## **MHA ONCOLOGY TEAM**

Holistic Approach to Effectively guiding members and families through a difficult journey

#### **Oncology Team Triggers:**

- Any Member with Cancer diagnosis:
  - Recent hospitalization
  - Recent claims
- · Specialty Medications
- Referrals from:
  - Member/providers
  - Client

#### **Engagement:**

- Dedicated Oncology Clinician Support led by Oncology nurses with extensive experience
- Focused on the individualized needs of the member & family
- Provider engagement

### Facilitates informed decision-making:

- Condition education
- Ensure member understands their treatment plan and evidence-based treatment options
- Prepare member to facilitate discussion with physician/specialist
- Assists with locating INN providers/COE

#### **Co-Management:**

- Integration with Behavioral Health Care Managers & Social Workers
- · Medical Director
- Pharmacist/SRU

#### **Resource Navigation:**

- Address social determinants impacting health (Local & National Resources)
- Assist with appropriate resource navigation (i.e. FMLA, Advance Directives, EAP, Disability Program, Care-giver support)
- Complete appropriate referrals (second opinion, clinical trial, BDC, Hospice, Palliative Care)
- Plan benefit education & assistance (predetermination, preauthorization, pharmacy)

#### **Support:**

- Provide education to increase treatment adherence
- Guide members to help manage symptoms, minimize complications & decrease avoidable ER visits & hospitalizations
- Discharge planning support 19
- Risk of readmission assessment
- Transition services/referrals

#### **Program overview**

# **Enhanced care management triggers**

Dedicated staff using custom identification methods

Financial Trigger

• \$50k in 12 months or single \$25k

Prior Authorization & Precertification

- Acute and scheduled hospitalizations (pre/post outreach, inpatient calls, if needed; includes BH admissions)
- Outpatient (pre/post utilization)
- Specialty (imaging, therapies)
- Specialty Rx

Disease States & Conditions

- New Cancer diagnosis
- End Stage Renal
- High-risk pregnancy and NICU
- Comorbidities with gaps in care and/or multiple ER utilization
- Behavioral Health-related ER visits
- Members Being Evaluated for Transplants

System Based Processes

- Gaps in Care Diabetes, COPD, Asthma, CAD, and CHF
- Predictive Analytics to identify high risk members

Some triggers result in automatic outreach, others are based on risk stratification to engage highest risk

