Horizon Healthcare of New Jersey, H3154 Dual Eligible (Medicare Zero Cost-Sharing) Special Needs Plan

Model of Care Score: 96.25%

3-Year Approval January 1, 2012 – December 31, 2014

Target Population

Horizon Blue Cross Blue Shield of New Jersey offers a Special Needs Plan (SNP) for dual eligible members that reside in its service area and meet specific requirements. This program is a Medicaid subset with zero cost sharing for individuals who receive services under Medicare Parts A and B and who are eligible for Medicaid benefits. Many of these individuals are very poor. Currently 94% of the membership lives below 200% of the federal poverty level and they report having a lower health status than other populations. Additionally, more than one-third of the population is disabled and 14% are age 85 or older. Members are more likely to have greater limitations in activities of daily living (ADLs). Almost one-quarter of the population resides in an institution such as a nursing home. Although a small portion of the membership lives with a spouse, one-third live with family members and non-relatives, and another one-third lives alone.

Provider Network

Horizon has a large and varied network that includes providers who specialize in treating members with special needs. The network consists of: all related physician specialists, primary care providers including geriatricians, free standing and hospital-based dialysis centers, behavioral health providers, durable medical equipment companies, acute rehab, sub-acute rehab and skilled nursing facilities. The plan has the ability to continually identify new providers, from a larger network to be credentialed into the Medicare Advantage network that supports the SNP program. Horizon also works with community advocacy groups to identify opportunities to further develop the provider network to support the SNP membership.

Care Management and Coordination

The plan's health risk assessment (HRA) tool is a comprehensive self-assessment questionnaire that scores health status, determines health risks and offers recommendations to improve the member's health. The HRA drives the development of the individualized care plan (ICP) and the creation of an interdisciplinary care team (ICT). The ICP is a living document that Horizon reviews and revises throughout enrollment. It is based on responses to the HRA, claims data, predictive modeling, internal and external referrals and member self-referral.

A case manager ensures that an ICP is developed for members in each level of care management, utilizing a model with the goal of treating the member or family holistically. The care plan is sent to the member and the provider following initial assessment and upon each update.

Implementation of the plan begins within thirty business days of the date of a complex needs assessment, or sooner, according to the circumstances and unique health needs of the member.

The implementation of the plan of care drives the creation of the ICT. The ICT consists of all internal and external staff that impact the member's ICP. The team meets on a regular basis and is comprised of but not limited to: the member, medical directors, care managers, rehab nurse, pharmacists, disease managers, behavioral health case managers and other specialties on an as needed basis.

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 member needs.

For more information about this health plan refer to the Special Needs Plan's website at: https://medicare.horizonblue.com/medicare-TotalCare-health-insurance-plans-new-jersey-introduction