



TAHP

The Texas Association of Health Plans

Service Coordination

Presentation to the SMMCAC Subcommittee

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Presenters

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Goals of Service Coordination

Emphasis on preventive care

Improved access to care

Appropriate utilization of services

Improve member and provider satisfaction

Improve health outcomes & quality of care

Cost-effectiveness

What Does Service Coordination Focus On?

- 1. Person-centered service planning
- 2. Assessing functional needs
- 3. Facilitating a determination of medical necessity/level of care
- 4. Ensuring safety and support in the least restrictive environment
- 5. Addressing social determinants of health
- 6. Ensuring PH and BH needs are met in an integrated way

Functions of Service Coordination

- Single point of contact
- Perform comprehensive assessment and instruments (SAI) to evaluate care needs
- Participate in the development, review, and completion of goals created in the Individualized Service Plan (ISP)
- Assist the member in obtaining access to services—including making referrals to specialty providers and scheduling appointments, with follow-up to ensure needed services are provided
- Proactive communication at timed intervals and beyond (telephonic, face-to-face, televisits)
- Facilitate and collaborate on the development of a transition plan prior to age 21 for STAR Kids members

Functions of Service Coordination

- Provide parental/member education on issues such as guardianship, outside community resources, compliance with medical care, and proper use of emergency services
- Conduct post-hospitalization discharge calls to address any potential unmet needs, perform reassessments, and encourage importance of compliance with follow-up appointments and connects families to value added services
- Assist members with arranging medical transportation
- Perform disaster outreach calls during times of disaster to ensure members have adequate supplies and medications to last a few extra days, as well as having an emergency plan in place
- Coordinate with pharmacy team to address state managed care formulary drugs that require special review

Service Coordination Team Members

Teams that may provide support to Service Coordinator:

- Program Coordinators
- Member Connection/Community Health Workers
- Workforce Appointment Schedulers
- Authorization Specialists
- Member Advocates
- Centralized Appeals & Fair Hearing Specialist
- Clinical Auditors
- Product & Job-Specific Trainers

HHSC Oversight of Service Coordination

LTSS UR Reviews

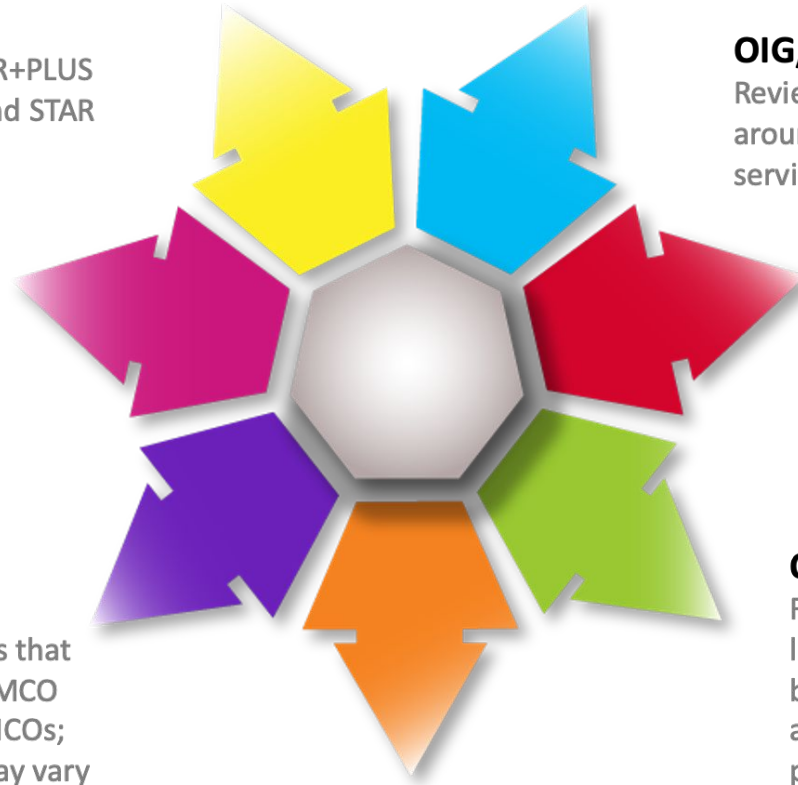
Review of services for STAR+PLUS & MMP HCBS Members and STAR Kids & STAR Health MDCP Members

ACUR Reviews

Review of acute-related activities for one or multiple Medicaid products

MCO Targeted Reviews/Audits

Specific, targeted elements that HHSC reviews for a single MCO and/or a small subset of MCOs; Medicaid product focus may vary



OIG/OAG Reviews

Reviews involving specific processes around services and/or specific servicing providers

EQRO Reviews

External quality reviews of MCOs that evaluate quality of care for members

Operational Reviews

Full review of an MCO's Medicaid lines of business and will include, but is not limited to, the assessment of policies, procedures and materials

A photograph of a doctor in a white coat holding the hand of an elderly patient in a hospital setting. The doctor is smiling and looking at the patient. The patient is looking back at the doctor. The background is a bright, clinical setting with a tray of medical supplies visible.

Operational Contract Changes in STAR Kids and STAR+PLUS

STAR+PLUS Levels of Service Coordination

1	Includes members in the STAR+PLUS HCBS waiver, individuals in a nursing facility (NF) with some exceptions, individuals with Severe and Persistent Mental Illness (SPMI), and other members with complex medical needs
2	Includes clients receiving Personal Assistance Services (PAS), Community First Choice (CFC), or Day Activity and Health Services; members with non-SPMI behavioral health issues; and individuals in the Medicaid Breast and Cervical Cancer program
3	Includes members not designated as Level 1 or 2 or individuals in a NF who are receiving hospice

Service Coordination Changes in STAR+PLUS

- **Changes to member contact/education requirements**
 - Increased frequency of face-to-face and telephonic visits (2013)
 - Participation in Utilization Management Reviews (2014)
- **Addition or carve-in of new benefits**
 - IDD waiver carve-in (2014)
 - Addition of Employment Assistance, Supportive Employment, and Targeted Case Management benefits (2014)
 - Addition of Community First Choice (2015)
- **Service Coordinator training requirements**
 - Addition of service coordinator training required curriculum (2013)
 - Increased training requirements for service coordinators (2016, 2017)
 - UR Form consolidation (2021)

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Service Coordination Changes in STAR+PLUS

- **Documentation requirements**
 - Addition of new Form H6516 for assessments (2015)
 - Addition of new Form H1700-3 for service planning (2018)
 - MCO requirements added when the state declares a disaster, which includes daily outreach to members & daily reporting to HHSC (2018)
 - Increased follow-up on medically and functional needed services (2019)
 - Additional requirements for GR funding process (2019)
 - Requirements that a series of questions must be asked at each contractually required contact (e.g., whether a member is facing eviction, affected by natural disaster, loss of spouse)
- **COVID-19 flexibilities**
 - Assessments may be conducted via telehealth during the public health emergency (2020 - Present)

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STAR Kids Levels of Service Coordination

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|----------|---|
| 1 | Includes members enrolled in MDCP; members with complex needs or a history of developmental or behavioral health issues (multiple outpatient visits, hospitalization, or institutionalization within the past year); members with Serious Emotional Disturbance (SED) or SPMI; and members at risk for institutionalization |
| 2 | Includes members who do not meet Level 1 but receive PAS, CFC, or NS, including PDN and PPECC; members the MCO believes would benefit from a higher level of service coordination based on the SAI and MCO findings; members with a history of SUD; and members without SED or SPMI, but who have a behavioral health condition that significantly impairs function |
| 3 | Includes those who do not qualify as Level 1 or Level 2. These members may have a medical or mental health diagnosis but are stable and receiving needed services. |

Service Coordination Changes in STAR Kids

- **Member education requirements**
 - Requirement to educate members on disenrollment options and how to make an MCO change (2017)
 - Requirement to send written information to members who decline service coordination contacts or the SAI (2022)
- **Addition or carve-in of new benefits**
 - Addition of Mental Health Rehab and Targeted Case Management (2017)
 - Addition of Autism Services (2022)
 - Addition of EMR/IRO option (2022)

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Service Coordination Changes in STAR Kids

- **Documentation requirements**
 - Addition of forms related to the EVV process (2018)
 - Requirement that Physician's Certification of Medical Necessity must be completed for CIC assessments (2020)
 - Addition of Form 2605 (2022)
 - Specification that certain additional items: change of Service Coordinator, alternative contact schedule, any SAI or contact refusal - must be documented on the ISP Narrative form (2022)
- **COVID-19 flexibilities**
 - Assessments may be conducted via telehealth during the public health emergency (2020 - Present)

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Service Coordination Changes in STAR Kids

- **Timeframe requirements**
 - Requirement to enter the authorization within 3 business days of assessment (2018)
 - PCS must be initiated within 7 days (2021)
 - Therapy evaluations must take place within 21 days (2019)
 - Adaptive aids must be delivered within 14 days (2022)
 - Non-MDCP assessments must be completed 30 days in advance (2022)
 - L1 quarterly visits must be spaced between 2 months and 3 months (2022)



Service Coordination Benefits & Opportunities

Providing Service Coordination



- The needs of Medicaid managed care members vary....
- ...So our service coordination responses need to vary

Service Coordination Opportunities

Ensuring assessment requirements or time are not burdensome to members and parents/caregivers

Allow MCOs to conduct assessments and service coordination activities via telehealth for members who can be assessed by video and choose to receive telehealth

Designing quality measures that are not duplicative or administratively burdensome is key to minimizing costs and drives innovative solutions

Texas Medicaid Works

Today's Texas Medicaid is more than health care coverage – it connects Texans to the personalized care and support they need to stay healthy and live the fullest lives possible

Managed care health plans provide services that go beyond the walls of a doctor's office, including arranging transportation, coordinating meals, and navigating challenges with school and work

*Watch videos of Texas Medicaid members' experience with their Service Coordinators:
<https://www.texasmedicaidworks.org/care-coordinators>*

Service Coordination Benefits Members By:

- Increasing awareness and understanding of the member's multiple or complex conditions
- Helping the member set and achieve goals that foster greater independence per their ability
- Improving the member's knowledge of the support available through the health plan and community resources
- Empowering the member to improve and/or maintain the member's quality of life

Service Coordination

Through the pandemic, Service Coordinators continue to be:

- Proactive
- Engaged
- Accessible
- Inclusive
- Flexible



As the public health emergency (PHE) nears its fourth year, MCOs have effectively used HHSC's COVID-19 flexibilities to safely and successfully conduct assessments through telehealth. The pandemic has demonstrated that telehealth can be used to safely and effectively conduct service coordination activities and assessments for and may even be a preferred option for some families.

Elements of a Great Service Coordinator



- Empathetic
- Resourceful
- Compassionate
- Effective Listener
- Patient
- Observant