

# ***Health Policy Newsletter***

---

**Volume 10, Number 2**

**May, 1997**

**Article 2**

---

## **JeffCare - A Clinical Case Coordination Strategy**

**Jeffrey L. Lenow, MD\***

\* JeffCare, Inc.

Copyright ©1997 by the author. The Health Policy Newsletter is a publication of Thomas Jefferson University, Jefferson Medical College and the Department of Health Policy, 1015 Walnut Street, Suite 621, Philadelphia, PA 19107. (215) 955-6969.

**Suggested Citation:**

Lenow, JL. JeffCare – a clinical case coordination strategy. Health Policy Newsletter 1997; 10(2): Article 2. Retrieved [date] from <http://jdc.jefferson.edu/hpn/vol10/iss2/2>.

## JeffCare - A Clinical Case Coordination Strategy

---

*"It was the best of times, it was the worst of times..."*. It is a sentiment derived from Dickens' classic A Tale of Two Cities, yet certainly timely in its application to our current medical delivery system. The clinician's ability to work small miracles through improved research, experience, and technological innovation abuts against current pressures to contain costs and reduce utilization of services. Employers are becoming far more demanding for detailed accountability for their health care expenditures and, as a result, third-party payers and administrators are seeking strategies to hold down premium increases while studying ways to deliver practical outcomes data. Out of these challenges springs great opportunity for a health care system to demonstrate the courage to be bold and innovative in its approach to the greatest challenge of all-- balancing delivery of the optimal health care available with tight utilization management. Jefferson Health System, in its creation of its Physician Hospital Organization, JeffCare, Inc., has realized the advantages of an Integrated Health System network design which allows for the alignment of provider incentives to attain "the best of times"--a physician conceived and driven system of outcomes accountability.

This is the chance for an academic community of providers with a cherished and well-earned reputation for excellence to meet the changing needs of health delivery. The administration and membership of the Jefferson family have now embarked upon a "full risk assumption" approach with one third party payer (and likely more to come) that will allow care givers to become even more effective participants in total patient care. For this daring endeavor of risk assumption, the system must employ an aggressive clinical management oversight. The clinical management strategy for JeffCare is predicated primarily on good old fashioned common sense management, a partnership wherein the traditional micromanagement approach to patient care management is replaced with in-house case coordination that involves trained case coordinators and medical director support for the most effective case disposition available. Sharing the risk also means sharing the responsibility for maximizing cost efficient care.

Our case management begins with rapid patient identification and thorough case manager chart review and analysis in cooperation with the JeffCare medical directors (Jeffrey L. Lenow, MD, Rachel Sorokin, MD, and Barry Ziring, MD, with additional assistance and oversight as needed by CEO, Stanton N. Smullens, MD). While traditional utilization management programs involved nurse to physician or nurse to nurse contact, JeffCare will employ a far more active physician to physician dialogue. The care coordinators then contact the primary care physician and involve other members of the Jefferson support team such as: Home Care, Social Service, Utilization Management, and Discharge Planning in assisting the patient's physician to effect an optimal care management plan that extends to the outpatient setting as necessary. A weekly multidisciplinary meeting occurs with the JeffCare case coordination team and the medical directors to assure all appropriate measures are being taken in support of this effort.

While traditional case management (coordination as we prefer to call it) is a vital part of our approach, the more exciting long term strategy at JeffCare is the pursuit of a true outcomes accountability methodology wherein a disease management and health maintenance approach can be considered. In a truly integrated health care

system, there are exciting opportunities to study populations of patients and to mold our data towards practical and effective longer term health maintenance planning. For instance, with the assistance of the Department of Health Policy directed by David Nash, we are beginning to study methods to effectively identify and stratify patients at risk for chronic illness. This will allow placement of such individuals into well defined disease management programs which will serve to reduce morbidity and improve quality of life while reducing overall health care cost. We are also studying methods that will allow for ambulatory chart review for early identification of patients at risk and special program placement where feasible.

Recently, while much has been written regarding the theory of outcomes management and disease-based approaches to health care management, the existence of our integrated network and the facility at JeffCare provides the opportunity to turn theory into practical application. This will require a strong organizational commitment and an open-mindedness to new ideas which at times may seem "pie-in-the-sky", but future survival in a very competitive health care environment demands that we remain dedicated to our effort. We must constantly demonstrate to the employer and lay public that we are the best at what we do. We are fortunate to have the research resources within to set the example and must now commit to the effort and to set the standard for what most certainly will be the "best of times".

### **About the Author**

Jeffrey L. Lenow, MD, is Medical Director of JeffCare, Inc.