

**United HealthCare (Care Improvement Plus), H5322, H3794
Institutional (Facility) Special Needs Plan**

Model of Care Score: 86%
3-Year Approval

January 1, 2014 – January 1, 2017

Target Population

UnitedHealthcare Medicare & Retirement Institutional Special Needs Plan (ISNP) has a target population that includes individuals that reside in nursing homes. Enrollment in the SNP product is voluntary and provides specialized services based on the population needs. The plan reviews and addresses overall membership composition through multiple avenues of data points and reporting; UnitedHealthcare uses the Health Outcomes Survey (HOS) to determine member demographics, quarterly prevalence reports to identify top diagnoses and other data points and reporting to gather indicators such as socioeconomic status. UnitedHealthcare considers the following key data points of membership composition: age, ethnicity, Medicaid status, income status in addition to difficulty/inability to walk, inability to see and difficulty reading.

Provider Network

The Medicare network includes those providers and services important to the Special Needs population, which includes primary care physicians (PCP), long term care specialists, physicians specializing in Internal Medicine, Family Practice, Gerontology, Cardiology, Endocrinology, Nephrology, Behavioral and Mental Health, Orthopedics, Urology, Rheumatology, Ophthalmology and hospital “Centers of Excellence.” In addition, UnitedHealthcare conducts a monthly review of local markets to evaluate the adequacy of the provider network to meet member needs. Providers are contractually bound to deliver care according to predetermined access standards. UnitedHealthcare has a clinical assessment program that provides physician data to benchmark their performance against national standards and similar specialists in their market.

Care Management and Coordination

The nurse practitioner/physician assistant (NP/PA) conducts a face-to-face comprehensive initial assessment/history and physical (H&P) as well as the annual reassessment each quarter during the quarterly comprehensive visit. Individually assigned NP/PAs in conjunction with PCP, member and family, if feasible, review and analyze needs, prioritize goals and determine treatment plan and follow up. Once the NP/PA completes the initial assessment, he/she assigns a level to the member, documents it in the member’s medical record in the skilled nursing facility (SNF) and then shares these findings and recommendations with the PCP, interdisciplinary care

team (ICT), member and family. The providers and SNF staff can read the medical record for all information and it is also available for member and family/RP review, upon request.

UnitedHealthcare develops the individualized plan of care (POC) beginning with the initial assessment by the NP/PA. The NP/PA reviews the POC with the PCP and updates it at least monthly to reflect any changes in condition, treatment plan or the wishes or preferences of the individual. As other members of the ICT become involved, they review and update the POC in order to ensure the delivery of care in the safest environment possible, to identify proactive plans for changes in condition and focus on keeping members in the least restrictive setting possible. The ICT also reviews the POC at monthly case rounds and quarterly case conferences or anytime the individual's condition warrants it.

The PCP and the assigned NP/PA lead the ICT, which coordinates care. The ICT also includes the member, family, physician specialists, therapists, health care providers and other social service or community-based providers involved in the member's care. The ICT engages additional team members as the member requires specialized services. Expectations for member engagement through outreach and education include the following activities based on member health and care needs: education, initial and annual HRA, periodic reassessment, face-to-face monthly access to NP/PA, screening exams and immunizations. The frequency of ICT meetings is dependent on the member's risk level and clinical program enrollment. Documentation of ICT activities, including the POC, occur in the individual's case management record. The facility medical record allows for interdisciplinary team communication.

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:
UnitedHealthcare, H5322 <https://www.uhcmedicareolutions.com/>