***Practice Name:***

**Address:**

**Policy on Identification of Patients for Care Management**

**Policy Effective: 4/3/17**

At Practice Name: we identify patients in need of care management beyond that required by the general pediatric population. Patients who require care planning/case management beyond what is required by the general population will be identified by both their specific diagnosis criteria for certain diseases states, and as “medically complex patients” through the placement of a code (Care Management patient) on their problem list. This decision to place this code on the problem list is at the discretion of the primary provider, however we use quality measure and registry reports from our electronic medical records program (EMR Name), as well as QUARR and HEIDIS reports from our Medicaid Managed Care companies, and recommendations from CMS, in order to designate patients for care management, create patient lists, and monitor patient compliance. Consideration should be given to the following patients:

* Depression **CM-01 A**
* Expensive Medications (Brand vs. Generic) **CM-01 B**
* Asthma, ADHD, Obesity, Hypertension **CM-01 C**
* Patients who are uninsured, and so self-pay for care **CM-01 D**
* Any patient determined by an outside organization to benefit from care management **CM-01 E**

Patients identified via the above criteria who have the medically complex diagnosis code on their problem list should have a care plan completed and included in their medical record. Care planning should include any communication/mobility aids, special equipment, respite care needs, and/or family support needs. Any outside referrals regarding these conditions will be included in their medical record as well.

Included as part of their care plan is a series of self-management tools, as well as evidence-based guidelines for a healthier lifestyle and better control of their complex conditions.