

Enhanced Personal Health Care Program

MEDICARE ADVANTAGE MEDICAL PANELS

The Program introduces the concept of the Medical Panel to encourage broad-based provider organization participation across markets while ensuring that patient access needs are met and physician performance assessment is statistically valid. The Medical Panel structure will support collaborative learning and community accountability for quality and affordability. As mentioned earlier in this section, Medical Panels will also serve as the basis for establishing a MPMLR.

Formation of Medical Panels

Medical Panels can be composed of individual physician practice or a group of practices. Prior to the MA Measurement Period start date, Amerigroup Community Care will assign Medical Panels for participating practices, and this information will be available on the secure provider portal. You will have an opportunity to review your Medical Panel assignment at that time. You will remain in your assigned Medical Panel for the duration of the MA Measurement Period.

General Parameters for Medical Panels

Provided below are *general* parameters related to the formation of Medical Panels under the Program.

- A single physician group with more than 1,500 Medicare Advantage Attributed Members will form its own Medical Panel.
- Physician groups with Medicare Advantage Attributed Member populations less
 than the minimum level set by Amerigroup may form Medical Panels with other
 participating physician groups. Prior to the start of the MA Measurement Period,
 assigned Medical Panels will be posted on our provider portal. Each Medical
 Panel that is comprised of multiple practices must meet or exceed the 1,500
 minimum number of Medicare Advantage Attributed Members. Amerigroup will
 make final Medical Panel decisions, and the final list will be shown on the
 provider portal.

When multiple physician groups may make up a Medical Panel, quality performance will be evaluated at the physician group level, and MPMLR will be calculated at the Medical Panel level to determine the Shared Savings Percentage achieved. If one provider group represents a Medical Panel, both quality performance and MPMLR will be calculated at the single group level.

Amerivantage is an HMO plan with a Medicare contract and a contract with the New Jersey Medicaid program. Enrollment in Amerivantage depends on contract renewal.