

Health Management Programs

Available to members of the Blue Cross and Blue Shield Service Benefit Plan in Montana

The Blue Cross and Blue Shield Service Benefit Plan offers Health Management programs to address eligible members with medical and behavioral health needs. These programs aim to help in four ways:

- Keeping you healthy
- Managing your emerging health risks
- Assisting with your safety and health outcomes
- Managing multiple chronic illnesses

You can access or find out more about these Health Management programs by calling the Customer Service number on the back of your member ID card.

Health Management Programs	Who Is This Program for?	How Can I Access the Program?	How Does This Program Work?
Flu Vaccine Campaign	All members on a current contract	Flu Vaccine Campaign is offered when Service Benefit Plan members call for any inquiries.	Customer advocate staff educate members on receiving a flu shot with no out-of-pocket cost at a Preferred retail pharmacy. The team can also provide the contact number for the Retail Pharmacy Program.
Mobile Mammography	Women 50 to 74 years old who are due for a breast cancer screening	Mobile mammography units are made available in New Mexico and Texas. Availability is based on demand.	Women 50 to 74 years old who are due for a breast cancer screening will receive a postcard with information about a mobile mammogram when it is available and nearby. This information can be used to register for the mobile mammography event.
Cervical Cancer Screenings Reminder	Women 21 to 64 years old who are due for their cervical cancer screening	Members receive a reminder postcard.	The mailers explain the importance of cervical cancer screenings and encourage members to set up a screening appointment.
Well-Child Visits	Parents of children turning three months old	Parents receive a one-time letter with a recommended schedule of visits.	These mailers provide education about the importance of well-child visits, immunizations and dental care within the first 15 months of life. Parents can discuss the information in the mailer with their child's health care provider.
Colorectal Cancer Screening Kits	Members over 50 years of age who are due for their colorectal screening test	Eligible members will receive a mailing.	Members who consent to this offering will receive an in-home colorectal cancer screening kit.
HbA1c In-Home Testing Program	Targeted population of members who have Type I or Type II diabetes and are due for an HbA1c test	Eligible members receive a letter in the mail.	The HbA1c In-Home Testing program is an initiative where Federal Employee Program Quality Improvement collaborates with Home Access Health (HAH) to offer in-home HbA1c testing kits to a targeted population of members. The testing kits are offered at no cost and used in the convenience of their homes to address access and cost barriers. Upon testing, the vendor sends the results to both the member and his/her primary care physician.



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Disease Management	Members who have diabetes, asthma, chronic obstructive pulmonary disease (COPD), coronary artery disease and/or congestive heart failure	You can call the Customer Service number on your member ID card.	Disease Management supports members who have specific conditions by helping them adopt effective self-care habits to improve the self-management of their condition.
Accordant® (Case Management Program)	Members affected by rare chronic diseases	Eligible members receive a letter in the mail. You can also call the Customer Service number on your member ID card.	This service offers 24-hour, seven day a week nurse access for patient/provider support. Members also receive personalized health evaluations on a quarterly basis and are monitored and given an individualized plan of care for each patient. Disease-specific and general wellness education are provided online, by phone and by mail.
Asthma Medication Compliance	Targeted members with asthma	Newly diagnosed members receive a letter in the mail.	The Asthma Medication Compliance program provides eligible members with an asthma medication compliance mailer and asthma action plan mailer. Targeted members with asthma are offered additional educational resources such as expectation management and medical information (Emmi®) videos for education and medication compliance.
Emergency Department Utilization	Members with a high number of emergency room (ER) visits	Emergency Department Utilization identifies members with three or more ER visits and provides them with “Know where to go” mailers via mail.	Mailers provide members with information regarding 24/7 Nurse Line, telehealth services and resources to locate urgent care clinics. FEP® clinicians reach out to members telephonically and provide members with 24/7 phone access to care team members to support execution of new care plans and answer questions. Members who have been hospitalized may receive outreach by clinicians for follow-up post-hospital stay.
Men’s and Women’s Wellness	Women 40 years old and older and men 50 years old and older	Eligible members receive an annual mailer or email.	Men’s and women’s wellness cards are distributed during their birthday month. They emphasize the importance of age and gender-appropriate preventive screenings, immunizations and tips to lead a healthy lifestyle. This information can be used as a reference for discussion with a health care provider.
Expectation Management and Medical Information (Emmi)	Members who want additional information regarding their medical condition or planned medical/surgical intervention	Members request information from their case or disease manager, who will then email the material to the member.	Emmi online education modules are a part of case management and disease management programs. The goal of this education is to improve self-management of medical conditions and medical/surgical intervention outcomes. We contact members who could benefit from case management or disease management and offer them a chance to participate in the programs. Members who change their mind later can opt out at any time by informing their care manager.

Accordant is an independent company that provides care management services to members of the Blue Cross and Blue Shield Service Benefit Plan in Montana.



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Incentive Programs	Service Benefit Plan members. Members can confirm eligibility for the various incentive programs by calling the Customer Service number on the back of their member ID card.	<p>Incentive Programs are available to eligible Service Benefit Plan members. The programs are designed to provide education about the importance of making healthy choices and identifying health risks. Incentive programs are tailored to a member's specific needs and offer expert recommendations about medical care, lifestyle, nutrition and other aspects of health. Members may be eligible for additional incentives through the following programs:</p> <ul style="list-style-type: none"> • Diabetes Management Incentive Program offers incentive dollars for optimal blood sugar control and maintenance • Hypertension Management Program offers a blood pressure monitor at no cost • Pregnancy Care Incentive Program offers incentive dollars for early and ongoing prenatal care • Tobacco Cessation Incentive Program offers tobacco cessation products at no charge • Online Health Coach encourages members to complete manageable activities each day to reach their health goals <p>In addition, FEP Blue Focus members have access to the following:</p> <ul style="list-style-type: none"> • Routine Annual Physical Incentive Program rewards members who visit their doctor each year for an annual checkup • Hypertension Management Program offers a blood pressure monitor at no cost • FEP Blue Focus members can also get tobacco cessation drugs at no cost to enjoy a tobacco-free life. This program also covers nicotine dependence from e-cigarettes. 	

Maternity Management Programs	Who Is This Program for?	How Can I Access the Program?	How Does This Program Work?
Women's Health/ Maternity Program	Members who are pregnant (for 34 weeks or less)	Eligible members receive a call from their assigned case manager. You can also call the Customer Service number on your member ID card.	The Women's Health/Maternity Program provides expectant mothers ongoing support and education from early pregnancy until six weeks after delivery. Personal contact with experienced obstetrical nurses enables early identification of high-risk pregnancies and increased opportunities for intervention.



Behavioral Health Programs	Who Is This Program for?	How Can I Access the Program?	How Does This Program Work?
<p>Complex Case Management Programs</p>	<p>Targeted members</p>	<p>Eligible members receive a call from their assigned case manager. You can also call the Customer Service number on your member ID card.</p>	<p>Complex Case Management programs' case managers educate enrolled members about making healthy choices and collaborate with members to offer support and resources to navigate the complex health care delivery system. Enrollment in case management programs requires a member's verbal and written consent.</p>
<p>Behavioral Health Case Management and Intensive Case Management Programs</p>	<p>Members who meet specific criteria</p>	<p>Referred eligible members receive a call from their assigned Behavioral Health case manager. If the case manager is unable to reach the member, a letter will be mailed. You can also call the Customer Service number on your member ID card.</p>	<p>Behavioral Health Case Management and Intensive Case Management programs include all or a combination of behavioral health conditions based upon severity and intervention needs. The programs are designed for members who meet specific criteria. Programs are available for the following diagnoses:</p> <ul style="list-style-type: none"> • Depression • Alcohol / substance abuse disorders • Anxiety / panic disorders • Bipolar disorder • Eating disorders • Schizophrenia and other psychotic disorders • Attention deficit disorder and attention deficit hyperactivity disorder <p>The case management coordinator will intervene with practitioners when the following concerns are identified:</p> <ul style="list-style-type: none"> • Provider variance in evidence-based treatment protocols • Medications appear to be at sub-therapeutic dose • Member is not making reasonable progress in treatment • Behavioral health status checks with provider • Long length of stay without subsequent successful goal achievement • Numerous readmissions • Member complaints <p>Our programs are designed to provide services with respect for the autonomy, dignity, privacy, confidentiality and rights of the member and to facilitate their involvement in the case throughout the entire process.</p>