

Physicians Health Choice, H4527
Dual-Eligible (Medicaid Subset - \$0 Cost Share) Special Needs Plan

Model of Care Score: 88.13%

3-Year Approval

January 1, 2012 – December 31, 2014

Target Population

Physicians Health Choice (PHC) targets the dual eligible population and uses data from Utilization Management, Customer Service, Pharmacy and Information Technology to identify its members. PHC delivers specialized services and benefits to dual-eligible special needs individuals as well as the vulnerable special needs individuals who are frail, disabled, developing end-stage renal disease after enrollment, near end-of-life and/or having multiple and complex chronic conditions.

Provider Network

PHC has contractual relationships with a network of facilities and providers including acute care hospitals, behavioral health facilities, laboratory services, long-term care, skilled nursing facilities, as well as primary care physicians (PCPs), nursing professionals, rehabilitation specialists, social workers and mental health specialists. PHC employed and contracted staff coordinates delivery of services through the provider and facility network by authorizing referrals and notifying the interdisciplinary care team (ICT). The case manager may assist the member in scheduling network (or out-of-network) provider appointments.

Care Management and Coordination

PHC has designed a comprehensive initial health risk assessment (HRA) tool which assesses the medical, functional, cognitive and psychosocial status of the member. It conducts the initial HRA within the first ninety days of enrollment and then uses the same tool annually thereafter. The primary case manager assigned to the member gathers the HRA results and stratification and presents them to the care coordination team during the ICT conference. The plan stores the HRA data electronically and mails an HRA results letter to the member. Physicians may access the results of the HRA and view the member's risk stratification through the provider portal. The primary care doctor or specialist also receives a hard copy of the members HRA and stratification results via mail or fax.

The case manager uses the information from the HRA, along with any other clinical data available, to work with the ICT to develop an individualized care plan (ICP). The care plan includes identified problems, strategies, tasks and responsibilities (for both the member and case manager) and desired goals and outcomes and is shared with the member and the PCP. PHC documents the ICP in a documentation system where the case manager can tailor it during any member interactions, including member input. The case manager, social workers and care coordination team members can access the plan of care in the documentation system while the

PCP or provider network may access their specific members' plan of care through the secure electronic provider portal.

The team is comprised of, but not limited to, the case manager, the PCP, specialty providers, social worker, pharmacist, behavioral health professional and the member or responsible party wishing to participate. Each member participates (whenever feasible) in the decisions made about their care through educating and including the member in all decisions that are made on their behalf as well as allowing the member to establish their own personal health status goals for the ICP. The plan has developed several avenues for communication for the ICT; PHC will keep the team informed through conference calls, e-mail communications and web-based electronic records, made available to appropriate individuals, as required by HIPAA. In addition, members and providers are able to contact the team using a dedicated call-in number. PHC considers written forms of communication important as well to the member's success, so it sends the members and providers copies of ICP, notices of any changes or additions to the plan and other communications, as necessary.

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://www.uhcmedicareolutions.com/>