

**Central Health Plan of California, INC. H5649
Dual-Eligible (All Duals) Special Needs Plan**

Model of Care Score: 85.00%
3-Year Approval

January 1, 2012 – December 31, 2014

Target Population

Central Health Plan of California's (CHMP) target population includes all dual eligible beneficiary categories – those receiving various levels of Medicaid (Medi-Cal) assistance with Medicare premiums and cost sharing, as well as those entitled to full Medicaid and Medicare benefits. CHMP considers the Asian community to be its primary niche market, however, it manages approximately 2,294 dual eligible that reside in the San Gabriel Valley area of Los Angeles and part of San Bernardino County.

Provider Network

CHMP contracts with numerous specialist and specialty facilities that correspond with its target population, including but not limited to: medical specialists, e.g., general practitioners, internists and family practitioners; cardiologists, neurologists, orthopedic specialists and nephrologists; pharmacists; mental health specialists; nursing and allied health professionals; as well as hospitals, skilled nursing facilities, outpatient clinics and dialysis facilities.

Care Management and Coordination

CHMP conducts a comprehensive health risk assessment (HRA) that was designed to identify key SNP member care needs, e.g., medical, psychosocial, functional, cognitive needs, medical and mental health. The initial HRA is conducted within 90 days of enrollment, and an annual reassessment is conducted for each member within 1 year of the last assessment.

The nurse case manager, in conjunction with the member, initiates the care plan, assesses the completed HRA tool and works with the interdisciplinary care team (ICT) to develop the individualized care plan (ICP). During the on-going development and delivery of the ICP, the case manager ensures member's goals and preferences are identified and documented in the ICP.

The interdisciplinary care team (ICT) consists of administrative and management staff, independent living services, primary care physician, community resource specialist, dietician, nurse educator, caregiver, family, beneficiary, pharmacy operations manager, behavioral health specialist, board certified physicians, ancillary health specialists and providers, and are considered integral members of the ICT. The medical director serves as the chairperson and assumes responsibility for reporting the SNP ICT activities on a quarterly basis. ICT membership may change to add new team members as CHMP identifies the needs of the member in accordance with their ICP.

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:

<http://www.centralhealthplan.com/>