

June 2014 MCO Good News Reports

MCOs Going Above and Beyond

Anthem

Anthem recently worked closely with a Western Kentucky member suffering from a liver disorder. The member was in need of a hematologist specialist and would potentially need a biopsy. Her PCP originally referred her to the University of Louisville to see a specialist there. The member preferred to see an out-of-network specialist in Nashville.

Anthem's Case Management worked diligently alongside her PCP and a local gastroenterologist to get the member an appointment locally for a preliminary evaluation and biopsy. As a result of those diligent efforts, the member will be seen by a local in-network physician. The member will only have to travel to the University of Louisville if the biopsy reveals that a higher level of care is needed. Furthermore, Anthem helped to arrange for a nurse to follow-up with her after the biopsy in order to provide continued assistance. The member was pleased to be able to see a local in-network provider to meet her unique health care needs. She expressed great satisfaction with Anthem's efforts and resolution.

CoventryCares

Member was a 33 year old male enrolled on 9/27/2013 in Case Management. Referral was received from CMT. Member has low back pain. His Primary Care Physician did not want to prescribe pain meds. Member needed a Pain Management doctor. Member also with concerns that his blood sugars were running high and he wanted to know what he could do to avoid a diagnosis of Diabetes type 2. Member with hypertension that is controlled with treatment. All counsel completed with member, Benefits reviewed. Case Manager was able to locate a network Pain Management practice. Case manager contacted Primary Care Physician and requested he make a referral to Dr. Lingreens for pain management. Member was referred to Pain Management clinic. Member was able to verbalize lifestyle changes to help with blood sugar control.

What: Member needed pain management as Primary Care would not treat chronic pain. Case Manager located clinic and assisted primary care office with a referral. Member had a denial of Lumbar MRI. Case manager called Dr. Lingreens office and gave information on guidelines for MRI approval and Authorization was obtained. Member was given information on Red flags for Low back Pain, Blood Pressure management, and Blood sugar control.

Why: Member needed Pain management and did not know how to go about finding an MD. Member had blood pressure issues that were not being addressed. Member had concerns about Diabetes and wanted some information and it was provided as well as telephonic counselling. Member's physician was trying to get an MRI of the Lumbar, all clinical requirements were there for approval MD was not submitting request correctly. Case management assisted with all these issues.

Humana

A Humana – CareSource case manager (CM) spoke with a member who stated that he/she went to the pharmacy to pick up his/her prescriptions but all of his/her prescriptions had been rejected. It was not clear to the member why the prescriptions had been rejected but after further investigation, the CM discovered that one of the prescriptions was waiting for the member to pick it up at second pharmacy. The CM contacted the PCP who reported to have never received the rejections from the pharmacy. The PCP completed the prior authorizations for the remaining prescriptions. The CM educated the member regarding prior authorizations and the pharmacy benefits. The member was able to pick up all of his/her prescriptions at the second pharmacy.

A Humana – CareSource case manager (CM) received a call from a member stating that every time he/she goes to the pharmacy to fill a prescription, the pharmacy will only give him/her the generic version of the drug. This member has a history of adverse reactions to the generic version of this drug and requires the brand name in order for the medication to be effective. The member reported to the CM that he/she had been given the wrong medication so many times he/she almost stopped taking the medication altogether. The CM contacted the provider requesting that

he/she submit a prior authorization for the brand name version of the drug which the provider did. Because of the CM's assistance, the next time the member went to the pharmacy he/she was able to get the correct medication.

This Humana – CareSource (HCS) Member is a middle aged individual who is employed and reports that he/she is in excellent health. The HCS Social Worker (SW) helped identify two needs for this member. The first was selecting a different Primary Care Provider (PCP) and the second was a request for materials regarding a Living Will. The Member stated he/she would prefer a different Primary Care Provider. The SW sent the member a list of Primary Care Providers and followed up with a conversation explaining that the Member could select any of the physicians listed. The Member was encouraged to contact HCS customer service to have the PCP's name changed on their identification card. The member was provided with the Customer Service's phone number and was in agreement with this plan. After reviewing the Member's overall reasons for having a Living Will, the SW provided the pertinent documents to the Member. The member stated that he/she will discuss his/her wishes with family members in case something unforeseen should happen. The Member expressed appreciation for this information and gratitude for the insurance coverage.

Passport

When Passport's Director of Government Relations & Mission Integration Ashlea Christiansen was recently attending a meeting in Jefferson County, a security guard named Teresa* happened to notice Ashlea's Passport badge. Teresa commented that her son had recently been disenrolled from Passport, and that she only learned of this when they arrived at an appointment and the provider's office informed her that he did not have coverage.

Ashlea took the time to care. She promised to connect Teresa with our Member Services team, gave Teresa her personal business card, and asked her to email all relevant information. As soon as Ashlea exited the meeting, she found a detailed description from Teresa in her email inbox.

Ashlea immediately reached out to our Member Services Director Judy Palmer, who instantly contacted the member to research the issue. It was determined that Teresa's son had a re-certification issue. Within one day Member Services Data Analyst Amber Bennett contacted Teresa and walked her through the steps she needed to take to ensure coverage for her son. Judy also circled back around with Ashlea to explain what had occurred.

Through this type of effective communication and teamwork, Teresa received a prompt, thorough explanation of what was needed to ensure that her son was covered appropriately.

"As Government Relations Director," says Ashlea, "I'm not typically in contact with our members... but this interaction gave me the opportunity to experience firsthand the phenomenal care that our Member Services team gives our members as I followed the communications between the parties. I was very proud to see that the member's concerns were quickly addressed in a very professional way. It is exactly this type of response to our members that makes my job as one of the public ambassadors of Passport so enjoyable and rewarding."

Passport Disease Manager Ron Keene recently spoke with John*, a Passport member with a history of heart attack and acid reflux symptoms who had just been released from the hospital after experiencing dizziness and an apparent heart attack. John was taking all of his medications as prescribed, but admitted he was concerned about the possible side effects he was experiencing, such as sexual dysfunction and difficulty with focus and concentration.

Ron discussed the importance of taking his heart medications as prescribed, but encouraged him to discuss possible medication options with his cardiologist at his next follow-up appointment, which was already scheduled. Ron also took the opportunity to encourage healthy eating, exercise, smoking cessation, and the need for an annual cholesterol screening.

These types of efforts have helped Passport to obtain the following rankings for national HEDIS® in 2013:

- Cholesterol Management: LDL-C Control <100: 44.50 (50th percentile)

Since Disease Manager Shawna Hickok first began working with Candace* over a year ago, Candace has admitted to struggling with an addiction to smoking cigarettes for many years. She recognizes her smoking is a problem; she has multiple comorbidities and often uses smoking as a crutch for stress relief and when she is not feeling well. All of her numerous attempts to quit using patches, gum, and Chantix, however, have failed.

Patiently, Shawna has listened, encouraged, and supported Candace throughout her struggles this past year. They keep in contact every several weeks, and with Shawna's positive encouragement Candace began to slowly reduce her number of cigarettes. Last week, Candace contacted Shawna to announce that she has finally decided to quit smoking! She reported being smoke-free for three days; the longest she had ever been without a cigarette. When Candace showed an interest, Shawna coordinated efforts internally with our Pharmacy and Rapid Response teams to obtain approval for her to receive nicotine replacement therapy.

Shawna's work in counseling our members like Candace about smoking cessation, medications, and strategies to assist have helped Passport to obtain the following rankings for national HEDIS® in 2013:

- Advising to quit: 81.54 (90th percentile)
- Discussing cessation medications: 49.28 (50th percentile)
- Discussing tobacco cessation strategies: 40.65 (50th percentile)

Although Passport member Amy* has a strong history of heart disease, she had been without health insurance for some time and was unable to seek medical attention. When she recently became eligible and rejoined Passport this spring, she immediately contacted her cardiologist and was admitted to the hospital for open heart surgery. When Disease Manager Ron Keen followed up with Amy after her surgery, she reported compliance with her medications and that the incision site was healing well without signs of drainage or infection. She was eating a healthier diet, had quit smoking several years ago, and had physical therapy and occupational therapy experts coming to her home with an exercise program to help rebuild her strength and endurance.

Ron further supported these efforts by encouraging her to schedule and attend follow-up appointments with her PCP and cardiologist, and sending her follow-up educational materials. He also advised Amy of the impact of consuming too much Vitamin K with the medication Coumadin. She promised to discuss dietary restrictions with the cardiologist who had prescribed Coumadin, and was encouraged to continue her efforts to eat healthy and exercise more as directed by PT/OT.

Sasha* is a Passport member with a history of gastrointestinal problems and hypertension. When one of our Embedded Care Managers met her at her primary care provider's (PCP) office, Sasha was having difficulty understanding and conforming to her dietary recommendations. She had tried following the diet prescribed by her gastroenterologist several years ago, but was really unsure how to do so. Starting a healthy, low-fat diet was only part of Sasha's problem, however. She was very much in need of a dental exam, but had limited access due to being low income and without a vehicle.

Coming to her rescue, our Embedded Case Manager devised several solutions. For Sasha's diet, she recommended a dietician consult. She consulted with Sasha's PCP, then contacted our Member Services regarding coverage and the process for accessing service. Finally, she facilitated communication between the PCP and the dietician's office in setting up an appointment before Sasha left that day.

To access the dietician appointment and other needed medical appointments, our Embedded Case Manager also provided Sasha with education regarding Medicaid transportation. Lastly, she gave Sasha forms to complete once her Pap and dental exams were complete so that she could receive a member reward from Passport. She also encouraged her to contact our Member Services anytime she had questions or concerns.

When she left that day, Sasha had basic information from her PCP about a healthy diet plan, an appointment to begin working with a dietician, a plan to obtain transportation to get to that appointment, and encouragement through the form of rewards to continue proactively healthy habits and preventive care.

Passport Health Plan Case Managers work daily to remove barriers and improve access to preventive services for members served. In fact, these efforts helped Passport to obtain the following ranking for national HEDIS® in 2013:

- AAP Adults Access to Preventive/Ambulatory Health Services: LDL-C Control <100: 90.68 (75th percentile 90.41)

When Matt* went to his PCP's office several months ago for sinus issues, he had no idea it would lead to heart surgery. Although he had a history of high blood pressure and high cholesterol, he had no history of heart disease. He exercised regularly with his job of carrying luggage to and from taxis, and had recently quit smoking. During his checkup with the PCP, however, a heart murmur was discovered. He was referred to a cardiologist and then a surgeon, who quickly scheduled and performed heart surgery.

Once the surgery was over, Passport Disease Manager Ron contacted Matt to check in and see how he was doing. Matt reported making some very important changes and had several follow-up appointments already scheduled, but confided his need for more education. Ron discussed simple changes he could make including a low-fat, low-cholesterol, low-sodium diet, the benefits of exercise, and gave him positive reinforcement to continue avoiding smoking. He also encouraged Matt to ask his PCP about the need for a cholesterol screening at his next visit. After the call, Ron sent follow-up education materials and made plans to check in with Matt in six weeks.

These types of efforts support our providers' efforts to decrease risk factors for members with heart disease. They also helped Passport to obtain the following ranking for national HEDIS® in 2013:

- Cholesterol Management: LDL-C Control <100: 44.50 (50th percentile)

When Passport member Mary* received a mailing from our Congestive Heart Failure Program, she called our Disease Manager Margot French to ask a few questions. After talking about her prescriptions and doctors, Mary started

crying and told Margot how wonderful Passport has been to her. "I don't know what I would have done without you these past few years," she said. "I tell everyone and even go up to people at the grocery and tell them to choose Passport." She said she would sing praises about us and did actually sing "Passport" on the phone. She told me to tell everyone at Passport "Thank You."

In measurement year 2012, a total of 4,106 Passport members used angiotensin receptor blockers (ARB drugs) or the angiotensin converting enzyme inhibitors (ACE inhibitors) for heart disease. The efforts of Margot and other talented Passport staff helped ensure that 3,737 (or 91.01%) of these members received at least one therapeutic monitoring event. These types of efforts have led Passport to be ranked in the 75th Percentile for national HEDIS® in 2013 for Annual Monitoring for Patients on Patients on Persistent Medications (MPM)

After Susan* was released from the hospital for a heart bypass and mitral valve replacement, she spoke with Disease Manager Ron Keene, ready to make some changes. After discussing her prescriptions, doctor appointments, and plans for post-surgery recovery, Susan noted that she wanted to cut down on the amount that she smokes. Ron educated her on Passport's smoking cessation benefits coverage and sent her several pieces of educational information. He also promised to follow-up with her within a month. These important steps helped prepare Susan for the coming weeks as she recovered from surgery and stop smoking in order to improve her health and quality of life with heart disease.

These types of efforts have led Passport to obtain the following rankings for national HEDIS® in 2013:

- 81.54 (90th percentile) in Medical Assistance with smoking and tobacco cessation: Advising to Quit.
- 40.65 (50th percentile) in Medical Assistance with smoking and tobacco cessation: cessation strategies discussion/coaching.
- 49.28 (50th percentile) in Medical Assistance with smoking and tobacco cessation: Cessation medications discussion.

Passport member Janet* had suffered from a chronic inflammatory illness for quite some time. In an effort to educate Janet about the link between diet and inflammatory illness, Case Manager Marsha Busey suggested she read the book *Breaking the Vicious Cycle – The Specific Carbohydrate Diet*. Medical Director Dr. Perry Meadows had recommended the book to Marsha, and after reading it she agreed the member seemed to fit the profile of people described in the book that had lessened or controlled their disease. Janet was receptive to the suggestion. She discussed the book with her doctor, who instructed her to follow the information.

When they next spoke, Janet said she had made the recommended changes in her diet and was thrilled to report dramatic results. Janet has lost weight, has an improved complexion, no longer has insomnia, and has reduced her medications from 30 to 7! She feels much better overall and thanked Marsha for giving her this life-changing information.

These types of efforts have helped Passport to obtain the following rankings for national HEDIS®** in 2013:

☐ Nutritional Counseling: 64.02 (50th percentile)

After many years of smoking, drinking, unhealthy diet and not exercising, Joe's* heart gave him a wake-up call. After being admitted to the hospital for a heart attack, providers placed a stent to open three of his vessels with 70%, 90%, and 100% blockage. Joe immediately stopped drinking and smoking, but needed help working on his diet and exercise. Disease Manager Ron Keene offered him not only the practical advice and education he needed to make these healthy lifestyle changes, but also the positive motivation he needed to get started. Joe was very thankful and promised to start eating healthier and discuss his exercise restrictions and limitations with his PCP at his upcoming visit. These types of efforts have helped Passport to obtain the following rankings for national HEDIS®** in 2013:

☐ Nutritional Counseling: 64.02 (50th percentile)

**Members' names changed for privacy.*

***Healthcare Effectiveness Data and Information Set (HEDIS)*

WellCare

A 39 year-old WellCare of Kentucky Medicaid member who had been diagnosed with chronic obstructive pulmonary disease (COPD), cancer, diabetes and high blood pressure recently underwent a hysterectomy. Her husband had to temporarily stop working to care for her and they were not sure how they were going to pay their utility bills. A WellCare case manager connected them with several community resources, and a local chapter of the Lions Club agreed to pay their water and electric bill in full. Thanks to the case manager's intervention, the member and her family were able to continue to have access to water and electricity, so the member could safely recover at home.

A 46 year-old WellCare of Kentucky Medicaid member with diagnosed sleep apnea, hypertension, chronic obstructive pulmonary disease (COPD), asthma and depression, fell out of bed and broke her ankle. While she was receiving rehabilitation at home, a WellCare social worker visited her and found that she needed assistance in obtaining a humidifier for her sleep apnea machine and a blood pressure cuff to monitor her hypertension. The member also requested help with applying for Supplemental Security Income (SSI) disability, and assistance with food and utility payments.

The WellCare social worker contacted a home health care provider to order the humidifier and blood pressure cuff for the member. She informed the member about WellCare's nurse advice line, over-the-counter supply credits and medical transportation benefits. She educated her about hypertension, COPD, asthma, depression and fall prevention. The social worker also helped the member apply for a free cell phone, and connected her with local social service organizations that provide food and utility bill assistance. Additionally, the member was provided with assistance to apply for SSI disability and agreed to be referred to WellCare's disease management program.