

<b>Seaside Health Plan Policies and Procedures</b>	<b>Effective Date:</b> May 17, 2013  <b>Note: For origination date see History at the end of Policy</b>
<b>SUBJECT:</b>  CASE MANAGEMENT	<b>Approval Signature:</b>  Barry Smith, MD Chief Medical Officer
<b>Manual:</b> Utilization Management  <b>Policy/Procedure #</b> UM-400  <b>Section:</b> Case Management	<b>Sponsor Signature:</b>  Kimberly Ward, RN Director, Utilization Management
<input checked="" type="checkbox"/> <b>COMMERCIAL</b> <input checked="" type="checkbox"/> <b>HEALTHY FAMILIES</b> <input checked="" type="checkbox"/> <b>MEDI-CAL</b> <input checked="" type="checkbox"/> <b>MEDICARE</b>	

**AUTHORITY**

National Association of Rehabilitation Professional Performance Standards: Criteria for Medical Case Management  
Case Management Society of America (CMSA) Standards of Practice

**POLICY**

The scope of this policy is limited to case management cases which are the responsibility of the health plan and where Seaside has not been delegated for case management. Seaside complies with requirements of contracted Health Plans and refers case management cases, when applicable to the responsible Health Plan.

Seaside refers Complex Case Management cases to the Primary Plan within the Primary Plan’s set timeframe for identification.

Basic comprehensive medical case management is provided to each member by his/her PCP

Case Management programs consider the member as a whole individual taking into consideration not only his/her medical needs, but the individual in context of cultural values, age, disability, self-determination, available resources and personal goals.

Case Management seeks to eliminate duplication, delays, and miscommunication in services, and to create an atmosphere where the medical plan can provide optimal healthcare and outcome results in a safe and timely manner.

Case Management utilizes a multi-disciplinary approach to the case management of their members. Case Managers may be Registered Nurses or other degreed professionals with appropriate training and an applicable background in the medical care and behavioral sciences.

Case Management provides for consideration of resource utilization and cost management as evidenced by documentation of utilization history and referral to CCS.

## DEFINITION

**Children with Special Health Care Needs (CSHCN):** those members under 21 years old who have or are at increased risk for a chronic physical, behavioral, developmental, or emotional conditions and who require health or related services of a type or amount beyond that required by children generally.

**Case Management:** a process directed at coordinating and integrating available resources and creating cost effective options for catastrophically ill or injured individuals on a case-by-case basis to facilitate quality treatment goals throughout the continuum of care.

## PROCEDURE

### I. Target Population

A. Seaside offers a comprehensive case management program that targets members with medically and socially-complex needs, including, but not limited to, those members identified as:

1. High recidivism for inpatient hospitalization
2. Medically complex
3. Chronically ill
4. Cost and /or length of stay outliers
5. Catastrophic diagnosis
6. Inadequate family support/Community Support
7. Long Term Care
8. SNF short stay
9. Children with Special Health Care Needs (CSHCN)

B. Criteria for identification of members who may require CM services

1. High risk profiles – must include the presence of two or more of the following criteria:
  - a. Two (2) or more active chronic diagnoses
  - b. Two (2) or more hospitalizations in the past six (6) months
  - c. Two (2) or more emergency room visits within the past six months
  - d. Age  $\geq$  eighty five (85) years
  - e. Significant impairment in one (1) or more activities of daily living (bathing, dressing, toileting, and ambulating)
  - f. Significant impairment in one (1) or more of the instrumental activities of daily living (preparing meals, shopping, housekeeping, transportation, using the telephone, managing finances) particularly when there is not a support system

- g. Developmentally delayed children
  - h. Evidence of malnutrition
  - i. Members under 21 years old identified per Seaside California Children's Services Policy
2. Catastrophic Illness – A catastrophic illness may qualify a member for case management. Catastrophic illnesses include, but are not limited to:
- a. Extensive burns (30% or greater of body surface)
  - b. Traumatic brain injury
  - c. Multiple traumatic injuries
  - d. Organ transplant
  - e. Oncology patients not on hospice
  - f. HIV/AIDS patients
  - g. Chronic major psychiatric illnesses
  - h. Guillain-Barre
  - i. Amyotrophic lateral sclerosis
  - j. Premature infants
  - k. Infants with congenital anomalies
3. Cost Outliers – May be an identification for case management:
- a. Members who are among the top utilizers of healthcare resources
  - b. Members who have annual ambulatory or inpatient costs at one half (1/2) reinsurance or greater
4. Pharmacy Review – Members who meet any of the following criteria may be assessed for case management:
- a. Patients taking six (6) or more medications
  - b. Patients hospitalized for adverse medication reaction

## **II. Case Management Processes**

- A. Seaside identifies and provides case management services to all members of the health population that require intervention.
- B. Seaside develops and implements effective processes to support case management services including, but not limited to:
  - 1. Development of case management plan and policy and procedures
  - 2. Identification of high risk members
  - 3. Triage
  - 4. Comprehensive assessment process and format

5. Coordination of care including discharge from in-patient facilities
6. Coordination of medical services
7. Care plan development and implementation
8. Carve out services – member referral coordination and transition
9. Documentation and communication process for all case management activity.
10. Evidence-based or clinical guidelines or algorithms to guide case manager through assessment and on-going management of a Member.
11. Automated prompts and reminders for next steps and follow-up contact scheduled with the Member.
12. Automatic documentation of the staff members ID and date and time action on the case or interaction with the member occurred.

### **III. Staffing**

- A. Seaside hires and trains case management staff. Staff ratios for active members are based upon an acuity scale.

**History:** New

**Origination Date:** May 17, 2013