Special Needs Plans

2018 Model of Care Training for Providers



SPECIAL NEEDS PLANS MODEL OF CARE PROVIDER TRAINING

- > Chapter 42 of the Code of Federal Regulations, Part 422 (42 CFR 422.101 (f)(2)(ii)) mandates that Special Needs Plans (SNPs) conduct SNP Model of Care (MOC) training for all employed and contracted providers.
- > The Special Needs Plans Model of Care is the evidence-based process (Clinical Core Model) by which we integrate benefits and coordinate care for customers enrolled in Cigna-HealthSpring's Special Needs Plans.



WHAT IS REQUIRED TO OPERATE A SNP?



- In 2008, CMS issued the final regulation Medicare Improvements for Patients and Providers Act of 2008, known as "MIPPA." This regulation mandated that all Medicare Advantage Special Needs Plans have a filed and approved Model of Care (MOC) by January 1, 2010.
- The Patient Protection and Affordable Care Act reinforced the importance of the SNP Model of Care as a fundamental component by requiring NCQA review and approval of a plan's MOC.
- > All SNPs are required to have a CMS-approved MOC to be operational.



SPECIAL NEEDS PLANS

There are <u>three</u> types of SNPs. Each requires its own <u>distinct Model</u> <u>of Care</u>, tailored to the needs and conditions of the eligible beneficiaries (target populations).

Chronic Condition SNP (C-SNP)

- Chronic Condition
 Special Needs Plan
- For Medicare beneficiaries with a specific medical condition
- Products:
 - Cigna-HealthSpring Achieve and Achieve Plus
- Condition = Diabetes

Dual Eligible SNP (D-SNP)

- Dual Eligible
 Special Needs Plan
- For Medicare beneficiaries who are also eligible for Medicaid
- Products:
 - Cigna-HealthSpring TotalCare

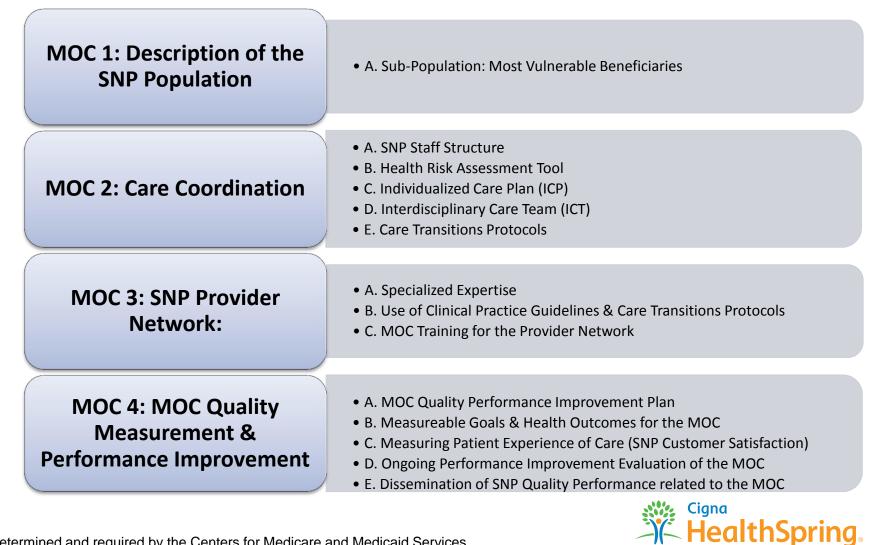
Institutional SNP (I-SNP)

- Institutional Special Needs Plan
- For Medicare beneficiaries who reside in a long-term care facility
- Products:
 - Cigna-HealthSpring Traditions



SPECIAL NEEDS PLANS MODEL OF CARE (MOC): 4 DOMAINS, 14 ELEMENTS*

The SNP Model of Care document includes the following sections:



*Determined and required by the Centers for Medicare and Medicaid Services

SPECIAL NEEDS PLANS MODEL OF CARE (MOC)

Cigna-HealthSpring's Special Needs Plan Model of Care has the following goals:

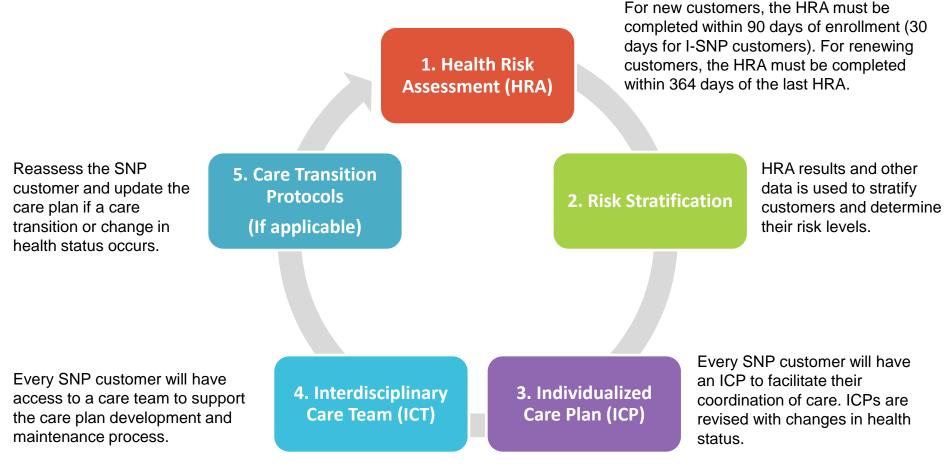
- > Improve access to medical, mental health, and social services
- > Improve access to affordable care
- > Improve coordination of care through an identified point of contact
- > Improve transitions of care across health care settings and providers
- > Improve access to preventive health services
- > Ensure appropriate utilization of services
- > Improve beneficiary health outcomes



*Determined and required by the Centers for Medicare and Medicaid Services

SNP MODEL OF CARE CORE CLINICAL PROCESS

Improving Care Coordination and Health Outcomes



HealthSpring.

The SNP MOC is continuous based on change in health status and applies to all SNP customers.

HOW CAN YOU HELP WITH THE CORE CLINICAL PROCESS?

- Through the Health Risk Assessment (HRA) and coordination of care, Model of Care goals are achieved.
- You play a critical role in HRA completion by conducting an annual 360 exam.
- By completing a 360 exam, your patient will receive an Individualized Care Plan.
- Ensure care plan goals are completed during the 360 exam.
- Depending on the results of the HRA or changes in health status, customers may be referred to case management.



CMS has included SNP Care Management: HRA completion in the Star Ratings Quality Program!



YOU ARE THE KEY ELEMENT TO IMPROVING YOUR CUSTOMERS HEALTH OUTCOMES

Interdisciplinary Care Team

- Providers who treat Special Needs Plan customers are core members of their Interdisciplinary Care Teams and oversee clinical care plan development and maintenance.
- > Your participation is key in the Interdisciplinary Care Team meetings. Meetings are based on customer needs.
- > Together, we will develop a functional care plan.
- > Cigna-HealthSpring will develop and maintain a prevention-oriented care plan.

Communication and Collaboration

- The care plan serves as a communication tool and increases collaboration with all members of the Interdisciplinary Care Team
- > Transition of Care notices are sent to the PCP.
- > Encourage patients to follow-up with you within 7 days of discharge.



WE'RE HERE TO HELP! SNP RESOURCE CONTACT INFORMATION

For Dual and Chronic SNP Customers

- > You may contact our Health Risk Assessment department to request patients' assessment results at 1-800-331-6769.
- > To discuss and/or request a copy of a SNP patient's care plan, refer a SNP patient for an Interdisciplinary Care Team meeting or participate in an Interdisciplinary Care Team meeting, please contact our Case Management department. The telephone number for Case Management may be found in your Provider Manual.

For Institutional SNP Customers

> To discuss and/or request a copy of a patient's comprehensive assessment results or care plan, refer a patient for an Interdisciplinary Care Team meeting or participate in an Interdisciplinary Care Team meeting, please contact our Care Coordination department at 1-866-487-3004.



CLINICAL GUIDELINES

- Evidence-based guidelines serve as the foundation of the care management program.
- Cigna-HealthSpring's approved clinical practice guidelines can be found in your provider manual.
 - Link to manuals on the Cigna-HealthSpring website: <u>http://www.cigna.com/medicare/healthcare-professionals/</u>



All Cigna products and services are provided exclusively by or through operating subsidiaries of Cigna Corporation, including Cigna Health and Life Insurance Company, Cigna HealthCare of South Carolina, Inc., Cigna HealthCare of North Carolina, Inc., Cigna HealthCare of Georgia, Inc., Cigna HealthCare of Arizona, Inc., HealthSpring Life & Health Insurance Company, Inc., HealthSpring of Tennessee, Inc., HealthSpring of Alabama, Inc., HealthSpring of Florida, Inc., Bravo Health Mid-Atlantic, Inc., and Bravo Health Pennsylvania, Inc. The Cigna name, logos, and other Cigna marks are owned by Cigna Intellectual Property, Inc. Cigna-HealthSpring is contracted with Medicare for PDP plans, HMO and PPO plans in select states, and with select State Medicaid programs. Enrollment in Cigna-HealthSpring depends on contract renewal. 01272016 © 2018 Cigna

