Health Partners Plans, H9207 Dual Eligible (All Dual) Special Needs Plan

Model of Care Score: 98% 3-Year Approval

January 1, 2014 – December 31, 2016

Target Population

The Health Partners Medicare line of business services dually eligible individuals in Philadelphia County. Approximately 12 percent of the population in Philadelphia County is 65 years of age and older and of these 185,000 people, 61 percent are women and 39 percent are men. Health Partners Plans current membership has nearly 6,000 members over the age of 60. Additionally, 42 percent are African American, 37 percent are Caucasian, 12 percent are Hispanic and 6 percent are Asian. While over 90 percent of the current Medicaid membership list English as their preferred language, the older population is less likely to speak English. Among those members, nearly 15 percent have asthma, nearly 37 percent have diabetes, 52 percent have hyperlipidemia and more than 75 percent have hypertension.

Provider Network

The Plan's network consists of a wide range of facility, ancillary and professional providers with specialties that typically provide services to the target population. The network includes providers who are currently participating with other payers' SNPs in the market. The Plan is able to learn of potentially negative information about a provider using the reporting agencies available, along with routine monitoring of member complaints and analysis of related data.

Care Management and Coordination

Health Partners Medicare performs a health risk assessment (HRA) for each member and the survey tool includes the Brody Frailty Index, the CMS Frailty Scale, PRA, SF-12, BMI, 5-item depression screener, chronic conditions, demographics, health service usage and preventive care. The Plan conducts the initial HRA within 90 days of enrollment and the annual assessment within 1 year of the last assessment. The VP of Medicare Stars together with the Director of Clinical Programs and Accreditation review the aggregate results quarterly. Upon completion of the HRA, members are notified about their ability to contact their assigned Care Coordinator (CC) to discuss their healthcare goals and develop a care plan that may be presented to the interdisciplinary care team (ICT).

The Care Coordinator attaches the Individualized Care Plan (ICP) to the member's case in the central case documentation system, sends a copy by mail to the member and forwards a copy to the primary care provider (PCP) via fax, mail or secure email. A secure email is also sent to the

ICT informing them of the completion of the initial plan and requesting review of the document in the system. Essential elements of the comprehensive assessment incorporated into the Plan of Care (POC) may include issues noted from HRA results, ER utilization,

hospitalization/readmission data, member care preferences, and mutually agreed upon goals and objectives with time frames for completion. The CC is responsible for the ongoing review and update of the ICP, member progress and satisfaction and the identification and assessment of members in need of more intensive and collaborative case management.

The SNP's ICT has a select core group including, but not limited to: the medical director, the member's assigned CC and the ancillary services manager, who invite and encourage the member, his/her representative or guardian and his/her PCP to participate as part of the ICT. The assigned CC with input from the member will also determine if representatives from home care agencies, specialty offices, therapy providers, behavioral health, pharmacy and/or community agencies need to be involved. The ICT meets monthly or more frequently as needed to accommodate members who are up for review. The Manager of the Care Coordinators functions as the ICT chair.

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: www.HPPMedicare.com.