

“PCP (would have mailed informational letter prior to dialogue): I am calling (or stopping by) to follow-up from a letter sent to you regarding one of your patients and how we believe that engagement in available services would benefit your patients overall wellbeing. The letter you received by mail pointed out that Missouri law allows for communication to be provided without violating HIPAA. What we are asking of you is to review available services with your patient should you deem necessary and/or provide our team members with appointment information so we may locate your patient for purposes of outreach only. We understand your office is very busy and we thank you for your time and attention.”

When contacting an outside agency we explain that the client has been referred to us by Medicaid and the Department of Mental Health. We always carry the letter that it is okay to share information and it is not breaching HIPPA. We always have our agency ID, if we are meeting with them in person. In person does work better as they have not doubts as to who we are. We also explain that we identified them as supplying a service to the client through Cyber.

“Your patient has been selected to receive an additional benefit package and care coordination as part of a joint initiative of the Mo Healthnet division and the Department of Behavioral Health. Family Counseling Center, Inc is the designated behavioral healthcare provider for this area. We would like to work together with your organization to coordinate care for this individual. We look forward to working with you to achieve positive patient outcomes. ”

# OUTREACH

## *Dialogues with Providers*

“I called the Police Department in [City], identified myself as a Pathways CSS and that I am trying to find [client name] whose last known address was in [City]. I emphasized that it was not a legal matter and the deputy I spoke with gave me an updated address for [client name] telling me that the home to the address we had burned down three years ago. He confirmed that [client name] still lives in [City].

**Pharmacy** - “Hi, I am [name from agency]. We are partnering with MoHealthNet & DMH to work with individuals who have ongoing health issues and we have a couple of individuals who qualify for additional free benefits through their MoHealthNet enrollment. We are having a tough time tracking [DM patient name] down and wonder if we could leave this packet of information with you to give to [DM patient name] next time he/she comes in to pick up his/her prescription?”

"My name is [your name] and I am with Pathways. I have been designated to outreach to [client name] as part of a statewide initiative to assist with healthcare needs. I am trying to locate [client name] and I have their birthdate and address on file but they don't seem to be living at that address now. Could you compare it to what contact information you have?"

Visit face to face at pharmacies, doctors' offices and hospitals - show ID and the letter from DMH and MO HealthNet. They are usually cooperative – it's harder for them to not help you when you are there face to face. If it's a hospital, always try to talk to the social worker, they are more likely to help and will want to work with you.

When CSS Melanie communicates with an outside doctor regarding a potential enrollee, she introduces herself and gives a general overview of Crider and the services we provide. She goes into some detail about her role in the client's life and her rationale for attending the appointment. She explains that her purpose as a CSS is multi-fold: assisting the client in maintaining independence, assisting with goal achievement, coordinating appointments, following up with test results, educating the client, promoting better health outcomes, helping the client to understand the doctor's instructions and to follow through on them, provide support and coaching). The level of interest from the physician tends to guide the length and direction of this conversation.

**Pharmacy** - Hello, this is Kimberly from the Arthur Center in Mexico, MO. I noticed on Cyber Access that [client] has been receiving medication from your facility. I have been trying to reach [client] and I have been unable to do so. I would appreciate any additional contact information you may have for the individual.

# OUTREACH

## *Dialogues with Providers*

**Pharmacy**—the CSS does research on Cyber Access prior to the visit. Then, they take this info with them regarding the client's current medications, date, type of prescription, and the prescribing doctor. CSS staff goes equipped with this info in addition to the form letter from DMH and indicates to the pharmacist that he works for Ozark Center. CSS explains that from his Cyber Access research he can see that 'John' filled a script here at the pharmacy on X date and would ask the pharmacy to provide 'John' with this packet of information when he returns for his next refill. He allows the pharmacy to see the letter and explains that the reason we would like for 'John' to have this information is because 'John' is a 'high spender' and we're trying to be pro-active in assisting the client receive community services that could reduce their need to go to the ER and increase the likelihood that they will utilize more cost effective services in the future.