University of Michigan

Complex Care Management Program

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CCMP Mission

"Provide continuous care management in collaboration with Patient Centered Medical Homes for patients with complex medical, mental health, and social support needs"





CN=MiPCT Care Navigator

PCP CN



PCP CN



CCMP



Hospital, Emerg Rm





CN PCP

СМН

Shelter

CCMP patients

 Homeless person with SA disorder is discharged from UM hospital for DVT, newly on coumadin.

 Chronic pain patient seen recurrently in ER, multiple missed appointments with PCP, discharged from several UM practices.

JL

 Bipolar disorder, alcohol abuse (pulmonary emboli, GI bleeds)

Homeless

 Recent death of mother, sister was paying for hotel stay

"Uncooperative" – Personality disorder

Health system

- UM Primary care provider
- Admitted 10 times / year for suicidality
- Declined alcohol treatment
- Exited from Shelter for drinking

Over time established relationship with complex care manager

Care Management

Frequent contact (calls from the Arb).

 Housing voucher from AA when Tent City shut down.

Many months of work - Medicaid, SSI

Work seminars, part time employment

Care Management (cont' d)

 Stable team of caregivers – community psychiatry, PCP, Care Manager

PCP visits twice monthly

 No suicidality (ER or hospital care) for six months.

Complex Patients (cont'd)

- Significant challenges in 3+ of:
 - Psychiatric illness
 - Behavioral problems / Substance Abuse
 - Medical conditions
 - Social support
 - Resources (insurance, housing, food)
 - Functional impairment

AND

High utilization (ER and hospital care)

Why does CCMP select patients by clinical complexity AND utilization?

Medicaid Managed Care

- All 48 patients with >\$50,000 expenses
 - 0.2% of pt-months (\$4 million)
 - 10% charges (\$40 million total)

- The most expensive patient:
 - 3 admissions, 2 ER visits

- The most ER visits (41)
 - Among the least expensive patients

Clinical picture and costs

 34% - severe medical illness and expected clinical course and treatment

 52% - severe medical illness and unexpected clinical course and treatment

 15% - avoidable health care utilization from complicated behavior / mental health / substance abuse conditions.

Managing Populations: Stratified Approach to Patient Care

IV. Most complex

(e.g., Homeless, Limited resources)

III. Complex

Complex illness
Multiple Chronic Disease
Other issues (cognitive, frail elderly, social, financial)

II. Mild-moderate illness

Well-compensated multiple diseases
Single disease

I. Healthy Population

THANK YOU



PCP

CN



PCP CN

Hospital, Emerg Rm

Washtenaw Health Initiative

> Home Care

Shelter





CN PCP



CCMP

Washtenaw Health Initiative

UMHS / CCMP

SJMHS

WCHO / CSTS

PCPs

WHI

Safety Net Providers

VA

WHP

BCBSM

Washtenaw Health Initiative

