

**VIVA Health, H0154**  
**Dual Eligible (Dual Eligible Subset) Special Needs Plan**

**Model of Care Score: 98.75%**

**3-Year Approval**

**January 1, 2014 – December 31, 2016**

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**Target Population**

VIVA's plan is designed to meet the needs of people who qualify for Medicare and Full Medicaid Benefits or are eligible for Medicare cost-sharing assistance under Medicaid. VIVA provides services to over 20 counties in Alabama, with the majority of members in Jefferson, Montgomery and Calhoun counties. Most of the members are between the ages of 45 to 54 and 65 to 69. The top five prevalent conditions of the members are diabetes without complication, chronic obstructive pulmonary disease, renal failure, congestive heart failure and vascular disease.

**Provider Network**

VIVA's contracted provider network includes the full spectrum of primary and specialty care, including community and private health care providers and thousands of physicians with all specialties covered. The network consists of nurse practitioners, behavioral health specialists, physical and occupational specialists, laboratory and radiology specialists and facilities pertinent to the care of the SNP population. VIVA's network also includes providers of additional benefits, such as transportation and fitness.

SNP members select a primary care physician (PCP) at the time of enrollment and it is the responsibility of the PCP to provide primary care and to help coordinate other medical care for the members. This includes evaluating each member's medical needs, facilitating communication and information exchange among the different providers treating the member and assisting the member through any transitions.

**Care Management and Coordination**

Within 90 days of enrollment and annually thereafter, VIVA mails the health risk assessment (HRA) to the member along with a self-addressed stamped envelope and a letter of explanation. If a response is not received within 60 days, a second mailing will be sent. The HRA tool is a standardized tool developed by VIVA Health that addresses the medical, psychosocial, functional and cognitive needs of the SNP membership. If a member is in intensive care management, the HRA may be completed by the care manager during a face-to-face visit or over the telephone.

Once the HRA results are entered into the system, VIVA's database, it groups the HRA responses and produces a report that allows the SNP team to review, analyze and identify those members at risk for potential problems or with specific needs. Members who are identified as the highest risk (Level 3) are further assessed by a dedicated care manager. After analysis and review of assessment findings, the care manager and the member work together to develop an evidence-based individualized care plan (ICP) specific to the member's complex needs and personal goals. Each ICP is based upon member's health literacy level and modified for ease of understanding. The care plan provides goals and directives on care, such as obtaining necessary testing, quality screenings, physician visits and community services. The member's PCP is ultimately responsible for directing the ICP.

If the care manager identifies a member as not meeting established goals, the case may be reviewed with the medical director and chosen for discussion with the interdisciplinary care management team (IDCT) for input. VIVA Health maintains an IDCT consisting of VIVA's medical director, physicians (primary and/or geriatric specialists), clinical pharmacists, licensed nurses, social workers and a mental health professional. Other health care disciplines may be included on an ad hoc basis if a need is identified during the pre-screening process. The composition of the IDCT is based on the complex medical and socioeconomic factors present in the SNP population and its responsibility is to improve the member's health status through collaboration with other disciplines to gain additional suggestions in enhancing the plan of care. IDCT meetings are face to face and are scheduled 6 times per year.

This MOC summary is intended to provide a broad overview of the SNP's MOC. Although the full extent of any MOC cannot be conveyed in a short summary, this summary provides the reader with a general overview of how the SNP addresses beneficiary needs.

For more information about this health plan refer to the Special Needs Plan's website at:  
2013 information can be found here

<http://www.vivamedicaremember.com/Plans/Current/ExtraValue.aspx>

2014 information can be found here

<http://www.vivamedicaremember.com/Plans/Previous/ExtraValue.aspx>

Additional information can be found here

<http://www.vivamedicaremember.com/Resource/Current/Important.aspx>