

## Interdisciplinary Team (IDT) Meeting Process

### Products Involved:

- Medica DUAL Solution<sup>®</sup> – Minnesota Senior Health Options (MSHO) program
- Medica Choice Care<sup>®</sup> – Minnesota Senior Care Plus (MSC+) program
- Medica AccessAbility Solution<sup>®</sup> - Special Needs Basic Care (SNBC)
- Medica AccessAbility Solution<sup>®</sup> Enhanced – Integrated Special Needs Basic Care (ISNBC)

**Purpose:** To provide criteria and a process for reviewing complex members in an interdisciplinary team (IDT) setting to improve their quality of care, reduce unnecessary utilization, and identify target areas for future intervention.

### CRITERIA:

- All delegates are eligible and encouraged to participate in IDT's.
- Members identified for review will primarily be by care level, risk factors, recent health events, high claims and/or other concerns based on recommendation from delegate or by the request of Medica.

### PROCESS:

- The interdisciplinary team will consist of some or all of the following individuals: delegate care coordinator, delegate supervisor, clinical liaison, nurse practitioner, medical director, social worker, behavioral health professional, and registered nurse.
- Delegate organizations are offered the opportunity to schedule an IDT meeting each month with the team to consult on cases per their request.
- The Medica IDT team will meet once per month to complete the IDT consultations for delegates who choose to sign up to present case(s).
- The first of every month the Clinical Liaison will send out a notice along with the link to sign-up for a time slot via Calendly.
- The time slots will run every 30 mins starting at 9am and run through noon on the 3<sup>rd</sup> Wednesday of the month. IDT team reserves the option to offer scheduling at different days and times if there are scheduling conflicts.
- Delegates can sign up for a maximum of 2, 30-minute time slots which do not have to run consecutively each month. Each 30-minute time slot is available for 1 case review and delegates are to sign-up via Calendly. Delegates will choose their time slot via Calendly which will provide them with a confirmation email of their chosen time.
- Clinical Liaison will be notified via Calendly of when an individual signs-up for an IDT. Once notified, the Clinical liaison will send a Teams Meeting invite to the participant confirming their scheduled IDT and include the SBAR (Situation, Background, Assessment, Recommendation/Plan) template for completion.
- Participants can share the Teams invite with any other individuals from their organization whom they would like present for the case review.
- Case Selection:
  - Delegates will have the option to choose up to 2 members to review who they consider to be high risk, or in need of additional support etc.

- IDT Team has the option to send a list of up to two potential members to delegates in advance of the IDT meeting, requesting a case review.
  - These high-risk members will be selected based on identification from High-Cost Claimant reviews, Enhanced Care Coordination reporting, or Daily Admission Reports or other reporting.
- Delegate will send completed SBAR template (summarizing key issues to be discussed for the member during the IDT consultation) via email for each case to Clinical Liaison at least one week prior to IDT meeting.
- Clinical Liaison will place SBAR template and Summary of Care (SOC), claims history for past 12 months for all IDT participants in the assigned delegate folder under the IDT Meetings folder in the Clinical Liaison folder on the J drive in Medica's system.
- During the IDT meeting, the delegate care coordinator and/or supervisor will briefly present each case and issue(s) to be discussed using the SBAR format. The IDT participants will discuss the case, ask questions, and provide suggestions for future intervention, resources, or opportunities to improve quality of care, reduce utilization, connect member to needed resources/supports, etc.
- After the IDT meeting, the delegate/care coordinator will follow up on recommendations and work to implement any interventions that were identified during the consultation.
- Care coordinator will document that the IDT review occurred in his or her case notes as well as document any follow-up activities completed following that review.
- Clinical Liaison will take notes during the IDT meeting and will track all cases reviewed and recommended follow-up activities on the Delegate IDT Tracking Grid.
- If necessary, two weeks following IDT, the CL will reach out to the CC to obtain an update on the case. This update will be added to the IDT tracking grid.

**CROSS REFERENCES:**

- High-Cost Claimant Report
- ECC Impact Index Report
- SBAR Template
- Delegate IDT Tracking Grid