

**Humana Health Plans of Puerto Rico, INC., H4007  
Dual Eligible (Full Benefit) Special Needs Plan**

**Model of Care Score: 83.75%**

**2-Year Approval**

**January 1, 2014 – December 31, 2015**

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**Target Population**

The targeted population served by Humana is Medicare beneficiaries who are also receiving Medicaid assistance from the state. These members may have complex medical needs and increased psychosocial needs that impact compliance with care plans and health outcomes. This population also demonstrates higher rates of mental illness, cognitive impairment and higher incidence of diabetes, stroke and Alzheimer's. Humana Contigo's Dual-eligible SNP offers benefits available through Medicare and Medicaid. It focuses on monitoring health status, managing chronic diseases, avoiding inappropriate hospitalizations and helping members move from high risk to lower risk on the care continuum.

**Provider Network**

Humana offers members of Special Needs Plans a comprehensive network of care centered on primary care with medical and surgical specialists available to augment and support primary care physicians (PCPs) as well as the needs of the targeted populations. This network includes, but is not limited to, acute care facilities, long term care facilities, skilled nursing facilities, laboratories, radiography facilities, long term care facilities, rehabilitative specialists, mental and social health specialists, home health specialists and end of life care specialists. Humana recognizes that members who are dually eligible for Medicare and Medicaid have specific needs and may require the services of many different types of specialists and various other physicians and providers. If a member is unable to utilize a network provider to obtain medically covered services, the D-SNP will provide and cover these services with out-of-network providers and the member would pay at an in-network rate.

**Care Management and Coordination**

The Humana Contigo case management team delivers its services within a multi-disciplinary care team model. Every SNP member is assigned to a care team. A health risk assessment (HRA) is required by the Centers for Medicare and Medicaid Services (CMS) for all new members for the purpose of providing continuity of care and appropriate coordination of clinical services. Humana Contigo administers HRAs on an annual and as needed basis, particularly following a health-related event. Humana Contigo administers the HRA primarily by phone but mails a simple, general questionnaire whenever necessary. The HRA is comprised of a set of validated questions about medical conditions, functional ability, living circumstances, nutrition and depression which are systematically computed into an overall risk score. The HRA is critical to effective risk management and channeling the member to the appropriate level of intervention.

All SNP members are required to have an active, individualized care plan (ICP) that addresses healthcare needs, goals and interventions to be implemented. Once a member is enrolled in the case management program, a qualified registered nurse will conduct an interview with the member, and/or caregiver using the Case Management Comprehensive Assessment tool. Based upon this information, and with input from various members of the ICT, the case manager (CM) will develop a care plan to include interventions, referrals, educational opportunities, preventive care, medication, safety review, and other services as required. At least annually, the care plan will be reviewed by the CM and appropriate members of the ICT and revisions communicated to the PCP and the rest of the ICT.

The ICT is a team of caregivers from different professional disciplines or services who work together to deliver collaborative healthcare support focused on communication, care planning, optimizing quality of life and advocacy for the individual and/or family. The principal case manager coordinates and engages other members of the ICT when required, based on member needs. The ICT works to integrate and support a holistic and member-centric model of care, delivering an end-to-end member experience that fosters communication between and among caregivers as the member moves along their life and health continuum.

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:

Humana Health Plans of Puerto Rico, INC. H4007: <https://www.humana.com/medicare/>