

May MCO Good News Reports

MCOs Going Above and Beyond

Humana

May, 2014

- In late March a member contacted Humana – CareSource (HCS) requesting to be assigned a case manager (CM). The member has been diagnosed with diabetes, depression, schizophrenia, and high cholesterol. The member also stated that he/she was previously homeless but now had an apartment. The CM provided the member with community resources for rent and food in an attempt to keep the member from becoming homeless once again. The HRCM also helped the member obtain a new blood sugar monitor and the supplies needed for testing. Throughout April and May the CM remained in close contact with the member, monitoring his/her status both medically and financially. In mid-May, the member called to inform the CM that his/her wallet had been stolen while he/she was sleeping on the bus. The wallet contained all of the member's essential documentation including driver's license, Social Security card, taxi driver's license, food stamp card, and bus voucher. Without the driver's license and the taxi driver's license, the member could not work and he/she was down to his/her last few dollars. In addition, he/she had left his/her apartment because he/she didn't feel like it was a safe place to stay. The member was now homeless, without any form of documentation, and almost no money so he/she reached out to the CM for help. The CM met the member downtown to better assist him/her to get back on track. The member stated that he/she had not had a lot to eat or drink recently and admitted that he/she was not compliant with his/her medications. The CM reiterated how important it is for the member to take his/her medication and encouraged him/her to pick them up at the pharmacy which the CM had made sure were ready in advance. The CM also made it clear to the member how important it was for him/her to eat regularly and check his/her blood sugar five to six times a day. During the meeting, the CM gave the member twenty dollars obtained from a local community resource so that the member would not have to take out a high interest pay day loan to purchase his/her license. Later that week, the member called stating that he/she could not obtain a license or Social Security card without the proper documentation which had all been stolen with the wallet. The CM educated the member on how to obtain a new Social Security card by using resources online and he/she was able to work with the DMV and the local police department to help the member obtain a new driver's license. With this documentation the member was now able to work again. Because of the HRCM's help, the member was able to get back to work and pick up his/her medication. While this is a significant success, they both have set new goals for helping the member find permanent housing, keep his/her diabetes under control, and reengage with a psychiatrist to restart his/her medications for Schizophrenia.
- A member was contacted for a standard disease management follow-up, during which the member stated that his/her blood sugars were ranging in the 200's and he/she is self-adjusting insulin by taking an extra twenty units during the day. The member has not discussed this regimen with his/her primary care physician (PCP). The case manager explained to the member the dangers of self-adjusting any medication and that his/her PCP needed to be informed. The member also stated that he/she had not taken his/her blood sugars in over a month because the prescribed strips had run out. The member was only guessing at his/her sugar levels because he/she felt like they were high. The member did not remember the name of the prescribed meter but said that it was not the free style meter that Humana – CareSource covers. The case manager contacted the member's PCP and arranged for a new meter to be picked up at the pharmacy. The case manager provided the member with the pharmacy's number and instructed him/her to call to make sure it was ready for pickup before going to the pharmacy. The member voiced his/her appreciation and thanks to the case manager for making the necessary calls and assured the case manager that he/she would no longer self-adjust medications.
- A member was identified for High Risk Case Management by a Bridge to Home case manager following the member's third hospitalization in as many months. The member has a long history of high blood pressure and elevated cholesterol. Since the member did not have medical insurance in recent years, it was a struggle to buy the necessary medication and he/she only consulted a doctor if there was something terribly wrong. Since the member got coverage on 1/1/2014, he/she was able to see a doctor regarding a recent shoulder injury and became established with a PCP for regular checkups and prescriptions. Something showed up on the shoulder x-ray that prompted a closer look. It was found that the member had gallstones, pancreatitis, and hepatitis C. As a result, the member was hospitalized and

his/her gallbladder was removed, the pancreatitis was treated, and a consult for the hepatitis was obtained. Things did not progress very well after discharge. The member was readmitted, again with pancreatitis, but this time tests revealed that the member had stage V chronic kidney disease and had to start dialysis. The member is now home and is slowly improving. He/she credits President Obama and the Affordable Care Act for saving his/her life. The member feels that without the ACA, they would have never found a doctor to take the time to perform a thorough enough examination leaving their various illnesses undiagnosed and untreated.

Passport

May, 2014

- ✓ At a recent health fair event, Passport Director of Community Engagement Dana Moody struck up a conversation with Alicia*, a local vendor for the eye clinic sitting next to her table. Alicia identified herself as a Passport member and expressed concern that she had not received her ID card. Instead of simply referring her to a phone number, Dana took the time to care by dialing Member Services with Alicia on her work cell phone. Our Member Services team identified the problem, assured Alicia the card would be mailed out, and gave the phone number to access services in the meantime. After they hung up, Dana also explained to Alicia that she would need to make sure her number was corrected at the State level; otherwise it would continue to override in our system. Alicia was impressed that the issue was resolved so quickly, and expressed confidence in contacting our Member Services team in the future. These are the types of above and beyond services that our Community Engagement representatives provide in the field on a daily basis. Their work supports Passport's ongoing efforts to increase member satisfaction and decrease barriers to care. Last year, this team participated in over 800 community events throughout Kentucky. Events consisted of member education; school and health promotion outreach; community and health fair events; civic, business and chamber of commerce involvement; cultural and linguistic services; and special populations outreach.
- ✓ Tabitha*, a Passport member with coronary artery disease, diabetes, and a history of stroke, recently had a double heart bypass. When Disease Manager Ron Keene checked in with her post-surgery, Tabitha reported a recent drainage from the surgical site. Ron educated Tabitha on the signs of infection and the importance of following up with her doctors regarding drainage. He informed her of the recommended screenings for her diabetes and discussed how to prevent and manage her cardiovascular disease by complying with her doctor appointments and medications, not smoking, and adopting healthy dietary habits (low fat/low cholesterol/low sodium/limited foods high in sugar and low in nutrition) and exercise per her doctor's instructions. Tabitha indicated she has started eating healthier, has stopped smoking and is taking medications as directed. She has also seen the surgeon and made an appointment with her cardiologist for an outpatient cardiac rehab evaluation. These types of efforts have helped Passport to rank slightly above the 50th percentile in Counseling for Physical Activity (total) for national HEDIS® in 2013. Nutritional Counseling for HEDIS 50th percentile.
- ✓ When Passport member Larry* called with questions about our Member Rewards program, he was impressed with the friendly service he received from Case Management Technician Kara Whaley. Kara gave Larry all the information he needed to get the reward gift cards. She also looked up which additional rewards he qualified for and the necessary steps he needed to take to obtain them. Larry said he is so happy with Passport and that he has NEVER worked with a "more friendly" group of people. He said this is the NICEST ORGANIZATION EVER. Larry's compliments reflect the Passport Promise, our commitment to always put our members first. This member-first focus has helped us to obtain a long history of high member satisfaction scores.
- ✓ Passport member Chad* has a history of heart disease and was recently admitted to the hospital for a heart attack. After his release, Disease Manager Ron Keene called to check in, ensure he had follow-up appointments with his cardiologist and PCP, and educate him on proper diet, exercise, and medication use. While speaking with Chad, Ron uncovered a risk for depression and quickly referred Chad to Passport's Behavioral Health program for additional assessment and education for depression. Thanks to his help, Chad is now knowledgeable on the best prevention and management of his heart disease, understands his medications and is taking them as prescribed, knows how to take nitroglycerin tablets and when to call 911 with symptoms of heart attack, recognizes the importance of exercise and weight management, and plans to discuss activity recommendations at his next doctor appointment. He also has the resources to help with his signs of depression. Depression is 3 times more common in patients after a heart attack than in the general population, with 15% to 20% of heart attack victims qualifying for a diagnosis of major depressive disorder, and a far greater proportion experiencing increased levels of depressive symptoms. Passport routinely refers to our Behavioral Health Program via Beacon when

signs of depression or mental health occur during member contact.

- ✓ A nurse care manager on Passport's Mommy Steps team recently spoke with Tammie*, a pregnant Passport member who drove herself to her doctor's office after experiencing persistent vomiting for several days. Our nurse encouraged Tammie to call an ambulance if persistent vomiting continued. She also spoke with Tammie about healthy eating and dental care during pregnancy, and gave her several smoking cessation resources. Tammie stated a great appreciation for Passport and all the help she has received from our Plan. She has promised to start trusting her own judgment and reaching out for emergency/ambulance help when needed to avoid unnecessary complications for herself and her baby. In 2013, our Mommy Steps outreached by phone, mail and in person to 6,091 pregnant members with an average of 1,523 per quarter.
- ✓ When new Passport member Michael* had a heart attack, he was perplexed. He ate well, got plenty of exercise from mowing lawns, and very recently tried to stop smoking. Although he had experienced an unexplained stroke 25 years ago, Michael had no history of heart disease. When Disease Manager Ron Keene called to check in with Michael post-surgery, he learned that Michael hadn't seen a primary care provider (PCP) in over a year and was experiencing a knot in his groin area from the catheter. Ron applauded Michael's efforts to get healthy, took the initiative to help Michael find out which PCP he had been assigned to, and worked through numerous scheduling conflicts to get Michael in to see his PCP and obtain a referral to see a cardiologist. Ron also advised Michael on warning signs of when to contact his PCP office or ER for his groin, such as bleeding or worsening of the knot. He educated Michael on Passport's smoking cessation benefits and various strategies to assist him with quitting. After their phone call, Michael expressed confidence in knowing how to prevent and manage his disease by complying with his doctor appointments and by living a healthy lifestyle. He promised to continue eating healthy and stop smoking. Instead of mowing the lawn, he has started walking as a way to get exercise until his doctor approves more intense exercises. These types of efforts have led Passport to rank above the 50th percentile in Counseling for nutrition (total) for national HEDIS®** in 2013.
- ✓ At three recent community engagement events in Region 8, Passport's Community Engagement representative David Grigsby assisted Passport members who had been experiencing difficulties accessing care. In each instance, David took the time to care by allowing the members to use his cell phone and speak with our Member Services department. Our Member Services team immediately identified the problem and educated the member on the appropriate steps to take to receive necessary care. In every instance, our members left very happy and we were able to resolve the issue on the spot for them. One member was particularly thrilled with the encounter. Although she has only been with Passport for one month, she reported being very happy after nearly everything was covered during a recent hospital stay. She commented how sweet Passport has been every time she calls Member Services, and that she actually looks forward to calling Passport with her questions. To date in 2014, Passport has assisted numerous members in a similar fashion at 155 community engagement events.
- ✓ After Mick* recently had a heart attack, he desperately needed to change his life around. His sister helped to take care of his insurance, medications, and doctor appointments. Disease Manager Ron Keene helped to educate Mike on eating healthy and potential non-impact exercise methods that his PCP might consider acceptable with his other complications. He also provided additional tips to help Mick manage his coronary artery disease through compliance with doctor appointments, medications, weight management, and smoking cessation. These types of efforts have led Passport to rank above the 50th percentile in Counseling for nutrition (total) for national HEDIS® in 2013.

**Members' names changed for privacy.*

WellCare

May, 2014

- A 50 year-old unemployed, single mother recently qualified for Kentucky Medicaid benefits and was assigned to WellCare. She has multiple medical conditions, including hypertension, fibromyalgia, hepatitis A and asthma. She was also previously diagnosed with depression and bipolar disorder. When a WellCare case manager visited the member's home to conduct an initial assessment, she found that the member was depressed and withdrawn. She had not bathed in 10 days, and her teenage son was missing school because the member could not get out of bed to drive him to school. The member told the case manager that she had not been able to maintain employment over the past few years because she misses too many days due to her depression. The son was left to care for himself, and the member was not seeing any doctors or taking any medications. The member also smokes, which has contributed to her asthma. During the home visit, the case manager identified a primary care physician for the member and scheduled an appointment for the next day. She also contacted a mental care therapist and scheduled an appointment for the

member. The case manager facilitated communications between the member's family and doctors who determined that it was best for the member to receive treatment at a local mental crisis center until she was stable. The case manager worked with the member's sister who agreed to care for the member's son while she was in the crisis center. She also worked with the member's sister to initiate an application for the member to receive disability incentives. The case manager made several social services referrals for the member, including a smoking cessation program, assistance with the purchase of eyeglasses, local food bank assistance, a utility assistance program and a low-income housing program.

The member is currently receiving mental health support and is seeing doctors to address her medical needs. Thanks to the quick intervention of her case manager, the member's mental state and physical health are improving, and she is looking forward to a better, healthier future.

- A 53 year-old WellCare of Kentucky Medicaid member with chronic obstructive pulmonary disease (COPD) is a long-time smoker and requires oxygen to help her breathe. This member was enrolled in WellCare of Kentucky's Medicaid program several years ago, and since then, WellCare case managers have worked to educate her about her condition and options to help her stop smoking. Despite WellCare's efforts, the member was unwilling to address her smoking habit or to accept case management support.
Recently, the member was hospitalized with pneumonia. During her hospitalization, she suffered respiratory failure and was placed on a life-support ventilator. Her doctors told her that the pneumonia was related to her smoking and that she might die from the condition if she did not quit. When the member was discharged, she received nicotine patches, and a WellCare case manager contacted her for consent to conduct a home visit. This time, the member agreed to meet with the case manager.
During the home visit, the member told the case manager that she was afraid of dying and that she really wanted to quit smoking for good. She said that she was willing to try the nicotine patches, but didn't think she could afford to buy them once she finished using the supply from the hospital. She asked about the smoking cessation program that WellCare had spoken to her about over the years.
The case manager explained the smoking cessation services offered to WellCare of Kentucky members in detail, and informed the member that nicotine patches could be obtained at no cost through WellCare's pharmacy program. The case manager helped her to schedule an appointment with her primary care physician and put her in touch with a WellCare disease manager to begin the program.
The member followed through with her doctor's appointment and is working with a WellCare disease manager to stop smoking so she can live a longer, healthier life.
- A new mother and her premature baby are both WellCare of Kentucky Medicaid members. After the newborn was sent home from the hospital, a WellCare case manager visited the family for an in-home assessment. The case manager was told that the baby was having trouble breathing when he was lying down completely flat. The member also said that the hospital was supposed to have given her a sleep apnea monitor to help her detect if the baby was struggling to breathe. The mother did not receive the monitor and was so afraid he would stop breathing, that she slept holding him upright each night. She said she tried to contact someone at the hospital for help, but was unsuccessful.
The case manager immediately called the hospital and spoke with the member's nurse practitioner. The nurse was aware of the situation and said that she had been trying to get in touch with the member, but did not have a current phone number. The nurse practitioner said that she would order the monitor immediately and agreed to see both mother and child that same day.
Because of the case manager's intervention, the issue was quickly resolved. The members received a medical consult that same day and were provided with a sleep apnea monitor. The mother can now rest knowing that she will be alerted if her baby needs help.
- A 63 year-old WellCare of Kentucky Medicaid member has diabetes and hypertension. The member was hospitalized for complications due to these conditions. During his stay, he was visited by a WellCare social services nurse. She noted that he had not seen a primary care physician (PCP) in over a year and did not have medication for his diabetes or hypertension. The nurse also determined that he required behavioral health support and referred him to a community mental health center. She helped the member identify a primary care physician, provided the member with instructions for the mental health center, and scheduled appointments and transportation for him. The member did not attend the appointments.
WellCare case manager called the member to check on him and to encourage him to go to his PCP and the mental health center. The member was unwilling to go, so the case manager arranged to meet the member at his home. During the home visit, the case manager discovered that the member had paranoid delusions and refused to leave his home because he feared that people would harm him. The case manager also documented that he was living in a filthy

motel room that was infested with insects and rodents, and smelled strongly of urine due to a urinary retention issue he had not previously disclosed.

The case manager was able to earn the member's trust and he agreed to have a mental health counselor visit him at home 1-2 times a week for therapy. The case manager also convinced the member to agree to have a nurse visit him each week to check his blood sugars and pressure, and to ensure that he was taking medication. The case manager ensured that medication and groceries would be delivered to the member's home on a regular basis, and she worked with the mental health center to get the member's carpets shampooed. Additionally, she was able to work with various organizations to get the member a new chair, mattress, rubber sheets, microwave and refrigerator.

The member is still struggling with the fear of leaving his home, but he is surrounded by improved living conditions and is receiving in-home medical and mental health support on a weekly basis. With transportation support and encouragement from his case manager, he is actively seeing a primary care physician and his overall health is improving

Anthem

May, 2014

- Recently an Anthem Blue Cross and Blue Shield member was in need of prescriptions and was told by her pharmacy that her ID number was invalid. She paid out of pocket for her prescriptions that she urgently needed. An Anthem Member Liaison contacted her and advised that we had updated her information in our system and offered to contact the pharmacy in order to have her reimbursed. The member had actually paid several times out of pocket since January. The Member Liaison contacted the pharmacies and they all agreed to rebill the pharmacy claims to Anthem and reimburse the member. The member was very happy and stated that it had made her day.
- The same Anthem Member Liaison also worked with a different member who had paid out of pocket for several prescriptions, including his insulin. The Liaison also contacted this member's pharmacy and had the claims rebilled and the member reimbursed. The pharmacy agreed to review the member's prescriptions through January and reprocess any that had been paid out of pocket and the member could pick up any reimbursements the next day. The member's wife was overjoyed and stated that she wished there were more people in the world like our Liaison.
- To date, almost 20% of members have returned the Health Risk Assessment form that were sent to members. Many of the responses contain notes from members such as:
"Thank you for being there for us in our time of need."
"This is the first time I had insurance since I was 8 or 9."
" I am grateful for your help; I need to go to the dentist."
One member wrote that he was indigent, had no family to help him as they have all died, has no transportation and could not get out. He state that he was depressed and has now been referred for Behavioral Health Case Management. A second member needed diabetic supplies for her insulin pump. Our Case Manager was able to confirm a vendor for all of her needs. She was very excited to have everything taken care of for her.

CoventryCares

May, 2014

- ❖ Member is a 25 year old female identified for the lock-in program due to high utilization in pharmacy and providers. The member is locked in to a PCP and Pharmacy. The member called Alicia Golden on March 28, 2014 regarding a pharmacy change and she also had additional questions for the lock-in coordinator. The request was flagged as "urgent" in the Kentucky Medicaid Lock-in Queue.
The member was educated on the Lock-in Program and advised the she was only allowed to be assigned to one pharmacy. The pharmacy change was approved and the member was satisfied with the outcome.
The member called back upset because she had to pay out of pocket for her eye medication. The MedCo system was checked to verify that the member healthcare provider was her optometrist and that he had prescribed Neomycin-Polym-Dexameth Eye Drops. The member's healthcare provider's NPI number was loaded in the MedCo system. The pharmacist was then notified and agreed to reverse the claim and resubmit so that the member could be and reimbursed. The member was then notified that she could go pick up her reimbursement. Member was pleased with the outcome and a positive rapport was established. Member has agreed to enroll in Lock-in case management program. The member has now been assisted with obtaining referrals from her PCP to see specialists and has kept scheduled appointments without delay or interruption of care.