

The Identity Crisis of the Medical Case Manager

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Disclosures

Presenter(s) has no financial interest to disclose.

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Learning Objectives

At the conclusion of this activity, the participant will be able to:

- 1. Define and identify points of medical case management involvement along the NHAS 2020 and HIV Continuum of Care.
- 2. Identify the various roles of the medical case manager and its impact on the delivery of HIV care.
- 3. Discuss ways of developing a supportive environment and provide effective supervision of the multiple roles of the HIV medical case managers.





RYAN WHITE

The Bluegrass Care Clinic

Established 1990 Served over 1400 patients in 2015 Receive RWHAP B,C,D,F funding







Who are Medical Case Managers?





History of Medical Case Management

•1990- Ryan White CARE Act

- Passed and provides support for HIV/AIDS case management as a core component in the delivery of HIV services
- Transition from end of life focus to more long term planning
- •2006- Ryan White Reauthorization
 - Placed emphasis on the provision of life-saving and life-extending services
 - "Care Coordinator" → "Medical Case Manager"





Medical Case Management

"Medical case management services (including treatment adherence) are a *range* of *client-centered* services that link clients with health care, psychosocial and other services. The coordination and follow-up of medical treatments is a component of medical case management. These services ensure timely and coordinated access to medically appropriate levels of health and support services and continuity of care, through ongoing assessment of the client's and other key family members' *needs* and personal *support* systems. Medical case management includes the provision of *treatment adherence* counseling to ensure readiness for, and adherence, to complex HIV/AIDS treatments."





Medical Case Management

"Key activities include :

(1) Initial assessment of service needs;

(2) *Development of a comprehensive, individualized* service plan;

- (3) Coordination of **services** required to implement the plan;
- (4) *Client* **monitoring** to assess the efficacy of the plan;
- (5) Periodic re-evaluation and **adaptation** of the plan as necessary over the **life of the client**

It includes client-specific advocacy and/or review of utilization of services."



Non-Medical Case Management

 "...Includes the provision of assistance in obtaining medical, social, community, legal, financial and other needed services. Non-Medical Case Management does not involve the coordination and follow-up of medical treatments, as does Medical Case Management."



Theoretical Frameworks

- Ecological Model of Care
- General and Family Systems Theory
- Social Network and Support Theories
- Strengths Based Perspective
- Biopsychosocial Perspective



Successful Outcomes

- Increased likelihood of linkage to care^{1,2,3,4,5}
- Reduce unmet needs and structural barriers⁶
- Retained in care⁵
- Adherence to medication⁴
- Improved biological outcomes of HIV^{4,6}
- Higher levels of client satisfaction with care ⁴

¹Brennan-Ing, M., Seidel, L., Rodgers, L., Ernst, J., Wirth, D., Tietz, D., Karpiak, S. (2016, February 5). The impact of comprehensive case management on HIV client outcomes. *PLoS ONE, 11*(2). doi:10.1371/journal.pone.0148865

² Craw, JA., Gardner, LI., Marks, G., et al. Brief strengths-based case management promotes entry into HIV medical care. *Journal of Acquired Immune Deficiency Syndromes*, 2008;47:597-606.
 ³ Gardner, LI., Metsch, LR., Anderson-Mahoney, P., et al. Efficacy of a brief case management intervention to link recently diagnosed HIV-infected persons to care. *AIDS*. 2005;19:423-431.
 ⁴ Kushel, MB., Colfax, G., Ragland, K., Heineman, A., Palacio, H., Bangsberg, DR. Case management is associated with improved antiretroviral adherence and CD4+ cell counts in homeless and marginally housed individuals with HIV infection. *Clinical Infectious Disease*. 2006;43:234-42.

⁵Willis, S., Castel, A. D., T. A., Olejemeh, C., Frison, L., & M. K. (2013, November 1). Linkage, engagement, and viral suppression rates Among HIV-infected persons receiving care at medical case management programs in Washington, DC. Journal of Acquired Immune Deficiency Syndromes, 64(1), S33-S41.

⁶Bradford, JB., Coleman, S., Cunningham, W., HIV System navigation: an emerging model to improve HIV care access. AIDS Patient Care STDS.2007;21(suppl 1):S49-58.

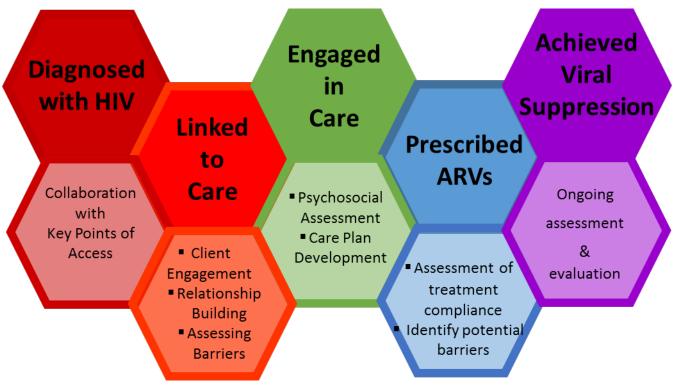


National HIV/AIDS Strategy 2020

Reducing New HIV Infections	 Engagement Education Prevention & Harm Reduction
Increasing Access to Care & Improving Health Outcomes for PLWH	 Collaboration with accessible and appropriate providers Treatment Adherence Assess and address barriers to care
Reducing HIV-Related Disparities & Health Inequities	 Cultural competency Social and structural determinates of health Direct practice and advocacy in community working with marginalized and at-risk communities
Achieving a More Coordinated National Response to the HIV Epidemic	 Resource allocation & coordination of HIV services/programs on a local, state, and geographical level Accuracy and collection of data Accountability



HIV Care Continuum





Making It Work

Integration

- Work closely and directly with medical providers
- Access to medical records and appointment information

Collaboration

- Case Discussion
- Communication

Coordination

- Linkage to other services
- Ongoing assessment

⁷Recommendations for Case Management Collaboration and Coordination in Federally Funded HIV/AIDS Programs. (2013, June 23). Retrieved August 8, 2016, from https://npin.cdc.gov/publication/recommendations-case-management-collaboration-and-coordination-federally-funded-hivaids



Supervision & Support

- Hiring Process
- Ongoing training and educational support
- Open Door & Individual Consultation
- Specialized Case Loads & Case Load Leveling
- Case Conferencing & Review
- Environment that fosters support and team collaboration
- Flexibility
- Community Collaboration



The Future of MCM

- Advocacy
- Retention & Adherence
- Linkage to Care
- Mental Health/ Substance Abuse



References

¹Brennan-Ing, M., Seidel, L., Rodgers, L., Ernst, J., Wirth, D., Tietz, D., Karpiak, S. (2016, February 5). The impact of comprehensive case management on HIV client outcomes. *PLoS ONE*, *11*(2). doi:10.1371/journal.pone.0148865

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⁸ Rowan, D. (2013). Social Work with HIV & AIDS A Case-Based Guide. Chicago, IL: Lyceum Books.

⁹ U.S. Department of Health and Human Services. *HRSA Care Action: Redefining Case Management,* November 2008.



Questions?

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