Adult Targeted Case Management Model

November 8, 2019
Problems with Former Montana Case Management Model

- Over-utilization of case management without clear case management guidelines in place.
- The Case Management Program was not evidence-based.
- No outcome measurement was available for quality management.
- Fee-for-service model rather than a value-based model fueled the over-utilization.
- Case management was not viewed always as a professional service.
- Case management at times was continued with clients who should have been discharged from the service.
Case Management Functions

Case management models vary in their philosophies and approaches but share six widely accepted basic functions:\footnote{1}:

- Identify and assess clients’ needs, strengths, and weaknesses
- Create service or treatment plans for clients’ needs
- Link clients with services in both formal and informal settings
- Monitor delivery of services and clients’ progress
- Advocate for clients
- Evaluate client outcomes
Case Management Outcomes

Effective case management and a good relationship between the case manager and the client can result in a dramatic improvement in clinical outcomes:\(^2\):

- Decreased hospitalizations
- Improved quality of life
- Improved global functioning and client satisfaction

All of which reduce the cost of care for the client!
Adult TCM Model Summary

- Agencies will register with the state to provide case management.
- Clear guidelines of case management duties and goals will be agreed upon by the state and agencies delivering case management.
- The DLA-20³ outcome measurement tool will be filled out by the case manager every 90 days during treatment plan updates.
- The outcome tool results will be submitted to a statewide database tracking case management results to ensure quality.
- Agencies will submit case management billing based on a monthly fee per client.
- Case management caseloads will be capped at 24 cases.
Case Management Program

- Case Managers will be employed by mental health agencies registered to apply case management.
- By having mental health agencies employ the case managers, they will have access to the full continuum of care from outpatient to crisis care.
- Case Managers can be placed in the community in settings such as hospitals, community health centers, crisis centers, outpatient therapy centers, etc.
- The mental health agency will be responsible for case managers’ productivity and billing. Bills submitted for non-case management agreed upon duties will not be reimbursed.
- The mental health agency will ensure that the DLA-20 is submitted every 90 days for each client in the case management program.
Financial Proforma
References:

