

Section 12

Disease Management Program



The Disease Management Program is designed to work with members diagnosed with diabetes, asthma, or other chronic health conditions by providing them the necessary self-management tools they need to properly manage their condition/s. The ultimate goals are to improve patients' current health status, achieve optimal health outcomes, and to avoid future complications of chronic disease/s.

Alliance members with asthma, diabetes and/or other chronic health conditions are identified using administrative, encounter, and pharmacy data. Members can also be referred to these programs by their PCP or other Alliance case management staff, or can self-refer. PCPs are notified about high-risk members via the Provider Portal and other means. High risk members are those with a high incidence of hospitalization and emergency department (ED) usage, those with screening deficiencies and members who have not had PCP contact for more than 12 months. Additionally, we support PCPs by providing clinical practice guidelines, useful clinical forms, and technical assistance as needed.

Health Programs staff work with members to refer them to health education classes, provide them with health education materials and refer them to additional community resources and services that are culturally and linguistically appropriate for the Alliance's diverse membership. Members also receive letters with basic health information about self-management of their conditions and the importance of regular PCP visits and routine screenings.

Chronic Disease Self-Management Workshops

Chronic diseases such as diabetes, asthma and chronic obstructive pulmonary disease require ongoing care and often affect an individual's overall quality of life. Often these conditions are best managed or avoided through prevention, a combination of clinical services, health education, counseling and community based interventions. Through Stanford University's Chronic Disease Self-Management Program, the Alliance has implemented the Healthier Living Program; a series of self-management workshops designed to help individuals with chronic conditions build the confidence to manage their health and maintain an active and fulfilling life. Participants can develop self-management skills in an interactive learning environment, sharing experiences with others who have a chronic condition and providing mutual support.

Workshops cover 17 hours of material over a six-week period and are conducted at local and convenient locations in the community. Workshops focus on common problems among individuals suffering from any chronic condition(s) and supports them with:

- Pain management
- Nutrition
- Physical activity
- Medication usage
- Communicating with doctors

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Participants who complete the series receive: A book titled *Living a Healthy Life with Chronic Conditions* and an audio CD called *Relaxation for Mind and Body* to assist in their chronic disease self-management. Alliance members who participate in the weekly sessions and who complete all six classes can receive a gift card of the amount of \$50. In addition, participants are entered in a raffle to win prizes.

There is no cost for Alliance members to participate. Workshops are conducted in English and in Spanish at convenient locations in the community. Members can be referred to Health Programs by their PCP or other Alliance case management staff, or can self-refer. For more information on how to refer Alliance members to this program or to receive a copy of a current workshop schedule, please call the Alliance Health Education Line at (800) 700-3874 ext. 5580.

Clinical Health Education Benefits

The following Clinical Health Education services are covered by the Alliance as an expanded benefit. Please visit the [provider website](#) for important information, including required program components, billing and reimbursement guidelines, and the approved providers list. Education providers must be pre-approved by the Alliance to bill for these services. ARs are not required for the basic program, as outlined below; however, ARs may be submitted to request additional services, if medically necessary.

Asthma Education

The Alliance covers up to six (6) hours of comprehensive asthma self-management education, including up to four (4) hours of individual training and the remaining hours as group training during the initial twelve-month period after an asthma diagnosis, with up to two hours of follow-up during each subsequent year. Education providers must be pre-approved by the Alliance to bill for these services. Education is provided on an individual or group basis and is delivered and/or supervised by a Respiratory Therapist (RT) or nationally certified Asthma Educator (AE-C). PCPs should include relevant medical history when referring patients and the asthma education provider will contact the member's PCP when indicated.

Diabetes Prevention and Self-Management Education

Diabetes Prevention Education

Members of any age diagnosed with pre-diabetes can participate in diabetes prevention education for up to 16.5 hours of group training during the initial twelve-month period. These services are provided through Alliance-approved pre-diabetes education providers, which use an evidence-based curriculum for pre-diabetes education and who can bill for these services. Members can be referred by their PCP or other Alliance case management staff, or can self-refer.

Diabetes Prevention Program (DPP)

The DPP program covers a minimum of 22 DPP sessions for the first 12 months and eight (8) quarterly sessions during the second year of the DPP benefit. These services are provided through Alliance-approved DPP education providers who can bill for these services. The DPP is an evidence-based lifestyle change program, taught by peer coaches, designed to prevent or delay the onset of type 2 diabetes among individuals (ages 18 and older) diagnosed with prediabetes. The DPP is taught in a classroom setting in a small group, participants learn about healthier eating, physical activity and other behavior changes. This is a

two year-long program. Alliance-approved DPP providers must meet the Centers for Disease Control and Prevention (CDC) Diabetes Prevention Recognition Program (DPRP) and be enrolled in the Medi-Cal Program with DHCS. In addition, once a provider meets the CDC and the DHCS requirements, in order to participate in the Alliance DPP network, a provider must sign an agreement and be approved prior by the Alliance before rendering DPP services to Alliance members. Please visit the [DHCS website](#) for important information, including required Medi-Cal program components. Members can be referred by their PCP or other Alliance case management staff, or can self-refer.

Diabetes Self-Management Program (DSMP)

Up to 20.5 hours (4 hours of individual training and up to 16.5 of group training) of Comprehensive Diabetes Self-Management Education is covered during the initial twelve-month period after diagnosis, with up to two hours of follow-up during each subsequent year. Education providers must be pre-approved by the Alliance to bill for these services. Education is provided on an individual or group basis and is delivered by a physician, Certified Diabetes Educator or by a Registered Nurse or Registered Dietitian who meets specific criteria. Physicians should include relevant medical history when referring patients and the diabetes education provider will contact the member's PCP when indicated. Members under 21 years of age should be referred to a CCS-approved Special Care Centers (SCC) for coordination of diabetes care including education by a CCS paneled provider, as appropriate.

For more information on **Diabetes Prevention and Self-Management Education** services, please refer to the the benefit description on the [provider website](#) or call the Alliance Health Education Line at (800) 700-3874 ext. 5580.

Breastfeeding Support

The Alliance gives new moms access to breastfeeding education, support, and free to low-cost community resources. The Alliance breastfeeding support benefit covers:

1. Two hours with an International Board Certified Lactation Consultant (IBCLC), outside the hospital stay, when medically necessary (inpatient lactation education is included in the hospital per-diem). The IBCLC will assist the member with complex problems, such as mastitis, suppressed lactation, etc., and must be pre-approved by the Alliance to bill for services.
2. Members can access a breast pump at no cost to them if either mom or baby has medical issues that prevent nursing at the breast (when medically necessary), or if the mother is returning to work or school and wants to continue breastfeeding. Alliance members are eligible for one personal use breast pump every three years. If there is a need for a second breast pump during the three-year period, an Authorization Request must be submitted with documentation stating the reason that the original pump cannot be used.
3. Replacement breast pump supplies, effective November 1, 2018, in accordance with the DHCS, a Treatment Authorization Request (TAR) must be submitted justifying the need for any breast pump supplies for DME to be replaced. The following HCPCS for breast pump supplies codes require a TAR: A4281, A4282, A4283, A4284, A4285, and A4286. These codes may not be reimbursed when provided within the same month of service as a breast pump codes E0602 and E0603. Breast pump supplies can be ordered as a replacement part. This would not have any impact on the breast pump with original supplies- those would continue to be available without prior authorization if member meets breast pump eligibility criteria.

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4. Up to one visit per day with a home health nurse from a contracted home health agency is covered for common breastfeeding problems and routine postpartum care. A TAR is required.