

Medicaid Case Study: Washington State Aging & Disability Services Administration Chronic Care Management Program

Program Overview

In early 2006, Washington State's *Department of Social & Health Services* embarked upon three pilot projects designed to: 1) better coordinate care, 2) establish medical homes and integrate acute and long-term healthcare using evidence-based approaches, and 3) develop client self-management skills while reducing avoidable medical expenses. Each pilot varied in its design and population, but did incorporate in-person and phone-based coaching.

The *Aging & Disability Service Administration (ADSA)* program (one of the three pilots) was the only program to integrate Insignia Health's *Patient Activation Measure® (PAM)* and *Coaching for Activation®* model. Specific components of the ADSA program included:

- Intensive care management services that integrated acute and long-term care services using face-to-face in-home care management. The nurse coach to client ratio was 1:45.
- Coach administration of the PAM in-home with intervention group participants early in the coaching relationship. Patient activation was again measured after six months of coaching.
- Coaches were trained in Insignia's *Coaching for Activation* patient support model and had access to Insignia's Web-based program to support these efforts. *Coaching for Activation* helps coaches identify patient self-management opportunities that are realistic and achievable given an individual's level of activation.

Program Participants

Two study groups -- a 'treatment' group and a control or 'abeyance' group -- were created through random assignment. Clients targeted for this program:

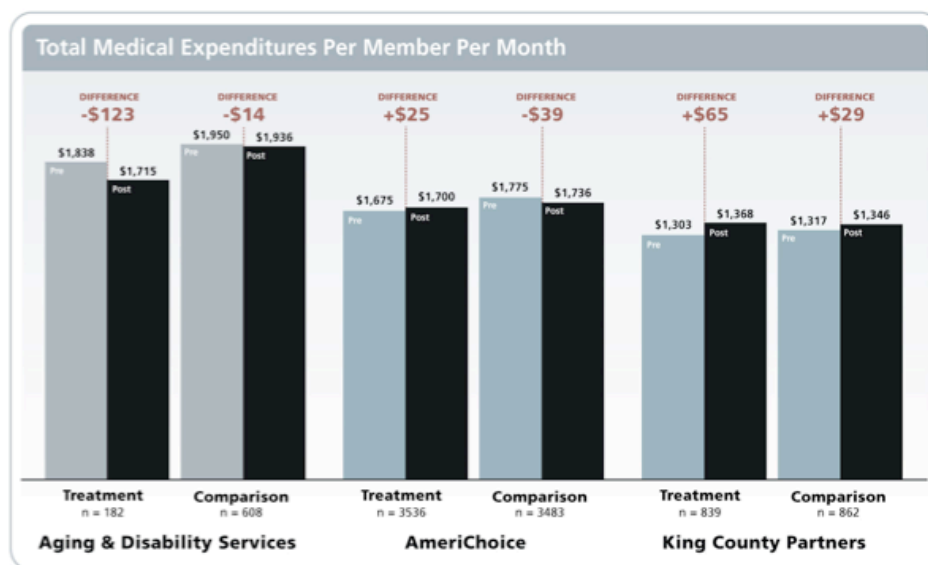
- Were eligible for aged/blind/disabled, categorically-needy, Medicaid only medical benefits,
- Were currently receiving home and community-based long-term care services case-managed by one of five participating Area Agencies on Aging,
- Fell in the top 20% of clients at risk of having future high medical expenses and met one of five assessed risk factors

Key Outcomes

The ADSA program was estimated to result in an average \$109 PMPM reduction in medical expenditures. Cost variability was high in these two study high-risk cohorts.

Of the three projects under study, only the ADSA program demonstrated costs savings. These savings were partially offset by an estimated increase of \$54 per member per month in ADSA long-term care expenditures, primarily in-home support services.

Washington State Health & Recovery Services
Chronic Care Management Pilot Projects

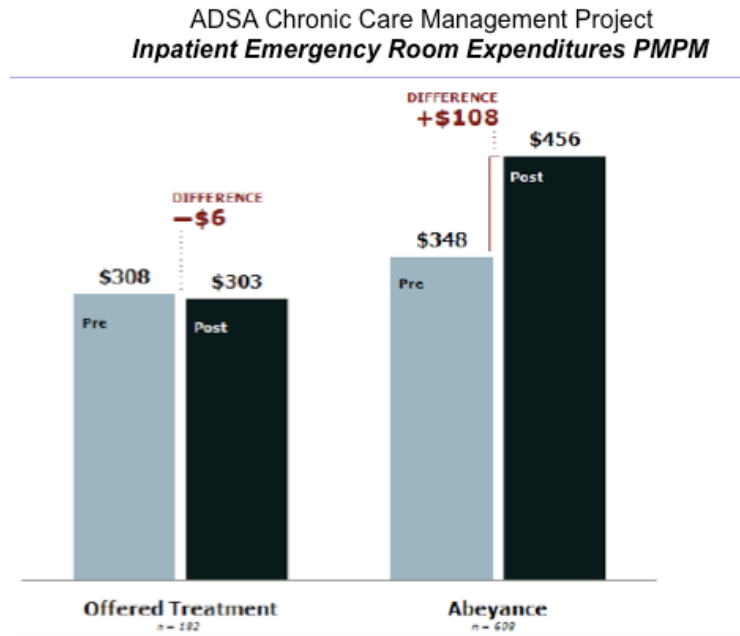


Source: Qualis Health. Evaluation of Washington State Medicaid Projects, Nov 13, 2008. <http://maa.dshs.wa.gov/healthyoptions/newho/reports/ccm.htm>
Note: Study populations adjusted for age, gender, education and health status. Cohorts created through random assignment and studied over 9 months

Studies based on 10 months of experience, with a pre (baseline) period of March 1, 2006 to Dec 31, 2006 and post (intervention delivery) period of March 1, 2007 to Dec 31, 2007.

Medicaid Case Study: Washington State Aging & Disability Services Administration Chronic Care Management Program

Roughly 80% of the cost reduction was associated with fewer unplanned admissions to the hospital through the emergency room amounting to a \$113 PMPM difference between the two study groups.



Additional key findings include:

- *Patient Activation Measure* mean scores in the Intervention Group improved from 52.2 (mid level 2) to 59.1 (lower level 3) over the course of the program
- A statistically significant lower risk of death among the clients randomly assigned to the intervention group (p=.04)
- Statistically significant self-reported health outcome improvements in overall health, patient activation, self-sufficiency, pain impact, and quality of life
- Findings from the client record review showed that nearly half of the clients in the treatment group achieved improvements in health condition, living environment, and/or access to treatment.

The full *Aging & Disability Services Administration* report can be found at <http://www.adsa.dshs.wa.gov/professional/hcs/CCM/>.

The full *Health & Recovery Services Administration* report (covers all pilots) can be found at <http://fortress.wa.gov/dshs/maa/healthyoptions/newwho/reports/ccm.htm>

Question & information: info@insigniahealth.com
www.InsigniaHealth.com

