

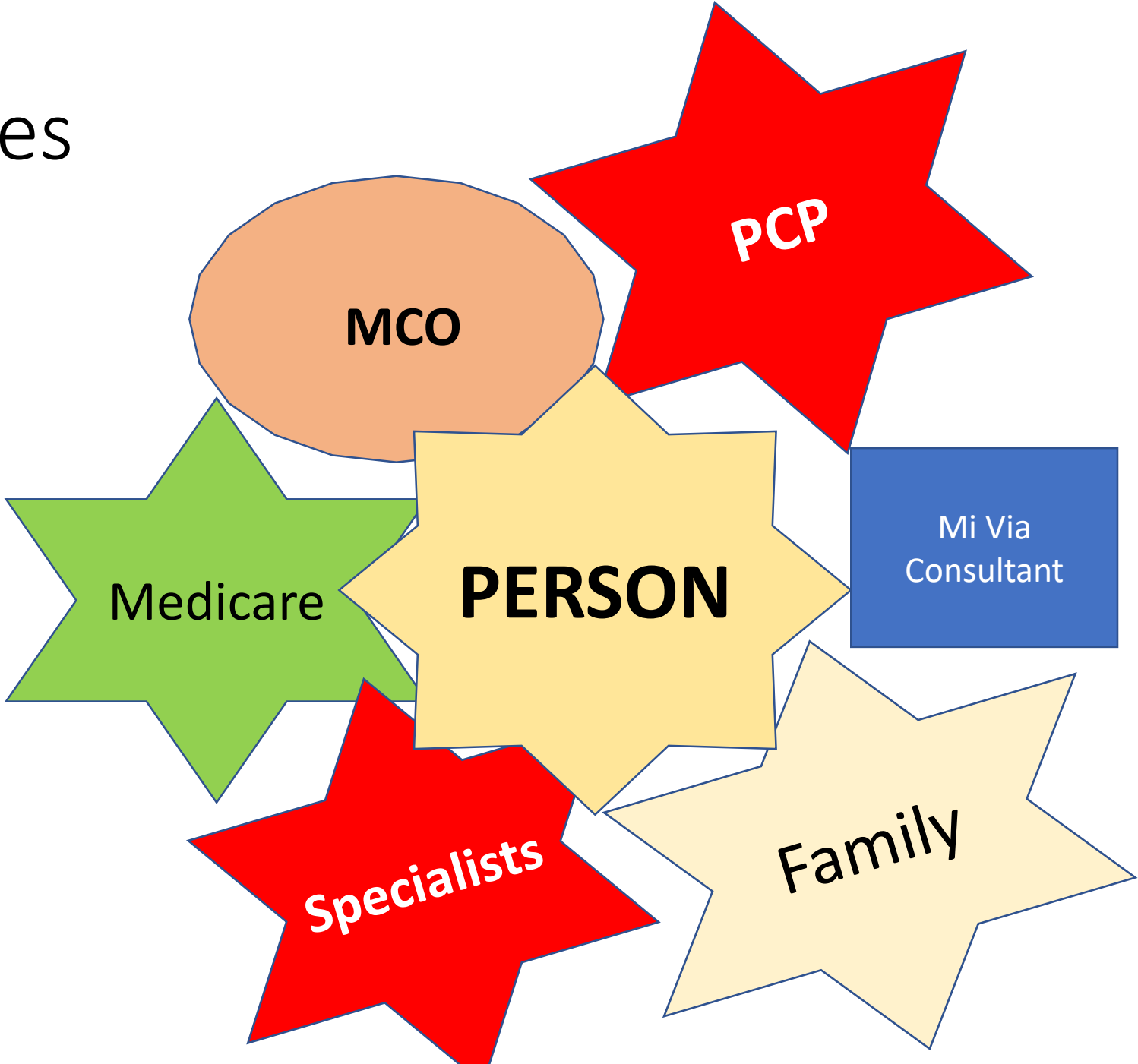
Health tips for Mi Via Consultants

Betsy Finley, RN

Clinical Services Bureau

May 12, 2020

Challenges



First Questions

- Who is the person?
 - What are their health needs?
 - What are their wishes and desires?
- Who is the guardian ?
- What supports are needed or wanted?

Person and Guardian

- Update the key information
 - Where are the guardianship papers? Don't assume anything.
- Everyone gets older
 - Is there a plan for the future? What help may be wanted.
- Talk about health changes, sooner rather than later.

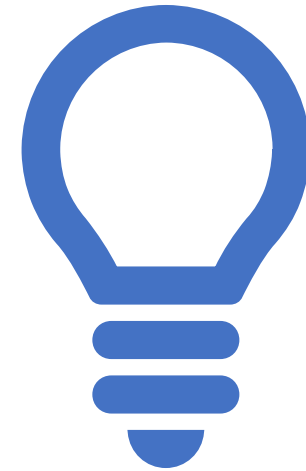
What do we know.....

- ✓ People with I/DD have a range of skills, strengths and needs
- ✓ Many have significant or multiple medical /behavioral diagnoses that require routine monitoring, support and specialty services
 - ✓ History of trauma → “trauma informed care”
- ✓ Routine medical services are identified by age and gender
- ✓ Some people are not receiving screening, routine services or specialized medical services due to variety of reasons

Why do some people not get services?

- They refuse to go to the Dr
- The primary care provider defers an exam
- Specialists may not be available in their community
 - Cannot make the trip
- Care or services may be refused or seen as not important
 - “ Our family’s never been much for Doctors”
- Unable to relay how they feel
 - “ I’m OK ”
- May not be taken seriously
 - “ Your head always hurts!”
- Symptoms may not be “typical”
 - Leaning, lethargy, hitting self
 - Unable to do things they did before
- Signs of illness may not be noticed until too late
 - “ Now that you mention it.... “

Ideas and Resources



Insurance

- Go to DDSD Website: See “Insurance Basics” webinar taught by Iris Clevenger.
 1. <https://nmhealth.org/resource/view/1351/> (install Acrobat)
 2. Medicare- always primary payer
 3. Medicaid – usually covers if there is Medicare Denial or if it’s a Medicaid benefit
 4. Private – sometimes people have added policies – ask
- MCO Care Coordinator
 - Encourage people and guardians to NOT refuse this service!
 - Their role is different than yours. They do visit/report on needs.
 - Keep their name and number updated and available. Call them when help is needed!
Turnover? Call customer service for new one.
 - Ask to talk to the Care Coordinator Supervisor if there are concerns or you need more help.
 - Get things done!
 - *MCOs feel disconnected from Mi Via recipients and their families*

Resource : Age Appropriate preventive care

- ***Healthfinder.gov*** is a website that is maintained by the U.S. Department of Health and Human Services. It contains information that is primarily focused on providing evidence-based information on health and diseases to the general public.
- There is also a widget that uses an individual's age and gender to generate a list of recommended preventive services and immunizations, which is based on the Preventive Services Task Force's "A" and "B" recommendations, as well as the recommendations of the Advisory Committee on Immunization Practices, which is the committee that makes recommendations on immunizations to the U.S. Centers for Disease Control and Prevention (CDC).
- The web address is: <https://healthfinder.gov>

<https://health.gov/myhealthfinder>

See which screening tests and vaccines you or a loved one need to stay healthy.

Age *

Sex * Male Female

Why are we asking these questions?

Get results

Using the Widget on health.gov/myhealthfinder

- Provides list of ideas and recommendations on a list.
- Take to your Dr visits.
- Useful to help guide conversations about what services may be needed including tests, vaccines and screening exams.
 - “I have Down Syndrome. Do need to have any other tests? “
 - “ She just wants to sleep all the time.”
 - “ I wake up coughing every night”
 - “ My Dad had a bad heart”

Advice about PCP and Specialist Appointments

- What is the person's insurance?
- Is that Dr on their plan? Which Dr is on the plan?
 - Turn over the insurance card. Go to website or call customer service.
- Take the first available appointment- *even if it is 6 months away.*
 - Ask about a cancellation list – get on it!
 - Of no wait list: call daily and see if there is an opening
 - 8 – 9 AM appointments are the most often cancelled – be ready to go early!!
- Visit times are short 8-15 minutes
 - Ask for a longer appointment time when you call to set up the appointment.
 - Talk to the Scheduler, let them know the person has special needs.
- Be ready for the appt.
 - Make a list of questions, issues and worries.
 - Bring all the meds in a bag.
- Tell them that there is NOT a nurse in the house 24/7 .
- Always ask: “ Is there anything that I should have asked you that I didn't?”
- Keep the paperwork to refer back to.
- Write things on a calendar.
- Use the on line chart or visits to communicate.

Issues seen in Covid-19

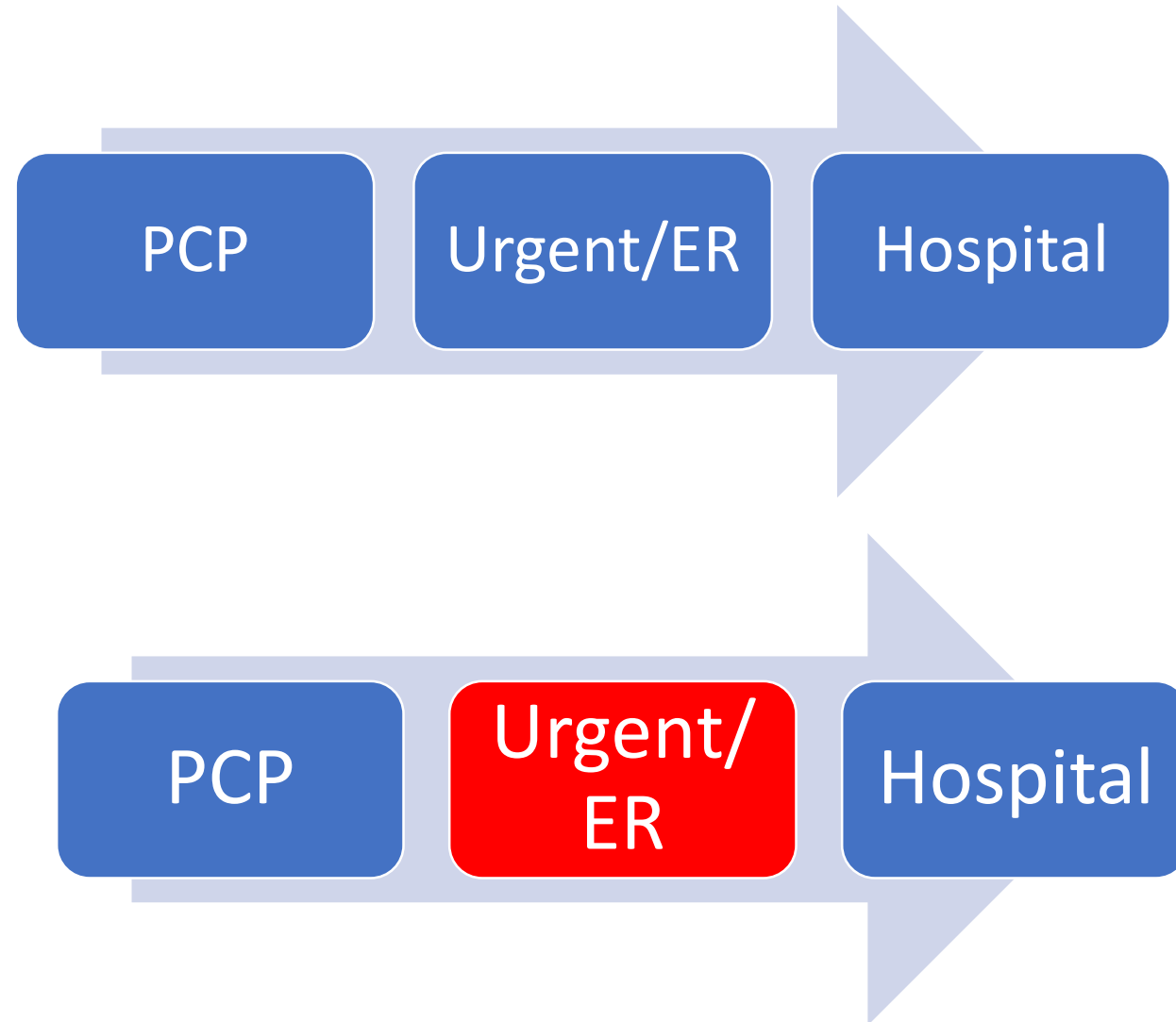
- Changes in health due to interruptions in routine services
- Not reaching out to be seen by PCP/specialists
 - “They cancelled my appointment in March “
- Afraid to go to the ER when sick with “regular” illnesses
- Not taking medications as ordered. Want them to “last longer” just in case

Medical Procedures

- Will always need a Prior Authorization
- Will need to be planned in advance
- Guardian will need to sign and often will need to be there
 - Receive after care advice/orders
- May need follow up care or appointments

Stay in the MCO System

- Electronic Medical Records can only be accessed by partners in the same system.
- Records are **NOT** accessible by the PCP if the person is seen outside the system



After Hospital, ER or Urgent Care

- Discharges to home from hospital must be planned.
 - Tell them that there is NOT a nurse in the house 24/7
 - What will be needed? Are equipment or supplies there and ready?
 - Refuse unsafe discharges.
 - “She’s not ready. I can’t lift her.”
- Always follow up with the PCP or specialist
 - “We were at the ER last night and Dr Martinez said we needed to see you as soon as possible”
 - Referrals from ER Drs to Specialists are helpful!
- Update all needed information: Med list at home, Calendars for appointments, tracking weight or blood sugars.

Same/Different ? Better/Worse?

- What do you see?
- What do you hear?

When should we worry?

- Any unexplained decline that does not make sense/have a diagnosis:
 - Weight loss/gain
 - “ Dwindles”: slowly declining over time or rapid onset of change
 - Loss of functional ability – walking, talking/communication, feeding or other self care
 - Increased behaviors/vocalizations
 - Increased sitting /sleeping
 - Bruising/Pressure ulcers
 - Swelling or edema
 - Color changes,
 - Coughing, Drainage
 - Anything new or unusual for the person
 - Increased “ behaviors”
- Always ask why? Have they been seen?

Worried? Need help?

- Clinical Services Bureau
 - General Advice
 - Elizabeth.finley@state.nm.us
 - Iris.Clevenger@state.nm.us
 - SAFE Clinic 505-841-5878
 - Seating Clinic 505-232-5712
- Continuum of Care
 - 505-925-2350 or 925-2374
 - Website: <https://coc.unm.edu/>
 - General Advice
 - Healthcare Decisions Resources
 - Specialty Clinics - Cerebral Palsy, Neuro, Ketogenic
- TEASC
 - 505-272-0515
 - Website: <https://fcm.unm.edu/for%20patients/teasc.html>
 - Transdisciplinary Team Clinics
 - Specialty Clinics

Got a situation?