

## Care/Case Management Model Cover Sheet

Program Name: Magellan Complete Care MLTSS Model of Care

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### Population Focus:

Individuals who are: 65 and older; adults and children with disabilities; living in Nursing Facilities (NF); Tech Assist Waiver; Standard Waiver (elderly or disabled with Consumer Direction); DD waiver; Aged, blind or disabled.

### Program Objectives:

Achieve high quality care and budget predictability, increase access to home and community based services, safely decrease institutional utilization, build on member choice

### Program Description:

The Magellan Managed Long-Term Services and Supports (LTSS) program, integrates long-term services and supports, including nursing facility services and Home and Community-Based Service (HCBS) alternatives to nursing facility care, behavioral health services, and acute and primary care services. Care coordination is person centered, cost effective and quality driven.

### Required Care/Case Management Staff:

Team approach: Medical Director, Care Coordinator (CC), Health Guide, LTSS Member Associate, Transition Coordinator. Other staff may include: Wellness specialist, housing specialist, peer recovery navigator, LTSS trainer, to name a few.

### Program Demographics

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Monthly member count: 22,644 total (NF waiver is 2,558) (tech assist waiver is 35)

Average monthly program cost per member: \$198/pmpm whole population. \$311 NF pop.,

Average monthly total benefit cost per population member: Requires data pull

Monthly provider count: Requires data pull

Average # of members per provider: Not tracked in this manner

Average monthly provider program revenue: Costs are tracked per member

## Program Measurements

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HEDIS Measures

NCQA LTSS Measures

LTSS specific measures per contract requirements

Provider profiles may include: Patient Satisfaction Rate, Readmissions/1000, ER visits/1000, No Fall Rate.

Recovery metrics