
Overview

The Centers for Medicare and Medicaid Services and the state of Missouri are contracted with Harmony Health Plans, Inc. to provide comprehensive, cost-effective managed care health services to enrolled members.

Case management emphasizes continuity of care for the members through the coordination of care among physicians and other providers. Case management is not an episode but occurs across a continuum of care, addressing ongoing individual needs rather than being restricted to a single practice setting.

- The Case Management team is comprised of specially qualified nurses who assess the member's risk factors, develop an individualized treatment plan, establish treatment goals, monitor outcomes and evaluate the outcome for possible revisions of the treatment plan.
- Case Managers work collaboratively with Primary Care Physicians (PCPs) to coordinate care for the member and expedite access to care and needed services. The Plan's Case Management team also serves in a support capacity to the PCP and assists in actively linking member to providers, medical services, residential, social and other support services, as needed. The Plan's Case Management team adheres to the Case Management Society of America (CMSA) standards of practice.
- The Plan has incorporated case management programs that manage members with specific health care needs such as catastrophic diseases (adult and pediatric), transplant and obstetrics. The physician may request case management services for any of the Plan members.

Case Management Process

The Case Management process illustrates the formation of one seamless Case Management Program and begins with Member identification, and follows the Member until discharge from Case Management. Harmony's philosophy is that these programs are an integral management tool in providing a continuum of care for our Members. The Case Management process is as follows:

- Member Identification
- Member Stratification
- Member Evaluation
- Member Planning
- Member Service Facilitation
- Member Advocacy

Members are discharged from the Case Management program when one or more of the following reasons occur:

- 80% of goals are met;
- Non-adherence to CM Treatment plan or Medical plan;
- Termination from the plan;
- Member request to be discharged from program;
- Death

Case Management Program

In accordance with each contractual agreement, the health Plans offer Case Management services to adult members with chronic illnesses and physical or developmental disabilities. In addition, Harmony's Case Management services also provide HIV/AIDS and Lead Case Management.

Harmony's Case Management Program is composed of seven categories of eligibility:

- Catastrophic – head injury, near drowning, burns, etc.
- Complex – multiple co-morbidities or multiple intricate barriers to quality health care i.e. HIV/AIDS.

- Lead- Blood Lead Levels equal to or greater than 10 mcg/dl.

Services include:

- Family education about lead poisoning;
 - Assistance in obtaining lead abatement;
 - Coordination of testing of siblings;
 - Scheduling of appointments; and
 - Coordination of transportation, when needed.
- Pre Natal – All Members reached receive an initial assessment to determine the level of risk. Those found to be lower risk receive departmental contact information and are encouraged to outreach to the prenatal program as necessary.

Those found to be high risk are inducted into:

- High Risk Obstetrics Program – teen pregnancy, past history of low birth weight, history of pre-term birth, etc.
- Transplantation – organ failure, donor matching, post-transplant follow-up.
- Special Needs Population – developmentally delayed, autism, failure to thrive, etc.
- Long Term Care – medically frail elderly.

Harmony Members have access to Case Management at any time. The Member can self refer or receive referral by a provider to the program (s) utilizing:

- Health information line referral;

- 24 hour nursing line; or
- Case Management toll free line, TTY/TTD available in unit.

Case Management Queue: **866.635.7045**

TTY/TTD: **888.505.1194**

24 hour Nursing Line: **800.919.8807**

TTY/TTD 24 hour Nursing Line: **800.955.8770**

Harmony's Case Management programs are "opt out" programs.

Disease Management Programs

The Disease Management Program proactively identifies members with certain chronic diseases and provides superior education for eligible members and/or support systems to empower them to make behavioral changes that will improve their health, reduce complications and the severity of illness. The Disease Management program strives to prevent unnecessary medical complications whenever possible. Early identification, intervention and effective management of complications from chronic conditions/diseases is the number one priority of the Disease Management Team.

The program's focus is on educating members and their caregivers regarding the standards of care for chronic diseases, specific triggers to avoid, and appropriate medication therapies. The Disease Manager also educates the member on appropriate action plans, preventing reoccurrences, and all measures that will decrease the likelihood of adverse outcomes.

The Disease Manager educates the member on appropriate action plans, preventing reoccurrences, and all measures that will decrease the likelihood of adverse outcomes. The Disease manager also assists the member to deal with the stress of chronic illness, understand how to manage their emotions in the

health care environment and work with their physicians and providers in the most effective ways.

The Disease Manager is sensitive to the emotional and psychological needs of the member, their support system and how best to work with that member to maximize their adherence to the treatment plan mutually agreed upon with their physician.

Additionally, the program also focuses on providing technical support and educational opportunities for the provider to ensure the provider is utilizing the most current and nationally recognized standards of care for chronic diseases, and current treatment recommendations. Intervention and education will improve the quality of life of members, improve health outcomes and decrease medical costs.

Harmony's Disease Management program covers the following disease states:

- Asthma
- Diabetes

In the Disease Management Programs:

- Members are stratified according to the severity of their disease.
- Members receive educational mailings and have the opportunity to request additional educational material specific to their condition or needs.
- Members who are stratified in the most high-risk categories receive telephonic intervention by a disease management nurse. The nurse conducts a telephonic disease-specific health risk assessment and provides education regarding the disease process.
- Members receive newsletters that feature articles related to chronic conditions.

- Providers receive Clinical Practice Guidelines based on nationally-recognized evidence-based guidelines.