

Important Instructions for New Members Special Supplemental Benefits for the Chronically Ill (SSBCI)

Your plan gives you extra health benefits called Special Supplemental Benefits for the Chronically Ill (SSBCI). Only members with certain health problems can keep getting these benefits. When you join the plan, you will automatically get these extra benefits for the first 180 days (about 6 months).

What you need to do:

Make an appointment to see your HealthSun Primary Care Doctor (PCP) as soon as you can. Your PCP (or another doctor you see) must fill out and send us a special form called the Provider Confirmation Form. This form tells us if you meet the rules to keep getting these benefits after 180 days from the date you became effective with the plan.

If you do not do this:

Your extra benefits will stop after 180 days. They will also stop if your doctor does not send us the signed form saying you qualify.

If you are approved:

We will send you a letter in the mail to let you know your benefits will continue.

If you have any questions, please contact our Member Services Department at (877) 336-2069. TTY users should call (877) 206-0500. Hours of operation from October 1st through March 31st, seven days a week from 8 a.m. to 8 p.m. (we are closed on Thanksgiving and Christmas Day). From April 1st through September 30th, we are available Monday through Friday from 8 a.m. to 8 p.m. (our office will be closed on federal holidays).

Provider Confirmation Form Special Supplemental Benefits for the Chronically Ill (SSBCI)

This form is used to make sure the member meets eligibility requirements for Special Supplemental Benefits for the Chronically Ill (SSBCI) as required by CMS. Full eligibility requirements can be found on the next page.

Please follow the instructions below.

1. **To expedite processing, complete an electronic version of this form by going to the HealthSun provider portal at <https://provider.healthsun.com>.**
2. If you are not a HealthSun provider, please submit this form by faxing it to 305-448-4148.

The member listed below has requested access to one or more Special Supplemental Benefits for the Chronically Ill, which by CMS guidelines, requires them to have a qualifying chronic condition and meet specific clinical requirements as outlined on the following pages.

Member information

Member first and last name

Date of birth

Medicare beneficiary ID

Member ID

By signing below, I certify that the above referenced patient is under my care and:

- ☐ Meets the defined criteria.
- ☐ Does not meet the defined criteria.

Provider information

Provider first and last name

Address

Phone number

Fax number

NPI

Signature:

Date:

Supplemental Benefits for the Chronically Ill Qualifying Conditions

Per CMS guidelines, members must have one of the eligible chronic conditions listed and have a condition that:

- Is life-threatening or significantly limits overall health or function,
- Has a high risk of hospitalization or other adverse health outcomes,
- And requires intensive care coordination.

Meeting these conditions must be demonstrated by one or more of the following:

- One or more inpatient admissions (inclusive of behavioral health) related to the chronic condition in the last 12 months, OR
- One or more urgent care or emergency room visits related to the chronic condition in the last 12 months, OR
- Two or more outpatient visits related to the chronic condition (including primary care or specialty care visits) in the last 12 months, OR
- Is a patient who requires home health visits related to the chronic condition, OR
- Is a patient who has an impairment in daily living activities related to the chronic condition (bathing, dressing, toileting, transferring, and eating) or cognitive impairments, OR
- Is a patient with a chronic condition and a need for one or more durable medical equipment (DME) in the outpatient setting (including but not limited to): group 3 power / manual wheelchair, non-invasive ventilation (NIV), wound vacuums, bipap machines, mechanical in-exsufflation devices, group 2 or group 3 mattresses.

Eligible conditions include:

- | | | |
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| · Chronic alcohol use disorder and other substance use disorders | · Cancer | · Overweight, obesity, and metabolic syndrome |
| · Autoimmune disorders: | · Cardiovascular disorders: | · Chronic gastrointestinal disease: |
| – Polyarteritis nodosa | – Cardiac arrhythmias | – Chronic liver disease |
| – Polymyalgia rheumatica | – Coronary artery disease | – Non-alcoholic fatty liver disease (NAFLD) |
| – Polymyositis | – Peripheral vascular disease | – Hepatitis B |
| – Dermatomyositis | – Valvular heart disease | – Hepatitis C |
| – Rheumatoid arthritis | · Chronic heart failure | – Pancreatitis |
| – Systemic lupus erythematosus | · Dementia | – Irritable bowel syndrome |
| – Psoriatic arthritis | · Diabetes mellitus: | – Inflammatory bowel disease |
| – Scleroderma | – Pre-diabetes (Fasting blood glucose: 100-125 mg/dl or Hgb A1C:5.7-6.4%) | |

- Chronic kidney disease (CKD):
 - CKD requiring dialysis/ End-stage renal disease (ESRD)
 - CKD not requiring dialysis
- Severe hematologic disorders:
 - Aplastic anemia
 - Hemophilia
 - Immune thrombocytopenic purpura
 - Myelodysplastic syndrome
 - Sickle-cell disease (excluding sickle-cell trait)
 - Chronic venous thromboembolic disorder
- HIV/AIDS
- Chronic lung disorders:
 - Asthma
 - Chronic bronchitis
 - Cystic fibrosis
 - Emphysema
 - Pulmonary fibrosis
 - Pulmonary hypertension
 - Chronic obstructive Pulmonary disease (COPD)
- Chronic and disabling mental health conditions:
 - Bipolar disorders
 - Major depressive disorders
 - Paranoid disorder
- Schizophrenia
- Schizoaffective disorder
- Post-traumatic stress disorder (PTSD)
- Eating disorders
- Anxiety disorders
- Neurologic disorders:
 - Amyotrophic lateral sclerosis (ALS)
 - Cerebral palsy
 - Epilepsy
 - Extensive paralysis (hemiplegia, quadriplegia, paraplegia, monoplegia)
 - Huntington's disease
 - Multiple sclerosis
 - Parkinson's disease
 - Polyneuropathy
 - Fibromyalgia
 - Chronic fatigue syndrome
 - Spinal cord injuries
 - Spinal stenosis
 - Stroke-related neurologic deficit
 - Traumatic brain injury
- Stroke
- Post-organ transplantation care
- Immunodeficiency and immunosuppressive disorders
- Conditions that may cause cognitive impairment:
 - Alzheimer's disease
 - Intellectual and developmental disabilities
 - Traumatic brain injuries
 - Disabling mental illness associated with cognitive impairment
 - Mild cognitive impairment
- Conditions that may cause similar functional challenges and require similar services:
 - Spinal cord injuries
 - Paralysis
 - Limb loss
 - Stroke
 - Arthritis
- Chronic conditions that impair vision, hearing (deafness), taste, touch, and smell
- Conditions that require continued therapy services in order for individuals to maintain or retain functioning
- Other:
 - Hypertension
 - Osteoporosis
 - Chronic back pain