Service Coordination Guide



Service Coordination

All five Medicaid managed care models (STAR, STAR Health, STAR Kids, STAR+PLUS, and Dental) include requirements for **service and/or care coordination**. These requirements vary based on the population served by the program and the level of coordination needed based on the client's acuity.

The service coordination models are designed to assist clients and providers with the coordination of care for the client. Service Coordination provides the clients with initial and ongoing assistance identifying, selecting, obtaining, coordinating, and using covered services and other supports to enhance their well-being, independence, integration in the community, and potential for productivity.

In general, clients are initially identified for service/care coordination through a review of state data, analysis of claims history and health risk assessments. Clients are also identified through HHSC, provider and client self-referral.

When a client is enrolled in managed care the health plan receives information from HHSC on their enrollment type and 'risk-group'. The 'risk group' is a category assigned to the client by the State agency that is based on the client's eligibility and services that they receive.

For example, a client that resides in a nursing facility will receive a nursing facility risk group designation. The MCOs use this information to identify clients that require service coordination and the level of service coordination required per the contract. The MCOs also conduct initial abbreviated telephonic health screening assessments for most new clients to identify clients who may have special health or social needs. Once a client is identified for service/care coordination, the MCOs will outreach to the client, schedule any necessary assessments and work with the client to develop a service plan as needed and/or required by the contract.

Key Functions of Service Coordination

The key functions of Service Coordination include:

- 1. Conducting client assessments and identifying care needs to include, but not limited to physical health, mental health services and long-term support service needs.
- 2. Development of a comprehensive Service Plan to address client needs, this includes coordination with treating providers and other clients of the individuals care team,
- 3. Assisting the client to ensure timely and coordinated access to providers and covered services,
- 4. Assisting the client with the identification and coordination of community supports as needed,
- 5. Active and ongoing client and provider engagement as needed, and
- 6. Coordination of covered services and non-capitated services, as necessary and appropriate.



STAR

The STAR program provides coverage to pregnant women and low-income children enrolled in Medicaid. In STAR individuals who are classified as high-risk or designated as having special health care needs must receive service management, this includes:

- Individuals receiving Early Children Intervention services
- High risk-pregnant women
- Pregnant clients with a previous pre-term birth
- Individuals with high-cost catastrophic cases or high service utilization
- Individuals with mental illness and co-occurring substance use disorder
- Individuals BH issues that may affect their physical health or treatment compliance, including Clients with serious emotional disturbance or serious and persistent mental illness
- Individuals with serious ongoing illness or a chronic complex condition that is anticipated to last for a significant period and requires ongoing therapeutic or pharmacological intervention and evaluation (e.g., HIV/AIDS, respiratory illness, diabetes, heart disease, kidney disease, individuals receiving ongoing therapy, individuals receiving in-home/facility nursing or attendant care)
- Other individuals identified by the health plans through the health risk assessment process.

Unlike other service coordination models, coordination of care may occur telephonically at frequencies based on the client's needs.

CHIP

CHIP is a health care program for children whose families earn too much to get Medicaid but cannot afford health insurance. To qualify for CHIP, a child must be age 18 and younger and meet HHSC's income guidelines.

The CHIP program requires the same level of service management as STAR. Case Management and Care Coordination Services are also a covered benefit of the CHIP program. These services include outreach informing, case management, care coordination and community referral.

STAR Health

The STAR Health program provides services to children in state conservatorship. All Clients receive comprehensive screenings when they enter foster care and every time a placement transition occurs. Clients are offered enrollment into Service Coordination or Service Management for clinical support when screenings or other factors indicate a need.



All Clients enrolled in Service Management receive comprehensive Service Plans with active monitoring. Clients assigned to Service Management are typically high-risk Clients with focus on disease process stabilization and appropriate utilization of services. At a minimum, monthly outreach is conducted or per Client preference and as needed for change in condition. Clients assigned to Service Coordination are typically moderate to low-risk Clients who need coordination/linkage to community resources. Contact with Clients may occur bi-monthly or quarterly per Client preference and as needed for change in condition.

STAR Kids

The STAR Kids program provides services to medically complex children up until their 21st birthday. All clients in the STAR Kids program receive some degree of service coordination which varies based on the designated client level, the client's preferences and the individual's coordination needs as outlined below, and their availability/willingness to participate with the MCO and Service Coordinator. The designated clients' touch points outlined below are not meant to restrict access to coordination and can be exceeded for any client based on their needs and preferences regardless of client level.

Level 1

- Includes individuals in:
 - o Medically Dependent Children Program or
 - o Youth Empowerment Services program,
 - o Individuals with complex needs or a history of developmental or
 - Behavioral health issues (multiple medical or psychiatric outpatient visits, hospitalization, or institutionalization within the past year),
 - o Clients with Serious Emotional Disturbance (SED) or Severe and Persistent Mental Illness (SPMI) and individuals at risk for institutionalization.
- These clients are assigned a designated Service Coordinator and receive a minimum of four face-to-face Service Coordination contacts annually, in addition to monthly phone calls, unless otherwise requested by the Client or Client's Legally Authorized Representative (LAR).

Level 2

- Includes individuals not otherwise classified as Level 1 who may qualify for:
 - Personal Care Services (PCS), Community First Choice (CFC), or Nursing Services, including
 Private Duty Nursing and Prescribed Extended Care Centers,
 clients who would benefit from a higher level of service coordination based on results from the
 STAR Kids Screening and Assessment Instrument, and
 - o additional MCO findings, clients with a history of substance abuse (multiple medical or psychiatric outpatient visits, hospitalization, or institutionalization within the past year) and those without SED or SPMI, but who have another behavioral health condition that significantly impairs functioning.



• These clients are assigned a designated Service Coordinator and receive a minimum of two face-to-face visits and six telephonic Service Coordination contacts annually, unless otherwise requested by the Client or Client's LAR.

Level 3

• Includes those who do not qualify as Level 1 or Level 2. These clients may have a medical or mental health diagnosis but are stable and receiving needed services. No additional interventions are required or requested by their LAR. These clients receive a minimum of one face-to-face visit annually and at least three telephonic Service Coordination outreach contacts yearly.

All clients in the STAR Kids program receive a comprehensive assessment via a standardized assessment tool annually and an Individual Service Plan.

STAR+PLUS

The STAR + PLUS program provides services to adults with disabilities and individuals on Supplemental Security Income (SSI). All clients in this program are eligible for service coordination and may request an assigned service coordinator at any time. The degree of service coordination may differ based on the clients designated client level. This is based on the complexities of the clients health condition; including both physical and mental health needs. These needs are determined by a formal assessment and/or their enrollment designation. There are three client levels in STAR + PLUS as outlined below.

Level 1

- Includes clients in the STAR+PLUS Home and Community Based Service Wavier, individuals in a nursing facility with some exceptions, individuals with Serious and Persistent Mental illness (SPMI), and other clients with complex medical needs.
- These clients receive an assigned service coordinator, up to two face-to-face visits annually or up to four if they are residing in a nursing facility and telephonic checks.

Level 2

- Includes clients receiving Personal Assistance Services, Community First Choice, or Day Activity and Health Services, clients with non-SPMI behavioral health issues and individuals in the Medicaid Breast and Cervical Cancer program.
- These clients receive an assigned service coordinator and a minimum of one face-to face visit annually and telephonic contact.

Level 3

- Includes individuals not designated as Level 1 or 2 or individuals in a nursing facility who are receiving hospice.
- Clients receive at least two telephonic service coordination outreach contacts yearly.



Individuals in the STAR+PLUS Home and Community Based Service Waiver receive an annual assessment and an Individual Service Plan.

Aetna Better Health of Texas

STAR Service Coordination Hotline: 800-248-7767 or 800-306-8612

STAR Member Service Hotline: 800-248-7767 or 800-306-8612

STAR Kids Service Coordination Hotline: 844-787-5437

STAR Kids Member Services Hotline: 844-787-5437

Amerigroup

STAR Service Coordination Hotline: 877-405-9872 ext. 106 103 5200

STAR Member Service Hotline: 800-600-4441

STAR Kids Service Coordination Hotline: 866-696-0710 ext. 106 103 5204

STAR Kids Member Services Hotline: 800-600-4441

STAR + PLUS Service Coordination Hotline: 800-839-6275 ext. 106 103 5201

STAR + PLUS Member Services Hotline: 800-600-4441

Blue Cross and Blue Shield of Texas

STAR Service Management/Care Coordination Hotline: 888-657-6061

STAR Member Service Hotline: 888-657-6061

STAR Kids Service Coordination Hotline: 877-301-4394

STAR Kids Member Services Hotline: 877-688-1811

Cigna-HealthSpring

STAR + PLUS Service Coordination Hotline: 1-877-725-2688



STAR + PLUS Member Services Hotline: 1-877-653-0327

Cook Children's Health Plan

STAR Service Coordination Hotline: 1-800-964-2247 TTY- 1-844-644-4137

STAR Member Service Hotline: 1-800-964-2247 TTY- 1-844-644-4137

STAR Kids Service Coordination Hotline: 1-844-843-0004 TTY- 1-844-644-4137

STAR Kids Member Services Hotline: 1-844-843-0004 TTY- 1-844-644-4137

Community Health Choice

STAR Member/Provider Hotline: 1-800-760-2600

Community First Health Plans

STAR Service Coordination Hotline: (210) 358-6060

STAR Member Service Hotline: (210) 358-6060

STAR Kids Service Coordination Hotline: 1-855-607-7827 or 210-358-6403

STAR Kids Member Services Hotline: (210) 358-6403

Dell Children Health Plan

STAR Member Service Hotline: 1-888-596-0268

Driscoll Children's Health Plan

STAR Member Services Hotline: 1-877-324-7543 (1-877-DCHP-KIDS)

STAR Case Management Member Services Hotline: 1-877-222-2759

STAR Kids Service Coordination Hotline: Nueces: 1-844-508-4672/ Hidalgo: 1-844-508-4674



El Paso Health

STAR Service Coordination Hotline: 1-877-532-3778, ext. 1500

STAR Member Service Hotline: 1-877-532-3778

FirstCare Health Plans

STAR Service Coordination Hotline: 1-800-431-7798 (Ask to speak with a Case Manager)

STAR Member Service Hotline: 1-800-431-7798

Molina

STAR Member Service Hotline: 1-866-449-6849

STAR + PLUS Service Coordination Hotline: 1-866-409-0039

STAR + PLUS Member Services Hotline: 1-866-449-6849

Scott and White Health Plan

STAR Service Coordination Hotline: 855-691-7947

STAR Member Service Hotline: 855-897-4448

Parkland

STAR Member Service Hotline: 1-888-672-2277

CHIP Member Services Hotline: 1-888-814-2352

Superior HealthPlan

STAR/CHIP Service Coordination Hotline: 1-800-783-5386



STAR Member Service Hotline: 1-800-783-5386

STAR Health Service Coordination Hotline: 1-866-912-6283

STAR Health Member Services Hotline: 1-866-912-6283

STAR Kids Service Coordination Hotline: 1-844-433-2074

STAR Kids Member Services Hotline: 1-844-590-4883

STAR + PLUS Service Coordination Hotline: 1-877-277-9772

STAR + PLUS Member Services Hotline: 1-877-277-9772

Texas Children's Health Plan

STAR Service Coordination Hotline: 1-866-959-2555

STAR Provider Service Hotline: 1-832-828-1004

STAR Member Service Hotline: 1-866-959-2555

STAR Kids Service Coordination Hotline: 1-800-659-5764, Option 3

STAR Kids Member Services Hotline: 1-800-659-5764, Option 3

United HealthCare

STAR/CHIP Member Services: 888-887-9003

STAR Kids Service Coordination Hotline: 877-352-7798

STAR Kids Member Services Hotline: 877-597-7799

STAR + PLUS Service Coordination Hotline: 800-349-0550

STAR + PLUS Member Services Hotline: 888-887-9003