

Implementation of A Centralized Medical Case Management System

RWA-457:

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HIV/AIDS Bureau Definition of MCM

- **HAB DEFINES MEDICAL CASE MANAGEMENT** as a range of client-centered services that link clients with health care, psychosocial, and other services. Coordination and follow-up of medical treatments are components of medical case management. Services ensure timely, coordinated access to medically appropriate levels of health and support services and continuity of care through ongoing assessment of clients' and key family members' needs and personal support systems. Medical case management includes treatment adherence counseling to ensure readiness for and adherence to complex HIV/AIDS regimens. Key activities include (1) initial assessment of service needs; (2) development of a comprehensive, individualized service plan; (3) coordination of services required to implement the plan; (4) client monitoring to assess the efficacy of the plan; and (5) periodic reevaluation and adaptation of the plan as necessary over the life of the client. It includes all types of case management, including face-to-face meetings, phone contact, and any other forms of communication.

History/ Background

- The Ryan White Office in Hartford, Connecticut was concerned about fragmentation in the delivery system prior to 2006.
- Results of a full chart audit in 2007 demonstrated superior coordination of care in Tolland County (one of three counties in the Hartford TGA).
- Based on this input, the Ryan White Office moved to convert the TGA to a centralized Case Management model with support from the Planning Council through their directives.

History/ Background

- Historically Ryan White Parts A, B, C and D funded multiple agencies and community health centers to provide psychosocial case management services through a competitive bid process.
- Each agency or community health center was responsible for the administration, clinical supervision and training of) psychosocial case managers (CM). Part B offered some training.
- Minimal interaction between Parts occurred and the RW psychosocial CM services varied greatly throughout the state. Clients frequently changed CM in search of “better” services.

History/Background

- In December 2006, the Ryan White HIV/AIDS Treatment Modernization Act changed to include medical case management as a core service and allow other models of case management to be funded under support services.
- In Summer of 2007, all Ryan White funded Parts met to agree on a uniform definition of medical case management that contained all activities defined by HAB. The collaborative working group developed a set of core standards of care, with indicators and outcomes reflecting minimum expectations for delivery of medical case management in Connecticut for all Parts. Core standards apply in both community and clinic-based case management programs. Each Part was given the option of adding to (but not deleting from) the core standards to meet the needs of its service populations. The standards went through an approval process by the Part A planning bodies .

Implementation of Hartford TGA Model

- In 1998, the Executive Director of AIDS Project Hartford and the VNHSC AIDS Program Director attended a national HIV/AIDS conference. A presentation resulted in the realization that case managers could be trained to incorporate basic medical assessments into their client encounters.
- A multidisciplinary team convened to develop a medical/psychosocial assessment encounter tool. The multidisciplinary team consisted of RW psychosocial CM, community representatives, medical, mental health, substance abuse and housing providers. This process took approximately nine months, including piloting the encounter assessment tool.

Implementation of Hartford TGA Model

- In 2006 HRSA announced that MCM would be a core service but gave limited directives. The Hartford TGA grantee funded a part time clinical nurse HIV/AIDS specialist to provide clinical supervision to implement a RW MCM model in the then centralized model. The assessment tool was the major component of this new medical model.
- A gradual shift towards increasing the number of RW psychosocial CM in medical settings expanded with the directive by the Hartford TGA grantee that placement of MCM in medical settings occur.

Implementation of Hartford TGA Model

- Extensive MCM trainings included HIV pathogenesis, uses, side effects and adherence of medication, appointment tracking, assessment and documentation skills, client quality of life issues and the need to follow up on all client issues.
- Monthly clinical record review of each MCM ensures accurate implementation of the MCM model. Expansion of the clinical record review process incorporates case study trainings on MCM clients.
- Mandatory monthly MCM team trainings expand the MCM knowledge base of HIV disease related topics, changes in entitlement eligibilities and availability, and addresses emerging issues.

MEDICAL CASE MANAGEMENT ASSESSMENT TOOL

Client ID# _____

Update from last visit: _____

Last App Date ____ With ____ Outcome ____ Date ____ With ____ Outcome ____
 Hospitalization Date D/C ____ Outcome ____ ED/Urgent Care Date ____ Outcome ____
 Next App Date ____ With ____ Date ____ With ____ Date ____ With ____
 Transportations Problems: _____

<u>Physical</u>	<u>Mental Health</u>
Change in body appearance? _____	Are you having trouble doing the things today that you used to be able to do before? Yes _____ No _____
Clothes fit differently? _____	
Weight & change: _____	Circle: ADL'S Hobbies Shopping Finances
Fatigue? _____ Skin problems? _____	Appetite: Good Fair Poor
Headaches? _____ Dizziness? _____	Sleep: Good Fair Poor
Vision changes? _____	Energy: Good Fair Poor
Short of breath? _____ Cough? _____	Anxious? _____
Problems with stomach, e.g.? _____	Depressed? _____
Nausea/Vomiting/Diarrhea/Constipation/Bleeding? _____	Suicidal? _____
	Homicidal? _____
Problems with extremities? _____	Forgetfulness? _____
Experiencing pain anywhere? _____	Hallucinations? _____
Severity (0-10) _____	



Social Issues

Change in living arrangements? _____
 Change in relationship(s)? _____
 Domestic Violence? _____ Sexual Assault? _____
 Smoke cigarettes? _____ Drink beer or alcohol _____
 Actively smoking pot? _____
 Actively using crack/cocaine? _____
 Actively using heroin? _____
 Any club drug use? _____
 (Ecstasy, MDMA, ketamine, rohypnol, meth, LSD)
 Buy prescription drugs on the street? _____
 Which ones? _____
 Attending group or counseling? _____
 Methadone clinic? _____
 Sexually active with ___ or without ___ protection? ___ not active?
 Do you tell your sexual partners that you are HIV+? Yes ___ No ___
 Do you know your sexual partners HIV status?
 Yes ___ No ___ Partner(s) HIV- or HIV+
 Difficulty paying bills/obtaining food? _____

Medication Adherence

Do you know the names of your medications? Yes ___ No ___
 Medication changes: _____

 How/what helps you remember to take your meds? _____

 Who helps you take your meds? _____
 Do you sometimes miss doses of your
 meds? _____
 Why? _____

 How many doses in a week do you forget to take?
 1 3 5 7 9 More
 Do you take any supplements? Yes ___ No ___
 ___ Vitamins? ___ Herbals? ___ OTC

Client's Appearance

Hygiene: Poor ___ Fair ___ Good ___
 Appearance: _____
 Affect: _____
 Mood: _____

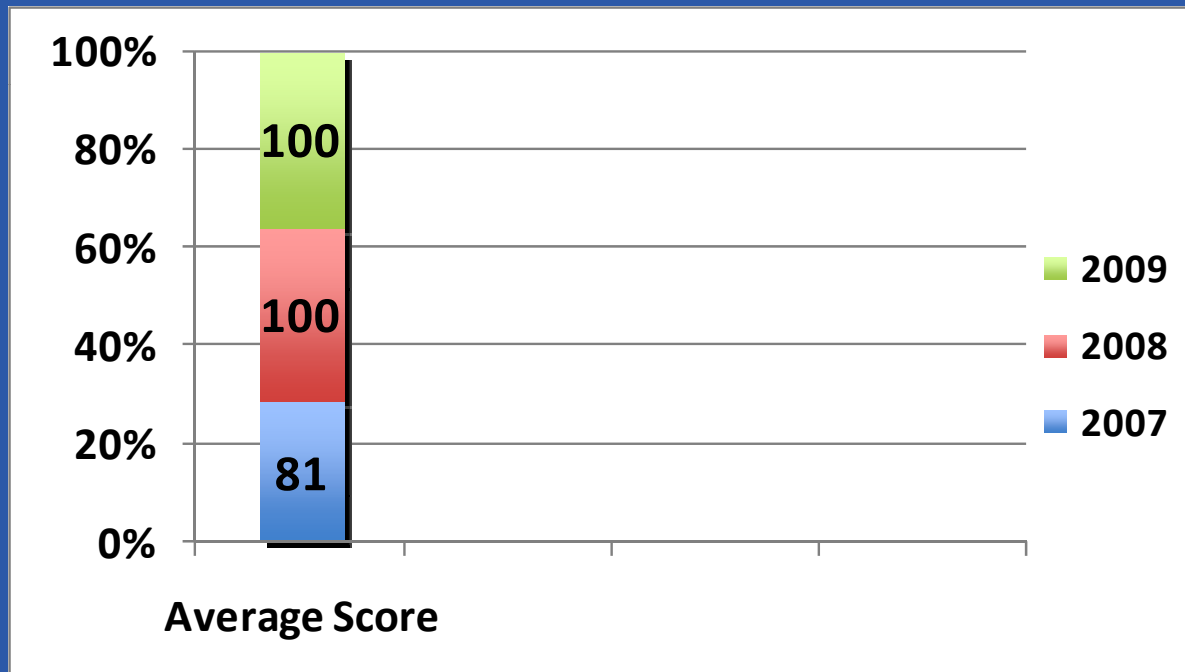
Comments / Follow-Up

Signature: _____ **Date:** _____



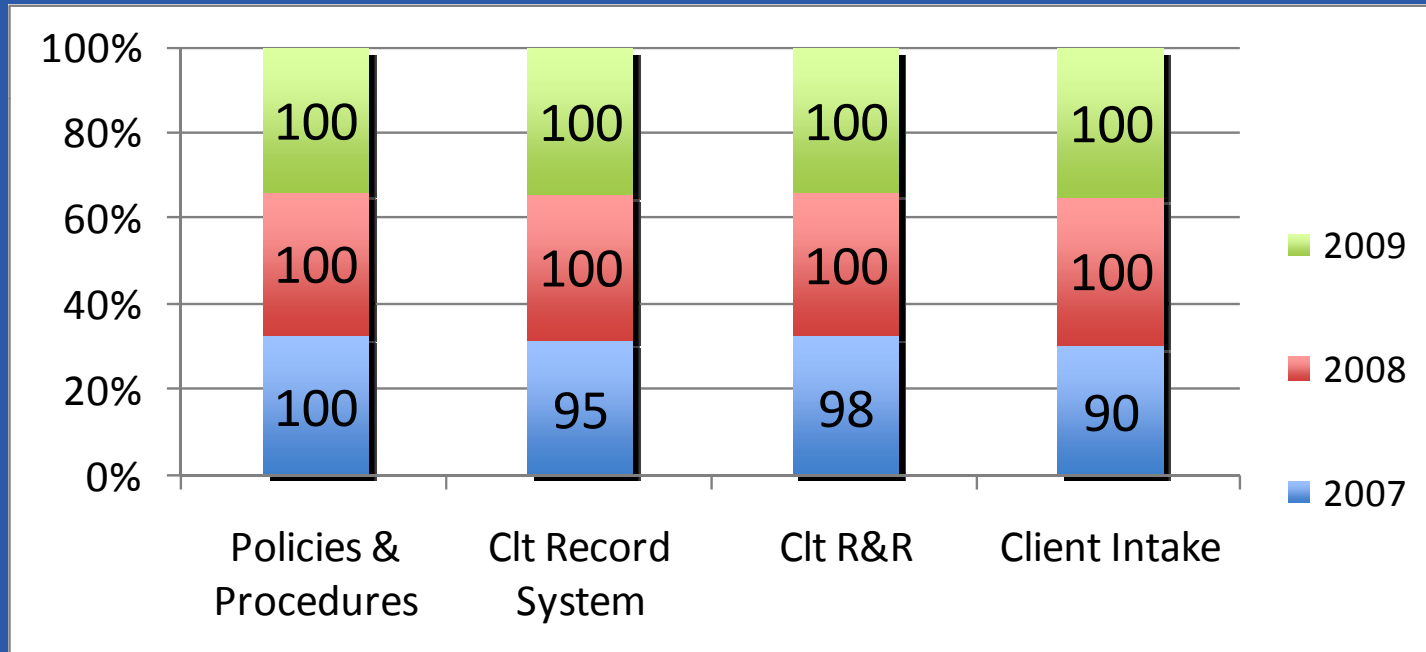
Results

Medical Case Management Standard of Care Compliance Scores have consistently been 100% in the Hartford TGA (statewide standard) in the past two years among 9 distributed sites.



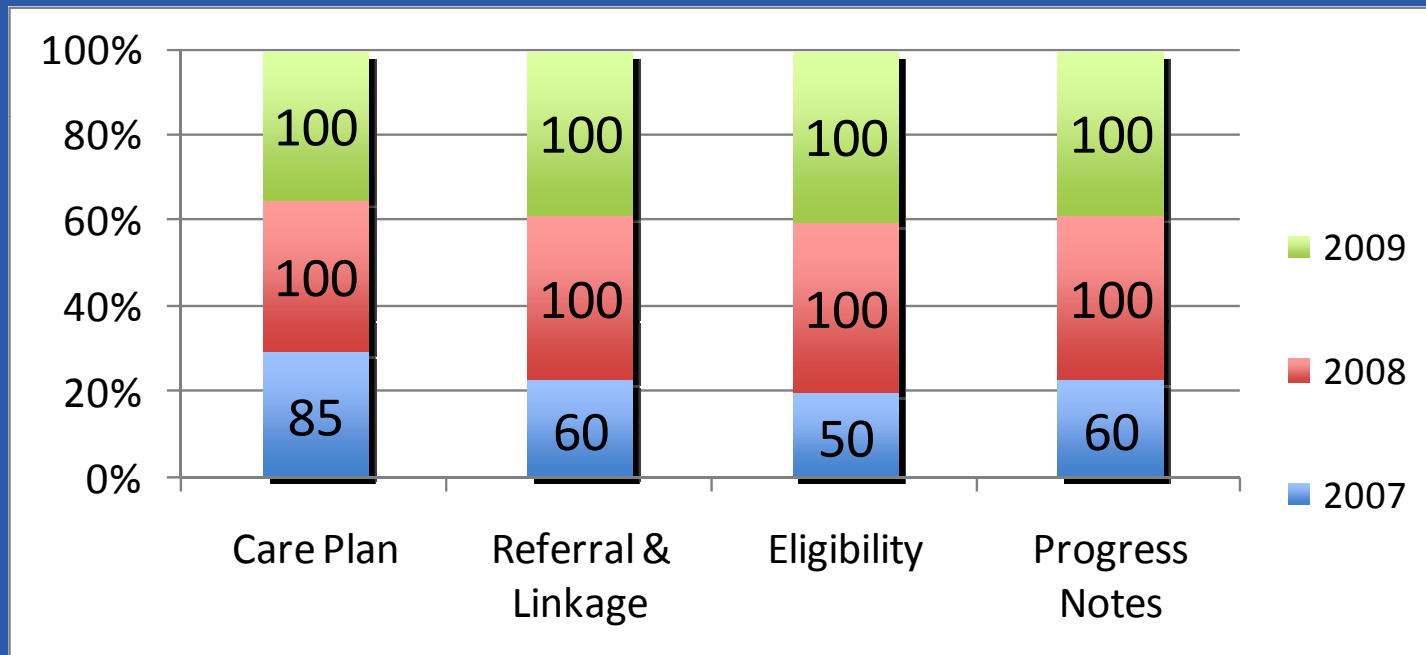
Results

A statewide Standard of Care was developed through all Ryan White Parts and facilitated through Technical Assistance from HRSA . This standard consists of 8 categories. The Hartford TGA consistently complies with all categories in that Standard.



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Results

PROS

ONE VOICE

CONTINUITY OF CARE

FLEXIBLE COVERAGE

END OF CLIENT 'SHOPPING'

COMPREHENSIVE CARE

FOLLOW-UP: ON
REFERRALS, BARRIERS,
RESOLUTION OF BARRIERS

CONS

CASELOAD (AVG OF 35
CLIENTS) DUE TO
INTENSITY OF SERVICE

LOSS OF CM THAT COULD
NOT COMPLY WITH
DOCUMENTATION

SOME CLIENTS LIKE TO
'CM SHOP' WITHOUT ANY
RESTRICTIONS

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