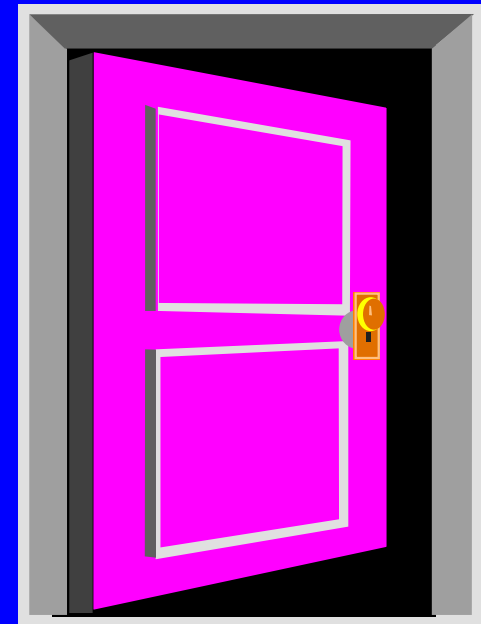

**COMMUNITY-BASED
CAPITATED MANAGED CARE
PROGRAMS FOR PATIENTS
WITH CHRONIC DISEASES:**

**EAST BOSTON
NEIGHBORHOOD HEALTH
CENTER**

Judith L. Steinberg, MD

OVERVIEW

- ◆ **Background:**
 - East Boston Neighborhood Health Center
- ◆ **Caring for the most sick:**
 - issues and model elements
- ◆ **Model programs**
 - Elder Service Plan
 - Project SHINE
 - CATCH
- ◆ **Lessons learned**



EAST BOSTON NEIGHBORHOOD HEALTH CENTER

- ◆ **Full service**
- ◆ **Community owned and operated**
- ◆ **Serves a working class to poor community; multicultural**
- ◆ **Affiliated with Boston Medical Center and Massachusetts General Hospital**
- ◆ **Largest community health center in New England**

MANAGING CARE OF THE MOST SICK

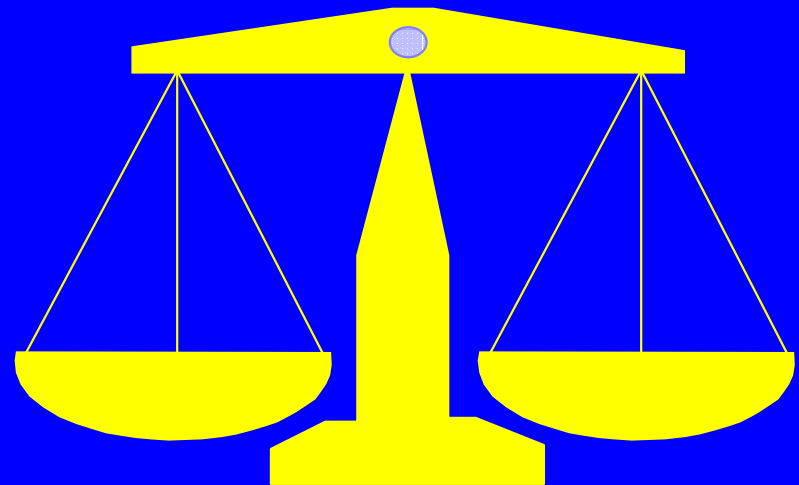
- ◆ **Cross cutting issues:**
 - **Medically complex**
 - **High utilizers of services**
 - **Increased need for social and other support services**
 - **Need for coordination of care**
 - **Family support needs**

CORE MODEL ELEMENTS

- ◆ **PCPs are managers of care**
- ◆ **Comprehensive on-site services**
- ◆ **Service integration through a multidisciplinary team approach**
- ◆ **Network of contracted specialists, services**
- ◆ **Focus on prevention, health maintenance and rehabilitation**
- ◆ **Goal of providing care in the community with support of PCP and family to that end**

KEY FINANCIAL ISSUES

RISK ADJUSTED CAPITATION RATES!



ELDER SERVICE PLAN

- ◆ **One of first replication sites of PACE model**
- ◆ **Eligibility: ≥ 55 , nursing home eligible**
- ◆ **Goals:**
 - **to maximize autonomy and continued community residence**
 - **maintain maximum level of physical, social and cognitive function**
 - **provide quality care at lower costs**

ESP: SEAMLESS, COMPREHENSIVE CARE

- ◆ **5 Adult day health centers**
- ◆ **5 Elderly housing sites**
- ◆ **2 Social day care centers**
- ◆ **Transitional Housing**
- ◆ **Transportation system**
- ◆ **Managed care inpatient unit**
- ◆ **Extensive home and hospice care**
- ◆ **Contracts with skilled nursing facilities, rehabilitation centers, pharmacies**

ELDER SERVICE PLAN: INTEGRATED FINANCING

MEDICARE

2.39 X AAPC

\$1,554

MONTHLY

MEDICAID

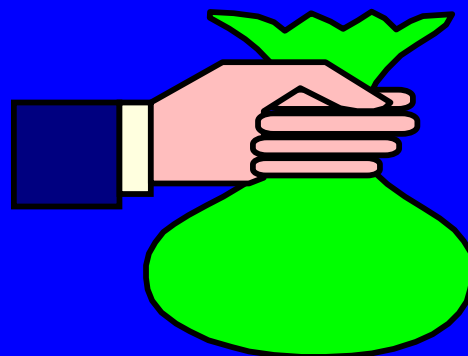
and/or private pay

85-95% of

comparable populations

\$2,130

CAPITATION



PROJECT SHINE

- ◆ **HIV Services division of Adult Medicine**
- ◆ **Supported in part by Ryan White funding, including Special Projects of National Significance (SPNS)**
- ◆ **Goals: patient focused care that is comprehensive, community-based, seamless, high quality, cost-effective**

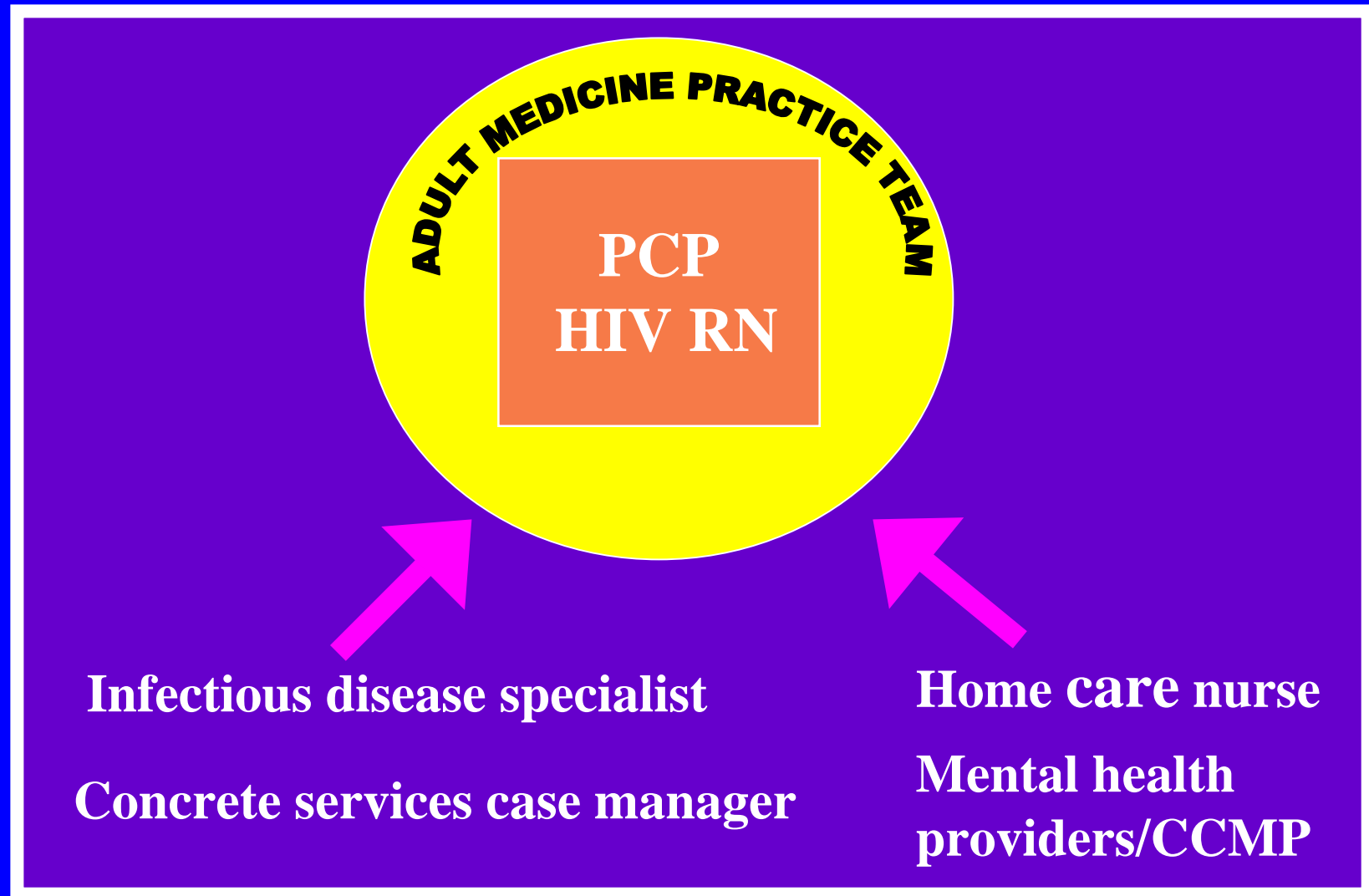
COMPREHENSIVE SERVICES

- ◆ **Outreach/HIV Counseling and Testing**
- ◆ **Primary, specialty and urgent care**
- ◆ **Laboratory and expanded radiology**
- ◆ **24 hour access to an HIV nurse**
- ◆ **Clinical Care Management**
- ◆ **Managed care inpatient units**
- ◆ **Chronic care facilities**

COMPREHENSIVE SERVICES CONTINUED

- ◆ Home and hospice care
- ◆ Primary care based mental health and social services, including concrete services case management
- ◆ Pastoral care program
- ◆ Volunteer program
- ◆ Consumer Advisory Board

PROJECT SHINE: MODEL OF CARE

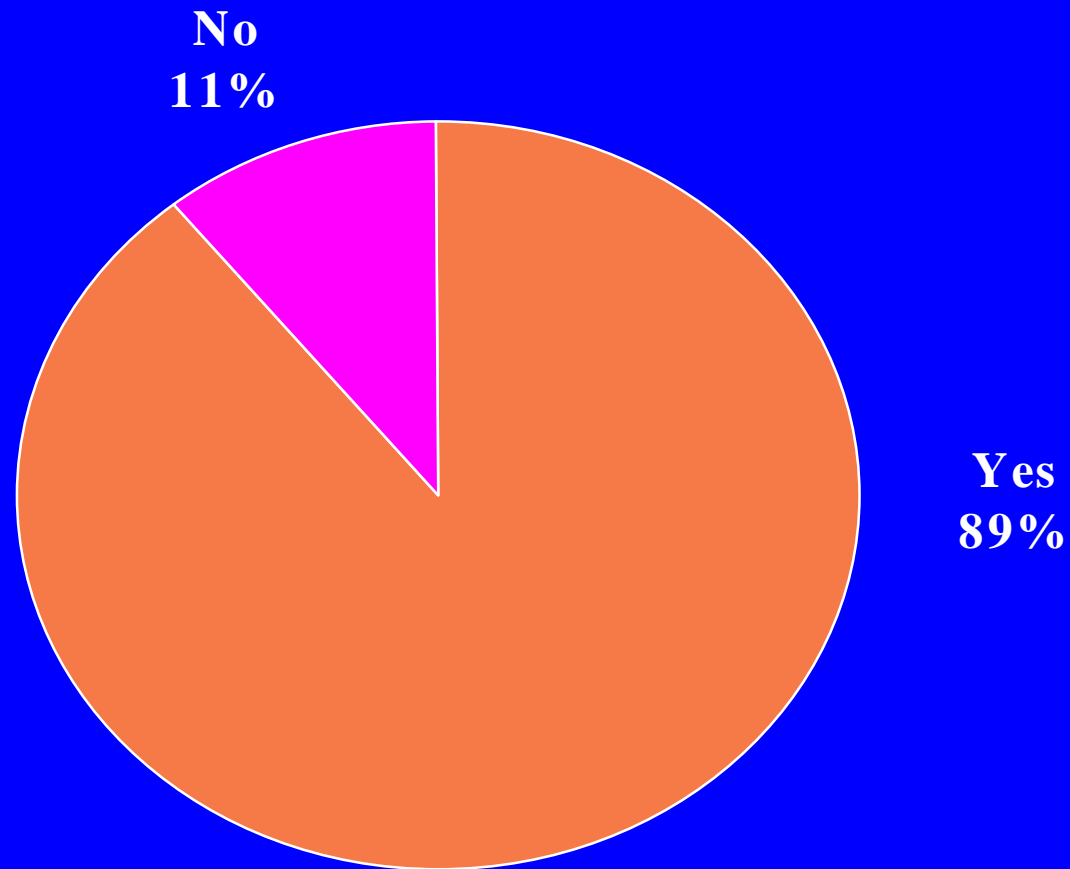


PROJECT SHINE: PATIENT DEMOGRAPHICS

- ◆ **128 patients, 43% Female**
- ◆ **Ethnicity: 50% White, 28% Latino, 14% African American, 8% Other**
- ◆ **Transmission: 47% IDU, 28% Heterosexual, 25% Gay/Bisexual**
- ◆ **Disease Stage: 35% AIDS at enrollment**

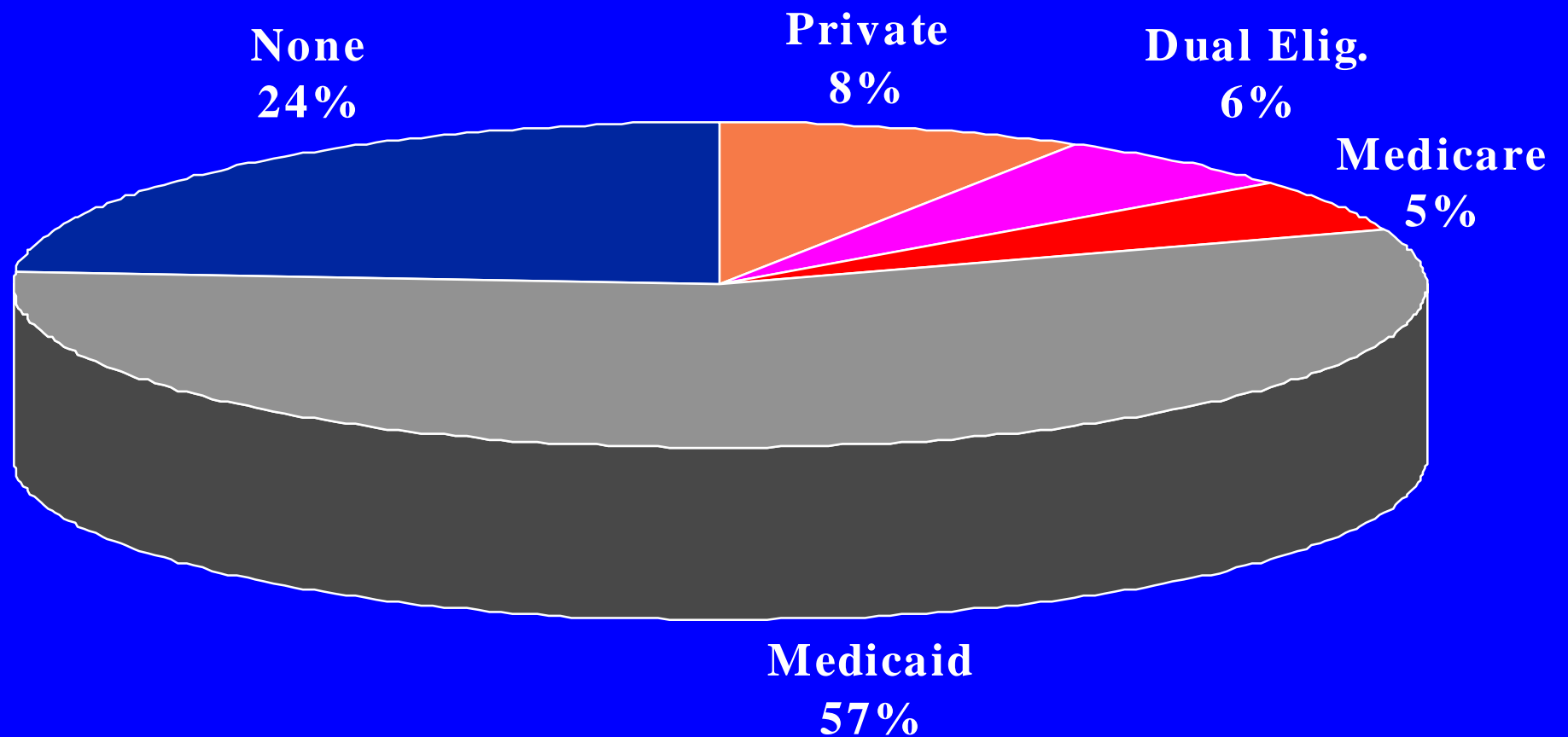
10/1/94 - 9/30/97

ACTIVE MENTAL HEALTH/SUBSTANCE ABUSE ISSUE



10/1/94 - 9/30/97

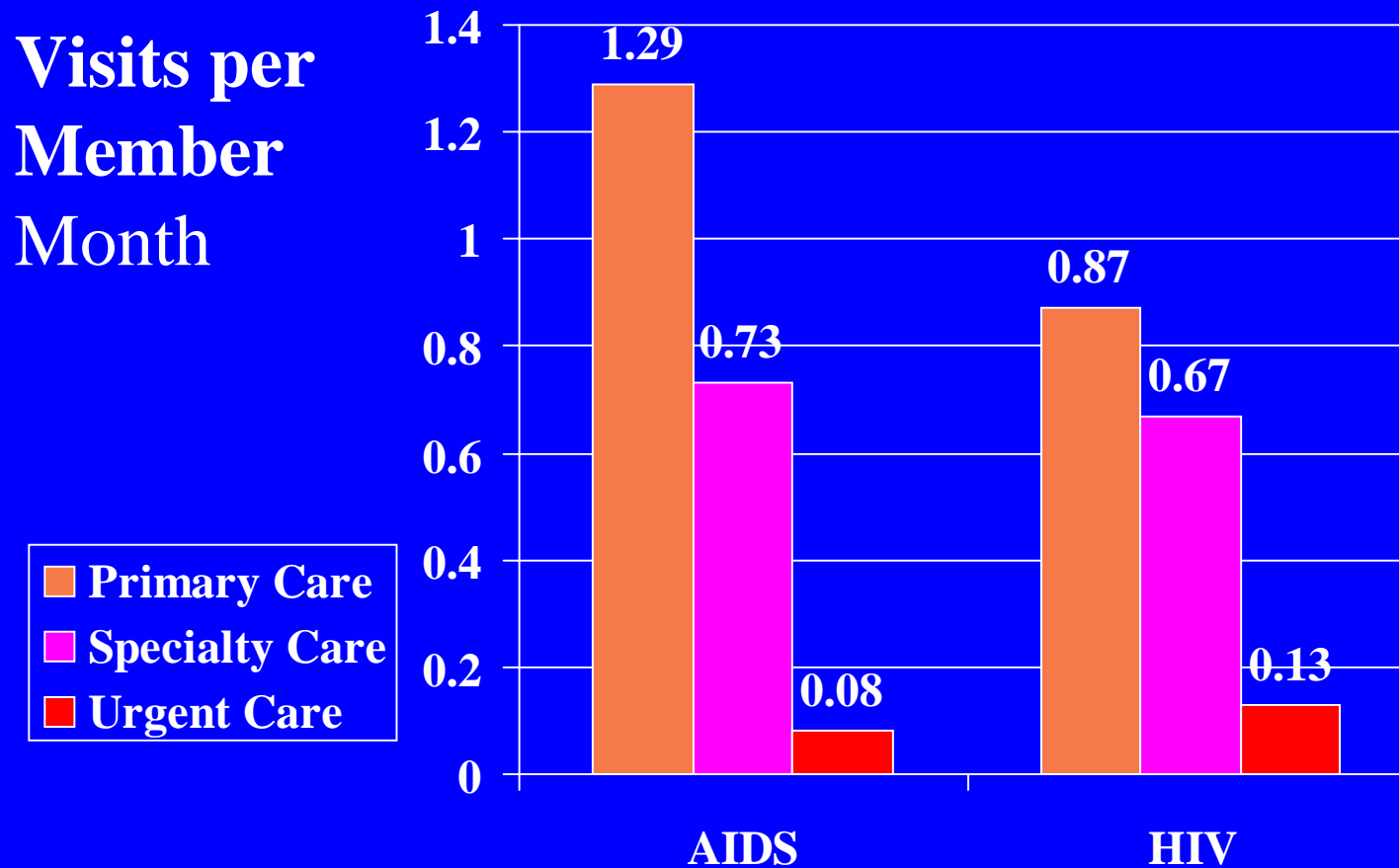
INSURANCE COVERAGE AT ENROLLMENT



10/1/94 - 9/30/97

EBNHC

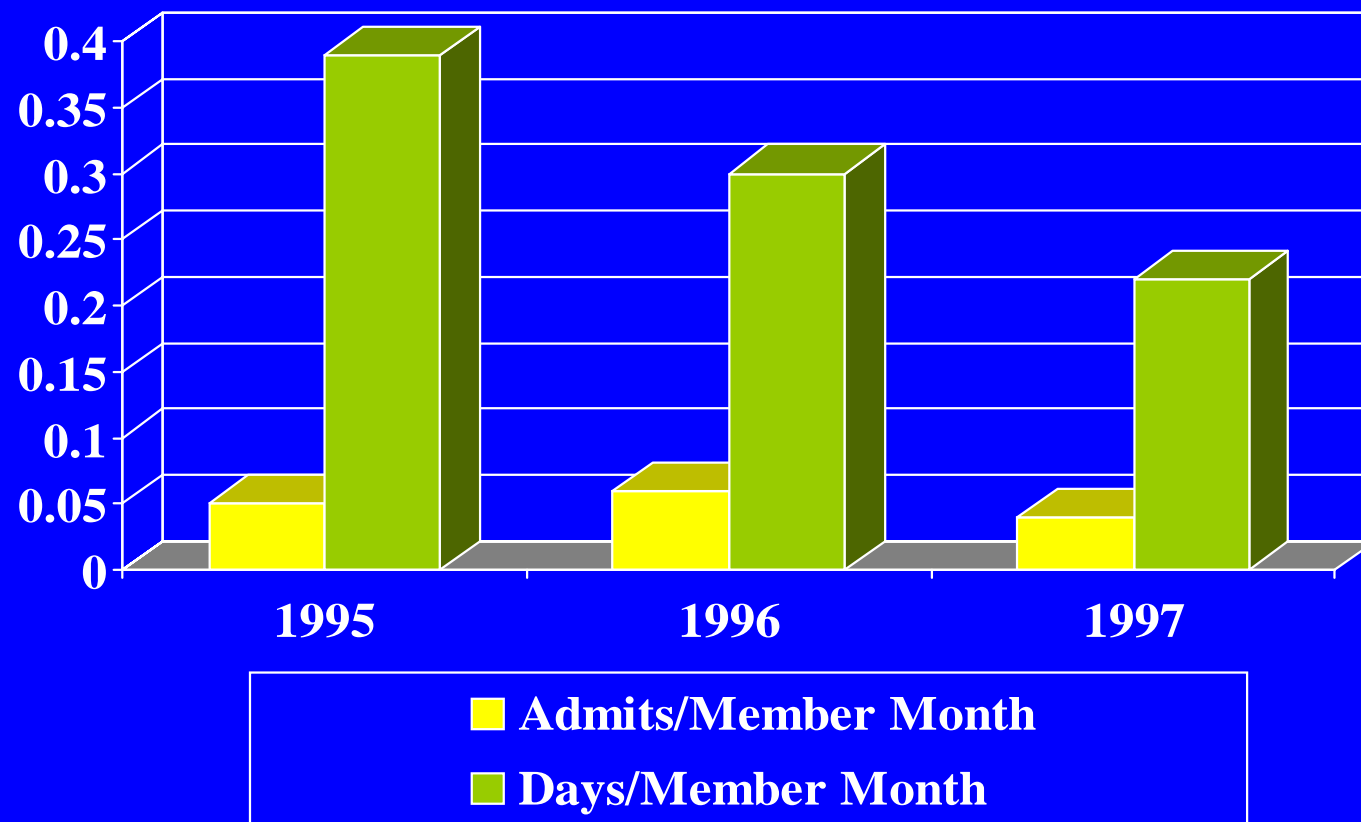
OUTPATIENT SERVICES USE PER MEMBER MONTH BY DISEASE STAGE



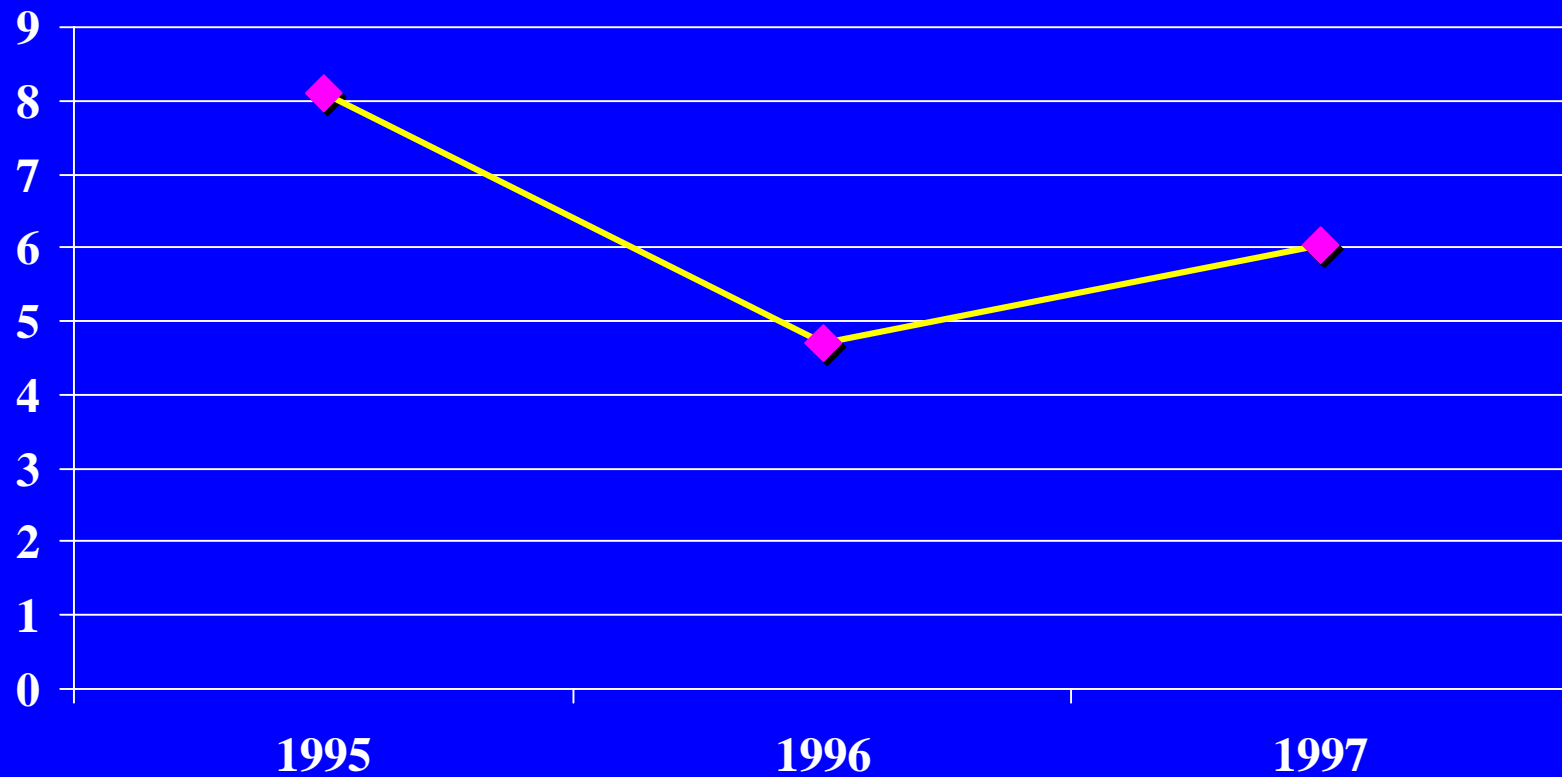
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HOSPITAL ADMISSIONS AND DAYS/MEMBER MONTH

Admissions/
Days



TRENDS IN AVERAGE HOSPITAL LOS OVER TIME



RISK ADJUSTED HIV CAPITATION

- ◆ Medicaid contracts with Community Medical Alliance
- ◆ Current capitation rate
- ◆ Eligible patients: Medicaid disabled plus AIDS, or active HIV_± HAART and/or Mental health/substance abuse dx
- ◆ Benefit package: in/outpatient care, home care, pharmacy, mental health/addictions services

CATCH PROGRAM

- ◆ Children's Access to Coordinated Healthcare
- ◆ **Eligibility: Children with significant disabilities who require adaptive equipment and/or elaborate therapies.**
- ◆ **Enrollment: 75**
 - 31 are technology dependent (ventilators, gastrostomy tube, tracheostomy)
 - 20 use wheel chairs, crutches or other mobility devices

CATCH PROGRAM: GOALS

- ◆ **To foster normal development and prevent progression of disabling conditions**
- ◆ **To reduce unnecessary interventions and hospitalizations**
- ◆ **To optimize the functioning of the child and family in the community by addressing individual needs and providing supportive services**

CATCH PROGRAM: MODEL OF CARE

- ◆ **Early intervention through community-based medical care and case management**
- ◆ **Shift the locus of care from the hospital to the community by creation of a “medical home”**
- ◆ **Local pediatrician is supported by a multidisciplinary team**

CATCH PROGRAM: MODEL OF CARE



CATCH PROGRAM: FAMILY SUPPORT

- ◆ **The family is an integral part of the care team and is included in the care plan**
- ◆ **Local Parent Consultant**
 - **organizes trainings for providers**
 - **internet training of parents**
 - **provides families' feedback to EBNHC staff**
 - **organizes informational meetings and special events for families**

LESSONS LEARNED

- ◆ **Complex medical/social issues require multidisciplinary teaming**
- ◆ **Clinical care management is necessary to reduce fragmentation, improve coordination**
- ◆ **Care must be managed throughout all settings**

LESSONS LEARNED, CONTINUED

- ◆ **Coordination requires communication**
- ◆ **Focus on prevention of decompensation and rehabilitation**
- ◆ **Support the care givers**
- ◆ **Evaluate the program: process, outcomes, utilization, costs**

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