



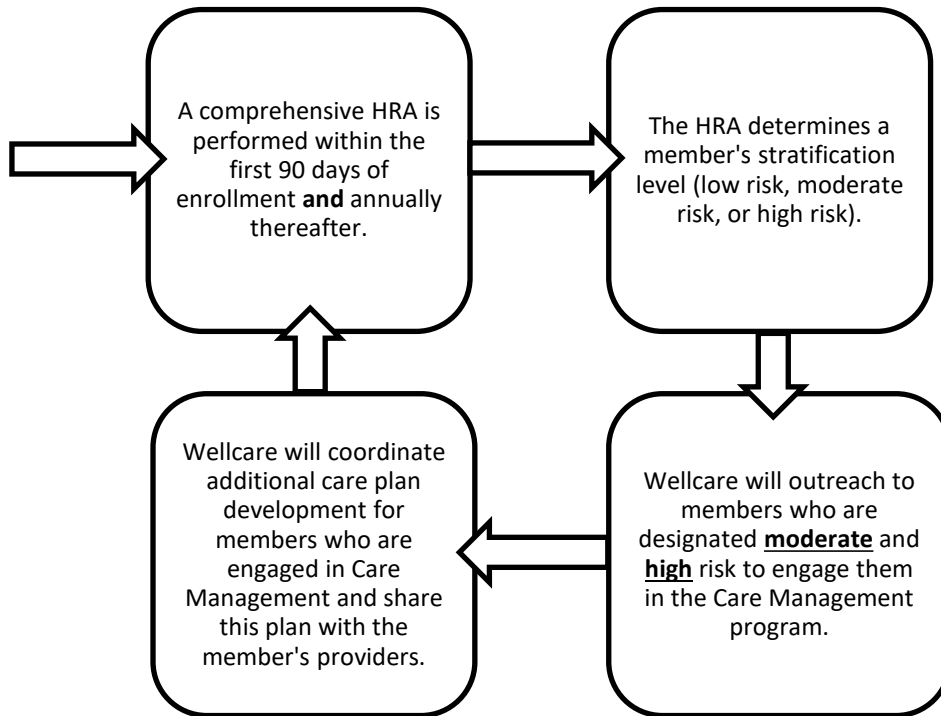
Wellcare Health Plans Model of Care Self-Study Program for Special Needs Plans

COMPREHENSIVE HEALTH RISK ASSESSMENT		INDIVIDUALIZED CARE PLAN	
Wellcare SNP (Dual-Eligible and Chronic Condition Special Needs Plans) members will be contacted to complete a health risk assessment (HRA) within 90 days of becoming a member. They will receive an HRA each year thereafter.		An individualized care plan will be developed based on the completed HRA results. This plan will be shared with the treating provider(s). Upon receipt of the care plan, you should:	
1.	The HRA is used to develop an individualized care plan and to identify members that will be assigned to the Interdisciplinary Care Team.	1.	Review and discuss the plan with the SNP member (and caregiver if appropriate).
2.	SNP members will be assigned a stratification level (low risk, moderate risk, or high risk) based on the results of the HRA. This level can change based on the member’s current health.	2.	Update the plan if you feel changes are needed. Updates to the plan may also be done when the SNP member has any change in health status, such as new diagnoses, planned or unplanned hospitalizations, or a change in the level of care.
3.	HRA results are also used to determine the intensity of Care Management that the member receives. Members who do not complete an HRA will get an “Unable-to-Reach” care plan based on claims data and general self-management goals.	3.	Submit the updated plan via fax to the number on the care plan. If no changes are required, there is no need to submit the plan back.

INTERDISCIPLINARY CARE TEAM	
Each SNP member enrolled in Care Management will be assigned to an Interdisciplinary Care Team (ICT) made up of a PCP and a care manager. The team may also include specialists, pharmacists, nurses, social workers, caregivers, and other medical personnel.	
1.	The care manager will create and distribute the care plan, coordinate care with members of the ICT, and oversee Care Management activities.
2.	Wellcare asks providers to participate in all care planning and ICT activities.
To refer a SNP member to the program or for other assistance related to a member’s care, please call our Care Management Department at 1-866-635-7045 . If you have questions regarding claims or other processes, please contact your Provider Relations representative.	



MODEL OF CARE PROCESS FLOW FOR MEMBERS ENROLLED IN CARE MANAGEMENT



TRANSITIONS OF CARE

Care transitions from one level of care to another can present possible disruptions in member care. As a member's care setting and care providers change, it is essential that care needs are coordinated and communicated.

To assist in meeting NCQA requirements for transitions of care, Wellcare will:

- Notify the member's PCP of record when a member is admitted to an inpatient or subacute care setting and when the member is discharged
- Request that the treating provider and/or facility communicate the following:
 - ✓ Discharge plan
 - ✓ Changes in care
 - ✓ Medications
 - ✓ Test results
 - ✓ Treatments provided

We will work with you and the member to ensure that necessary care is scheduled and provided so that there is no interruption of care or services. We ask that you partner with Wellcare during these transitions to ensure the member's needs are met and that all transitions of care are smooth and successful.



WELLCARE CURRENTLY OFFERS D-SNP AND C-SNP PLANS

C-SNP plans include:

- **Diabetes, Cardiovascular Disease, and Congestive Heart Failure**
 - Florida, Georgia, and Texas
- **Diabetes**
 - Illinois and Michigan

D-SNP plans include:

- Alabama, Arkansas, Arizona, California, Connecticut, Florida, Georgia, Hawaii, Indiana, Kentucky, Louisiana, Maine, Michigan, Missouri, Mississippi, North Carolina, New Jersey, New York, Ohio, Rhode Island, South Carolina, Tennessee, Texas, and Washington

For more information on how to work with our health plan to manage SNP members, please visit the **Provider Resource Page** at www.wellcare.com/Providers.

The Provider Resource Page has links to the **Provider Manual, Quick Reference Guide, and Clinical Practice Guidelines (CPG)**, as well as other valuable resources for managing Wellcare Members. To access these resources and view highlights from the new secure provider portal, navigate to the state in which the member has benefits in.

Here is a sample of our state-specific resources:



We have redesigned our website to help you find the information you need more easily. To better assist you, please first select your state.

State		
Arkansas	Kentucky	New York
Connecticut	Louisiana	South Carolina
Florida	Mississippi	Tennessee
Georgia	Missouri	Texas



MEDICARE

- Resources
- Claims
- Secure Login