



Chronic Special Needs Plan and Supplemental Benefits for the Chronically Ill Qualification Verification Form

FIRST NAME:

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LAST NAME:

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MEDICARE NUMBER:

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DATE OF BIRTH (MM/DD/YYYY):

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PLAN NUMBER:

H2962	-			
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In order to confirm that you meet the eligibility requirements to enroll in our Chronic Special Needs Plan (CSNP) and receive Special Supplemental Benefits for the Chronically Ill (SSBCI), please visit your physician and have them complete the information below. SSBCI benefits will not be available until we confirm eligibility.

Questions? Please contact us at 888-657-4170 (TTY 711), Monday through Friday from 8:00 am to 8:00 pm. Between October 1 and March 31, we are available Monday through Sunday from 8:00 am to 8:00 pm.

Please submit via Fax: 855-825-8128, Email: SNP@ulthp.com, Online: <https://uhp.health/submit>, or mail it to Ultimate Health Plans Enrollment at PO Box 3459, Spring Hill, FL 34611.

Providers may also complete the form electronically on the Provider Portal: <https://uhp.health/providerportal>

A copy of this letter was also faxed to your physician.

To Be Completed by Physicians, Physicians' Extenders, Allied Health Providers, and Nurses.

The above applicant has applied to enroll in a CNSP offered by Ultimate Health Plans. To qualify, the applicant must have one of the chronic conditions listed in Step 1. They have also enrolled in a plan that offers additional SSBCI Benefits. To qualify for SSBCI benefits, the applicant must meet eligibility requirements as required by CMS.

- Please see full SSBCI eligibility requirements on the following page.
- Please complete both Steps 1 & 2 by placing checkmarks in the appropriate boxes.

Provider Questions: 888-657-4171, Monday through Friday from 8:00 am to 5:00 pm.

Step 1: Chronic Condition Confirmation (Select All that Apply)	Step 2: SSBCI Eligibility Criteria
☐ Cardiovascular Disease (CVD) - Plans 021, 026, 029, 033, 050, 051, 052: <i>Cardiac Arrhythmias, Coronary Artery Disease, Peripheral Vascular Disease, Valvular Heart Disease</i>	☐ I DO confirm the applicant meets eligibility requirements as required by CMS.
☐ Chronic Heart Failure (CHF) - Plans 021, 026, 029, 033, 050, 051, 052	—OR—
☐ Chronic Lung Disorder/COPD - Plans 023, 053: <i>Asthma, Chronic Bronchitis, Cystic Fibrosis, Emphysema, Pulmonary Fibrosis, Pulmonary Hypertension</i>	☐ I DO NOT confirm the applicant meets eligibility requirements as required by CMS.
☐ Diabetes Mellitus (DM) - Plans 021, 026, 029, 033, 050, 051, 052	
—OR—	
☐ I DO NOT confirm the presence of any condition listed above.	

PHYSICIAN LAST NAME:

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PHYSICIAN FIRST NAME:

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AUTHORIZED SIGNATURE:

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Must be signed by the physician's office.

TODAY'S DATE: (MM/DD/YYYY)

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Supplemental Benefits for the Chronically Ill Qualifying Conditions

Per the Centers for Medicaid and Medicare Services (CMS) guidelines, members must have one of the eligible chronic conditions listed and have a condition that:

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

At least one of the following must be documented to show that these conditions are met:

- One or more inpatient admissions, including behavioral health admissions, related to the chronic condition within the past 12 months
- One or more urgent care or emergency room visits related to the chronic condition within the past 12 months
- Two or more outpatient visits related to the chronic condition, including primary care or specialty care visits, within the past 12 months
- A need for home health visits related to the chronic condition
- An impairment in daily living activities related to the chronic condition (bathing, dressing, toileting, transferring, and eating), or cognitive impairments
- A chronic condition and a need for one or more durable medical equipment (DME) items in the outpatient setting, including but not limited to: a group 3 power/manual wheelchair, non-invasive ventilation (NIV), wound vacuums, BiPAP machines, mechanical in-exsufflation devices, or group 2 or group 3 mattresses

Eligible Chronic Conditions

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| <ul style="list-style-type: none"> • Chronic alcohol use disorder and other substance use disorders (SUDs) • Autoimmune disorders <ul style="list-style-type: none"> ○ Polyarteritis nodosa ○ Polymyalgia rheumatica ○ Polymyositis ○ Dermatomyositis ○ Rheumatoid arthritis ○ Systemic lupus erythematosus ○ Psoriatic arthritis ○ Scleroderma • Cancer • Cardiovascular disorders <ul style="list-style-type: none"> ○ Cardiac arrhythmias ○ Coronary artery disease ○ Peripheral vascular disease ○ Valvular heart disease • Chronic heart failure • Dementia • Diabetes mellitus <ul style="list-style-type: none"> ○ Prediabetes (Fasting blood glucose: 100-125 mg/dl or Hgb A1C: 5.7-6.4%) • Overweight, obesity, and metabolic syndrome • Chronic gastrointestinal disease <ul style="list-style-type: none"> ○ Chronic liver disease ○ Non-alcoholic fatty liver disease (NAFLD) ○ Hepatitis B ○ Hepatitis C ○ Pancreatitis ○ Irritable bowel syndrome ○ Inflammatory bowel disease | <ul style="list-style-type: none"> • Chronic kidney disease (CKD) <ul style="list-style-type: none"> ○ CKD requiring dialysis/End-stage renal disease (ESRD) ○ CKD not requiring dialysis • Severe hematologic disorders continue <ul style="list-style-type: none"> ○ Aplastic anemia ○ Hemophilia ○ Immune thrombocytopenic purpura ○ Myelodysplastic syndrome ○ Sickle-cell disease (excluding sickle-cell trait) ○ Chronic venous thromboembolic disorder • HIV/AIDS • Chronic lung disorders <ul style="list-style-type: none"> ○ Asthma ○ Chronic bronchitis ○ Cystic fibrosis ○ Emphysema ○ Pulmonary fibrosis ○ Pulmonary hypertension ○ Chronic obstructive pulmonary disease (COPD) | <ul style="list-style-type: none"> • Chronic and disabling mental health conditions <ul style="list-style-type: none"> ○ Bipolar disorders ○ Major depressive disorders ○ Paranoid disorder ○ Schizophrenia ○ Schizoaffective disorder ○ Post-traumatic stress disorder (PTSD) ○ Eating disorders ○ Anxiety disorders • Neurologic disorders <ul style="list-style-type: none"> ○ 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 | <ul style="list-style-type: none"> • Stroke • Post-organ transplantation care • Immunodeficiency and Immunosuppressive disorders • Conditions associated with cognitive impairment <ul style="list-style-type: none"> ○ Alzheimer's disease ○ Intellectual and developmental disabilities ○ Traumatic brain injuries ○ Disabling mental illness associated with cognitive impairment ○ Mild cognitive impairment • Conditions with functional challenges <ul style="list-style-type: none"> ○ 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: <ul style="list-style-type: none"> ○ Hypertension ○ Osteoporosis ○ Chronic back pain |
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