

Our Mission: Keeping Seniors Healthy and Independent

Our Vision: SCAN health plan is the best choice for seniors

We do right by our members and clients

We take pride in what we do

We push beyond our boundaries

We express ourselves

We are agents of change



Delegated Model

SCAN *delegates* care and services to contracted provider organizations to provide medical and mental health care and services.

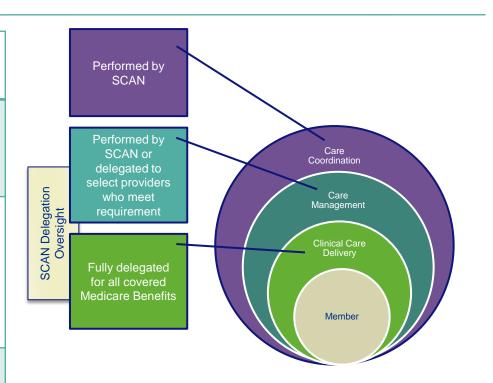
SCAN supports *members* in a comprehensive manner, while providing the information, support and assistance necessary to more actively manage their own care, including assessing the member's needs (HRA) and coordinating care and benefits

SCAN supports *provider* organizations by providing:

- Training
- Technical assistance and tools
- Evidenced Based Practice Guidelines
- Collaboration on quality measures (i.e., CMS 5 Star, Consumer Assessment of Healthcare Providers and Systems (CAHPS) and Health Outcomes Survey (HOS))

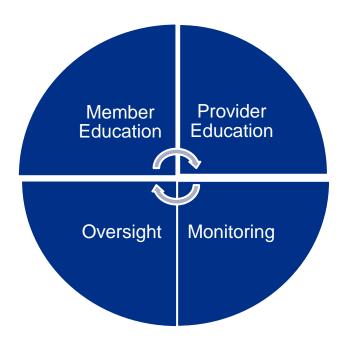
SCAN performs **oversight** through initial and annual audits to evaluate the delegate's ability to perform delegated activities and reporting.

SCAN *monitors* member experience (grievance trends and quality investigations)





Approach to Initial Health Appointment





Member Engagement

Personal Assistance Line (PAL)

Specialized customer service/assessment unit for dual members, that:



- Provides cultural/linguistic sensitive services
- Resolves barriers and access to care
- Conducts assessments to identify needed services
- Assists with resolution of Medi-Cal Eligibility Issues

Welcome Calls



- Educates member on importance of IHA
- Offers to schedule PCP/IHA appointment and arrange transportation
- Sends member Welcome Letter



Provider Organization Education

Annual SNP MOC training which includes IHA Training

- IHA regulatory requirements and best practices
- Clinical Protocols
- USPSTF Guidelines
- Documentation expectations
- Coding

IHA Report sent monthly to groups

Ongoing guidance presented at JOCs, other provider meetings and ad-hoc trainings

Requirements outlined in:

- Provider Operations Manual (POM)
- Delineation of Responsibilities (DOR)
- Provider Orientation Packet (POP)
- Provider Today Newsletter



Provider Responsibilities

Provider Organizations are required to educate their physicians on the IHA requirements and to facilitate completion

Physicians are responsible to conduct the IHA/AWV with the member



Monitoring and Oversight

Monthly reporting to Provider Organizations

Provider
Organizations
notified of
expectations

Delegation Oversight Audits Network Performance Committee



IHA Compliance Rates Q1 2023

	January	February	March
Q1 2022*	33.3%	29.1%	25.7%
Q1 2023	54.2%	52.9%	52.5%

DOU issued the following CAPs during Q1 2023:

Memorial Care
Optum
Apple Care
St. Vincent's
PIH
Axminster
Facey





Supporting Documentation Submission

Policies and Procedures

- Initial Health Appointment (IHA) Monitoring and Oversight
- Personal Assistance Line (PAL) Unit
- First Tier, Down Stream and Related Entities (FDR) Compliance Program Effectiveness Audit Process
- Corrective Action and Escalation Process for Non-Compliant First Tier, Downstream, or Related Entities (FDRs) Deficiencies

IHA Monitoring Process Desktop Procedure

Network Performance Committee Charter

Network Performance Committee Presentation

IHA Workgroup Meeting Minutes

IHA Monitoring Reports

Provider Operations Manual

Physician Orientation Packet

Provider Training PowerPoint Presentations

Member Evidence of Coverage

PAL Member Welcome Letter



Governance Structure - Delegation Oversight

