



Adirondack Health Institute

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POLICY AND PROCEDURE

Title: Access to Care

Department: Health Home

Intended Population: Health Home Serving Adults and Children

Effective Date: 2/1/2019

Review Date: 7/1/2020,

7/1/2021

Purpose of Policy

To ensure that all AHI Health Home participants have 24 hours-per-day/7 days-per-week (24/7) telephone access to Care Management staff.

Scope

This policy applies to all AHI Health Home Service Providers that serve Health Home participants.

Statement of Policy

AHI shall develop, disseminate, and review at least annually an Access to Care Policy that addresses purpose, scope, roles and responsibilities, management commitment, coordination among organization entities, and compliance. AHI shall formalize documented procedures to facilitate the implementation of the Access to Care Policy.

Definitions

AHI HH: AHI Health Home, a designated lead Health Home by the New York State Department of Health

Health Home Network Partners: The group of medical, behavioral, social services, and other community-based organizations by which a Health Home Participant receives services to address needs identified on the comprehensive care management plan developed by the Health Home Participant's AHI Health Home Services Provider.

Health Home Participant: A Health Home Candidate who is participating in the AHI Health Home and is assigned to an AHI Health Home Services Provider for care management.

Health Home Service Provider: An organization that has a fully executed contract (the "Health Home Services Provider Agreement") with the Adirondack Health Institute to provide health home outreach and/or care management services.

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Care Management Record System: A structured information system, maintained by the Adirondack Health Institute Health Home (AHIHH), and made available for Health Home Service Providers and Health Home Network Partners to utilize, as applicable and appropriate to their role in the Health Home.

Background

The Access to Care Policy at AHI is intended to facilitate the effective implementation of the processes necessary to meet the Health Home Program standards and requirements as stipulated by the NYS DOH, federal regulations, and best practices. This policy directs that AHI meet these requirements.

POLICY

It is the policy of the Adirondack Health Institute Health Home (AHI HH) that for each Health Home member, telephonic access is available 24/7 to Care Management staff in the event of a crisis or urgent concern.

PROCEDURE: 24/7 ACCESS TO CARE ELEMENTS AND REQUIREMENTS

1. Upon enrollment, the Health Home Participant and/or their Parent(s)/Legal Guardian will be provided with contact information for the Health Home Service Provider, the Primary Care Manager assigned to the individual/family, as well as alternate numbers that can be utilized after normal business hours, to address non-life-threatening concerns or issues.
2. The Health Home Participant and/or their Parent(s)/Legal Guardian will be educated on the use of all contact numbers.
 - a. It is the responsibility of the Primary Care Manager to ensure that their clients have been given the after-hours on-call phone number, and that clients are encouraged to reach out to the Care Manager, or on-call number as their first point of contact in non-life-threatening emergencies.
3. Recorded messages on the Health Home Service Provider's voicemail system will direct Health Home Participants to the on-call number after normal business hours.
4. Telephonic access to care management staff will remain available during non-business hours, weekends, and holidays.
5. When responding to the call, the on-call Care Managers will do the following:
 - a. Identify the situation or concern and provide needed information, support and assistance.
 - b. Determine if medical/behavioral treatment is warranted.
 - i... If a visit is warranted, the on-call Care Manager will assist with coordination of care with an available facility (e.g. urgent care, emergency department, physician after-hours clinic).
 - ii... If there is a life-threatening event, the on-call Care Manager will call 911 for emergency responders to be sent to Health Home Participant's current address or stated location.



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- c. The on-call Care Manager will refer to the Health Home Participant's Plan of Care and crisis plans, providing feedback and advising accordingly. If it is determined that the issue can be deferred to the Health Home Participant's primary care physician, then the client will be advised as such and assisted in scheduling a priority appointment.
 - i... The on-call Care Manager will notify the Primary Care Manager and Care Management Supervisor of the situation and provided recommendations/action taken no later than the next business day.
 - ii... The Primary Care Manager will follow up with the Health Home Participant within five business days if non-urgent, and within 2 business days if there was a life-threatening event or other crisis.
6. Documenting a Call:
 - a. When receiving a call after hours, the details of the call will be documented in the Care Management Record System under progress notes.
 - b. The information will be shared with the Primary Care Manager and the Care Management Supervisor.
 - c. The Primary Care Manager and/or Care Management Supervisor will follow up with the Health Home Participant within five business days if non-urgent, and within 2 business days if there was a life-threatening event or other crisis, and the details of the call will be documented in the Care Management Record System under progress notes.
 - d. The Primary Care Manager will update Plan of Care as needed to address any unmet needs.

Contact Person: Director, Care Management and Health Home

Responsible Person: Health Home Service Provider

Approved By: Chief Operating and Compliance Officer