

Comprehensive Care Management: Trends from Approved Health Homes SPAs (July 2014)

Idaho, Iowa, Kansas, Maine, Maryland, Missouri, New York, North Carolina, Ohio, Oregon, Rhode Island, Wisconsin

Areas of Commonality:

- Comprehensive, Individualized Care Plan: All states require that a comprehensive, individualized care plan be established for each health home patient. The care plan is based on a health risk assessment that each health home conducts on eligible enrollees.
- Physical and Behavioral Health Integration: All states also specify that all care plans should incorporate a patient's physical and behavioral health needs.
- Family Involvement: 9 states (ID, MO, NY, NC, OH, OR, RI, KS, MD) require that the patient's family be incorporated in the initial health assessment but also in subsequent reassessments and changes to care plans.
- Period Reassessment of Care Plans: 9 states (same as above) also require that the care plans be reassessed based on patient's progress or changes in patient needs. Based on the reassessment, care plans should be revised. OH is the only state that specifies the exact time frame when care plans should be reassessed which is within 90 days. Maryland requires monitoring of the individual health status and progress towards ITP goals, documenting changes and adjusting care plans as needed, twice annually minimally.

Areas of Variation:

- Initial Risk Assessment and Screening Tools: Although all states are conducting a health risk assessment that incorporates the patient's medical, behavioral and social history, a few key differences stand out:
 - ME and NC also use claims data and hospital utilization to inform their initial risk assessment
 - IA mentions the use of a specific screening tool in patient assessment
 - ID and IA also specifically mention conducting a depression screening as part of the assessment process, although we can assume that many of the states, especially NY, conducting behavioral health assessments are most likely also conducting depression screenings.
 - MD uses Medicaid, hospital and pharmacy data from the state-run Chesapeake Regional Informational System for Our Patients (CRISP) to inform assessments. _
- Chemical Dependency/Substance Abuse Screening: 4 states (IA, ME, NY and OH) require a substance abuse/chemical dependency screening be conducted as part of the initial health assessment.
- Culturally and Linguistically Sensitive Care Plans: ID, OH and KS also ask that the care plans be culturally sensitive and in the case of Ohio, care plans must meet linguistic/literacy needs.
- Education Level of Staff: RI is specific about education level of staff providing case management services – only Masters level individuals can provide certain services.

Best Practices:

- Referrals Tracking: ID and NY both require that all referrals for services are tracked to ensure that the care was actually delivered and the outcome.

- Tracking Care Plan Goals: 6 states (ID, ME, MO, NC, OR, NY, KS) mention tracking goals of the care plan. While ID and ME are not very specific about how and when to track progress, NY health homes must have specific goals and time frames for improving the patient's health. MO and OR also require that health homes conduct population-level panel management of health home patient needs and progress. KS refers to tracking of the health assessment plan (HAP) through quality metrics, assessment survey results and service utilization to monitor and evaluate intervention impact.

Table 1: Matrix of Comprehensive Case Management

	ID	IA	KS	MD	ME	MO	NY	NC	OH	OR	RI- CMHO	WI
Care Plans												
Using a formal screening tool		x										
Health risk assessment includes medical, behavioral and social history	X	x	X	X	x	x	x	X	x	x	x	x
Using claims data				X	x			X			X	
Chemical Dependency / Substance Abuse		x	X	X	x		x		x			
Family involvement	X		X	X		x	x	X	x	x	x	
Periodic reassessment and changes to care plan	X		X	X		x	x	X	x	x	x	
Depression screening	X	x										
Referrals Tracking	X						x					
Case Management Staffing					x		x		x		x	
Measuring Impact of Interventions	X		X	X	x	x	x	X		x		
End of Life care		x	X									