Care Management Request for Proposal

2017

Attachment A
Use Case Diagrams

Attachment A Use Cases

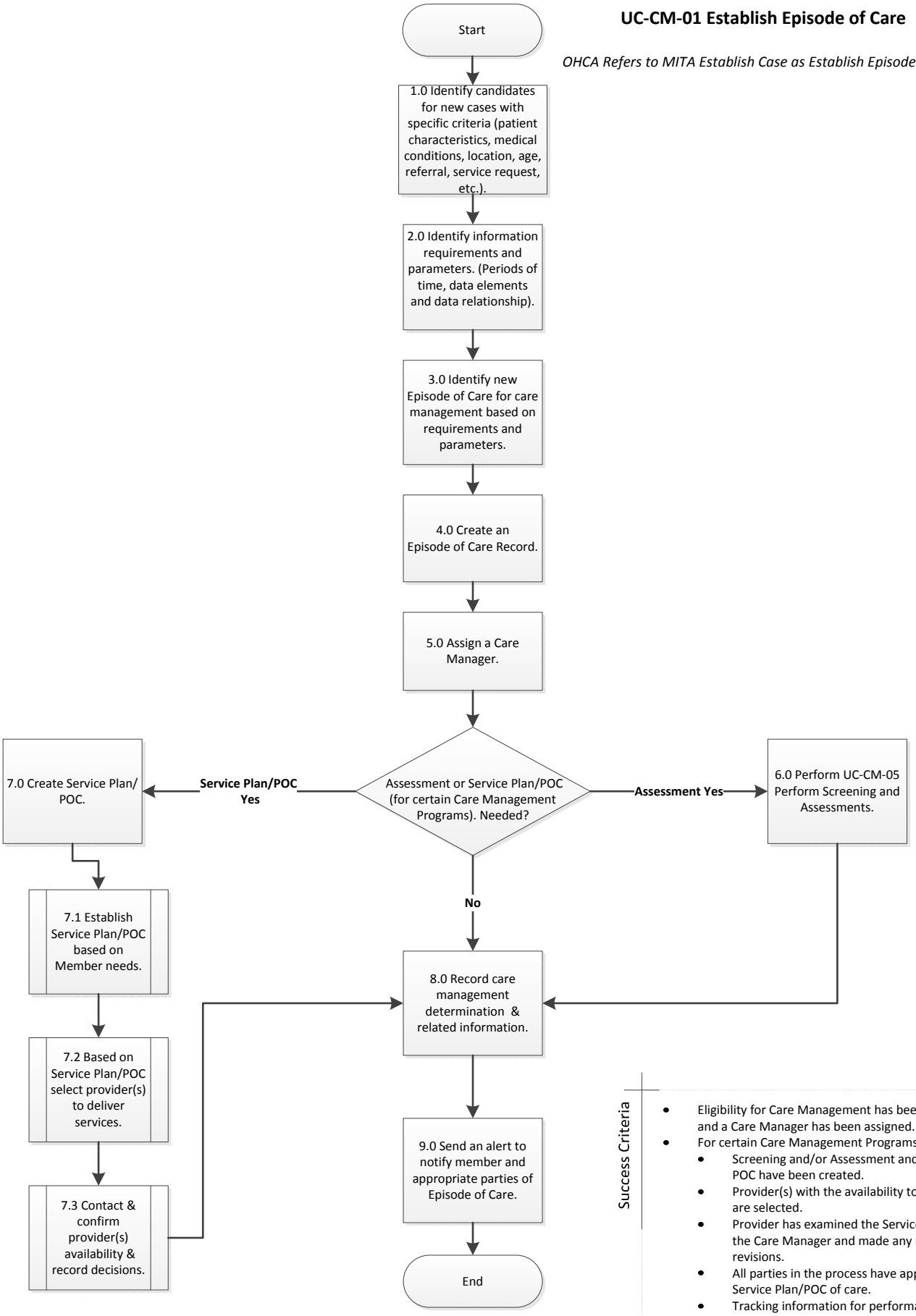
Introduction

The following documents are based on OHCA business processes and the MITA Use Cases. The Use Cases are the basic workflows for each process. Not all workflow process steps are documented. The detailed PASSR workflows are not included in this document. Detailed Workflow requirements gathering and design are a deliverable for the RFP.

OHCA uses different language for some of the MITA use cases. The MITA use case name is referenced under the OHCA Title.

UC-CM-01 Establish Episode of Care

OHCA Refers to MITA Establish Case as Establish Episode of Care

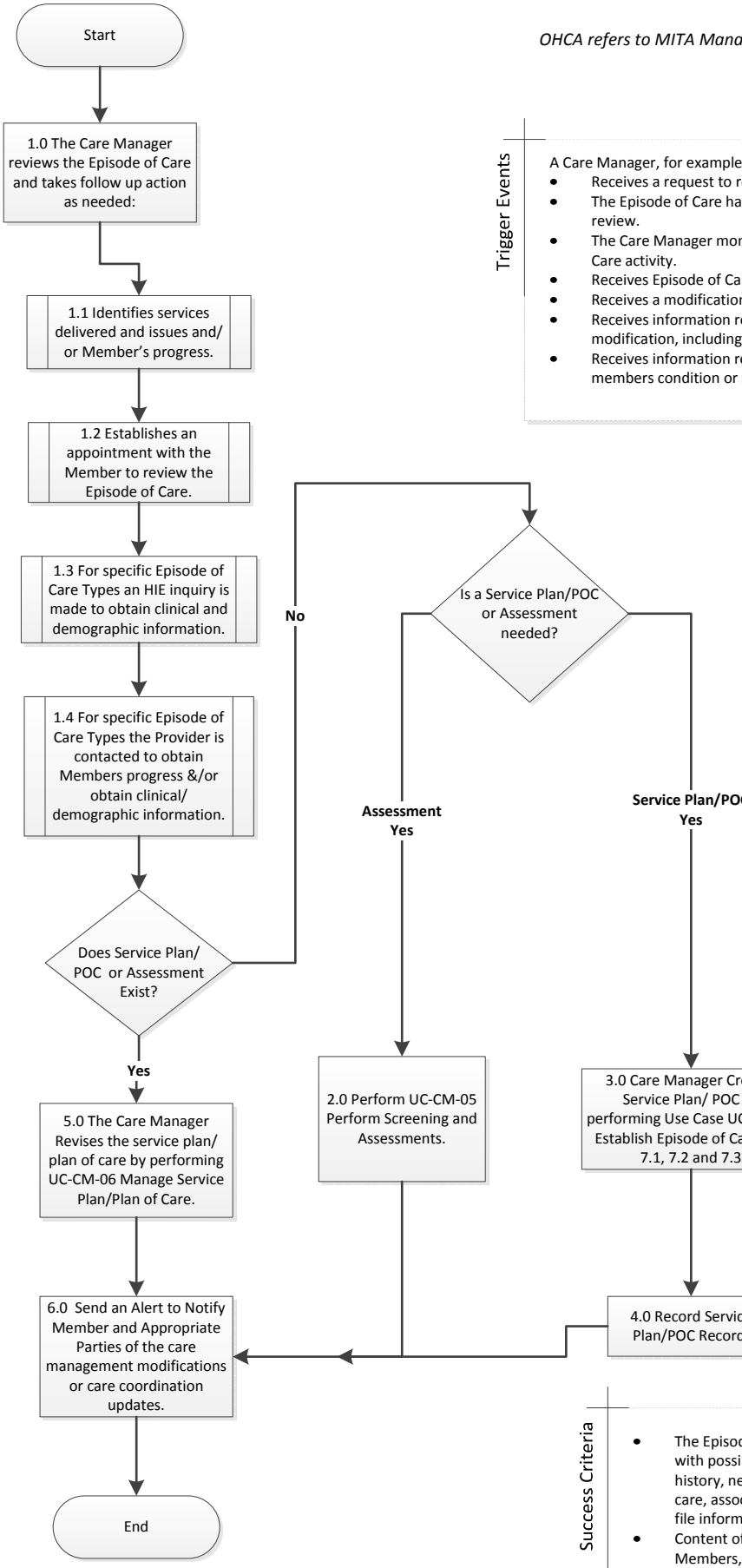


Success Criteria

- Eligibility for Care Management has been determined and a Care Manager has been assigned.
- For certain Care Management Programs;
  - Screening and/or Assessment and a Service Plan/ POC have been created.
  - Provider(s) with the availability to the service plan are selected.
  - Provider has examined the Service Plan/POC with the Care Manager and made any necessary revisions.
  - All parties in the process have approved the Service Plan/POC of care.
  - Tracking information for performance measures and business activity monitoring are captured.

UC-CM-02 Manage Episode of Care

OHCA refers to MITA Manage Case as Manage Episode of Care



Trigger Events

A Care Manager, for example:

- Receives a request to review an Episode of Care.
- The Episode of Care has been selected for periodic review.
- The Care Manager monitors the Member's Episode of Care activity.
- Receives Episode of Care modifications.
- Receives a modification of Member health benefit plan.
- Receives information regarding an enrollment modification, including disenrollment.
- Receives information regarding modification in a members condition or situation.

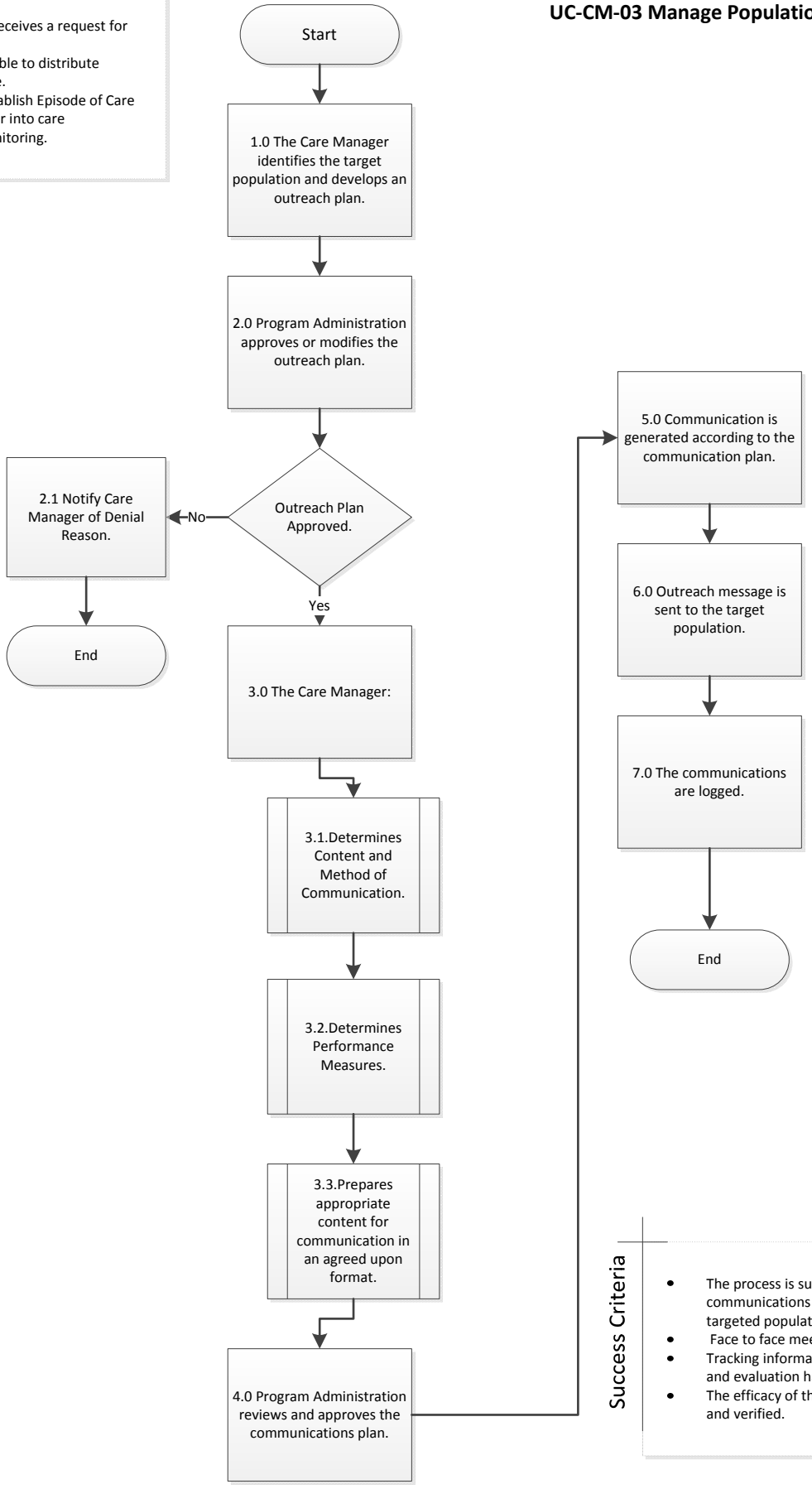
Success Criteria

- The Episode of Care history has been updated with possible revisions to Episode of Care history, needs assessment, service plan/plan of care, associated Providers, and Episode of Care file information.
- Content of communications has been sent to Members, Providers and Stakeholders.
- Tracking information as needed for measuring performance and business activity monitoring.

UC-CM-03 Manage Population Health Outreach

Trigger Events

- A Care Manager receives a request for outreach.
- A periodic timetable to distribute information is due.
- An alert from Establish Episode of Care to place a Member into care management monitoring.



Success Criteria

- The process is successful when outreach communications are produced and distributed to targeted populations or individuals.
- Face to face meetings could occur.
- Tracking information for performance measures and evaluation have been produced.
- The efficacy of the outreach has been evaluated and verified.

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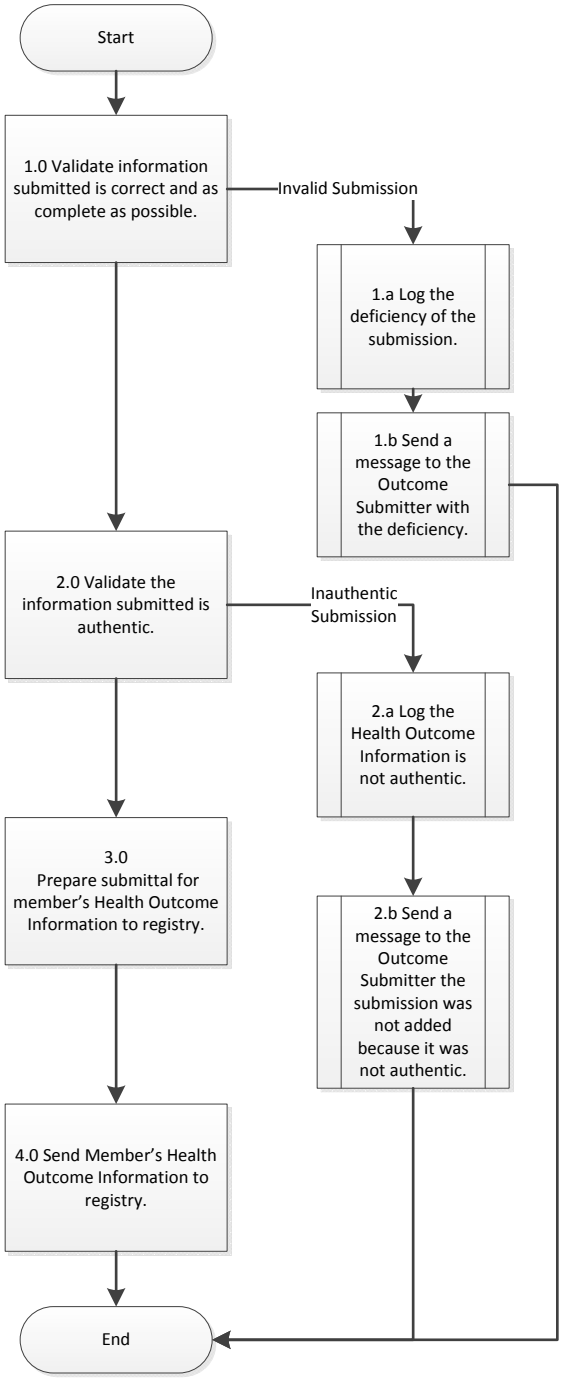
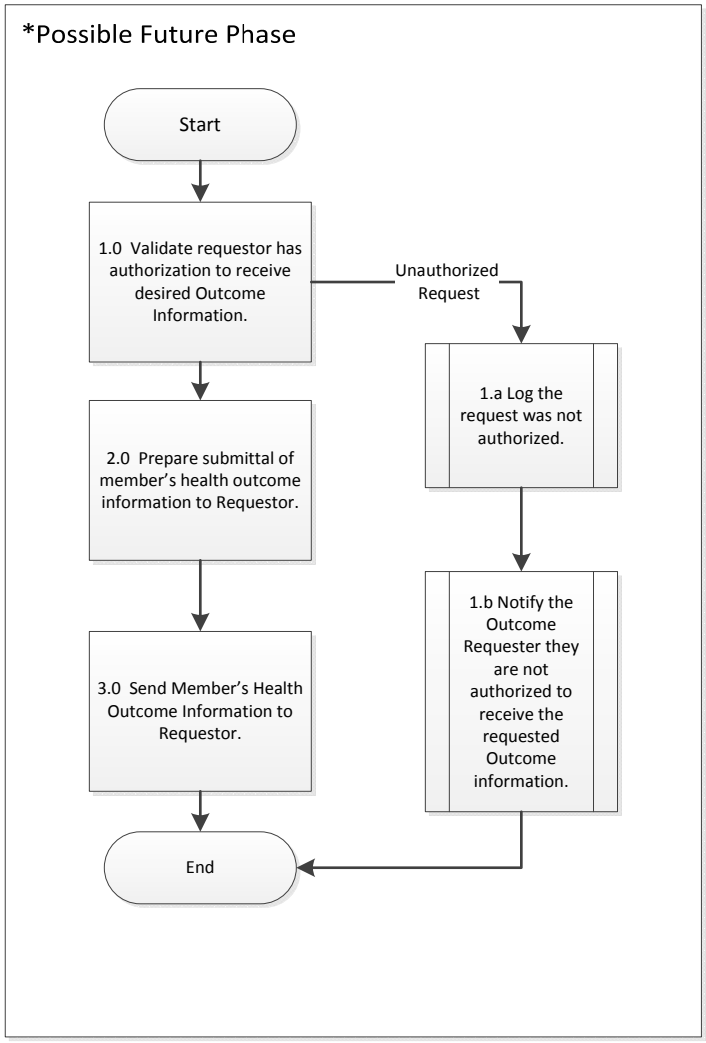
Trigger Event

Path 1
Receive Member's Health Outcome Information.



Trigger Event

*Path 2
Receive request for health outcome information.



Success Criteria

Path 1
- Receipt of OHCA Member Health Outcome information is processed.
- The Outcome Registry is updated with data.

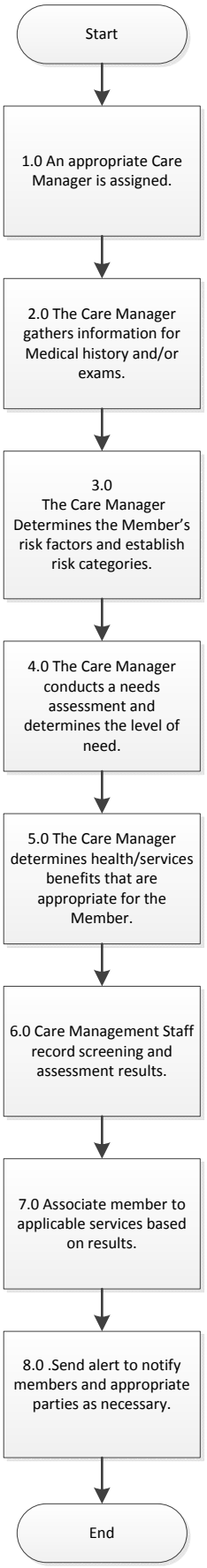
Path 2
- OHCA responds to the inquiry for Health Outcome information.
- OHCA prepares and sends updated Health Outcome.

Both Paths
- Necessary tracking information is collected for monitoring and performance tracking.

UC-CM-05-Perform Screening and Assessments

Trigger Events

- Establish Episode of Care
- A Care Manager receives a new or re-determination of Member enrollment.
- Receives a referral from Manage Episode of Care Information.



Success Criteria

- The process is successful when the Member is notified of services as needed.
- The appropriate tracking information for measuring performance and business activity monitoring is captured.
- Screening and/or Assessment is completed and recorded in the Episode of Care record.

UC-CM-06-Manage Service Plan/Plan of Care and Outcomes

OHCA Refers to the MITA Manage Treatment Plan and Outcomes as Manager Service Plan/Plan of Care and Outcomes

Trigger Events

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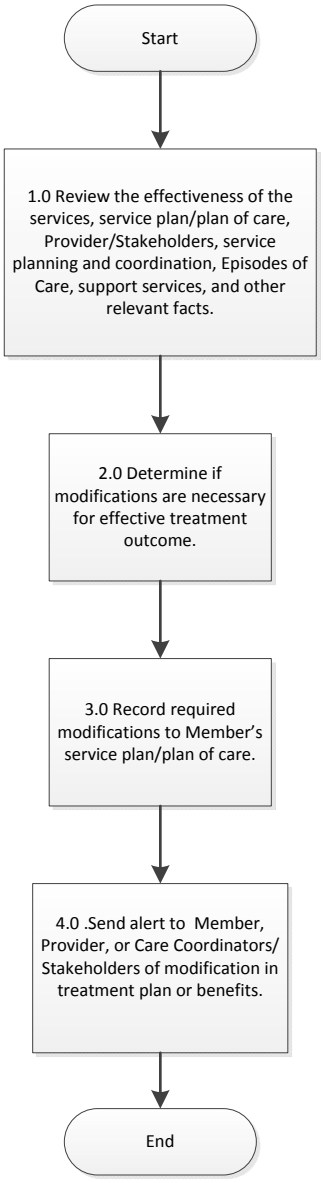
- The Care Manager receives from Health Information Exchange (HIE) or Provider a modification in a Member's Health Outcome.
- The Care Manager receives Service Plan/ Plan of Care from Establish Episode of Care business process.
- The Care Manager receives Service Plan/ Plan of Care or modification from Manage Episode of Care business process.
- A periodic review of Member's Service Plan/Plan of Care is due.
- A request is received to review a Member's Service Plan/Plan of Care.

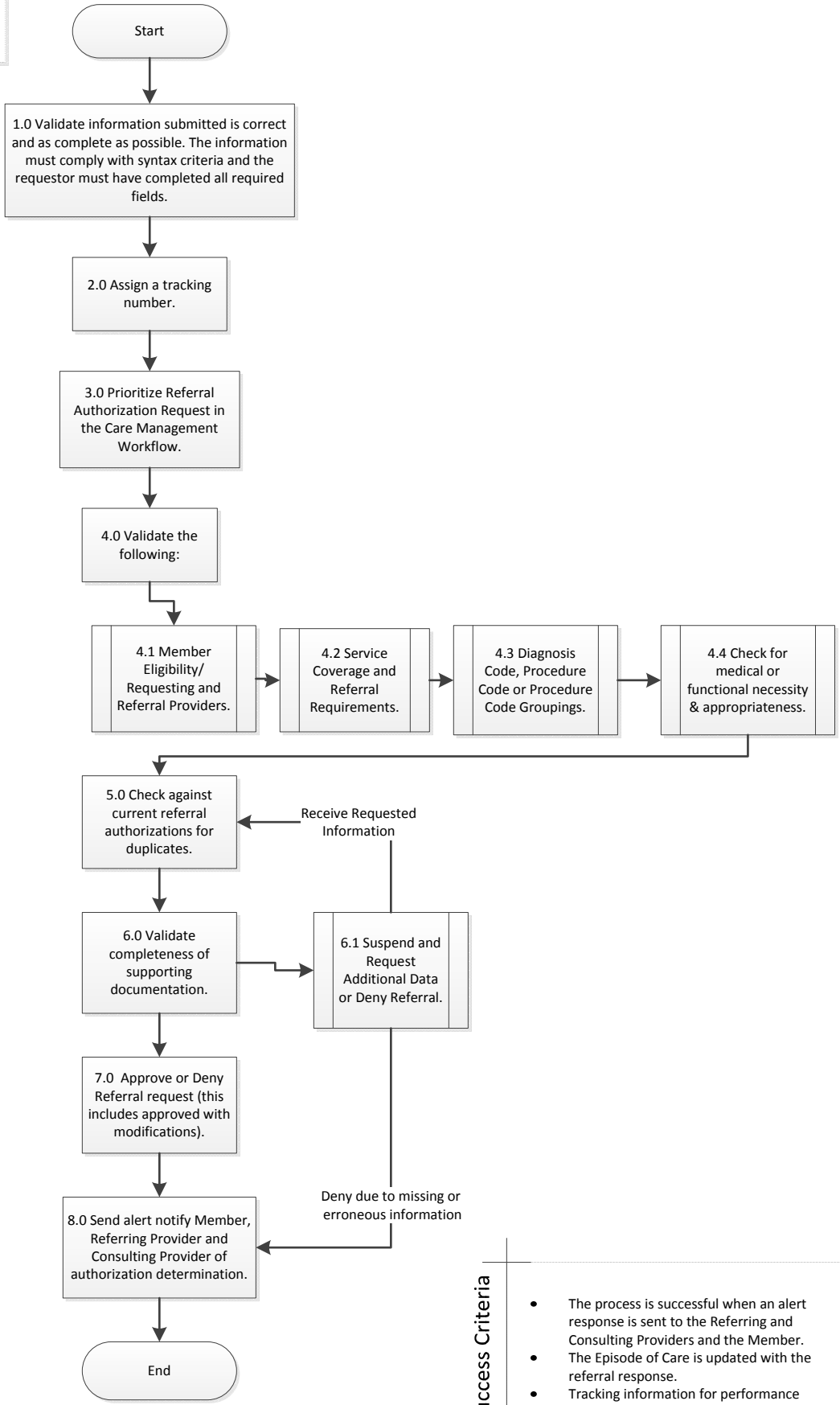


Success Criteria

- The process is successful when the Member's Service Plan/Plan of Care and Outcomes are appropriate for their needs.
- Modifications of the Member's Service Plan/Plan of Care are sent to the Health Information. Exchange (HIE) and Member's Service Plan/Plan of Care.
- The Member, Provider and Care Coordinators are notified of the Service Plan/Plan of Care or modifications.
- The appropriate tracking information for measuring performance and business activity monitoring is captured.

Trigger Event

- Receive a Referral request from an authorized Provider.

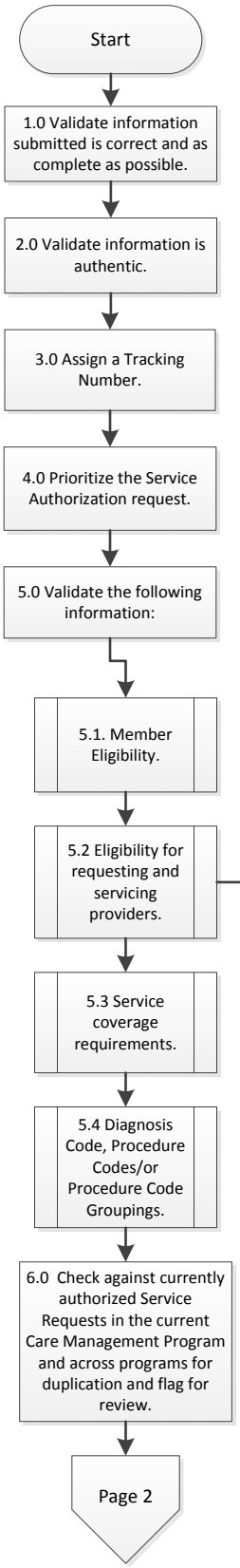


Success Criteria

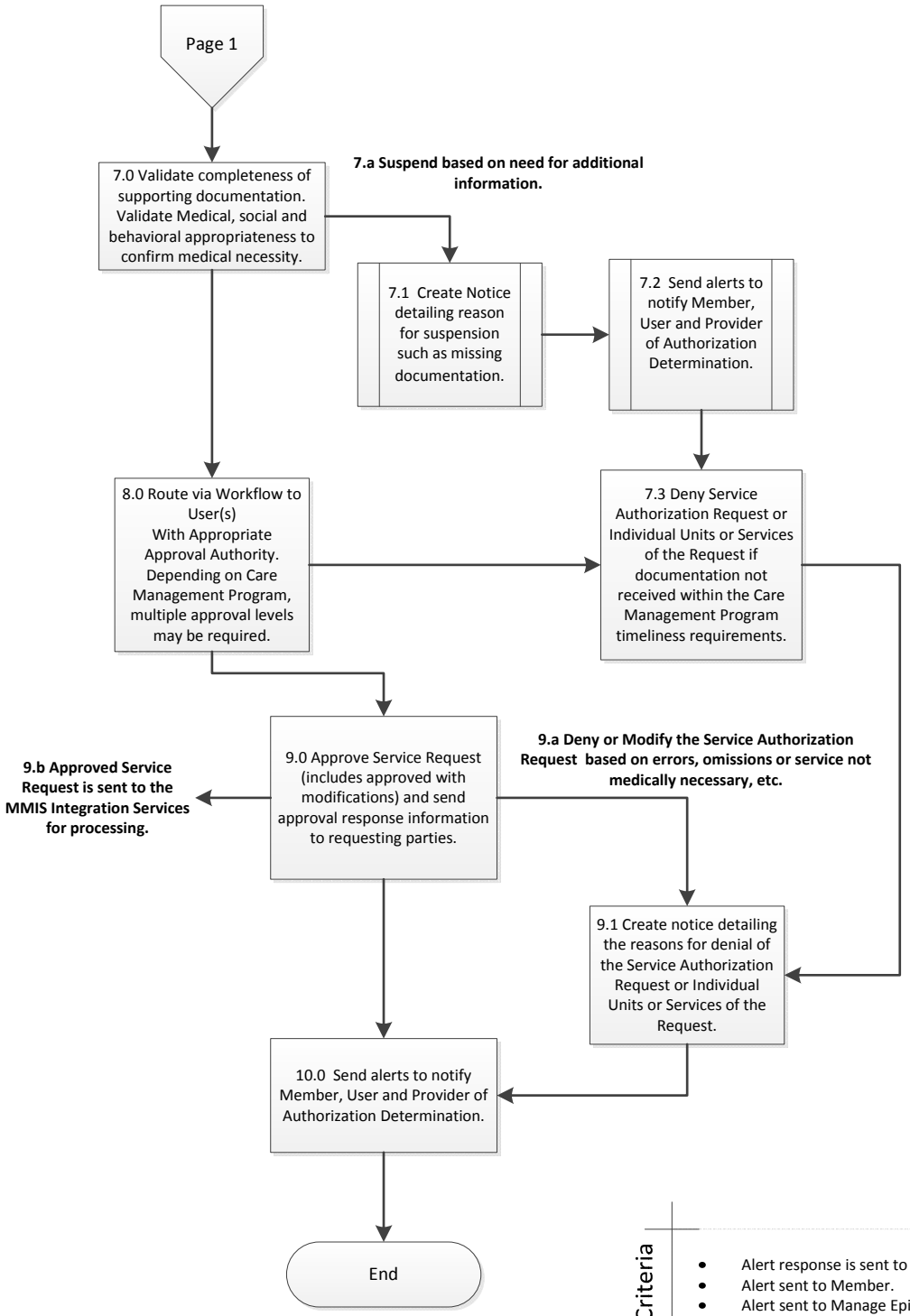
- The process is successful when an alert response is sent to the Referring and Consulting Providers and the Member.
- The Episode of Care is updated with the referral response.
- Tracking information for performance measures and business activity monitoring are captured.

Trigger Event

- Receive Service Request from MMIS Integration Service.
- Receive a Service Authorization Request from Health Information Exchange or other recognized standard such as ASCI.
- Environment based triggers to include but not limited to:
- Provider submits a request for service in accordance to state policy.
- Provider submits additional information for existing service request.



5.2a Based on business rules for each Episode of Care program, the authorization process will stop at process 5.2 if the involved providers are not contracted. Other Episode of Care programs will continue through process 7.0 and then stop for non-contractor providers.



Success Criteria

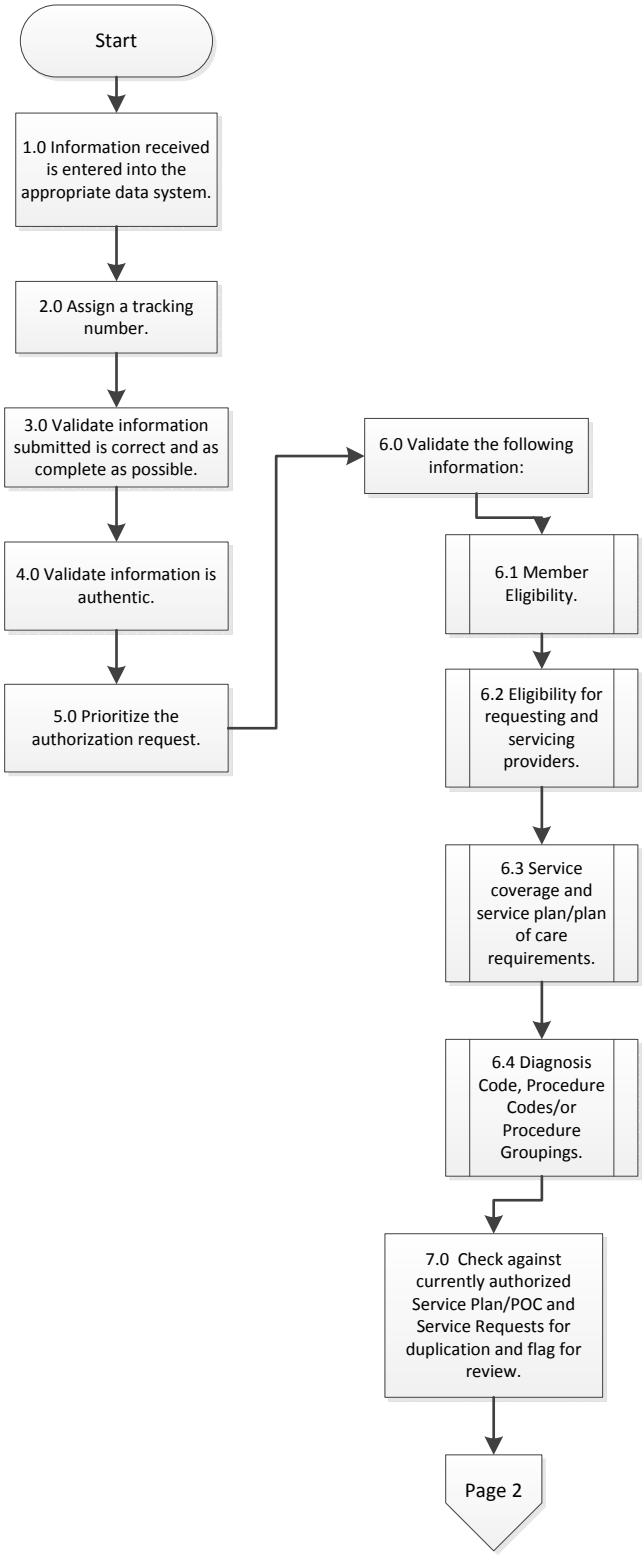
- Alert response is sent to the Requestor.
- Alert sent to Member.
- Alert sent to Manage Episode of Care Information.
- Successful processing of the Service Request by MMIS Integration Service. Authorization processing.
- Tracking information is produced as needed for measuring performance and business activity monitoring.

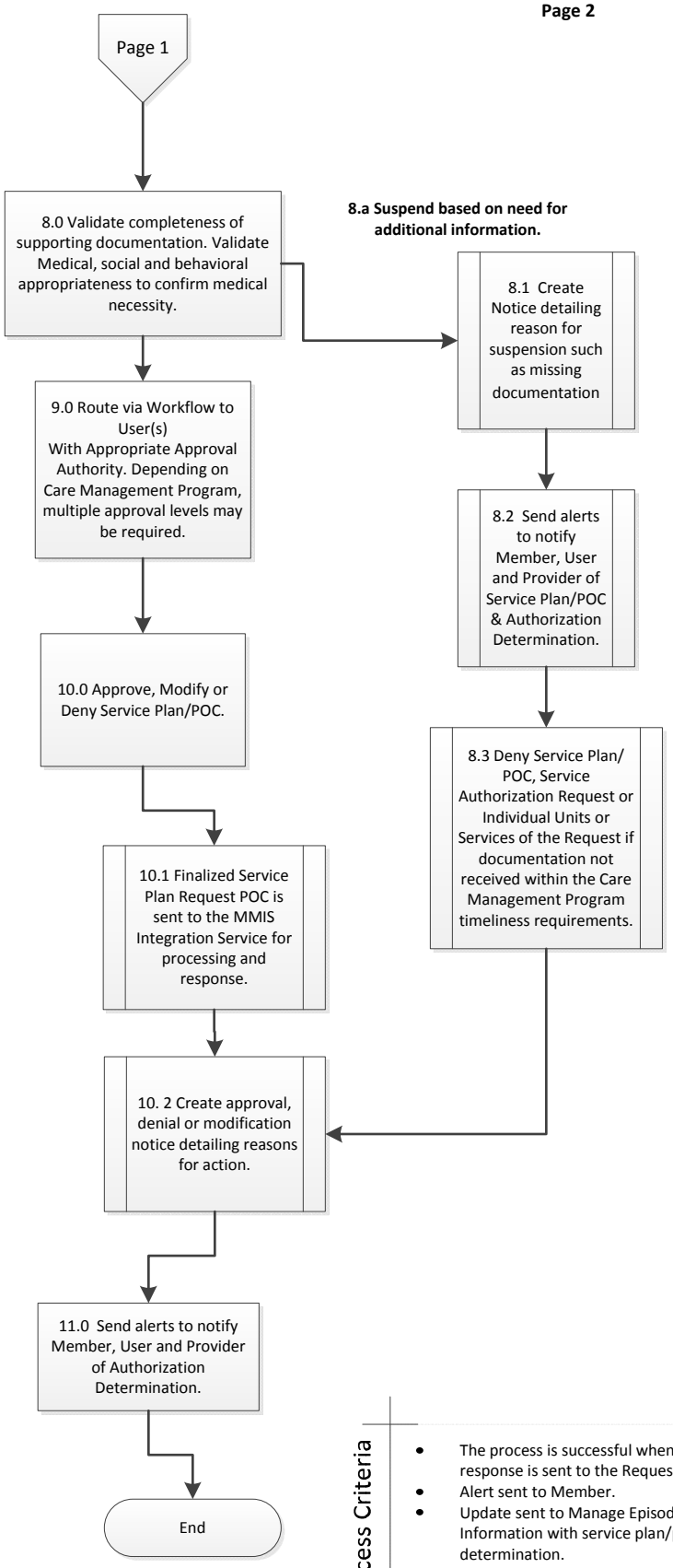
UC-CM-09-Authorize Service Plan/Plan of Care

Page 1

Trigger Event

- Receive a Treatment Plan request from Health Information Exchange or other recognized standard such as the ASC.
- User (Care Manager) submits a request for treatment plan authorization.
- Provider submits a request for treatment plan authorization in accordance with state policy.
- Provider submits additional information for existing treatment plan request.





Success Criteria

- The process is successful when an alert response is sent to the Requestor.
- Alert sent to Member.
- Update sent to Manage Episode of Care Information with service plan/plan of care determination.
- Successful processing of the Service Request by MMIS Integration Service.
- Tracking information for performance measures and business activity monitoring are captured.