

H3347 Elderplan Inc.
Dual Eligible (Full Benefit) Special Needs Plan

Model of Care Score: 81.67%

2-Year Approval

January 1, 2015 to December 31, 2016

Target Population

The Elderplan Medicare Dual-Eligible Special Needs Plan (Elderplan D-SNP) provides coverage to members who live in the following geographic service areas in New York: Richmond, Bronx, Queens, Kings, New York, Westchester (partial), Dutchess and Orange Counties. Members are eligible for Medicare and Medicaid. A member's level of Medicaid eligibility determines if he/she is eligible for the all dual or the full dual product line of business. More than 60 percent of members have hypertension, and 52.7 percent have at least one co-morbidity. Ninety-four percent of members live within the community, 73 percent speak English as their primary language and most members are female.

Provider Network

Elderplan providers include but are not limited to physicians specializing in geriatrics, cardiology, nephrology, pulmonology endocrinology and behavioral health. Members also have access to dietitians, podiatrists, nurse professionals, therapists, social workers, mental health providers, pharmacies, skilled nursing facilities (SNF), outpatient mental health facilities, pain management centers and supplemental benefit providers. Community based services available to members include radiology, laboratory, licensed home health care agencies, transportation and durable medical equipment (DME) vendors.

Care Management and Coordination

Elderplan uses three health risk assessment (HRA) tools, the health status form (HSF), a D-SNP assessment and a NY State assessment referred to as the UAS-NY assessment to identify the medical, functional, cognitive, psychosocial and mental health needs of its members. A care manager (CM) completes these assessments and stratifies members based on their health risk level and creates the member's individual care plan (ICP). The ICP is a comprehensive member-centric plan that documents problems, goals and interventions to address the integrated medical, physical/functional, cognitive, behavioral and psychosocial needs of the member.

The CM convenes an interdisciplinary care team (ICT) to review the ICP member specific priorities the assessments identify. The ICT partners with the member's primary care physician (PCP) in order to finalize the ICP. The CM monitors and re-evaluates the ICP to confirm that the

planned interventions remain appropriate to the member's condition and desired outcomes. For example, changes in a member's health status or care transitions result in making updates to the ICP.

The composition of each member's ICT is based on the HRAs, risk stratification, care goals and needs identified by the CM. ICT participants include, but are not limited to the CM (who is a registered nurse or social worker), the supervisor of coordinated care, member, caregiver/family, member's PCP, specialist, behavioral health providers, pharmacist, inpatient case manager transitional care nurse, palliative care, cultural/pastoral liaison and eligibility and entitlement specialists.

When a member's care is led by a specialist, that specialist may replace the PCP's role in the ICT. The ICT may include additional clinicians, community workers, social workers, community outreach workers, peer support workers, external agency case and care managers or Elderplan staff who represent specialized programs (i.e. the diabetic care team). Upon review of the member's ICP, the ICT addresses barriers/delays to goal attainment and recommends changes to the ICP to remove barriers and achieve outcomes. The ICT works with the member to identify interventions that will help them to maintain independence and safety, monitor health plan eligibility, review the ICP and reinforce the availability of the CM work with the member on an ongoing 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 beneficiary needs.

For more information about this health plan refer to the Special Needs Plan's website at:
<http://elderplan.org/plan-options/2014-plan-options/>