Insurance Company of Scott and White, H8237
Dual-Eligible (Full Benefit) Special Needs Plan

Model of Care Score:  74.38%
1-Year Approval  January 1, 2014 – December 31, 2014

Target Population

Insurance Company of Scott and White (ICSW) is a subsidiary of Scott and White Health Plan (SWHP) and serves members in the D-SNP population. SWHP’s D-SNP will include beneficiaries who are dually eligible for Medicare and Medicaid benefits and services and reside in the SWHP service area, have Medicare Part A, Part B, and Part D and are not under treatment for End-Stage Renal Disease (ESRD). This includes Qualified Medicare Beneficiary without other Medicaid (QMB only); QMB+, SLMB+, Qualifying Individual (QI), and other populations under the Texas Medicaid Star Plus Category.

Provider Network

SWHP provides access to preventive and primary care, acute and post-acute care, including long-term acute care, rehabilitation services, skilled nursing services, behavioral health services, lab and radiology services, home infusion services, home care/hospice, palliative care, geriatric programs, all levels of hospital and outpatient medical/surgical services, inpatient and outpatient behavioral health services, and other supportive services. SWHP provides a wide range of health care services within Central Texas which includes Level 1 Trauma Center organ transplants, advanced cardiac and oncology care, which span across multi-faceted care centers and clinics.

Care Management and Coordination

The health risk assessment (HRA) identifies the vulnerable and at risk enrollees, evaluates the intensity of their need, either by phone or in the member’s home, for care management, disease management, social service interventions, clinical education needs, education needs regarding enrollment and benefit issues, and access issues. SWHP has powerful analytic tools that assist staff in reviewing all available data to determine level of risk. SWHP considers the results of the HRA, a summary of the member’s home visit, available health history and records, input from relatives and authorized member representatives, as well as ‘members’ own input to compile a more complete picture of each member’s needs. SWHP Care Coordinators arrange for administration of comprehensive HRAs within 90 days of a member’s enrollment and annually thereafter. The assessment measures the medical, psychosocial, behavioral, functional, and cognitive needs, as well as assesses any safety issues in the home.
Based on the HRA, medical treatment plan, clinical assessment and psychosocial evaluation, SWHP care coordinators develop individualized care plans (ICPs) which are developed in collaboration with the member and other members of the interdisciplinary care team (ICT). The ICP defines the issues and plan of care unique for the member. Every care plan will include medication reconciliation as well as a safety assessment. Care plans may be developed by phone with the beneficiary or face-to-face when a home visit is made. The ICT works with the care coordinator and member to develop a final ICP. The ICP includes but is not limited to the following elements: goals and objectives to address each positive finding from the health risk assessment; needed services, benefits and end of life planning, if applicable. All ICPs are shared with the member’s primary care physician (PCP).

The Interdisciplinary Care Team (ICT) is a multi-disciplinary team of clinicians that is responsible for ensuring that member needs are identified and addressed. Members of the team are selected based on their experience and expertise as well as a review of the unique issues within the population. Members include but are not limited to, the member or appropriate family or caregiver (with a Power of Attorney), SWHP care coordinator, case managers if high risk or vulnerable member, and the PCP. Other members of the ICT may include clinical pharmacists, social workers, specialists, palliative care team, geriatric team members, behavioral health specialist and the Plan medical director.

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: https://medicare.swhp.org/vital-traditions-hmo-snp.