

Policy Title: Care Coordination			
Department Responsible: Care Management	Policy Number: MM-003	THN's Effective Date: January 1, 2022	Next Review/Revision Date: September 30, 2024
Title of Person Responsible: Director of Care Management	THN Approval Council: THN Operations Committee	Date Approved: June 8, 2023	

- I. **Purpose.** The purpose of MM-003 is to provide a description of Triad HealthCare Network's (THN) Care Coordination Program as required by THN's Care Coordination Program.
- II. **Policy.** It is the policy of THN to maintain a care coordination program to meet the needs of THN's population, including but not limited to chronic disease management, transition of care and high, rising, and low risk management programs for beneficiaries attributed to THN.
- III. **Procedure.**
 - A. THN offers embedded care services at participating doctor's offices to help patients understand their illnesses and manage their care.
 1. When patients visit their doctor's office, they can speak with a registered nurse (RN), pharmacist, social worker, and/or care guide who may offer clinical guidance as well as community resources.
 2. Participation in embedded care services is confidential and optional.
 - a. Depending on the patient's health plan, embedded care services may be available at no additional cost or for a monthly copay.
 - B. Patients with chronic medical problems that live in Alamance, Guilford, Randolph, or Rockingham County or part of Forsyth County (Kernersville) with Medicare or a participating plan may qualify for some or all of the following THN care management services:
 1. No cost telephone calls from a RN to review your health;
 2. Easy to understand health and food education;
 3. Medication information from a pharmacist;
 4. Community resources from a social worker;
 5. A free 24-hour nurse advice line; and
 6. A highly trained care team who works with your doctors.
 - C. In addition to patients with chronic conditions, patients presenting at one of Cone Health's emergency rooms with potentially serious acute conditions (e.g., cerebral infarctions, heart attacks, etc.) will be contacted



- by Care Management to discuss lifestyle changes and clinical interventions to prevent future episodes.
- D. **Use of Enabling Technologies.** THN encourages and promotes the use of the following enabling technologies for improving care coordination for beneficiaries:
1. Electronic health records and other health IT tools;
 2. Telehealth services, including remote monitoring;
 3. Electronic exchange of health information; and
 4. Other electronic tools, as appropriate, to engage beneficiaries in their care.
- E. THN utilizes internal reporting to identify additional target populations that would benefit from the individualized care plans provided during care coordination, and the additional assistance of available community resources.
1. Patients may enroll in care management services if one of the following occurs:
 - a. Patients visit a Cone Health emergency room presenting with serious acute conditions (e.g., cerebral infarctions, heart attacks, etc.);
 - b. Patients are referred by primary care physicians; or
 - c. Patients contact Care Management directly to inquire about services.
 2. Patients are not required, under any circumstances, to participate in the Care Management Program.
 - a. Care Management team members will try to contact patients, though if patients do not respond after a number of documented attempts, they may be removed from the program.
- F. THN shall not use data to avoid at-risk beneficiaries. The use of data is for identification of those beneficiaries who are most in need of care coordination services, and who are most likely to benefit from those services. Care Coordination activities are not denied based on a beneficiary's classification as "at-risk."
- G. THN does not require Beneficiaries to be referred to THN or to any other provider or supplier.
1. **Exception:** Referrals made by employees or contractors who are operating within the scope of their employment or contractual arrangement to the employer or contracting entity, provided that the employees and contractors remain free to make referrals without restriction or limitation if:
 - a. The beneficiary expresses a preference for a different provider, practitioner, or supplier; or
 - b. The referral is not in the beneficiary's best medical interests in the judgment of the referring party.



- H. THN partners with long-term and post-acute care providers, both inside and outside THN, to improve care coordination for assigned beneficiaries.
- I. **Enforcement.** THN Related Individuals are required to follow all applicable THN policies. Failure to comply with THN processes, including cooperation in Beneficiary Engagement and Care Coordination activities, will result in remedial and/or disciplinary actions as appropriate in accordance with CIT-002.

Date	Reviewed	Revised	Notes
January 1, 2022			Originally Published
August 2022	X		No changes
April 2023	X		Reviewed for REACH – no changes