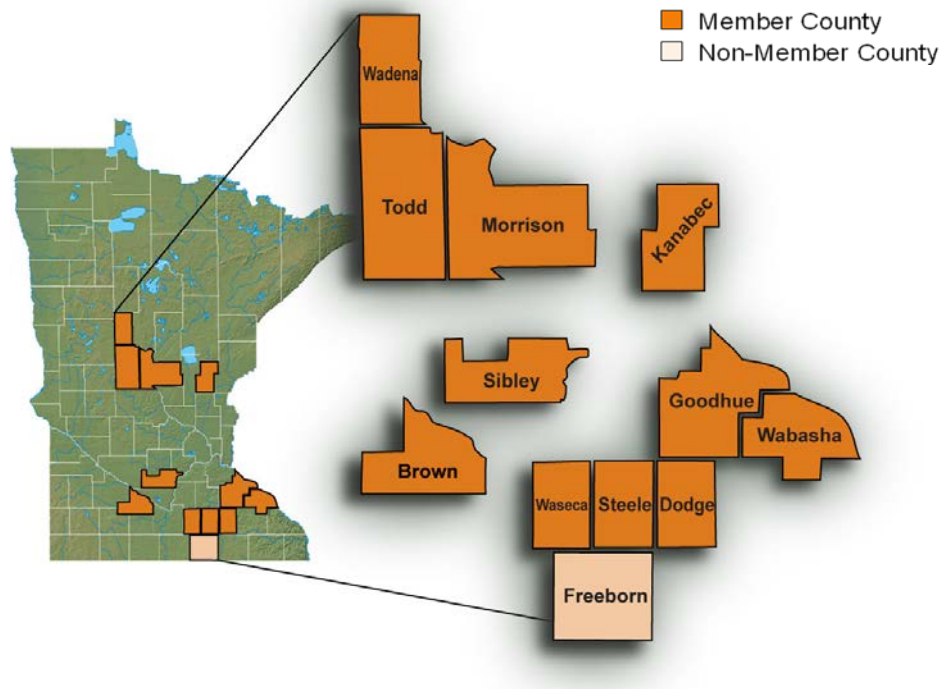


Chapter 1

Introduction to South Country Health Alliance

SCHA OFFERS HEALTH COVERAGE IN THESE 12 MINNESOTA COUNTIES

Map of Coverage Area



The Provider Manual is a source of guidance and is not meant to be your only source for billing, authorization and coverage.

South Country Health Alliance (SCHA) Background Information

SCHA brings together an integrated health care management model into a single care delivery arrangement for our members. We work very closely with the local Department of Human Services and Public Health in our 11-member counties.

The SCHA Mission

South Country Health Alliance's mission is to empower and engage our members to be as healthy as they can be, build connections with local agencies and providers who deliver quality services, and be an accountable partner to the Counties we serve.

To accomplish this, South Country implements a care coordination model that incorporates both medical and social services and enables South Country's enrollees to receive services in a comprehensive and cohesive manner.

South Country Health Alliance became Minnesota's first multi-county based purchasing organization in 2001. Authorized by Minnesota Statute 256B.692, County Based Purchasing (CBP) is a health care purchasing system intended to be operated by a county or group of counties, for the initial purpose of purchasing health care services for certain residents enrolled in Medical Assistance, MinnesotaCare, SeniorCare Complete (MSHO), and AbilityCare (SNBC). CBP presents an enhanced alternative to the fee-for-service state-purchased and operated public programs and to the Prepaid Medical Assistance Program (PMAP), where the State of Minnesota purchases services through contracts with HMOs.

CBP entities must meet the same requirements as HMOs or Community Integrated Service Networks (CISN), as provided for under Minnesota Statutes, chapters 62D and 62N. Requirements are also set out in portions of Minnesota Statutes, chapters 62A, 62J, 62M, 62Q, and 72A; and in Minn. Rules Part 4685. These requirements include standards for access, quality, and financial solvency. Once operational, a county-based purchasing entity is subject to a contractual agreement with the Minnesota Department of Human Services (DHS) and with regulatory oversight by the Minnesota Department of Health (MDH).

CBP plans are required to bring together the medical and the social/public health components into a single care delivery model. CBP also assumes full financial risk for the array of eligible services from these two sectors. As noted by DHS, the single care delivery and with CBP assuming full financial risk, the CBP plan is believed to add value to public programs by:

- Assuring improved access to providers and community resources
- Improving coordination of health and human services
- Stabilizing and supporting existing community provider networks

As required by statute, SCHA is governed by a Joint Powers Board (JPB) comprised of one commissioner from each of the member counties. The JPB membership is considered a "committee assignment" for each commissioner. The JPB provides the vision, policy direction, and governance for SCHA. SCHA staff supports the Board and oversees the regulated activities of SCHA functions.

JPB members and an executive staff listing can be found on our website www.mnscha.org.

Carved Out Entities

SCHA works with *Delta Dental* to provide dental services for members (network, claims processing, provider service).

SCHA partners with *PerformRX* to provide pharmacy services for members (network, claims processing, provider service).

South Country Health Alliance Provider Network

SCHA uses a primary care model allowing members to select a Primary Care Clinic (PCC), which is their "medical home". If the member has not selected a PCC, SCHA will assign a PCC or a "medical home" to that member. Members can access any of the specialists in the network without a referral from their PCC. Some services require an authorization. SCHA Provider Directory can be found on the web at www.mnscha.org.

South Country Health Alliance Community Care Connector

SCHA has a Community Care Connector to service each of the 12 county service areas. The Community Care Connector will serve as the primary link between South Country Health Alliance (SCHA) and the County.

South Country Health Alliance Programs

Medical Assistance (MA) -Program for persons age birth to 64 who meet income measures.

MinnesotaCare – Program for person’s age birth and up without access to affordable health care coverage. Members pay a monthly premium each month to the State. The premium is based on income and determined by the State.

SingleCare (SNBC) - A Special Needs Basic Care program for persons age 18 to 64 years of age with disabilities who live in our 12-county service area and are eligible for Medical Assistance only.

Minnesota Senior Care Plus (MSC+) – A program for persons age 65 and over who meet income measures. May have Medicare primary outside of SCHA. Persons are eligible for Elderly Waiver benefits.

SharedCare (SNBC) – A Special Needs BasicCare program for people with disabilities who live in our 12-county service area and are eligible for Medical Assistance and Medicare. South Country ONLY administers Medical Assistance benefits.

AbilityCare (HMO SNP) – a Medicare Advantage plan for dual eligible SNBC residents age 18 to 64 years of age. Persons must be dually eligible for Medical Assistance and Medicare Part A and B, certified disabled or blind – certified through SSA, SMRT or through the County for purposes of the MR/RC waiver. Also provides Medicare Part D.

SeniorCare Complete (HMO SNP) – a Medicare Advantage plan and MSHO program for dual eligible seniors 65 years of age and over. Persons must be eligible for Medicare Part A and B. Persons are eligible for Elderly Waiver benefits. Also provides Medicare Part D.