

# *Model of Care Program*

October 2009



## Model of Care

- Clinical personnel required for today's discussion
- Overview of WellCare's *Model of Care* Program
- Member Experience
- Provider Participation

## Review of Supplemental Documentation

- Provider Notice
- *Model of Care* Job Aid
- Sample Care Plan
- Frequently Asked Questions (FAQs)

# MODEL OF CARE: OVERVIEW



To improve WellCare's dual-eligible members' access to and coordination of care, we are enhancing our *Model of Care* program.

- The Medicare Improvements for Patients and Providers Act (MIPPA) of 2008 includes:
  - New policies to reduce racial and ethnic health disparities within the Medicare population
  - New accountability measures for Medicare Advantage (MA) plans to increase access to preventive and mental health services
  
- Focused *Model of Care* program
  - Targeting dual-eligible members enrolled in one of our Dual Special Needs Plans (D-SNP):
    - ♦ *Access*
    - ♦ *Select*
    - ♦ *Liberty (NY)*
    - ♦ *Advocate Complete (NY)*
  
  - Targeting improvement of:
    - Coordination of care through Case Management (a Nurse Case Manager will be assigned to each D-SNP Member)
    - Transitions of care across healthcare settings and providers
    - Access to preventive health, including medical, social and mental services, to improve Member health

# MODEL OF CARE: MEMBER EXPERIENCE



**All WellCare D-SNP Members will receive a Health Risk Assessment (HRA) to identify individual needs.**

- Each HRA is reviewed by an internal Interdisciplinary Care Team (ICT) and the Member is assigned an acuity level of care management based on their current needs
  - Acuity Levels 1 and 2 have a higher level of health and functioning
  - Acuity Levels 3 and 4 have a higher health risk and require additional attention from WellCare and you, their Provider
- All D-SNP Members will receive:
  - A Health Risk Assessment (HRA)
  - An Individualized Care Plan (“Care Plan”) that provides coordination of care and assists with any transition services
  - Regular telephonic contact with their assigned Nurse Case Manager
  - Regular ICT meetings to re-evaluate the Member’s needs
- D-SNP Members assigned an Acuity Level of 4 will also receive:
  - An in-home assessment (i.e., Home Health Assessment (HHA))

*Members can expect to move up or down the continuum of care based on their changing health care needs.*

# MODEL OF CARE: PROVIDER PARTICIPATION

Ongoing participation from Members and Providers is essential to the success of the *Model of Care* program.

- WellCare is requesting your ongoing participation. Please:
  - Review the faxed Care Plan for each WellCare D-SNP Member to whom you provide care
  - Update each Care Plan with any changes and fax back to WellCare
  - Discuss the Care Plan with each WellCare D-SNP Member to whom you provide care
  - Communicate with the Interdisciplinary Care Team (ICT) as requested to ensure optimal coordination of care and transition of care for the Member
  
- You will receive Member Care Plans throughout the year for existing and new members, including each time the Care Plan is updated.
  
- Both Members and Providers can expect communication in the following ways:
  - ◆ Mailings
  - ◆ Telephonic
  - ◆ Providers only – Faxes and In-person visits
  
- Your participation ensures the Member understands their Care Plan and receives needed care
  - Case Managers will facilitate regular communication with the Provider on behalf of the Members
  - You may reach WellCare’s Case Management Department by calling **866-635-7045**, or you may call the Case Manager directly by calling the number included on the fax cover sheet of the Care Plan

# MODEL OF CARE: SUPPLEMENTS



WellCare has provided *Model of Care* supplements to aid you in participating.

- Provider Notice (Letter)
  - Notice sent via fax to all PCPs of WellCare D-SNP Members prior to October 1, 2009
  - If you did not receive the fax, please provide a correct fax number to ensure you receive important notifications in the future
- *Model of Care* Job Aid
  - A quick reference tool outlining your requested participation
- Sample Care Plan
- Frequently Asked Questions (FAQs)

**Thank you for your time and attention**