Managing complex care

Do you have patients whose conditions need complex, coordinated care they may not be able to facilitate on their own? A care manager may be able to help.

Care managers are advocates, coordinators, organizers and communicators. They are trained nurses and other clinicians who promote quality, cost-effective outcomes by supporting you and your staff, as well as your patients and their caregivers.

A care manager connects the MHS Health Wisconsin member with the healthcare team by providing a communication link between the member, his or her primary care physician, the member’s family and other healthcare providers, such as physical therapists and specialty physicians.

Care managers do not provide hands-on care, diagnose conditions or prescribe medication. Care managers help members understand the benefits of following a treatment plan and the consequences of not following the plan outlined by a physician.

Our team is here to help your team with:
- Noncompliant members
- New diagnoses
- Complex multiple comorbidities

Providers can directly refer members to our care management program by phone or through the provider portal. Providers may call 1-800-222-9831 for additional information about the care management services MHS Health offers.

Supporting member health

As a part of MHS Health’s quality improvement efforts, disease management programs are offered to members with conditions such as diabetes, asthma and high-risk pregnancy.

The programs provide education and help members and their caregivers manage their conditions and adhere to treatment plans. The goals of the programs include:
- Increasing coordination among the medical, social and educational communities
- Ensuring that referrals are made to the proper providers
- Ensuring coordinated participation from physicians and specialists
- Identifying modes of delivery for coordinated care services, such as home visits, clinic visits and phone contacts

If you know a member who would benefit from disease management, call MHS Health Wisconsin at 1-800-222-9831 or visit our provider portal to initiate a referral.
A shared agreement

Member rights and responsibilities cover members’ treatment, privacy and access to information. We have highlighted a few below. There are many more member rights and responsibilities, and we encourage you to consult your provider manual to review them. Visit www.mhswi.com if you need a copy of the manual.

Member rights include but are not limited to:

- Receiving all services that MHS Health Wisconsin must provide
- Being treated with dignity and respect
- Knowing their medical records will be kept private
- Being able to ask for, and get, a copy of their medical records
- Being able to ask that their medical records be changed or corrected, if needed

Member responsibilities include:

- Asking questions if they don’t understand their rights
- Keeping scheduled appointments
- Having a member ID card with them
- Always contacting their PCP first for non-emergency medical needs
- Notifying their PCP of emergency room treatment

Helping moms Start Smart

Start Smart for Your Baby® is a care management program for women who are pregnant or have just given birth. We want to help women take care of themselves and their babies every step of the way, through pregnancy, postpartum and newborn periods. To take part in this program, women can contact Member Services at 1-888-713-6180. As soon as you confirm a patient’s pregnancy, submit a notification of pregnancy (NOP) to ensure MHS Health Wisconsin is aware of the pregnancy and can provide needed support and member incentives through the Start Smart program. MHS Health reimburses practitioners for completion of the NOP form. The forms are available on our website, www.mhswi.com. Only one notice and one payment is allowed per member. MHS Health will pay $75 for a first-trimester notice, $50 for a second-trimester notice and $25 for a third-trimester notice.

Keep up to date on pharmacy coverage

MHS Health Wisconsin Medicare Advantage is committed to providing appropriate and cost-effective drug therapy to its members. MHS Health Wisconsin Advantage uses a formulary that is updated throughout the year. A printed copy of the most current formulary includes the procedure for prior authorization and other guidelines, such as step therapy, quantity limits and exclusions. If you have questions about our pharmacy procedures or would like a printed copy of the formulary, please call 1-877-935-8024. You can also view the formulary at advantage.mhswi.com/content/dam/centene/MHSWI/Advantage/PDFs/2017_wi_formulary.pdf. The pharmacy benefit for MHS Health Wisconsin BadgerCare Plus and Medicaid SSI members is managed by the state of Wisconsin. You can view the Wisconsin Medicaid, BadgerCare Plus Standard and SeniorCare Preferred Drug List (PDL) – Quick Reference at www.forwardhealth.wi.gov/WIPortal/content/provider/medicaid/pharmacy/resources.htm.spage#.
Behavioral health HEDIS measures

The Healthcare Effectiveness Data and Information Set (HEDIS) is a set of performance measures updated annually by the National Committee for Quality Assurance (NCQA).

Most health plans use HEDIS to measure performance on important aspects of care and service. Through HEDIS, NCQA holds MHS Health Wisconsin accountable for the timeliness and quality of healthcare services (including acute, preventive, mental health and other services). We also review HEDIS data to identify opportunities to improve rates and ensure our members are receiving appropriate care.

Please familiarize yourself with the behavioral health HEDIS topics covered in this issue of the provider newsletter.

**Screening for depression**

The U.S. Preventive Services Task Force recommends screening patients, including older adults and pregnant and postpartum women, for depression. According to the American Academy of Family Physicians, patients with depression may show signs of:

- Depressed mood
- Feelings of worthlessness or guilt
- Loss of interest in activities
- Poor concentration
- Suicidal ideation

Others may report nonspecific symptoms, including:

- Change in weight or appetite
- Fatigue
- Headache
- Insomnia or hypersomnia
- Pain in the abdomen, back, neck or joints

MHS Health Wisconsin offers preventive behavioral health programs, including the Start Smart for Your Baby® program for expecting and new mothers. For more information on programs or to refer a patient, call 1-800-222-9831 or visit our provider portal.

**Antidepressant medication management** is an important part of helping patients recover from mental health issues. Adherence to prescribed medications is a priority for patients who have been diagnosed with depression. Ask patients about side effects, and discuss any other barriers to medication compliance. MHS Health Wisconsin can assist members with staying adherent to their antidepressants.

**Adherence to antipsychotic medications for people with schizophrenia** is critical in treating this chronic mental illness. Although antipsychotic medications reduce the risk of relapse and hospitalization, non-adherence to prescribed medications is common. Ongoing treatment and monitoring are essential. MHS Health Wisconsin provides support to members with schizophrenia through our care coordination and care management programs.

**Follow-up after hospitalization for mental illness** is vital to a patient’s recovery. There are more than 2 million hospitalizations for mental health issues in the U.S. each year. Follow-up care can help patients transition back into the community, ensure they are taking prescribed medications correctly and attend appointments with a therapist or counselor. MHS Health Wisconsin can help by scheduling follow-up appointments, making reminder calls about appointments and providing member transportation assistance.

**The HEDIS measure definition:**

Antidepressant medication management (acute phase): Percentage of health plan members ages 18 and older with a diagnosis of depression who were treated with an antidepressant medication and remained on the medication for at least 12 weeks.

Antidepressant medication management (continuation phase): Percentage of members ages 18 and older with a diagnosis of depression who were treated with an antidepressant medication and remained on the medication for at least six months.


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**The HEDIS measure definition:**

Percentage of members ages 6 and older who received follow-up within seven days and 30 days of discharge from a psychiatric unit.


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**The HEDIS measure definition:**

Percentage of members ages 19–64 who have schizophrenia and were dispensed and remained on an antipsychotic medication for at least 80 percent of their treatment period.

Guidelines for care

MHS Health Wisconsin adopts preventive and clinical practice guidelines based on the health needs of our membership and on opportunities for improvement identified as part of the quality improvement (QI) program.

When possible, we adopt preventive and clinical practice guidelines formulated by nationally recognized organizations, government institutions, statewide initiatives or a consensus of healthcare professionals in the applicable field.

Guidelines are available for preventive services, as well as for the management of chronic diseases, to assist in developing treatment plans for members and to help them make healthcare decisions. MHS Health Wisconsin evaluates providers’ adherence to the guidelines at least annually, primarily through monitoring of relevant HEDIS measures.

The guidelines:
- Consider the needs of the members
- Are adopted in consultation with network providers
- Are reviewed and updated periodically, as appropriate
- Are intended to augment, not replace, sound clinical judgment

Preventive and chronic disease guidelines and recommendations include:
- Adult, adolescent and pediatric preventive care guidelines
- Guidelines for diagnosis and treatment of ADHD, asthma, depression, diabetes, hypertension and other diseases and disorders

For the most up-to-date version of our preventive and clinical practice guidelines, go to www.mhswi.com or call 1-800-222-9831.

Diagnosing and managing asthma

Clinical practice guidelines for the diagnosis and management of asthma describe the key clinical activities and action steps needed to provide quality care to patients with the chronic lung disease.

Beyond initial diagnosis and treatment, the guidelines also address the need for patients with asthma to obtain long-term follow-up care to maintain control of the disease, which will ideally reduce the frequency and intensity of symptoms and resulting functional limitations, decrease the likelihood of future asthma attacks and prevent a decline in lung function.

Guidelines from the U.S. Department of Health and Human Services include the following action steps:
- Establish an asthma diagnosis
- Assess asthma severity
- Initiate medication and demonstrate use
- Develop a written asthma action plan
- Schedule follow-up appointments

At follow-up appointments, providers should:
- Assess and monitor asthma control
- Review medication technique and adherence, side effects and environmental control
- Maintain, step up or step down medication
- Review the asthma action plan and revise as needed
- Schedule the next follow-up appointment

For more information on clinical practice guidelines for diagnosing and managing asthma, go to www.nhlbi.nih.gov/health-pro/guidelines/current/asthma-guidelines.