

Primary Care Case Management and HUSKY – Frequently Asked Questions for Providers

February 1, 2009 HUSKY began offering a new option to families and providers – Primary Care Case Management (PCCM) in the Waterbury and Willimantic areas. By January 1, 2010, PCCM will open to HUSKY families in the Hartford and New Haven areas as well. PCCM is a way of running Medicaid without HMOs. It is based on the patient-centered medical home model of care including care coordination and an emphasis on primary care, prevention and disease management. In medical homes, providers work as a team of professionals partnering with patients to improve overall health. PCCM is built on and supports the patient-provider relationship.

Thirty other states successfully use PCCM to run their Medicaid managed care programs – both providers and patients are generally more satisfied with PCCM programs than with traditional HMOs and health outcomes are improved. PCCM will reduce HUSKY administrative burdens and give providers and patients more control over medical decision-making.

In Connecticut, PCCM has been named HUSKY Primary Care.

How does it work?

In HUSKY Primary Care, patients choose a Primary Care Provider (PCP) who agrees to provide them with primary care services and to coordinate their care. Patients sign up voluntarily for HUSKY Primary Care; no one will be defaulted into HUSKY Primary Care. Patients then choose an available PCP in their area with an opening; PCPs can choose how many patients they will be responsible for. PCPs will be paid on a fee-for-service basis for the services they provide their HUSKY Primary Care patients, as well as a \$7.50 per member per month fee to reimburse for care coordination.

What are the benefits to providers of HUSKY Primary Care?

HUSKY Primary Care providers are supported and compensated in providing their patients with coordinated care. Patients are able to rely on a regular place to receive care and providers can place limits on the number of patients they will be responsible for. Providers will no longer be subject to HMO hassles and administrative red tape. In HUSKY Primary Care, prior authorization from DSS is only required for non-emergency hospital admissions and selected outpatient procedures as required by Medicaid policy. Providers have a direct relationship with DSS to guide program policies. When Oklahoma switched all their Medicaid managed care families from HMOs to PCCM, the

number of participating providers jumped 44%. HUSKY Primary Care also provides support to practices transitioning to the patient-centered medical home model for all their patients.

Who can be a PCP in HUSKY Primary Care?

- Family medicine physicians
- General practitioners
- Primary care physicians associated with community health centers
- Internists
- Pediatricians
- Osteopaths
- OB/GYNs
- APRNs
- Nurse midwives
- Physician Assistants
- Specialists, per patient request and DSS approval

What are PCPs responsible for in HUSKY Primary Care?

- Providing timely primary care services.
- Making referrals for appropriate specialty care and tests, collecting the results and following up with the patient
- Identifying a person who is responsible for patient care management
- Initial risk assessment and developing a care plan approved by the patient
- Participate in advising DSS on implementation of HUSKY Primary Care and feedback about on-going operations and possible expansions of the program
- PCPs must have a provider available to see patients at least 30 hours/week with some weekend and/or evening hours
- PCPs must provide access to medical advice and care 24 hours/day, 7 days/week and allow same or next day appointments for urgent care
- PCPs must provide patients with referrals for tests and specialty care
- PCPs will have the option of participating on the PCCM Provider Advisory Committee which will, together with DSS, set policies for the program
- Work with patients and DSS to identify patients struggling to access care and develop a plan to improve their health
- Have or acquire an electronic medical record system or electronic disease management data registry
- Provide patient education to support best practices and help patients manage their own care

What are patients' responsibilities in HUSKY Primary Care?

- Patients must contact their PCP first for all medical problems, except as allowed under state or federal law
- Patients must receive a referral from their PCP before accessing tests or specialty care
- Patients must collaborate with their PCP to manage their own care

What are the state's responsibilities in HUSKY Primary Care?

- Provide you with accurate, timely enrollment, utilization and patient satisfaction information about your patients
- Pay you on a fee-for-service basis for the services you provide and, in addition, pay you \$7.50 per HUSKY Primary Care enrollee per month to reimburse for care coordination
- Solicit and incorporate PCP input in all HUSKY Primary Care policy decisions
- Solicit PCP feedback on a regular basis
- Provide a simple, easy process to collect provider concerns and complaints
- Provide disease management and quality improvement programs, developed in collaboration with PCPs

How will dental, mental health and substance abuse services be provided to HUSKY Primary Care patients?

Most HUSKY behavioral health services will be provided through the CT Behavioral Health Partnership (CT-BHP, www.ctbhp.com) as they are now. Oral health services will be provided through the CT Dental Health Partnership (CTDHP, www.ctdhp.com). PCPs will make appropriate referrals to CT-BHP and CTDHP, provide medication management, and coordinate care with their patients' behavioral health and dental providers.

What changes will patients see in HUSKY Primary Care?

Patients will not have to figure out who to call with a health care problem – they call their PCP. HUSKY Primary Care should increase the number of available providers, both because they can choose from all Medicaid providers rather than just those on their HMO's panel, and more providers may be willing to take HUSKY without the HMO hassles.

Why is the state implementing HUSKY Primary Care?

State policymakers have been frustrated by the current HMO-based system for HUSKY. The program has been plagued by overpayments to the health plans, HMO resistance to accountability or transparency, low provider participation, and difficulty of families to access the care they need and that taxpayers are paying for. It has become clear that the state needs another option. Providers and families can choose which program, HMOs or PCCM, works best for them, making both systems work better.

How do I learn more?

You can keep up on HUSKY Primary Care developments at www.cthealthpolicy.org/pccm.

