



HAB HIV Performance Measures Medical Case Management FAQs

December 2009

The document focuses on questions related to the HIV/AIDS Bureau's medical case management performance measures that are most frequently asked by programs that receive funds under the Ryan White HIV/AIDS Treatment Extension Act of 2009 (Ryan White HIV/AIDS Program). FAQs will be updated as necessary.

Questions that relate to the various types of performance measures can be found at: <http://www.hab.hrsa.gov/special/habmeasures.htm>.

The following categories of questions have been frequently asked and the corresponding answers are detailed in this document:

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Medical Case Management FAQs

Medical Case Management Care Plan

Question: What are the recommended or required components of a medical case management care plan?

Answer: The HIV/AIDS Bureau has not recommended or required specific components be included in a medical case management care plan. The client's individualized care plan is the plan of action written by the case manager who conducted the client's initial comprehensive assessment. The care plan should include the identified service needs, goals, objectives, desired outcomes and realistic time frames for resolution of the identified needs. The individualized care plan is developed collaboratively between the case manager and the client. Clearly defined priority areas for needed services and specific actions to be taken to meet these goals should be outlined. Medical case management includes treatment adherence counseling to ensure readiness for and adherence to complex HIV/AIDS regimens, coordination of services and monitoring of the plan to assess efficacy. These key elements should be addressed in the care plan.

The TARGET Center is a resource developed for the Ryan White Community and can be accessed at: <http://careacttarget.org>. This is a technical assistance source which has Case Management Standards of Care posted for various states. These documents can be used as a guide for a grantee, provider, or case management organization to use in defining the components of a medical case management care plan that might be used in their state, region, or organization.

Question: What if the medical case management care plan didn't need to be updated?

Answer: If the care plan remains appropriate and no revisions are made, the medical case manager should document that the care plan has been reviewed and no changes were indicated. While not required, it is strongly recommended that clients indicate either acceptance or review of their care plan, regardless of whether changes were made.

Question: Are clients required to indicate their acceptance and/or review of their medical case management care plan?

Answer: While it is strongly recommended that clients indicate either acceptance or review of their care plan, it is not required by HAB.

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Question: Is a medical case management care plan required for clients receiving “low intensity” medical case management services or for patients with lower acuity?

Answer: Yes. All clients receiving medical case management services, regardless of the level of acuity, should have a care plan established.

Question: Do the outcome measures apply only to patients receiving medical case management services, or can they be used for the broader HIV/AIDS patient population?

Answer: Yes. The outcome measures may be used, as appropriate, for the broader HIV/AIDS patient population.

Medical Case Management: Medical Visits

Question: What type of documentation in the medical case management record of a patient’s medical visit is acceptable? Is self-report acceptable?

Answer: No, self report is not acceptable. Examples of documentation include communication between case manager and provider, progress notes that document the day of visit to provider or case conference notes. Even if medical and case management services are co-located, the case management record should clearly document the medical visit. The information could be accessed through medical records or electronic health records.

Question: Why does the medical case management medical visit measure focus on the case manager’s documentation, rather than on the services that the patient needs and receives?

Answer: Documentation of the client’s medical visit by the case manager indicates the active involvement of the case manager in the client’s successful utilization of and retention in medical care, which is the focus of this performance measure. While this measure is similar to the HAB clinical measure, “Medical visits”, the difference is in the source of data.