
2023 SNP
MODEL OF CARE (MOC)
PROVIDER/VENDOR TRAINING

IMPERIAL HEALTH PLAN/ IMPERIAL INSURANCE
COMPANIES



IMPERIAL HEALTH PLAN
OF CALIFORNIA



IMPERIAL INSURANCE COMPANIES

SNP Overview

The Medicare Modernization Act of 2003 (MMA) established a Medicare Advantage Coordinated Choice Plans specifically designed to provide targeted care to individuals with special needs.

“Special needs individuals” are

- 1) dual eligible; Members who qualify for both Medicaid and Medicare
- 2) institutionalized individuals; and/or
- 3) individuals with severe or disabling chronic conditions, as specified by CMS



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SNP POPULATION

- Imperial Health Plan/Imperial Insurance Companies services SNP members in the following Counties

California			Texas	Arizona	Nevada
<ul style="list-style-type: none"> Alameda Amador Butte Contra Costa Del Norte El Dorado Fresno Glenn Humboldt Imperial Inyo Kern Kings Los Angeles Madera Marin Mariposa 	<ul style="list-style-type: none"> Mendocino Merced Modoc Monterey Napa Nevada Orange Placer Plumas Riverside Sacramento San Benito San Bernardino San Diego San Francisco San Joaquin San Luis Obispo 	<ul style="list-style-type: none"> San Mateo Santa Barbara Santa Clara Shasta Siskiyou Solano Sonoma Stanislaus Tehama Tulare Tuolumne Ventura Yolo yuba 	<ul style="list-style-type: none"> Bexar Collin Comal Dallas Denton El Paso Fort Bend Harris, Hays Montgomery Nueces Tarrant Travis Williamson Wise 	<ul style="list-style-type: none"> Coconino Maricopa Pima Pinal Yavapai 	<ul style="list-style-type: none"> Clark

SNP Overview

- We perform a population assessment to build a Model of Care that will best serve the needs of the members.
- Some of the factors identified include but not limited to the following:

Age
Gender
Ethnicity
Incidence of major diseases and chronic conditions
Language barriers and health literacy
Identification based on multiple hospital admissions, high pharmacy utilization, high cost
Combination of medical, psychosocial, cognitive and functional challenges



SNPs

D-SNPs

Members that are dually eligible for Medicare and Medicaid

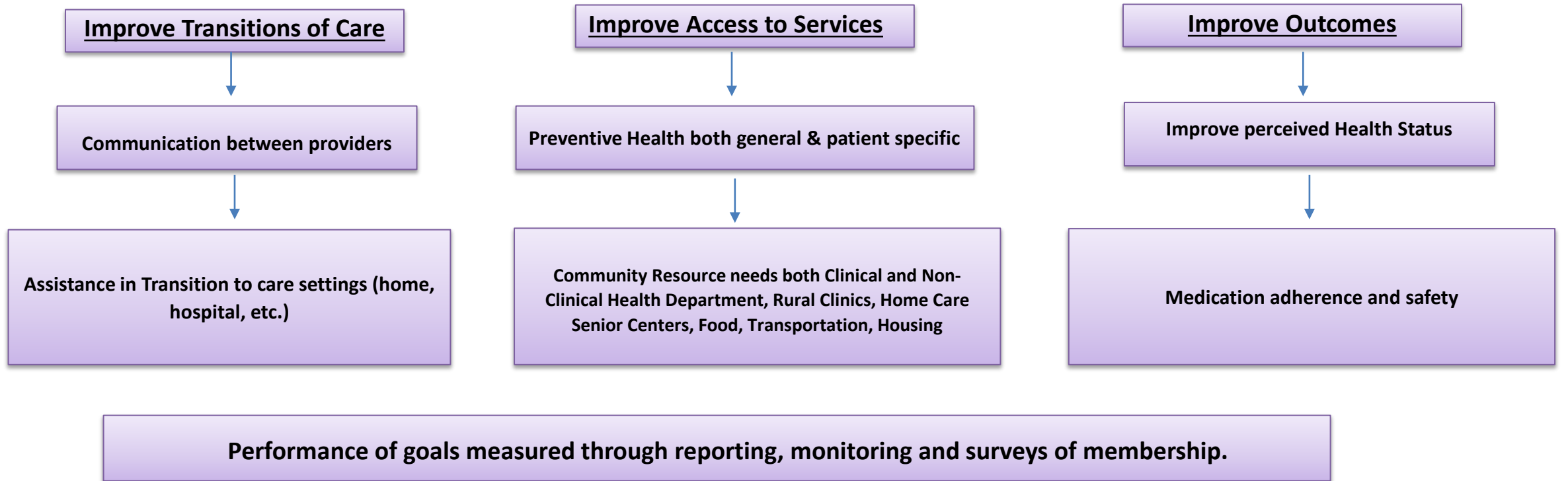
C-SNPs

Members with chronic and disabling disorders. One or more of the following chronic diseases depending on the specific plan

- Diabetes
- Chronic Heart Failure
- Cardiovascular Disorders
 - Cardiac Arrhythmias
 - Coronary Artery Disease
 - Peripheral Vascular Disease
 - Chronic Venous Thromboembolic Disorder



MOC Goals



Staff Structure

All staff work as an integrated team for care management of the enrollee.

Staff Roles include but are not limited to:

Administrative Staff

- Member/Enrollee Services
- Customer Service Staff
- Appeals and Grievances Staff
- Member/Enrollee Accounting Team
- Claims Team

Clinical Staff

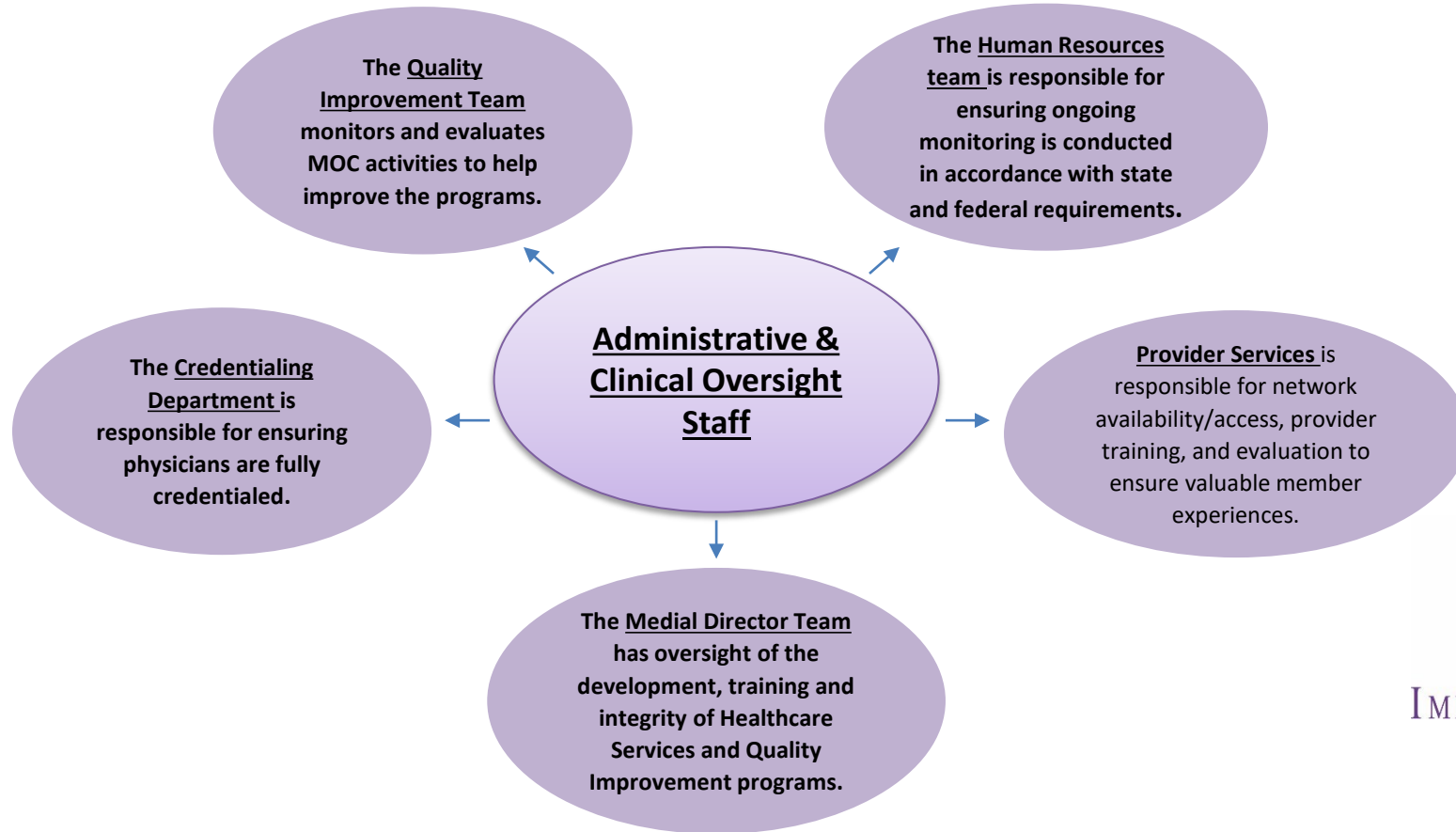
- Behavioral Health Clinicians
- Licensed Clinical Social Workers
- Psychologists
- Mental Health Counselors

Medical Clinicians

Community Connectors



Staff Structure and Description



*The team serves as a resource for Integrated Case Management Teams and providers regarding member/enrollee's health care needs and care plans
Selects and monitors usage of nationally recognized medical necessity criteria, preventive health guidelines and clinical practice guidelines.*



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Specialized Provider Network

Imperial has an adequate and specialized provider network that maintains the appropriate licensure and competency to address the needs of the target population



Imperial provides the full SNP Model of Care with team based internal case management when it is not provided by the member's primary care provider and medical group.

Provider Network has Specialized Expertise, utilizes clinical practice guidelines and protocols



Model of Care Training

Initial/Annual Training

- Network Providers
- Health Plan Staff

Training Methods

- Webinars
- On Site at Provider Office
- Provider Manual with written training materials for reference/attestations

Components of Training

- Model of Care Elements
- Plan Processes and Procedures
- Health Plan Tools and Resources



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Health Risk Assessment (HRA)

An HRA is conducted to identify medical, psychosocial, cognitive, functional, and mental health needs and risks.

Imperial attempts to complete initial HRA within 90 days of enrollment and annually via telephone.

Multiple attempts are made to contact the patient including mailed surveys.

The patient's HRA responses are used to identify needs, incorporated into the member's care plan and communicated to care team via electronic medical management system, the provider portal or by mail.

If patient is unreachable, medical history from member's provider will be used to complete HRA

Patient is reassessed if there is a change in health condition and these and annual updates are used to update the care plan.



Individual Care Plan

1) Individual Care Plan (ICP) is created for each patient by the Case Manager with input from the care team.

2) The member and caregivers are involved in development of and agrees with the care plan and goals.

3) ICP is based on the patient's assessment and identified problems.

4) Goals are prioritized considering patient's personal preferences and desired level of involvement in the process.

5) ICP is revised when change such as new diagnosis/hospitalization or at least annually and communicated to Interdisciplinary care team (ICT) and member.

6) Patient's self-management plans and goals are described.

7) Barriers and progress towards goals are listed.



Care Management

Case Managers coordinate the member's care with the Interdisciplinary Care Team (ICT) which includes designated IHP's staff, the member and their family/caregiver, doctors, specialists and vendors, anyone involved in the member's care based on the member's preference of who they wish to attend.

Case Managers strive to do the right thing for members by encouraging self-management of their condition as well as communicating the member's progress toward these goals to the other members of the ICT

Imperial is responsible to maintain a single, integrated care plan that requires reaching out to external ICT members to coordinate many separate plans of care into one that is made available to all providers based on member's preference.



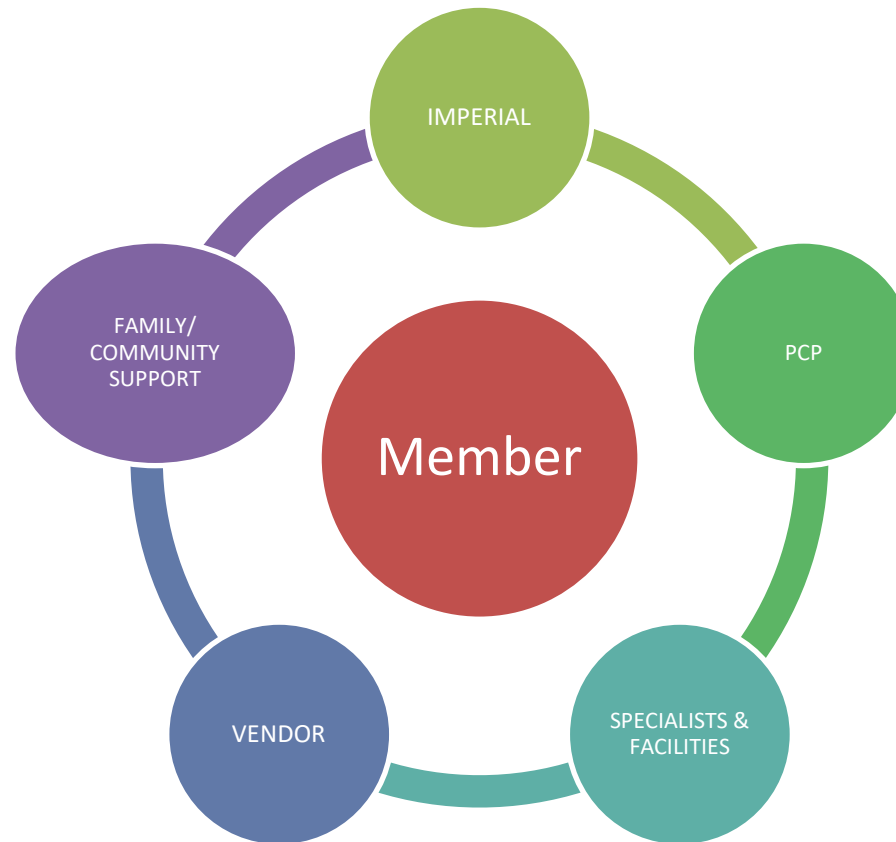
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Interdisciplinary Care Team (ICT)/Integrated Communication Network

Imperial's staff works with all members of the ICT in coordinating the plan of care for the enrollee



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Face to Face Encounters

What are Face to Face encounters?

- In-person doctor's visit**
- Teladoc

Appropriate Personnel for Face to Face

- Physicians**
- Specialists
- Contracted Providers/Physicians
- Pharmacist
- Behavioral Health

Clinical Functions of Face to Face



Performance and Health Outcomes Measurement

Process Measures

Timeliness of Assessment processes
Physician Relationship (% populations with PCP or Medical Home Relationship)
Care Meetings
Case/Care Management performance

Care Measures

Utilization Patterns
Prescribing Patterns
Drug interactions
Readmissions

Quality Measures

HEDIS
Quality of Care Concerns
Satisfaction Surveys



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QUESTIONS/COMMENTS

Providers:

- Please contact our Provider Relations Department at (626) 838-5100 Prompt 5

Staff:

- Please contact our Health Education Department at (626) 838-510 ext 266



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