

Goals and Objectives

- Understand Program Goals
- Who is Eligible
- Program Design and Components
- Confirming Enrollees and Referrals
- Provider Engagement The Critical Success Factor

5 Year Demonstration Program launched June 1, 2014!

Shared Program Goals

The Care Management Organization Will Improve...

Quality of Care



Health Outcomes



Satisfaction



Cost Reductions



Who is Eligible to Participate

The Health Care Guidance Program Will Serve...



Participation is mandatory

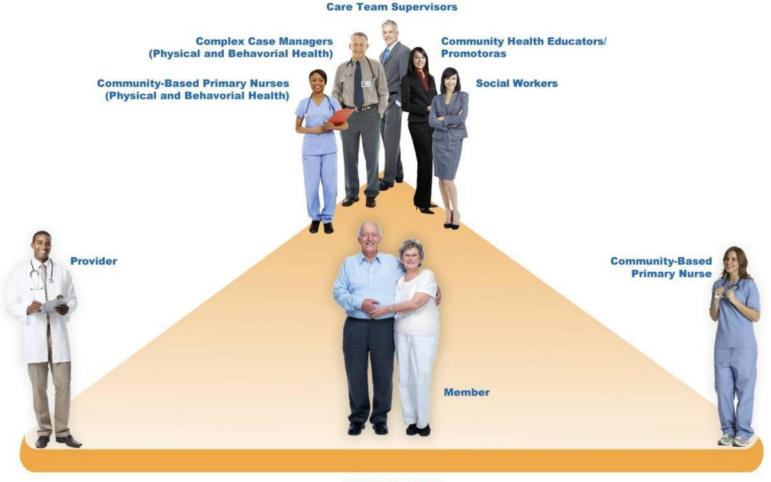
Medicaid Populations Excluded

Who is not eligible to participate?

- Dual-Eligible's
- Adoption assistance, foster care
- Home and Community Based service Waivers (Section 1915c)
- Those receiving Targeted Case Management (TCM)
- MCO enrollees
- Nevada Check-Up enrollees (CHIP)
- Emergency Medicaid
- Residents of Long-Term Care facilities / SNF
- New eligible's/Childless Adults

Program Delivery

Care Management and Coordination



COMMUNITY

Recipient Evaluation

Opportunity for Collaboration



Claims and Provider data
UM Authorizations
Data from Agencies

- Physical Health
- Emotional Health
- Psychological Health
- Functional Status
- Current Health and Health History
- Self Management Knowledge
- Current Treatments
- Support for using a PCP

Core Program Components

The Care Management Organization Will Provide...

Enrollee Services

- Mailed materials, surveys, enrollee handbook
- Health Education/ Coaching
- 24x7 Nurse Advice Line Support
- Eight Care Management Programs
- Online Health Resources
- Assistance with confirming transportation, making appointments, etc

Provider Services

- Member/ Provider Linkage
- Clinical Care Alerts
- Provider Outreach
- Provider Portal
- Provider Profiling
- Practice Improvement

Administrative Services

- Population Profiling
- Enrollment and Disenrollment
- Medical Records
- Quality Assurance
- Grievances
- Technical Infrastructure
- Reporting

Healthcare Management

Nurse Advice Line, Educational Outreach, and Episodic Interventions



VITAL Health
Coaching Empowers
Enrollees to be Active
in Self-management



82%

of Callers with a Pre-intent to Seek Care at ED are Redirected to a Less Costly Level of Care

All Nurses are
Licensed in the
State Where the Call
Originates

Our certified and accredited nurse advice service, staffed by an experienced team of nurses, is available 24x7 to direct your Enrollees to the most appropriate level of care

Assistance finding a PCP

Comprehensive Enrollee Handbook and mailed outreach materials

Commitment to Nevada

Steps To Support Our Local Presence

- Established local office for management staff
- Hired local leadership team:
 - Full-time Executive Director
 - Full-time Medical Director
 - Full-time Operations Manager
 - Part-time BH Medical Director
 - Full-time BH Program Director
- Hired Nevada-based care management staff
 - Aligned hired staff to location of members
 - Diverse clinical and case management experience
 - Experience with current care and resources in community
 - Medical & Behavioral Health Care Managers, RNs, Social Workers, Lay Educators, Health Resource Coordinators & Supervisors



Confirming Enrollees and Referrals

For FFS Medicaid Beneficiaries

- Confirm enrollment through EVS: "HCGP" FFS
- •Contact Us: 1-855-606-7875, option #2 for providers
- Fax Real Time Referral Form:
 - DHCFP website under Care Management Organization & 1115 Waiver tab
 - Secure Fax: 1-800-542-8074
 - Attach additional clinical as appropriate
- •Log into portal: www.nv.guidance.vitalplatform.com/providerportal/nev
 - Call 1-855-606-7875, option #5 to get log in details

Provider Engagement is Critical

Good Primary Care Improves Outcomes and Reduces Costs





- Provider Awareness and Role in Care Planning
- Improved Clinical Metrics Patient Outcomes
- Engage Thought Leaders
- Reduce Inappropriate Utilizations
- Enhance Coordination with Behavioral Health and Other Specialists
- Increase the Number of Enrollees Under Management
- Provider Education and Spread of Best Practices

Questions?











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