

Request for Information – Diabetes Management Survey Due December 18, 2015

Rider 84 of the General Appropriations Act (2016-2017) mandates that HHSC submit a report to the Texas Legislature and Governor regarding disease management education services for individuals diagnosed with diabetes.

INFORMATION REQUEST

HHSC requests all Medicaid MCOs to provide responses to a survey on diabetes disease management policies and procedures available at this link

<https://www.surveymonkey.com/r/ZDW6F5M> by December 18, 2015.

For your convenience we have included a PDF with all the questions. The information you provide will be considered for inclusion in the legislatively-required final report. All MCO responses will be presented anonymously (no plan will be identified and connected to specific survey responses in the report). The report will also not include any proprietary information from the plans.

All Medicaid MCOs are expected to complete the survey provided below for each of the STAR, STAR Health or STAR+PLUS programs in which the MCO participates (e.g. if an MCO participates in STAR and STAR Health, than two surveys should be completed).

Please email any questions you have regarding the survey to Alex Melis, Policy Analyst at alex.melis@hhsc.state.tx.us.

MCO Diabetes Disease Management Survey

BACKGROUND

Rider 84 of the General Appropriations Act (2016-2017) mandates that HHSC submit a report to the Texas Legislature and Governor regarding disease management education services for individuals diagnosed with diabetes.

Managed Care Organizations (MCOs), under the Terms of the Uniform Managed Care Contract (UMCC), must provide or arrange the provision of comprehensive disease management (DM) programs consistent with state and federal statutes and regulations. The Uniform Managed Care Manual (UMCM) further requires that MCOs participating in STAR and STAR+PLUS include diabetes as a diagnosis covered under their disease management education programs. The UMCM specifies that STAR Health must provide disease management services for Chronic or Complex conditions prevalent in the STAR Health population.

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Thank you for your participation in this survey.

1. Name of Organization (choose one):

- Aetna
- Amerigroup
- Blue Cross and Blue Shield of Texas
- CHRISTUS
- Cigna-HealthSpring
- Community First Health Plans
- Community Health Choice
- Cook Children's Health Plan
- Driscoll Children's Health Plan
- El Paso First
- FirstCare
- Molina Healthcare of Texas
- Parkland
- Right Care from Scott and White Health Plans
- Sendero Health Plans
- Seton Health Plan
- Superior HealthPlan
- Texas Children's Health Plan
- UnitedHealthcare Community Plan

2. Please indicate which program you provide services under (choose one):

- STAR
- STAR Health
- STAR+PLUS

3. If you operate multiple Medicaid programs, is your disease management program the same for all programs?

- Yes
- No (If no, please submit a separate survey for each program)

4. How does your MCO identify members diagnosed with diabetes (choose as many as apply)?

- Physician/Provider claims/encounter data
- Inpatient hospital claims/encounter data
- Emergency room claims/encounter data
- Pharmacy data

- Case Management
- Utilization Management
- Provider Referrals
- Self or Family Referral
- Health Risk Assessments
- State or Community Referral
- By a Disease management vender
- Other (enter text:) _____

5. How does your MCO identify members with **pre-diabetes** (choose as many as apply)?

- Physician/Provider claims/encounter data
- Inpatient hospital claims/encounter data
- Emergency room claims/encounter data
- Pharmacy data
- Case Management
- Utilization Management
- Provider Referrals
- Self or Family Referral
- Health Risk Assessments
- State or Community Referral
- By a Disease management vender
- Other (enter text:) _____

6. What nationally recognized guidelines or models are used to develop diabetes education curriculum for your disease management program (choose as many as apply)?

- American Diabetes Association (ADA) Guidelines
- Texas Diabetes Council (TDC)
- National Committee on Quality Assurance (NCQA)
- Utilization Review Accreditation Commission (URAC)
- American College of Obstetricians and Gynecologist (ACOG),
- American Heart Association (AHA)
- Centers for Disease Control and Prevention (CDC),
- Mayo Clinic
- Milliman,
- National Diabetes Information Clearinghouse (NDIC),
- National Institute of Diabetes and Digestive and Kidney Disease (NIDDK)
- National Institute of Health (NIH)
- The Journey for Control (Merck & Co. Inc.)
- Other (enter text:) _____

7. Are diabetes disease management services provided internally by the MCO, or a third party contract?

- Provided internally
- Third party contractor. (Please enter vendor name: _____)

8. What is your process for enrolling members in diabetes disease management (choose as many as apply)?

- Client is contacted by phone, mail or electronically and informed of the program
- with the option to participate
- Automatic enrollment with the option for the member to opt-out of participation
- Other (enter text:) _____

9. How do can members request diabetes disease management services from the MCO?(choose as many as apply)

- Phone
- Fax
- Mail
- E-mail/Website
- Physician or health practitioner referral
- Other (enter text:) _____

10. Which methods of diabetes disease management are provided by the MCO to its members? (choose as many as apply)

- Individual face to face counseling
- Individual telephonic counseling
- Individual video counseling
- Individual on-line counseling (e.g., instant messenger or chat)
- group classes
- computer based training
- publications (e.g., brochures, videos)
- (enter text): _____
-

11. Who performs the services for the MCO that are associated with the diabetes disease management (choose as many as apply)?

- Physician
- Nurse
- Certified Diabetes Educator (CDE)
- Nutritionist/Dietician
- Social worker
- Health Educator
- (enter text): _____

12. How do you assist members to find community resources under your diabetes disease management program (choose as many as apply)?

- Case Manager makes community referrals
- Diabetes Disease Management Coach or other specialized/certified diabetes disease management worker makes community referrals
- Member is provided list of resources or directed to appropriate websites
- Member is assisted in enrolling in community-based diabetes education classes

- and support groups
- Other (enter text:) _____

13. What protocols does the MCO have in place to ensure that primary and secondary diabetes preventive services are provided and tracked (choose as many as apply)?

- Case Management
- Claims Systems Research
- Other (enter text): _____

14. What incentives does the MCO offer to providers to better manage the care of patients with diabetes?

- Financial incentives (e.g., bonus) based on quality
- Recognition of excellence for quality or innovation
- Other (enter text): _____
- None

15. What screening tool does your MCO use to identify member at risk or a diagnosis of gestational diabetes (choose as many as apply)?

- Case Management
- Claims Systems Research
- Risk Assessment
- Physician screenings
- Other (enter text): _____

16. If diagnosed with gestational diabetes, what type of follow-up care services are provided by the MCO to members to avoid complications during pregnancy (choose as many as apply)?

- Case Management
- Nurse or PCP assessment
- Online resources
- Community referrals
- Medication/supplies
- Disease self-management
- Dietician or nutritionist
- Other (enter text): _____

17. Describe typical MCO follow-up or ongoing care for members with gestational diabetes provided post-partum (i.e., testing of mother for type 2 diabetes, information regarding future risk for type 2 diabetes for mother and child) (choose as many as apply)?

- Case Management
- Nurse or PCP assessment
- Online resources
- Community referrals
- Medication/supplies
- Disease self-management

- Dietician or nutritionist
- None provided
- Other (enter text): _____

18. Name, Title and Phone of Person Completing Survey