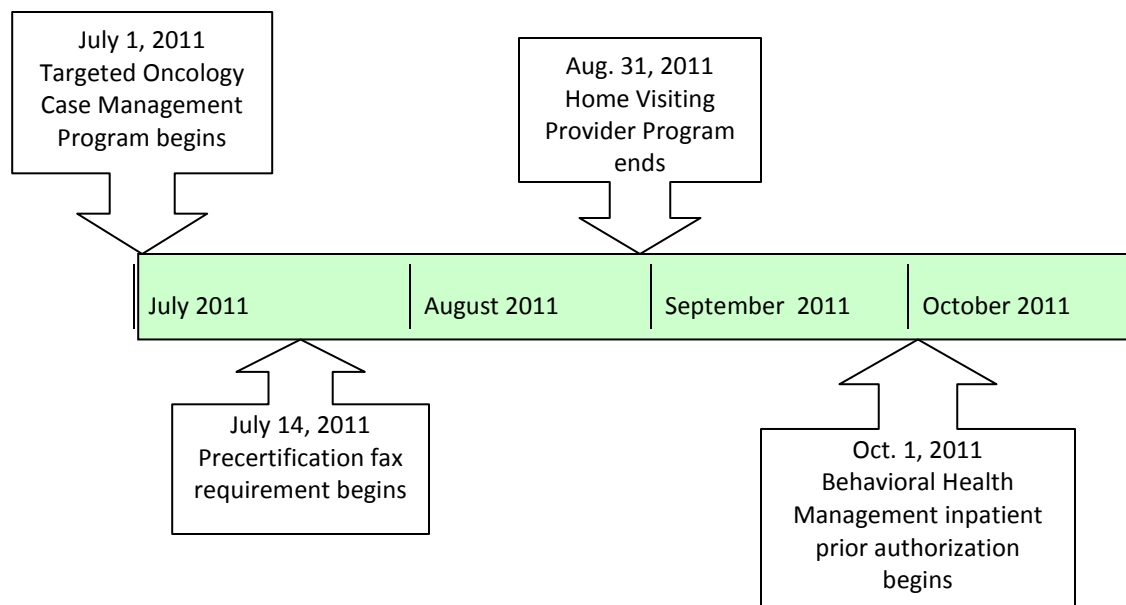


Medicare Advantage Care and Disease Management Initiatives

Fall 2011



What's new for Medicare Plus Blue PPOSM medical management?



Blue Cross Blue Shield of Michigan's Medicare Advantage program offers a variety of case management and disease management programs. In the fall of 2011 we will expand our program portfolio to include Behavioral Health Management, which has an inpatient prior authorization requirement. On the next page we've listed important dates and information for you to know about these initiatives.

Important information about changes to BCBSM's Medicare Advantage medical management programs

Key date	Program	Impact
July 1, 2011	Oncology Targeted Case Management Program began for Medicare Advantage members	Targeted case management program to ensure that members with a cancer diagnosis other than skin cancer receive quality of care. Provides a targeted intervention that meets the needs of members with cancer. Provides services in five areas: <ul style="list-style-type: none"> ✓ Primary care access ✓ Quality of life ✓ Advanced illness and end of life ✓ Cancer and symptomatic therapy ✓ Complications
July 14, 2011	Precert fax requirement begins for skilled nursing facilities, long term acute care hospitals and inpatient rehabilitation facilities	All precertification requests must be submitted via fax or e-fax. Information and forms are available on web-DENIS under <i>BCBSM Provider Resources</i> . In an effort to ensure appropriate and timely processing, providers must ensure that all required sections of the fax form are complete. Incomplete forms will be returned and may cause significant delays processing the request.
Aug. 31, 2011	Home Visiting Provider Program (administered by INSPIRIS) ends	Members will be transitioned into other Medicare Advantage PPO care management programs as needed.
Oct. 1, 2011	Behavioral health management program: inpatient prior authorization requirement begins	This prior authorization and case management program will assist members who may benefit from additional support due to co-morbid or complex behavioral and medical health conditions. See the September 2011 issue of <i>The Record</i> for more information.

Existing care and disease management initiatives

- **Care Transitions to Home**
 - BCBSM nurses provide discharge planning and outreach for members at risk for early readmission.
 - Care Transitions aims to reduce avoidable readmissions and emergency room visits as well as decrease delays in identifying members for advanced intensity case and disease management programs.
- **Precertification for skilled nursing facilities, long-term acute care hospitals and inpatient rehabilitation facilities**
 - Facilities must precertify admissions and days for Medicare Plus Blue PPO members based on clinical guidelines.
 - Facilities must fax precertification requests effective July 14, 2011.
- **High-risk condition disease management initiatives for chronic obstructive pulmonary disease and congestive heart failure**
 - Telemonitoring administered by Alere®.
 - BCBSM case managers oversee telemonitoring, member education and facilitation of physician alerts for Medicare Plus Blue PPO members with COPD or CHF.
- **Case management**
 - Case managers coordinate care delivery needs, close gaps in care and promote end-of-life decision-making for complex cases.
- **Radiology management**
 - Providers must precertify requests for high-tech radiology based on clinical guidelines through the American Imaging Management® provider portal.
- **24/7 nurse line (BlueHealthConnection®)**
- **Health assessment and online health coaching**

You can find more information about these programs in the *Medicare Plus Blue PPO Manual* or on our Medicare Advantage health care provider website, bcbsm.com/ma.