



# Applying Care Management Strategies to Chronically III, Fee-for-Service Beneficiaries

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## **Program Overview**

## 37,000 to 41,500 Fee-for-Service Beneficiaries

- HCGP's services are directed to Nevada's highest need individuals among the Medical Assistance for the Aged, Blind, and Disabled (MAABD) population and chronically ill rural Medicaid beneficiaries with limited access to care.
  - 62% southern (urban Clark, rural Clark and southern Nye)
  - 28% northern Nevada (urban Washoe, rural Washoe, Carson City, Douglas County, Churchill, Lyon)
  - 11% rural (Elko, Pershing, Humboldt, Esmeralda, Nye, Lander, Mineral, White Pine, Eureka)
- Members have one or more of eleven diagnoses managed under one or more of eight care management programs: Disease Management, Care Management, Oncology Care Coordination, Chronic Kidney Disease, Mental Health Program, Pregnancy Care Coordination, Complex Condition Care, and General Health Care.
- Face to face interventions supplement telephonic outreach
- 24/7 GuidePoint access for all beneficiaries to compliment on-the-ground staff services
- Nevada based staff are proficient problem solvers with integrated resource experience:
  - The intersection of social, physical, and mental health needs can sometimes be the most challenging aspect of staff's daily interaction.
    - >80% were found to require food, shelter, clothing and/or utilities assistance
    - >90% require transportation assistance;
    - >75% have mental health issues; and
    - >50% required assistance with durable medical equipment.





## Quality Improvement (QI) Tools and Identified Causes of Barriers to Completing the Medical Plan

## **Quality Improvement:**

- HCGP conducts a monthly review of medication adherence via the Identification and Stratification process.
- Monthly review changes to risk levels for the entire population flagging changes for prioritization of our outreach efforts, based upon acuity.
- Quarterly operational workflow and value stream mapping.

### **Identified Cause(s):**

- Prioritized by Maslow's Hierarchy: Security needs supersede needs associated with behavioral/medical conditions.
- 90+% of our enrollment population experiences ongoing social determinant needs related to food and shelter insecurities.
- Challenges with transportation.
- Poor access to providers/poor capacity.





## HCGP Intervenes to Improve Quality In Medication Adherence

#### Interventions:

- Identification and Stratification process escalates member for outreach based upon Gaps-in-Care identified including provider visit adherence
- Identification and avoidance of roadblocks to medication adherence.
- Full medication review for complex risk members.
- Assistance with transportation to decrease missed appointments.
- Clinical care alert letters sent to all of a member's providers and pharmacists.
- Coaching session frequency adjusted as clinically indicated.
- Regular staff consults and co-management of cases as needed to educate members.
- Staff carry pill boxes to assist members with medication organization and compliance.
- Establishing relationships with primary health providers, including daily updates on admissions and discharges from key facilities.
- Alert letters mailed and faxed to providers.
- Alert letters mailed to members.
- Clinical Rounds with Medical Director on difficult-to-manage cases.





## Identified Causes and Interventions which are Mental Health-Specific

#### **Identified Causes:**

- Access to BH providers is particularly constrained across Nevada.
- Core symptoms of both bipolar and schizophrenic disorders (e.g. paranoia, lack of motivation, positive effects of not being medicated, etc.) which naturally inhibit medication adherence.
- Stigma associated with the diagnosis and medication of behavioral health disorders discourages some members from compliance.
- Medication side effects are frequently a disincentive to adherence.

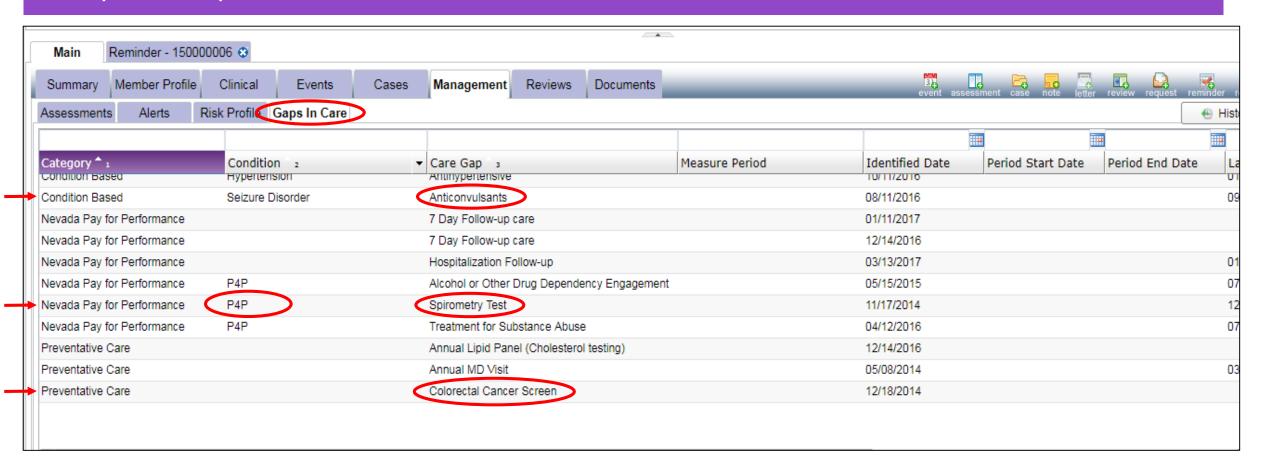
#### **Interventions:**

- In addition to the interventions previously mentioned:
  - Clinical Care Alerts are especially focused on mental illness and drug abuse issues.
  - Use of Peer staff in coaching and mentoring positive behaviors and minimizing stigma about behavioral health and the need for medications.





## Example of Gaps in Care







## Provider and Pharmacy Alerts





P.O. Box 2127 Carson City, NV 89701

July 12, 2017

CM\_PPST\_06292017 Nevada Health Centers Inc Attn: Managed Care Coordinator 752 14th St Elko, NV 89801-3413

Dear Nevada Medicaid Provider:

You are receiving this report as the identified primary care provider (NPI provider) and/or Behavioral Health provider for one or more Nevada Medicaid Fee-for-Service (FFS) Health Care Guidance Program (HCGP) beneficiaries. The beneficiaries identified in this report have been seen in this clinic or by a provider in this practice.

The enclosed information highlights care improvement opportunities for participating HCGP beneficiaries that can be reinforced by your practice. The report details gaps in care or recommended interventions. This information is being sent to the primary care provider and if appropriate, the behavioral health specialist to ensure all identified patient providers are informed of patient needs and program recommendations. We encourage you to participate by providing feedback on the patient information that is captured here or prescribing further care management interventions.

As you review these assessments, please keep in mind the limitations of patient self-reported information. We welcome your input and any updated patient metrics or treatment recommendations that you may have for the listed patients.

The HCGP care managers will use the treating providers' feedback in upcoming coaching sessions with your enrolled patient(s). They cannot initiate treatment changes or take verbal or written treatment orders, but they will reinforce your treatment recommendations and help educate patients as an extension of your care team.

Your support and participation are vital to the success of the Health Care Guidance Program outreach to your patient(s). If you have questions or concerns, please call 1-855-606-7875, option 2, Monday through Thursday 8 a.m. to 8 p.m., and Friday 8 a.m. to 5 p.m.

For additional information about the program, including the evidence-based guidelines used for the program, alert criteria and the Practitioner Bill of Rights and Responsibilities, please visit our secure website at https://nvguidance.axispointhealth.com/providerportal/nev. This website gives you access to secure patient information, registration for this site is required. You may also visit our general website at www.nevadahcgp.com for more information about the program, or call 1-855-606-7875, option 2.

Sincerely.

#### Nevada Medicaid Health Care Guidance Program Assessment Report

Page 1 of 2

Beneficiary Name:

Beneficiary Date of Birth:

Beneficiary ID:

Assessment date:

Assessment conducted by:

Debra Svab

06/08/2017

This report indicates areas where patient self-reported information reveals possible needs identified during the program assessment.

#### **Condition Management:**

For your consideration, these possible gaps in care were identified. Medications are reviewed and adherence is discussed with patients during their calls. If you feel that the below self-reported assessment is incorrect or would like to give additional information regarding medications, barriers, and/or interventions that were not covered within the assessment, feel free to call the HCGP at 1-855-606-7875, option 2, or use the fax sheet on the following page to provide your feedback.

Patient with symptoms of not well-controlled asthma does not take a daily ICS or other controller.

#### Self-Reported Barriers:

The program care manager will work with your patient to provide education around the following barriers.

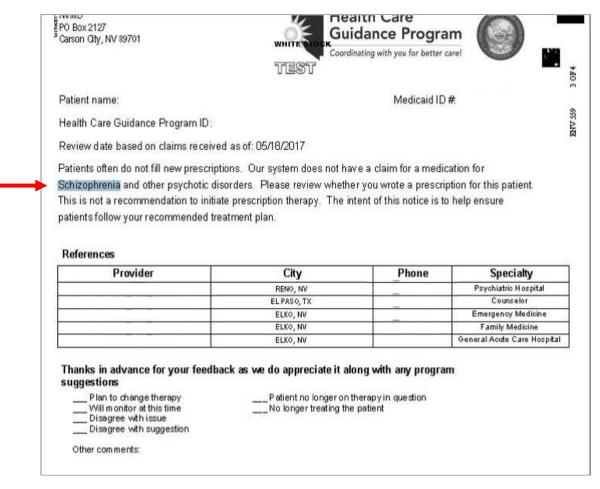
Needs to use inhaled medicines effectively Needs medication review Needs asthma self-management overview





## Provider and Pharmacy Alerts

- There are currently 10 types of Clinical Care Alerts sent to Providers on behalf of our members based upon monthly claims analysis:
  - Early Discontinuation
  - Under Use (Medication Adherence)
  - Overuse of Narcotics
  - Polypharmacy
  - Drug-Drug Interaction
  - Duplicate Therapy
  - Pediatric Age Limits
  - Admit No Follow up
  - Lab Monitoring
  - Conditions No Medications







## Educational Mailings and Interactive voice Response Campaigns



I'm a Health Care Guidance Program Nurse-Call anytime: 1-855-606-7875

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Avoid:

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Caring for yourself—or someone you love with Heart Disease or High Blood Pressure

The Nevada Medicaid Health Care Guidance Program knows that it's hard to take care of yourself or a family member with heart disease or high blood pressure.

You may have only one or both of these conditions:

- Heart disease means the blood vessels in your heart are being blocked by too much fat in your blood. The fat sticks to the blood vessel walls. This makes it hard for blood to get to your heart and can damage your heart.
- When your blood pressure is high, your heart works harder to pump blood through your body. High blood pressure may hurt your heart, blood vessels, and organs all over your body.

Work with your doctor to learn how to take care of your condition, manage your symptoms and improve your health.

#### Questions about Heart Disease or High Blood Pressure? Call the 24-Hour Nurse Advice Line 1-855-606-7875

If you have a question about heart disease or high blood pressure, your symptoms or medicines, call the Nevada Medicaid Health Care Guidance Program. Our nurses are here to answer your questions and help you take care of yourself. We can even help you get transportation to and from your doctor appointments.

For life-threatening emergencies, call 911 or your local



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I'm a Health Care Guidance Prog<mark>ram Nurse-</mark> and I'm here for you.

NEV\_DMCD\_1115



The health professionals with the Nevada Medicaid Health Care Guidance Program know that it can be hard to care for yourself or a family member with health problems. You are not alone.

The Health Care Guidance Program is here for you with a FREE program for Nevada Medicaid beneficiaries who have qualifying health conditions.

See yo
 Our expert nurses provide information and answer
 Take yi
 Get rec
 Way you feel.

We're here for you every step of the way—and can even help you with transportation to and from your medical appointments.

Take advantage of this great program. Call Monday through Thursday from 8 a.m. to 8 p.m. or on Fridays from 8 a.m. to 5 p.m. 1-855-606-7875; TTY/TDD users call 711.

#### Call before going to the Emergency Room— 1-855-606-7875

If you have an illness or injury, call the 24-Hour Nurse Advice Line first\*. Our registered nurses will evaluate your symptoms or injury and assist in helping you decide what to do or where to go for care. Focused Interactive Voice Response

Education: Medication Adherence

#### SCRIPT FLOW



#### POPULATION NOTE

#### Population Note:

 A portion of the population has either not filled a prescription for a medication or the prescription is not being refilled regularly; or may not be taking medication as prescribed

#### Goal:

- To deliver high-level education on the importance of medication adherence
- Provide importance of:
  - Reinforcing doctor/patient relationship
  - Influencing members to take medications even when they feel healthy to prevent complications

## or a







Thank You!
Public Comments About the
Progress of
The Health Care Guidance
Program are Welcomed!





Formerly a McKesson Company