



ConnectionsSM Health Management Programs
2011 Annual Update



**Independence
Blue Cross**

Independence Blue Cross offers products directly, through its subsidiaries Keystone Health Plan East and QCC Insurance Company, and with Highmark Blue Shield — independent licensees of the Blue Cross and Blue Shield Association.

Annual Update summary

The 2011 Annual Update provides general information on the Connections Programs as well as information about new initiatives, outreach efforts, and tools to help you provide support to your patients, our members.

Connections is a comprehensive disease management and decision support program. The program strives to improve the quality of health care through more informed patient-physician communication. This is accomplished by providing individually tailored health coaching and support materials to patients and actionable clinical information to physicians.

There are two components to the Connections Programs. The Connections Health Management Program focuses on common, chronic diseases such as asthma, coronary heart disease (CHD), chronic obstructive pulmonary disease (COPD), heart failure (HF), and diabetes. The program covers a variety of chronic conditions and offers disease management, decision support, and general health information. Providers with patients in the Connections Health Management Program also receive the SMART[®] Registry, an action-oriented clinical report that assists physicians in treating patients with specific health care gaps. The ConnectionsSM Complex Care Management Program supports members with one or more of 16 complex, chronic conditions such as seizure disorders, rheumatoid arthritis, and multiple sclerosis. Interventions include outreach telephone calls, interactive voice messaging, and/or mail campaigns.

ConnectionsSM Health Management Program

The Connections Health Management Program, offered in partnership with Health Dialog, an independent company, provides 24/7 disease management and decision support to eligible members through Health Coaches and online resources. For providers, it is a resource to help you manage your patients with asthma, CHD, COPD, HF, diabetes, migraine headache, hypertension, gastroesophageal reflux disease (GERD), peptic ulcer disease (PUD), cardiometabolic risk, poor medication persistence, chronic pain, and those at risk for falls.

The SMART[®] Registry

The SMART Registry tracks important evidence-based aspects of care for patients with one or more of the following conditions:

- asthma
- diabetes
- CHD
- HF
- COPD
- comorbid hypertension

In 2011, two important changes were made to the SMART Registry:

- The SMART Registry is now sent on CD once a year to all providers with eligible patients. This year, the Registry CDs were mailed to practices in early August.
- The reports included in the SMART Registry are now based on the Healthcare Effectiveness Data and Information Set (HEDIS[®]) measures. Previously, the reports used internally developed quality indicators.

The most recent SMART Registry was sent to 2,762 participating primary care practices and provided information on 75,522 Independence Blue Cross (IBC) members. These reports offer practical, relevant information about your Connections-eligible patients in a convenient format to help you stay informed about your patients and monitor their care plans.

Please refer to your most recent SMART Registry to update the clinical care your patients have received and to refer those patients who may benefit from health coaching to the Connections Program.



Connections Program Specialists support provider offices

Connections Program Specialists (CPS) are local clinical professionals who provide support and offer information about the Connections Health Management Program. Your CPS can:

- help you understand the Connections Program and become an active participant;
- provide assistance and best practices for using the SMART Registry;
- provide you with clinical support tools to refer your patients to a Connections Health Coach.

Please call the Provider Support Line at [1-866-866-4694](tel:1-866-866-4694) for more information about how a CPS can help you or to schedule a visit from a CPS.

Tools and resources for providers who treat patients with chronic conditions

Multiple tools and resources are available to your office to help manage your patients with chronic conditions. Visit www.ibx.com/providerconnections to find tools such as the beta blocker and COPD brochure; action plans for HF, COPD, and diabetes; a patient medication tracker; a list of Shared Decision-Making[®] videos; and more. Additional quantities of print materials are available by contacting a CPS at [1-866-866-4694](tel:1-866-866-4694).

Provider satisfaction survey

The 2010 provider survey returned to the format of prior surveys and was mailed and available online to physicians. Approximately 5 percent of the physicians responded to the survey. The survey found that awareness of the program was high among respondents. Of those who responded:

- More than 64 percent of providers feel the information and health education materials their patients receive from Connections is useful.
- Fifty percent of providers feel that reports received about their patients, such as the SMART[®] Registry and monthly member report, are useful.
- More than 56 percent of providers think the program has a positive impact on their patients' health status.
- Fifty-six percent of respondents feel the program has a positive impact on adherence to treatment plans.
- More than 43 percent said the program improved communication with their patients.
- Forty-five percent found the support from the Connections staff to be helpful.
- Forty-six percent said the program provided a more positive image of the health plan.

Member satisfaction survey

Each year, we survey a sample of members to determine their levels of awareness, use, and satisfaction with the Connections Health Management Program. The survey is conducted by telephone by an outside company at the end of the year.

The 2010 survey sample population included members identified with and without one of the five managed common chronic conditions (asthma, CHD, HF, diabetes, and COPD), members who had telephone contact with a Health Coach, and members who had never spoken to a Health Coach. Of those who responded:

- Eighty-two percent indicated that their impression of IBC was positively affected because of the Connections Program.
- Ninety percent would recommend Connections to family and friends.
- Seventy-three percent indicated that it is important that IBC continue to offer the Connections Program.

The reasons that members most frequently cited for using Connections are:

- to obtain information about an illness or condition;
- to understand treatment options and choose among them;
- to help manage a chronic illness.

We encourage you to use the Connections Program to help you support your patients by calling [1-866-866-4694](tel:1-866-866-4694).

ConnectionsSM Complex Care Management Program

The Connections Complex Care Management Program supports eligible members with one or more of 16 complex, chronic conditions. Members in the program have access to an IBC care management nurse who can work with them by telephone to help them with their health care needs. The nurse's role is to offer support through education, guidance, and assistance in monitoring the member's health and to work with the physician to support the member's care plan.

Program conditions

The conditions covered by this program are:

- rheumatoid arthritis
- sickle cell disease
- cystic fibrosis
- dermatomyositis
- hemophilia
- amyotrophic lateral sclerosis (ALS)
- multiple sclerosis
- chronic inflammatory demyelinating polyradiculoneuropathy (CIDP)
- Crohn's disease
- Parkinson's disease
- Gaucher disease
- myasthenia gravis
- scleroderma
- seizure disorders
- polymyositis
- systemic lupus erythematosus (SLE)

If you think a patient with one of the complex, chronic conditions listed above could benefit from care management from a care management nurse, we encourage you to electronically complete the Case Management Physician Referral Form at www.ibx.com/case_mgmt_ref_form. You can also contact the Connections Complex Care Management Program by calling 1-800-313-8628 or 215-567-3570.

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