Partnering with the Care Management Department

February 2018

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Department of Care Management

- Physician Advisors
- Inpatient Case Managers
- Social Workers
- Care Manager Assistants
- Utilization Managers
- Lee Health Solutions

"Case Management in Hospital/Health Care Systems is a collaborative practice model including patients, nurses, social workers, physicians, other practitioners, caregivers and the community. The Case Management process encompasses communication and facilitates care along a continuum through effective resource coordination. The goals of Case Management include the achievement of optimal health, access to care and appropriate utilization of resources, balanced with the patient's right to self determination." ACMA 2002

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Roles of Care Management

- Patient advocacy
- Clinical coordination
- Safe discharge planning
- Regulatory compliance
- Provide clinical information to insurance companies as requested
- Denials management
- Utilization review
- Data collection (delays, readmission reasons)
- Collaboration with local community social service agencies/SNF/HH agencies.

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Care Coordination

- Coordination of resources to meet patient needs and facilitate movement across the continuum of care in a cost effective manner
- Medically Complex cases
- Frequent hospitalizations / Chronic disease
- Educational needs associated with newly diagnosed conditions
- Post-acute needs and follow-up
- Crisis intervention / Advance Directives
- Baker Acts
- Length of Stay monitoring

- Our Goal: ensure a safe transition of care and prevention of readmission

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Discharge Planning

- Home Health and DME orders contain a “Face to Face” requirement which documents the rationale for a patients homebound status
- Acute Rehabilitation Hospital placements
- Skilled Nursing Facility (SNF), transfers requiring Class II or greater Narcotics (such as Benzodiazepines, Opiates, etc.) must have a hard script
- Home Health Services
- Long Term Acute Care Hospital placements
- Assisted Living Facility (ALF) placements
- Outpatient Infusion / Wound Care
- Lee Health Interim / Infusion Center / Coumadin/Lovenox Clinic
- Community Social service agencies
- Outpatient therapy

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Physician Advisor

- Collaborates with attending physicians to identify and resolve issues regarding clinical appropriateness, resource utilization, and appropriate alternatives
- Assist attending physicians in utilization management, decision, and placement
- Serves as an advisor on complex cases
- Serves as a resource for the Care Management program
- Reviews referred cases for medical necessity, quality, and documentation
- Denial review and appeals

  - Cape Coral Hospital: Dr. Lisbeth Malaret
  - Gulf Coast Medical Center: Dr. Darlyn Victor
  - HealthPark Medical Center: Dr. Robert Brown

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Supportive Documentation of Inpatient Admission

- Severity, risks, and service intensity supporting need for hospitalization
- Failed outpatient treatment – what was tried and did not work?
- Complexity of signs and symptoms
- Advanced age / multiple co-morbidities
- Your clinical documentation is provided to the insurers who authorize payment (or not)
- We may request your assistance in completing peer to peer reviews
- Update plan of care daily

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Medicare Observation vs Inpatient Status

- Observation status is commonly ordered for patients who require a significant period of treatment, testing, or monitoring in order to make a decision regarding their admission or discharge.
- Billed under Part B as outpatient
- The Two-Midnight rule states that Inpatient admissions will generally be payable under Part A. During the completion of H&P physicians should determine patient's status
- The Two-Midnight specifies that all treatment decisions for beneficiaries are based on the medical judgment of physicians and other qualified practitioners. The Two-Midnight rule does not prevent the physician from providing any service at any hospital, regardless of the expected duration of the service
- Inpatient Only Procedures

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Case Management Protocol

- **The following orders may be initiated by Case Management based on their assessment of the patients' needs during the hospital stay to assist with discharge planning:**

- PT / OT / Speech therapy to eval and treat
- Durable Medical Equipment: walker, bedside commode, wheelchair
- Ostomy nurse consult
- Diabetic educator
- Cardiac / Pulmonary rehab eval
- Oxygen qualification test and home oxygen if documentation supports

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Tips for successful collaboration

- Please discuss with patients observation status while still in the ED. Do not use the word “admit”.
- RX assist protocol for “financial assistance” patients
- Please provide RX scripts for high cost meds early so we can run it and obtain prior auth if needed. You may receive calls from pharmacy requesting to change medications to something more cost effective or covered on patient’s insurance.
- Required signed scripts for narcotics for SNF patients
- Required signed scripts for insulin for patients obtaining this from Lee Co Health Dept
- Tertiary facilities- your role in obtaining a provider, our role then to work with the facility
- We may request a peer to peer review for appeals.
- Please write the dc order when patient is medically ready even if we don’t have a SNF bed or services in place because we track avoidable days.
- Signing SNF form # 3008 and ALF form #1823 24 hours prior to d/c to prevent delays

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Lee Health Solutions 424-3120

- Chronic Disease Self Management Classes “It’s All About You”
  - Meet at various locations through out our community
  - Teaches how to self-manage chronic diseases
- Chronic Pain Self Management
  - Meet at various locations through out our community
  - Teaches how to self-manage chronic diseases
- Lee Diabetes Care
  - Inpatient and outpatient diabetes education provided by Certified Diabetes Educators (RNs and RDs)
  - Recognized by the American Diabetes Association since 1987
- Lee Center for Nutrition Therapy/ Weight Management
  - Offers individual and group sessions
  - Facilitated by Registered Dietitians
  - Complete Health Improvement Program (CHIP)
    - Reduce disease risk factors through the adoption of better health habits and appropriate lifestyle modifications.

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Thank You

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