Mobile Care Coordinator Program

Year 1 Quarter 4

Reporting Period: 1/1/2021 through 3/31/2021

SouthernCoastal FUND

GUARDIAN NURSES Healthcare Advocates

The Guardian Nurses Way: Celebrate Success

Catching people doing the right things is more effective than catching people doing the wrong things. Give meaningful acknowledgement and appreciation – in all directions throughout our company.

We Track Mobilized Nursing Outcomes in Three Areas

Highlights

- Happy Anniversary!!!!
- Not even a global pandemic could stop us!
- More than 1,100 members and 170 mobilizations!
- Established good relationships with local healthcare resources
- Seventy direct calls in Year 1!

Mobilized Nursing Outcome:

Improving Care

Acute Program

"That's Too Many Medications to Take"

MCC engaged with 48 y/o member while inpatient at rehab facility for stroke. MCC educated member on possible residual effects of stroke and the need for follow up care with Neurology and Cardiology. MCC offered accompaniment to Cardiology but member declined. During follow-up call member shared she had a bad experience with the physician and didn't understand why so many medications were prescribed so she stopped taking many of them. MCC explained the risks of discontinuing the medications and persuaded her to allow MCC to accompany to next appointment. MCC reviewed medications with member and discovered a discrepancy and informed MD of meds she had stopped taking, resulting in adjustments being made. Member pleased with visit with MCC present and now following prescribed treatment plan. MCC also accompanied to Neurology with positive outcome. Member continues to be engaged and will be transferred to the Complex Program.

7	**Accompaniments (1 Virtual)**
4	Psychosocial Needs Assessed & Addressed
2	Expedited Care
11	**Hospital/Rehab Visits**
3	Identified & Engaged Member with High Cost Claims
2	Safety Needs Assessed and Addressed
3	**Home Visits**
1	Medication Reconciliation
21	**Total Mobilized Events**

Mobilized Nursing Outcome:

Improving Members' Experience Acute Program

Meet Patients Where They're At

MCC engaged with 39 y/o member while doing home visit with spouse. Member with history of rectal fistula, experienced complications and infection after multiple surgeries. Member initially insisted on minimal engagement, but would accept phone calls. Finally, member trusted MCC's expertise and engaged. MCC obtained and reviewed medical records to gain a better knowledge of clinical plan. Second opinion at Center of Excellence declined. MCC expedited and accompanied member to multiple surgery appointments to avoid emergency room. Member gained better understanding of treatment plan as a result of MCC presence at appointment. Member now calls MCC with all clinical concerns and requests accompaniments to multiple specialists.

Mobilized Nursing Outcome:

Managing or Reducing Cost

Acute Program

Two 30-Day Readmissions

Fund Notified

1. 57 yo member with fever – sepsis – stable and closed
2. 19 yo dependent with fracture – fever – stable and closed

Check the Paperwork! It Could Prevent a Readmission

MCC engaged 61 y/o member post-hospital discharge for new diagnosis of CHF. MCC supported member to identify and establish care with Cardiology. Member also shared being managed for Diabetes and HTN but was unsure of what changes were made to medications and treatment plan while inpatient. MCC requested and reviewed discharge paperwork, completed medication reconciliation where MCC identified missing medications. MCC coordinated with MD at appointment the next day to ensure medications were corrected and member was well educated. Since engagement, member has had **no** admissions and is transitioning to the Complex Program.

Mobilized Nursing Outcome:

High Claimants (>$400,000 YTD)

Acute Program

Total High Claims 1/1/20-3/31/21 (runout) : $13,013,518.10

Claimant	Diagnosis	Total Claims YTD	Status/Anticipated Needs
1.	ALL	$819,735.23	Disengaged – Post BMT
2.	Lung CA	$741,187.33	**Engaged** – Continued Treatment
3.	Aplastic Anemia	$648,930.84	**Intermittently Engages** – doing well post BMT -should fall off
4.	Bone CA	$607,185.16	Will drop off - Deceased
5.	Factor VIII Deficiency	$583,402.90	Disengaged
6.	End Stage Renal Disease	$492,239.47	Will drop off - Deceased
7.	Breast CA	$474,634.70	Not interested in engaging
8.	Lung CA	$452,315.90	**Engaged** – Continued Treatment
9.	Lung CA	$451,671.57	Will drop off - Retired
10.	Breast CA	$424,609.06	**Engaged** – Continued Treatment

Mobilized Nursing Outcome:

High Claimants (>$70,000 YTD)

Acute Program

1/1/21 - 3/31/21

Claimant	Diagnosis	Total Claims YTD	Status/Anticipated Needs
1.	Prostate CA	$186,134.61	**Engaged** –currently in ICU
2.	Unknown	$107,702.09	Outreach
3.	Factor VIII Deficiency	$106,555.17	Disengaged – Continued Treatment
4.	**COVID-19**	$104,598.78	Closed – doing well, will drop off
5.	Lung CA	$83,724.49	**Engaged** – Continued Treatment
6.	Atrial Fibrillation	$78,671.05	**Engaged**, 2 recent hospitalizations – will accrue
7.	Lung CA	$76,109.62	Disengaged
8.	Crohn's Disease	$75,669.57	Outreach
9.	Unknown	$74,342.70	Will drop off - Deceased
10.	Breast CA	$73,063.46	Disengaged – Continued Treatment

Mobilized Nursing Outcome:

Improving Care

Simple Fix Leads to Engagement

MCC engaged 58 y/o member during outreach call for labs. Member with elevated A1C of 10.4, history of Thyroidectomy secondary to Thyroid Cancer. She reported MD ordered Synthroid but her insurance wouldn't cover brand name, only generic. Member states she had an allergic reaction to the generic and as a result had been paying OOP for Synthroid. Understanding the importance of having this medication, MCC worked with Allen & Assoc to get brand name approved. Member is now taking Synthroid and is open to working towards decreasing her A1C, making diet and lifestyle changes.

Wrapping Our Arms Around Someone

MCC engaged 64 y/o member by direct call from his wife who had concerns for member not managing his own care, PCP not taking ownership, and things being let go. MCC accompanied member to PCP appointment, reviewed preventative tests that patient needed including prostate antigen and colonoscopy. Facilitated and accompanied to appointment with GI doctor, colonoscopy scheduled for this month. Member also complaining of intermittent chest pain. Facilitated and accompanied member to Cardiology appointment, member had full cardiac work up, now with scheduled follow up visits. Member also diabetic, intermittently taking medications. Educated member on importance of medication compliance, and we are working on decreasing A1C. He agreed to Endocrinology appointment if next A1C has not improved and is now knowledgeable and engaged with his care. MCC keeps him up to date on upcoming appointments and checks in frequently with both member and his wife.

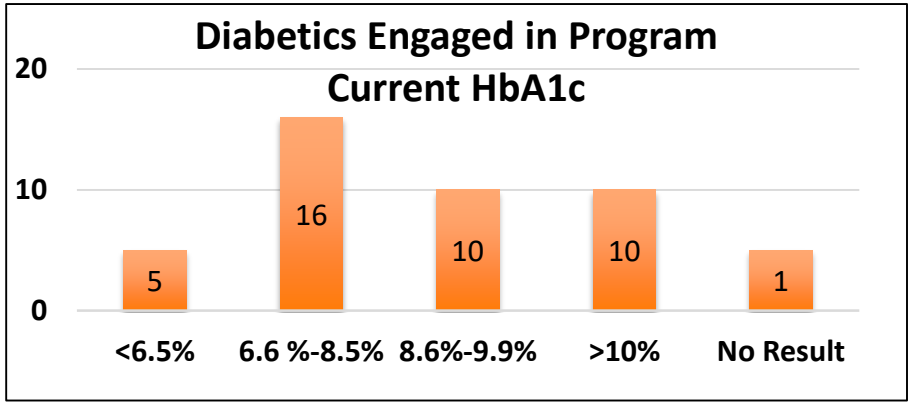
Complex Program

24	**Accompaniments (9 virtual)**
19	Safety Needs Assessed and Addressed
5	Expedited Care
3	**Hospital/Rehab Visits**
3	Shared Understanding of Treatment Plan
1	Identified Member at High Risk for Readmission
3	**Home Visits**
1	Connected Member to PCP/Specialist
30	**Total Mobilized Events**

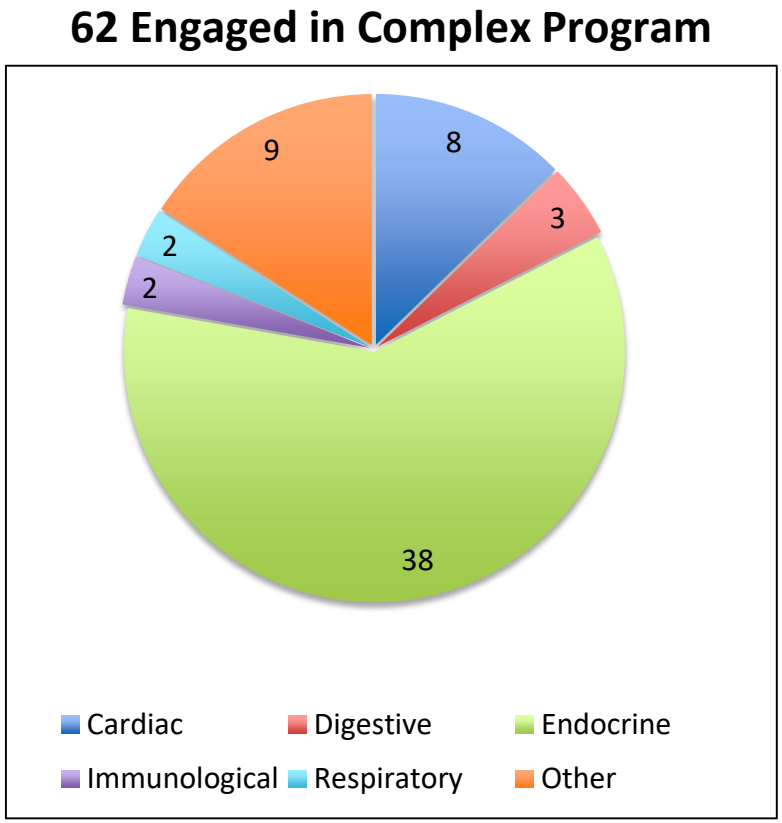
Mobilized Nursing Outcome:

Improving Care:

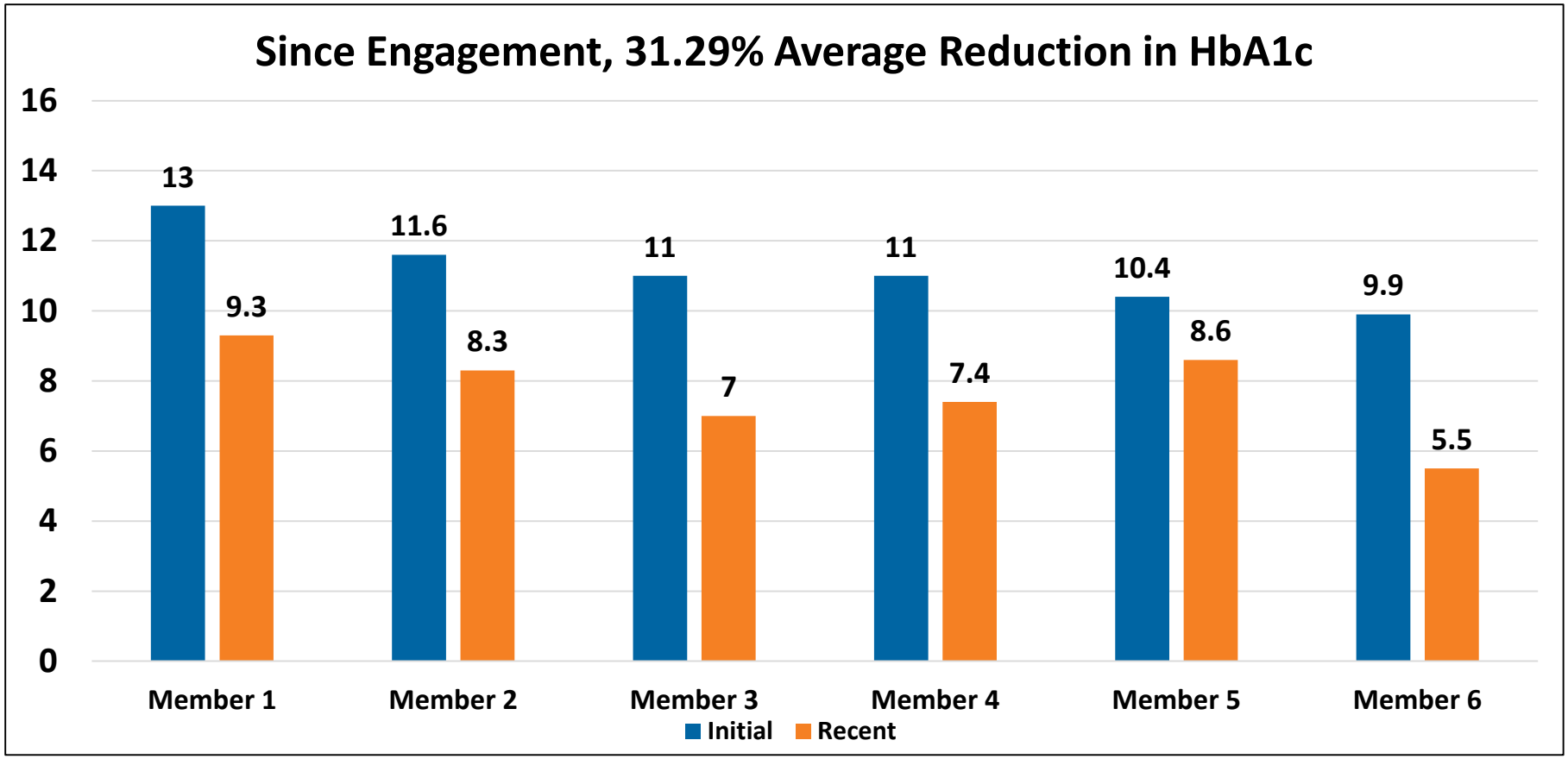
Diabetics Engaged in Program	42
2 or More Complex Diagnoses (60%)	25
Have PCP	42
PCP Manages Diabetes	24
Endocrinologist Manages Diabetes	18



Complex Care Overview



Improving Care: Diabetes Program



Mobilized Nursing Outcome:

Improving Members' Experience Complex Program

Timely Care Prevents Blindness

MCC engaged 44 y/o member during Diabetes outreach call for A1C of 11.6. Member shared with MCC he would not engage until MCC first established a working relationship with spouse, also a diabetic but not on current lab report. MCC assessed and identified both member and wife with multiple needs. Member with Diabetes, on high dose insulin being managed by PCP. Spouse untreated Diabetic with Retinopathy and risk of going blind. Both reported PCP doesn't listen or manage their care. With that, MCC expedited treatment for both member and spouse including; establishing care with retina specialist and accompanied wife to appointment. Also identified new PCP for both and attended appointments. PCP has been successful supporting clinical and behavioral needs. MCC referred member to Center of Excellence, expedited and accompanied to appointment with Endocrinologist. Member's whole medication regimen changed and he now has the Freestyle Libre resulting in much better control of sugars. His most recent A1C is 8.3 down from 11.6. His wife is also engaged with endocrinologist and her A1C is 7.0 down from 11.0. She continues to do well with her treatment plan for diabetic retinopathy. Most importantly, the retina specialist shared with MCC, patient and member, *"if she would have waited too much longer she would have gone blind in her left eye."*

Mobilized Nursing Outcome:

Managing or Reducing Cost

Complex Program

Cat Scratch Fever? Or Infection?

Direct call from 57 y/o member for help managing redness and pain in lower leg. Member was originally engaged with MCC for elevated A1C. Over time, member has grown to trust MCC and reaches out with any clinical need. When MCC received this call, member reported having called PCP to report symptoms, ultrasound was ordered and completed. MCC assessed symptoms with member and quickly discovered she had been scratched by her cat several days prior and had a low grade fever which was not reported to PCP. MCC concerned symptoms were related to an infection or "cellulitis" and not a clot and called PCP to share assessment. Antibiotics were immediately phoned in to pharmacy. Member improved quickly, symptoms resolved and **hospitalization avoided**.

Two Complex Admissions

Diagnosis	Stage
Stroke	Engaged
COVID	Engaged

For Discussion

1. Program Feedback: How are we doing?
2. HSX – Engaged with 17 inpatients in 3 weeks
3. Visiting Schools in the fall?
4. Vaccination Update in NJ

Mobile Care Coordinator

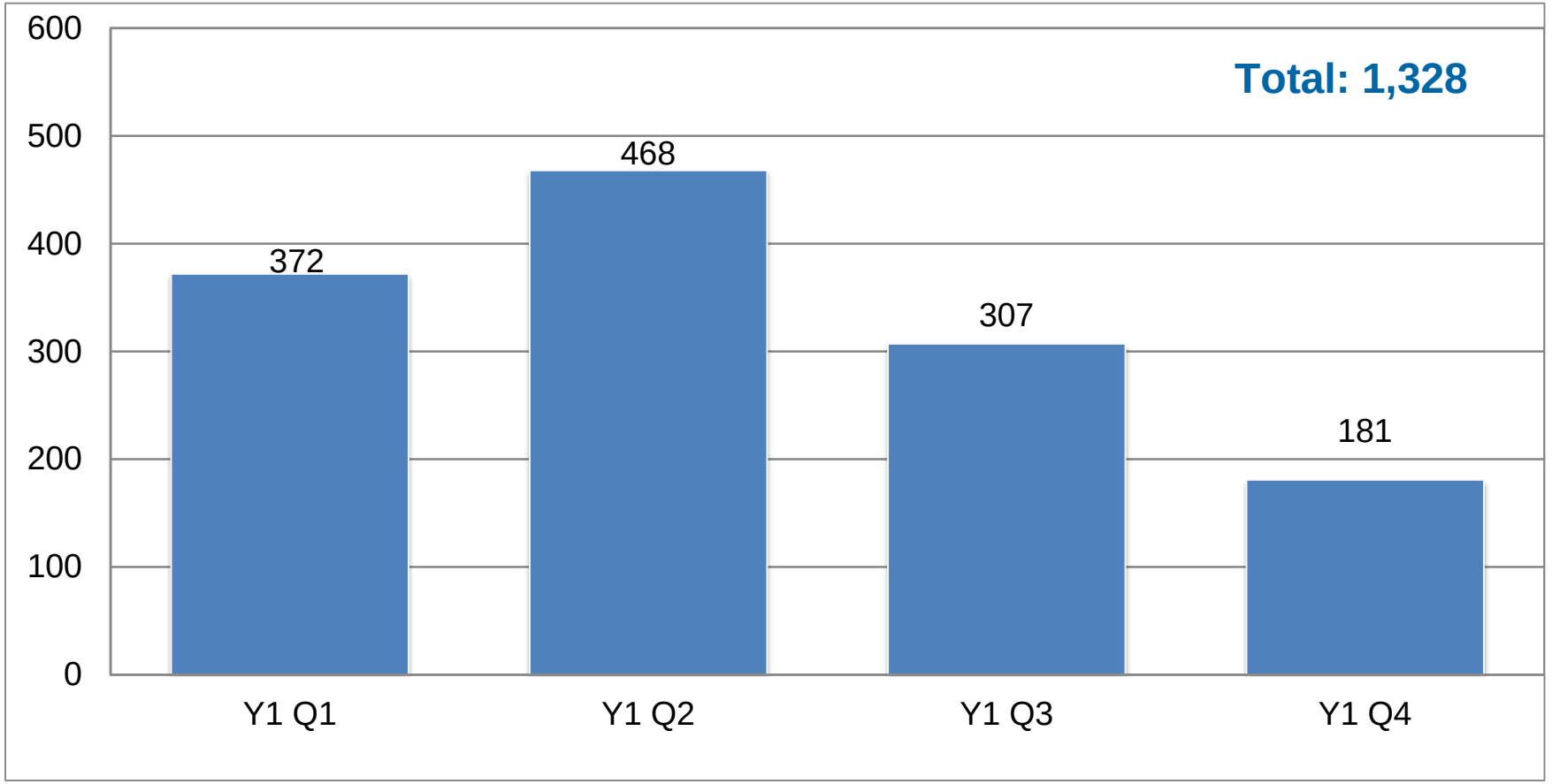
Powered by Guardian Nurses Healthcare Advocates

Southern Coastal FUND

Appendix to Follow

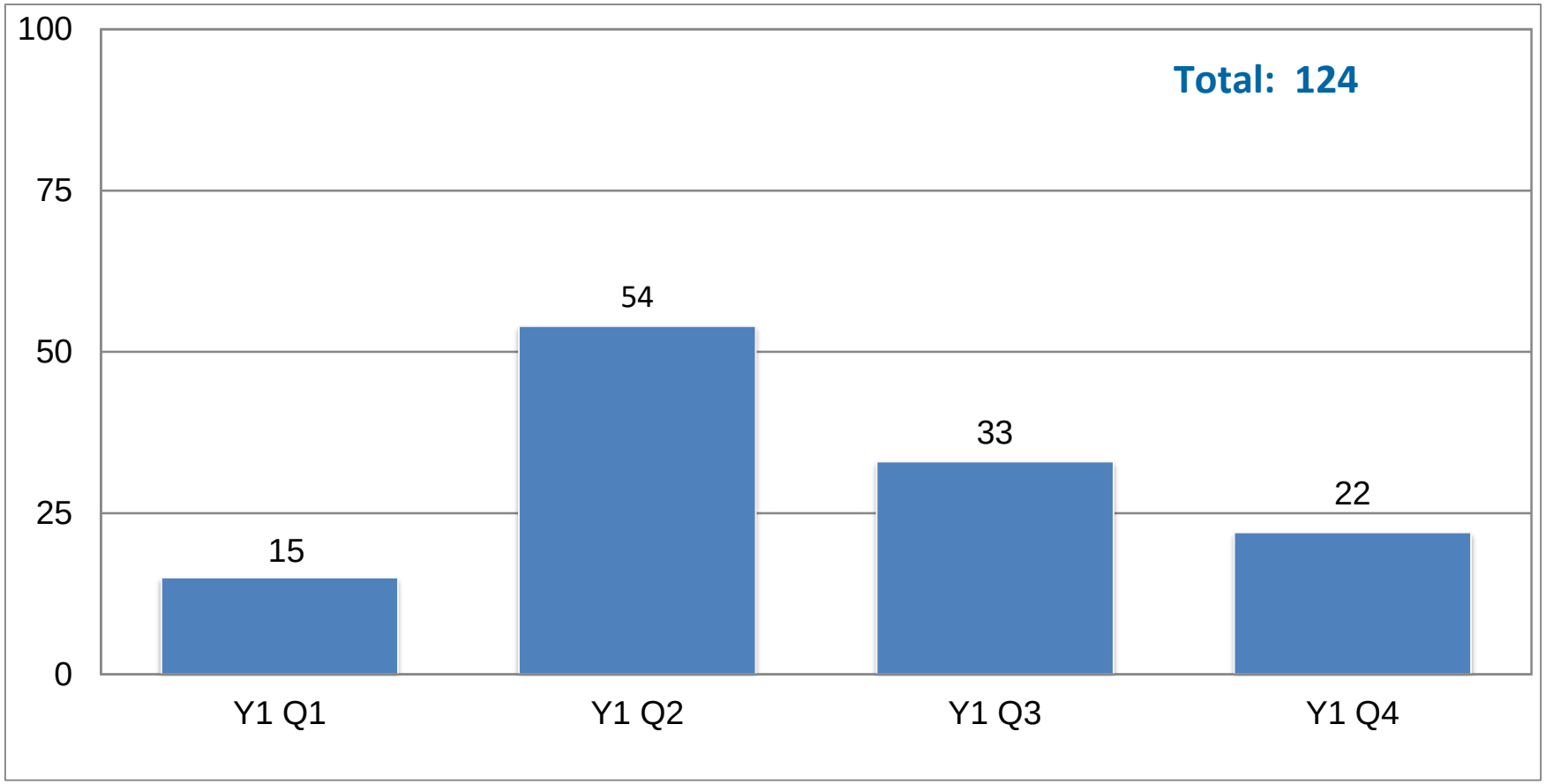
Referrals by Quarter

Acute Program

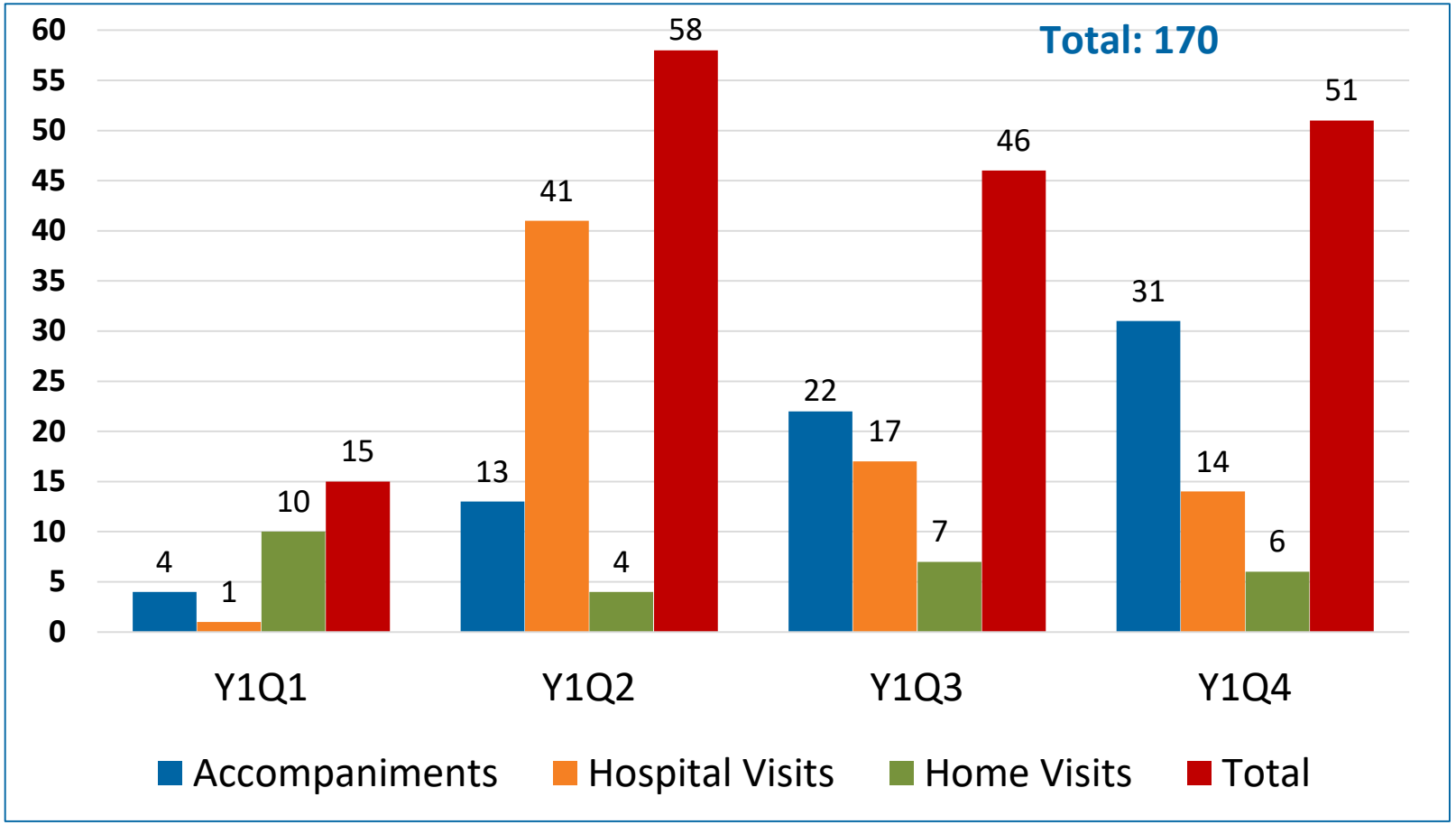


Referrals by Quarter

Complex Program



Total Mobilizations by Quarter



MCC Program Growth – Unique Members Referred