

WELL *On your Way*

IMPORTANT STATISTICS

- ▶ *More than 14 percent of Americans employed full and part-time report heavy drinking.*
- ▶ *According to a national survey conducted by the Hazelden Foundation, more than 60 percent of adults know people who have gone to work under the influence of drugs or alcohol.*
- ▶ *The National Institutes of Health reports that alcohol and drug abuse cost the economy \$246 billion per year in decreased productivity and increased accidents, absenteeism, turnover, and medical costs.*
- ▶ *Alcoholism causes 500 million lost workdays each year.*
- ▶ *68% of workers say that their employer should offer a program that helps build resilience to stress (American Psychological Association, 2004).*
- ▶ *Workers who take time-off because of stress, anxiety, or a related disorder will be off the job for about 21 days (US Bureau of Labor Statistics).*
- ▶ *American employees used about 8.8 million sick days in 2001 due to untreated or mis-treated depression (National Committee for Quality Assurance, 2002).*



BEHAVIORAL HEALTH

Piedmont's Behavioral Health case management program is a proactive management plan designed to assist and support members receiving behavioral health services through education and utilization of available community resources.

The main objective of the Behavioral Health case management program is to ensure quality health care and enhance the member's quality of life. The program also serves as a continuum of the physician/counselor/patient relationship with the goal of early identification of members who might be at risk with psychiatric and/or behavioral disorders.



PIEDMONT COMMUNITY HEALTH PLAN
Community Partners for Quality Healthcare

Working Together for a Healthier Tomorrow

Upon enrollment, Piedmont's Behavioral Health case management program progresses in a series of procedural steps designed to best evaluate and treat a member's specific mental healthcare needs.

STEP 1 Members will be initially identified through the following processes:

- ▶ Analysis of claims data
- ▶ Physician/Counselor referrals
- ▶ Utilization Management referrals
- ▶ Self referrals



STEP 2 Members will be assessed at appropriate risk level to include:

- ▶ **Low Risk** — Utilization of outpatient services, psychiatrist or counselor.
- ▶ **Moderate Risk** — Utilization of outpatient services, psychiatrist or counselor, emergency room services, and diagnoses requiring intervention.
- ▶ **High Risk** — Utilization of an array of services, including inpatient/outpatient services, psychiatrist or counselor, emergency room services, and diagnoses requiring intervention.



STEP 3 Upon completion of risk assessment, the case manager will contact member and:

- ▶ Introduce member to program, detailing conditions and benefits.
- ▶ Encourage member's participation and schedule further assessments.
- ▶ Make member aware of disease concept, risks, and possible treatment regimens.
- ▶ Assess current support system of family and friends.



STEP 4 Upon completion of the interview the case manager will:

- ▶ Notify the member's mental health provider of enrollment, discuss compliance, and treatment goals and objectives.
- ▶ Develop a program for appointments, a contact schedule, and address any member concerns in relation to expectations and a time frame for progress.
- ▶ Discuss member specific program with the mental health care provider including community support contacts.



STEP 5 Evaluation. Benefits of the program include:

- ▶ A collaborative relationship between the patient, mental health care system, and the case manager.
- ▶ A systemic approach to providing assistance to members, continuous evaluation, and appropriate intervention to ensure the member has adequate means to comply with treatment.
- ▶ Cost savings as a result of a reduction in inappropriate use of medical services.
- ▶ Continued member educational opportunities.



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