

CareAdvantage (HMO) Fact Sheet

Overview: A Medicare Advantage Dual Eligible Special Needs Plan

In January 2006 the Health Plan of San Mateo (HPSM) launched CareAdvantage (HMO), a Medicare Advantage Dual Eligible Special Needs Plan (SNP). Under this plan, HPSM integrates the care that members receive across both the Medicare and Medicaid programs. Consolidation of Medicare and Medicaid services under CareAdvantage has enabled HPSM to provide a comprehensive set of benefits to enrolled members while reducing confusion, reducing administrative burden, and improving the quality of care.

Who are Our Members?

CareAdvantage serves more than **8,000** members across San Mateo County. Members are required to have Medicare Parts A and B and have full-scope Medi-Cal through HPSM. As dual-eligible individuals, CareAdvantage members not only experience financial hardship, but also complex health and social service needs:

- 46% have diabetes
- 43% have heart disease
- 36% have a mental illness
- 29% are disabled and under the age of 65
- 7% have developmental disabilities

Additionally, CareAdvantage members represent diverse ethnic backgrounds with significant language assistance needs. Detailed demographic information can be found on our website, www.hpsm.org.

What Services does CareAdvantage Cover?

CareAdvantage provides a comprehensive set of benefits that are simple to use for our members and easy to process for our providers. Our benefits include:

Standard Medicare benefits

These include hospital care (Part A), physician visits (Part B), and prescription drugs (Part D).

Medi-Cal wraparound benefits

These include additional days of hospital and skilled nursing facility care, non-skilled nursing facility stays, ancillary services beyond what Medicare covers (e.g., speech therapy, occupational therapy, podiatry, and audiology), non-emergency transportation, and preventive health exams and health education.

Supplemental Medicare Benefits

In 2011, CareAdvantage provides these additional benefits:

- 50 free taxi rides to health care service locations
- Comprehensive dental coverage with \$0-\$20 co-payments
- \$0 co-pay for all generic drugs until total amount paid under the part D benefit reaches \$2,660
- Free eye exams and eyewear up to \$125 for eyewear every two years
- Free in-home assessment

We fight to make a difference in our community.

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healthy
fight.**

What Makes CareAdvantage Special?

HPSM strives to provide the highest quality of service and health care available to our members. It is particularly important that we effectively address our members' complex needs. Our selection of supplemental benefits reflects our responsiveness to their specific health care needs. We demonstrate superior service through:

High-quality customer service. We maintain a customer service unit dedicated to CareAdvantage members. Our CareAdvantage Navigators answer questions regarding primary care provider assignment, benefits, access to services, and more. Based on member calls to **1-800-Medicare**, HPSM's customer service has one of the lowest complaint rates among all Medicare Advantage plans in the country.

Accommodation of cultural and linguistic needs. HPSM builds its staff and provider network with the cultural and linguistic needs of its members in mind. CareAdvantage staff speak English, Spanish, Tagalog, Russian, and Chinese dialects (Cantonese and Mandarin). To communicate with members in other languages, we use Pacific Interpreters, a telephonic interpretation service. We also produce our member materials, including member letters, in five languages: English, Spanish, Chinese, Tagalog, and Russian.

Hands-on care management that reduces hospital costs. HPSM's Care Coordination department conducts medical management for our CareAdvantage members. All members receive an initial and annual assessment to help guide care plans. Members identified as high-risk are enrolled into HPSM's Care Coordination program, which provides hands-on care to members to ensure that members receive the right care at the right time. As a result of care coordination efforts, HPSM has seen a significant drop in hospital costs for members enrolled in the program:

- **45%** reduction in **inpatient admissions**
- **42%** reduction in **emergency room usage**
- **11%** reduction in the average length of **hospital stays**

To reduce the rate of unnecessary readmissions, an HPSM nurse assists members with the transition from hospital to home. We also have physicians who visit members in their homes.

Linkages to social services. HPSM facilitates member linkages to critical social services through the combined efforts of the Care Coordination team and the CareAdvantage Unit. The Care Coordination team identifies members who need special assistance, including case management, home and community-based services, or mental health services, and refers them to County Aging and Adult Services and/or Behavioral Health and Recovery Services, as appropriate. Meanwhile, the CareAdvantage Unit identifies members who have lost Medi-Cal coverage or who are at-risk of losing coverage to facilitate timely renewal. Since 2008, CareAdvantage has saved more than **2,400** members from losing Medi-Cal through intervention with members and the Department of Social Services. HPSM has also contracted with the Legal Aid Society of San Mateo County to provide assistance to members who have complex Medi-Cal Share of Cost issues that threaten both their Medi-Cal and CareAdvantage coverage.

