

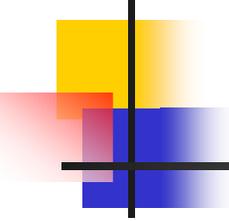
Managed Health Care Pilot Program

State of Connecticut
North Region

Department of Developmental Services

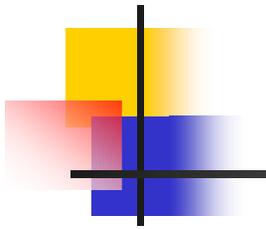
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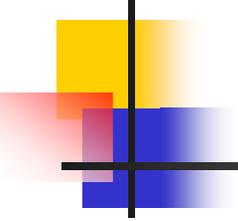
Purpose:

- To evaluate the medical oversight needs of individuals residing in their own homes.
- To determine the impact of a nurse coordinator role in healthcare management.



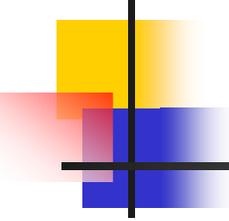
Initiation of Managed Health Care Pilot

- Managed Health Care Coordinator hired April, 2007
- Responsibilities
 - Assessment, education and assistance with coordination of healthcare
- Criteria for participation
 - 35 consumers living in their own homes
 - Identified health risks
 - Individualized supports
 - Served by private provider or an individual hirer approach



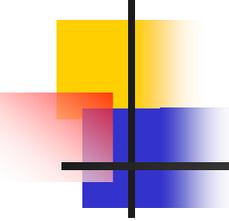
Initiation of Managed Health Care Pilot

- Control Group
 - 25 consumers
 - Identified health risks
 - Served by private providers not involved with Pilot study



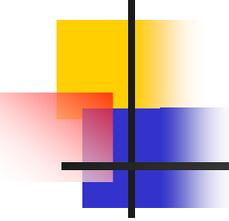
Initial Intake

- Initial meetings
- Chart reviews
- Home visits
 - Nursing assessment
 - Conferencing with staff
- Control group chart reviews
 - Inability to use control group to determine outcome data



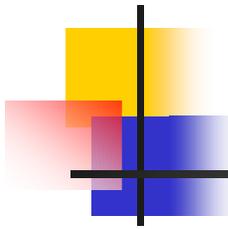
Identifying Health & Safety risks

- Initial intake
- Quarterly/Annual/Crisis meetings
- Hospital/SNF discharge meetings
- Ongoing contacts with support services



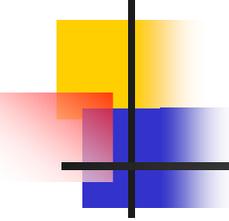
Examples of Identified Health & Safety Risks

- Medication noncompliance
- Inaccurate OTC medication usage
- Multiple tooth loss/rapid eating tendencies-choking risk
- Inaccurate medical equipment usage
- Home safety
- Diet noncompliance



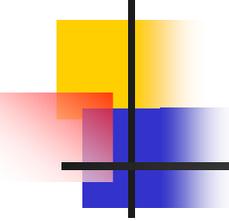
Data Summary

- Supports adjusted as issues identified
 - Residential supports added for medication, diet and medical equipment management
 - Agency nursing supports for medical oversight added for 3 individuals
 - Intermittent VNA direct care nursing supports added for 12 individuals
 - Behavioral supports added for 7 individuals



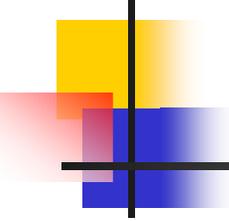
Data Summary

- Other Supports added
 - 8 Lifeline services
 - 9 Pharmacy pre-fill services
 - 11 PT/OT services
 - 11 Dietitian services
 - 7 Swallowing evaluations



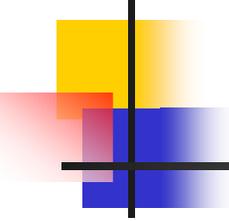
Data Summary

- 53% reduction of missed appointments
- 68% reduction of ER evaluations
- 36% reduction of hospitalizations
- An additional 153 medical/mental health issues identified



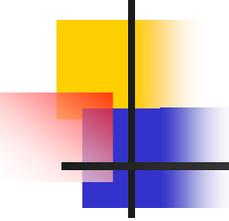
Support Service Issues

- Agency Nursing Supports
 - Minimal due to IHS not having a funding stream for this support.
- VNA Nursing Supports
 - Lack of communication
 - Early discharge of services
 - Limitations in training to consumer only
 - Inability to commit to specific times
 - Lapse in service and medical information transfer



Support Service Issues

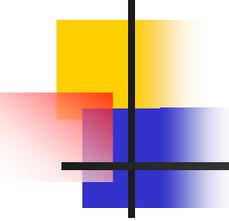
- Observed Behavioral Support Issues
 - Delayed initiation of services
 - Lack of communication between agency/behaviorist
 - Lapse in service due to agency transfer
 - Lack of understanding as to nurse role with mental health/behavioral issues



Conclusions

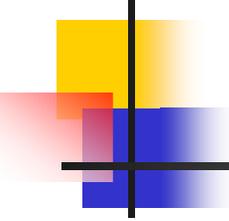
- Individuals with enhanced medical and mental health issues, especially with the aging population, benefit from the medical oversight of a Nurse Coordinator, as evidenced by:
 - Increased support services
 - Improved adherence to appointments
 - Decreased ER visits/hospitalizations which resulted in an estimated cost savings of \$104,099.*

*Estimated savings based on average charge for ER visit & average charge for medical hospital admission at 11 CT hospitals.



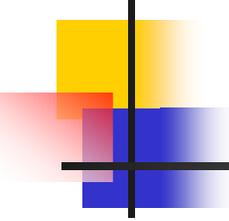
Conclusions

- Funding sources need to be pursued through working with the department's waiver unit for health care coordination. This is now a cost free, waived service.



Recommendations

- Training for agency support staff and DDS case managers which includes the criteria to identify individuals who would benefit from health care coordination and assist in establishing the baseline nursing resources. We found the following criteria:
 - Increased 911/ER visits/Hospitalization/SNF stay
 - Poorly controlled medical conditions
 - Poly-pharmacy
 - Aging consumers
 - Mobility changes/fall risk/choking risk



Recommendations

- Provider agencies to be cognizant of the health care issues to be recognized and addressed in the plan when completing the LON and IP.
- Continued work with agency staff on effective communication and collaboration with VNA's, hospitals and health care providers to address the IHS consumers needs.