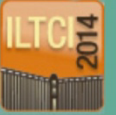


If "cost effectiveness" is a criterion for coverage under the APOC provision, indicate for whom it must be cost effective.



- Policyholder - 2
- Carrier - 10
- Policy has criterion, but it isn't enforced - 1
- Other - 4

Question #6



“Other” responses:

- Policyholder and Carrier - 2
- Not a Criterion - 2

Question #7



Who is empowered in your organization to consider APOC requests?

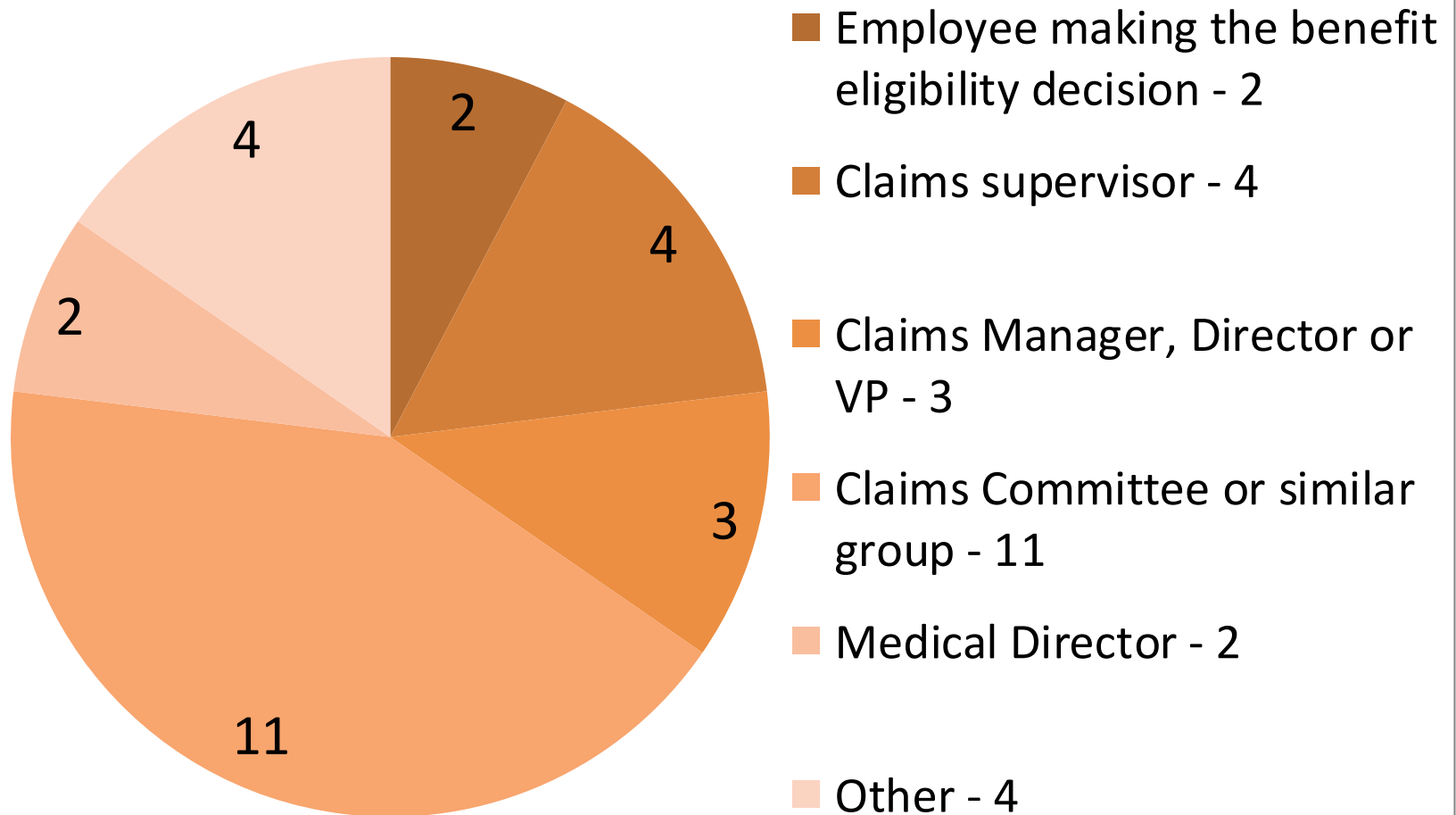
- Employee responsible for making the eligibility decision
- Claims Supervisor
- Claims Manager, Director or VP
- Claims Committee or similar group
- Medical Director
- Other (specify)

Question #7



Who in your organization is empowered to consider APOC requests?

Some respondents had ore than once choice.



Question #7



“Other” responses:

- APC Specialist
- Client (Carrier)
- Employee in conjunction with the Manager
- Employee in conjunction with Committee

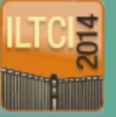
Question #8



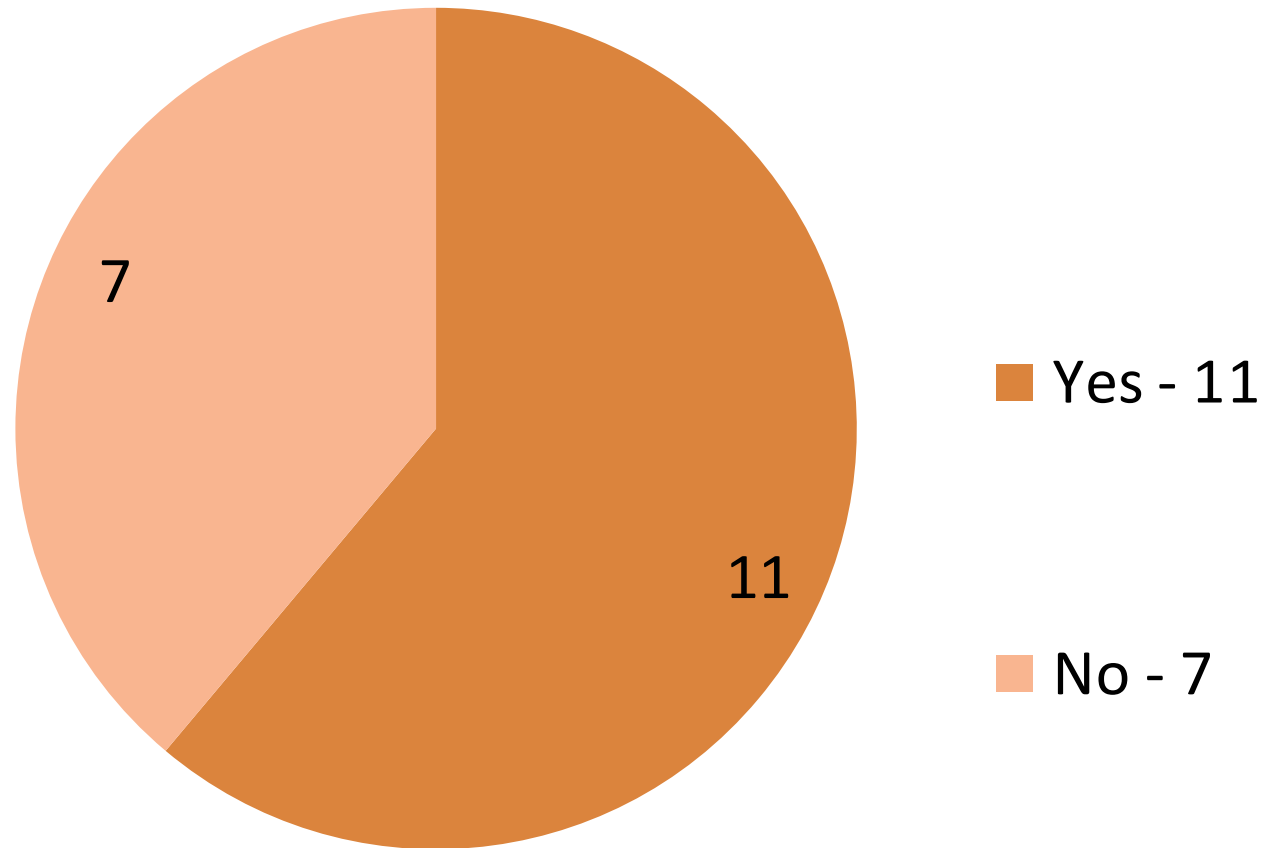
Do you require that policyholders sign an agreement/contract before you will issue APOC benefits?

– Yes or No

Question #8



Do you require that policyholders sign an agreement/contract before you will issue APOC benefits?



Question #9



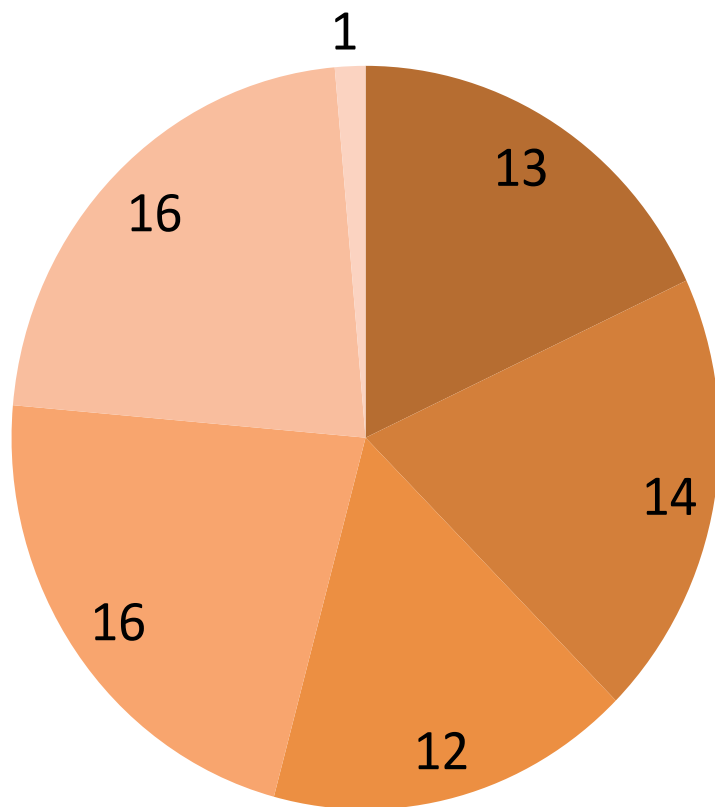
Once approved, what are the reasons you would consider revoking/ending approval? Select all that apply.

- Claimant did not comply with administrative requirements
- Claimant changed providers and carrier declined to cover new provider
- Provider failed to provide requested information
- Carrier has information that quality of the alternative care is no longer equal to or greater than would be available through standard benefits
- Carrier suspects fraud or misrepresentation
- Other (specify)

Question #9

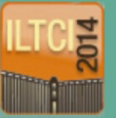


Once approved, what are the reasons you would consider revoking/ending APOC approval (respondents may indicate more than one option)



- Claimant did not comply with administrative requirements - 13
- Claimant changed providers and carrier declined to approve new provider - 14
- Provider failed to provide requested information - 12
- Carrier has information that indicates care is no longer equal to or greater than would be provided under non-APOC benefits - 16
- Carrier suspects fraud or misrepresentation by provider, claimant, family and/or others - 16
- Other - 1

Question #9



“Other” response:

Recovered or no longer met benefit triggers

Question #10



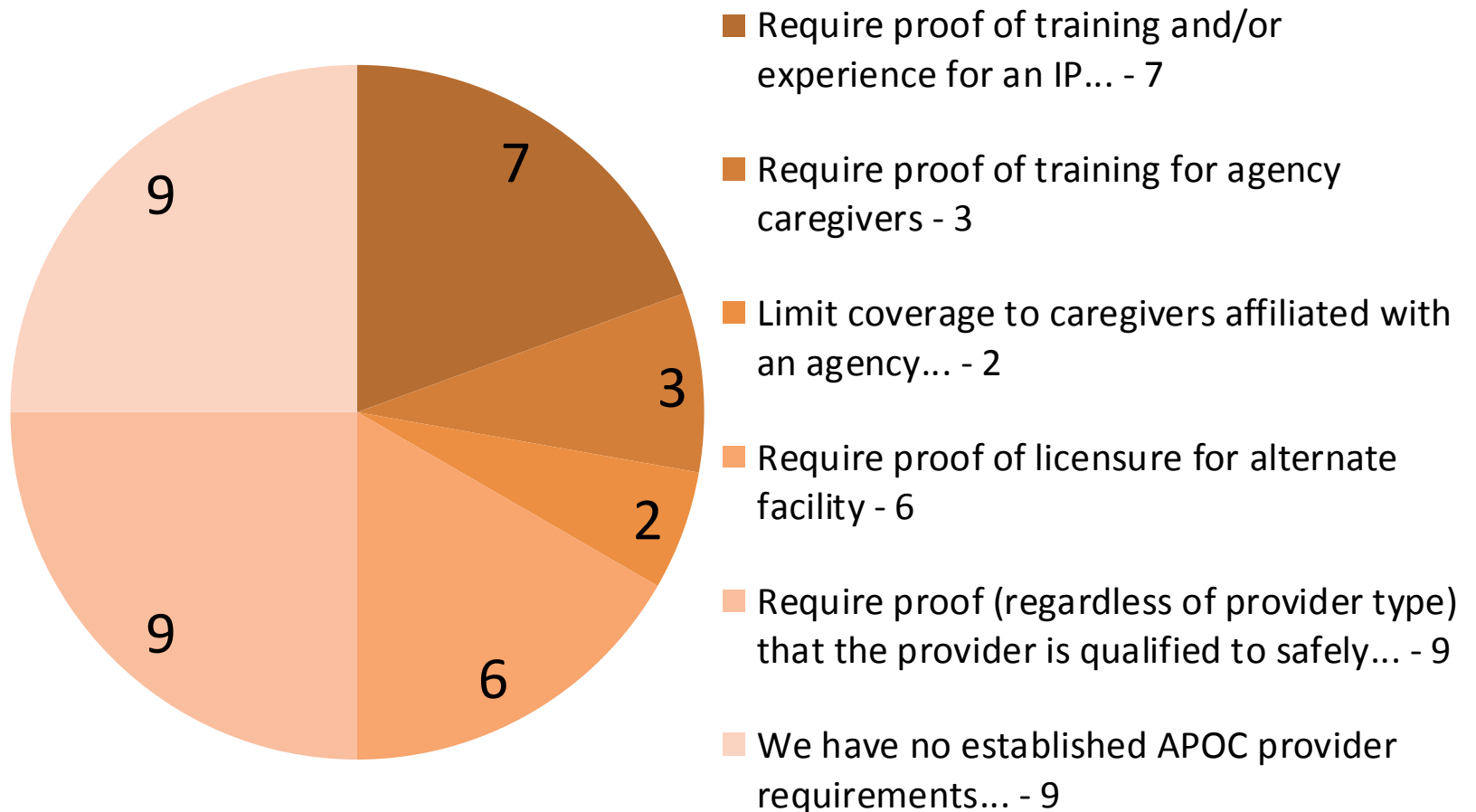
If you consider APOC coverage for providers (HHC or Facility) that are not otherwise eligible under the policy, what are your criteria (respondents may indicate more than one choice)?

- Require proof of training and/or experience for an IP, i.e., caregiver hired directly by claimant
- Require proof of training for agency caregivers
- Limit coverage to caregivers affiliated with an agency, i.e., no IP consideration
- Require proof of licensure for alternate facility
- Require proof (regardless of provider type) that the provider is qualified to safely meet all of the individual's needs (e.g., dementia care, medication management, personal care, etc.)
- We have no established APOC provider requirements, i.e., each is determined on a case-by-case basis; licensure and/or training/experience may not disqualify an alternate provider.

Question #10



If you consider APOC coverage for providers (HHC or Facility) that are not otherwise eligible under the policy, what are your criteria (respondents may indicate more than one choice)?



Questions?

Thank You



Thank you for participating.