

Department of Veterans' Affairs –
Coordinated Veterans' Care Program



Patient Treatment Report User Guide

Australian Government
Department of Veterans' Affairs



Coordinated Veterans' Care Program



Patient Treatment Report User Guide

Introduction

About the Coordinated Veterans' Care Program

The Coordinated Veterans' Care (CVC) Program is a new Department of Veterans' Affairs (DVA) program to better manage and coordinate primary and community care for Gold Card holders who are most at risk of being admitted or readmitted to hospital.

The CVC Program is focussed on providing additional support for veterans and war widow/ers with one or more chronic diseases or conditions, and who have been identified as having complex care needs. Through improved community based care, the program is intended to improve the health of participants by:

- providing ongoing planned and coordinated care from their general practitioner (GP) and a nurse coordinator
- educating and empowering participants to self manage their conditions
- encouraging the most socially isolated to participate in community activities.

To assist you in providing this support, the Patient Treatment Report has been developed to provide insight into your patient's medical history and display potential opportunities for optimising patient care.

The Patient Treatment Report

The Patient Treatment Report (PTR) is a practice support tool that has been designed to provide evidence-based care for the management of chronic illness. **The PTR does not, nor is it intended to, replace your professional clinical judgement as the patient's treating general practitioner.**

Information in the PTR is compiled from DVA payment data, and has been used to identify potential gaps in patient care through the analysis of a patient's medical and hospital admission history. Due to the timing of when claims are submitted for processing, we understand the information contained in the report may not be fully reflective of your current patient records.

The PTR will provide you with information to:

- identify opportunities for optimising patient care
- maintain a comprehensive view of your patients' care.

Important information about the Patient Treatment Report

Information in the PTR is compiled from payment data received by DVA. Payment data included in the report may not be as up to date as the information contained in your patient records. If the report does not list a test or treatment, it does not mean the test or treatment has not occurred. However, it does indicate that DVA has no record of the test or treatment being performed in the relevant period.

Reading the Patient Treatment Report



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Patient treatment report as at 31/07/2011
DR A SAMPLE

1 Patient: JOHN SAMPLE
DVA Identifier: XXXXXX
Age: 85
Gender: M
2 Admission Risk Rank: 84

Chronic and other high risk conditions

Claims data indicate that your patient has the following conditions:

3 CVC targeted chronic conditions				
CAD				

4 Other high risk conditions				
Cancer				

5 Services received in the previous 12 months

Where applicable, further information on recent hospitalisations and medications is included in the attached history.

Overnight Admissions	Same Day Admissions	Specialist Visits	GP Visits	6 VHC Hours	CN Visits	AHP Visits	Total Filled Medications
0	0	1	27	0	0	12	16

Patient history report for the past 6 months

Overnight Admissions	Discharge	Diagnosis Code and Description	Procedure Code and Description	7
None				

Medication history for the past 3 months

Medication	Strength	Date Filled
BETAMETHASONE DIPROPIONATE	Cream 500 micrograms (base) per g (0.05%), 15 g	23/05/2011
CEPHALEXIN	Capsule 500 mg	4/06/2011
CEPHALEXIN	Capsule 500 mg	30/05/2011
FOSINOPRIL SODIUM	Tablet 20 mg	19/05/2011

8 Clinical pathways opportunities

Clinical care and judgment is necessary in all matters, the following opportunities are intended as a guide only.

Test/Treatment Received	Condition	Test / Treatment	Date of service of most recent claim	9
Yes	CAD	Lipid regulator medication	2/06/2011	
Yes	CAD	Beta blocker medication	5/05/2011	
Yes	CAD	Cholesterol test	17/01/2011	

6 months of history included for medication opportunities and 12 months of history for test/treatment opportunities.



This report has been sent by Bupa Health Dialog on behalf of the Coordinated Veterans' Care Program, a Department of Veterans' Affairs initiative. Please treat in accordance with Commonwealth and local privacy laws.

www.dva.gov.au/cvc.htm

- 1 Patient's DVA Gold Card number.
- 2 How likely a patient is to be readmitted to hospital in the next 12 months, against the overall DVA Gold Card population. The higher the rank, the more likely a patient is to be readmitted to hospital. The range of the admission risk rank is 0–100.
- 3 The relevant conditions targeted by the CVC Program – Coronary Artery Disease, COPD, Diabetes, CHF, Pneumonia will appear if applicable to the patient.
- 4 Other selected high risk conditions may appear if applicable for the patient such as Hypertension, Depression, Cancer, Kidney disease, Osteoporosis, Lower back pain, Atrial Fibrillation, Hyperlipidemia, Asthma.
- 5 As paid by DVA.
- 6 May also include specialist visits, where a specialist is also a registered GP.
- 7 Primary treatment applied for each admission. In some cases, this may not appear as it may not have been received by DVA.
- 8 Clinical pathways opportunities represent the tests and treatment regimes for each patient's chronic condition/s. It is for you, the GP, to decide if the treatments listed are appropriate for your patient/s and the table should be viewed as suggested opportunities only.
- 9 When the test or treatment was conducted or received for the most recent claim.



Patient Treatment Report User Guide

Patient Overview

This section provides an overview of all your patients enrolled in the CVC Program, and includes patient specific information including name, DVA identifier, gender and age.

The admission risk rank identifies how likely a patient is to be readmitted to hospital within the next 12 months, against the overall DVA Gold Card population.

The inpatient, outpatient and bed days fields give a snapshot of how many admissions, visits and number of days in hospital patients have had in the previous 12 months (excluding same day visits).

If your patient has one or more of the five conditions targeted by the CVC Program, clinical pathways opportunities will be indicated by the number of tests and treatment regimes recommended for each patient's chronic condition/s.

Patient Condition Overview

This section highlights which of the five chronic conditions targeted by the CVC Program each of your patients may currently have. This section takes into account all history for four of the targeted conditions (Diabetes, Coronary Artery Disease, Congestive Heart Failure, Chronic Obstructive Pulmonary Disease) and the previous 36 months for the remaining targeted condition – Pneumonia.

The ICD-10 AM diagnosis and procedure codes at any position (not restricted to primary diagnosis or procedure only), MBS, prostheses and a few ancillary item numbers were used from the claims to identify the conditions that the patients have. Pharmacy claims were **not** included for the condition identification.

Individual Patient Treatment Report

The date of the PTR is identified in the top left corner of the first page. This is the date up to which the claims history has been included.

Each patient is identified in the top right corner with their name, DVA identifier, age and gender.

Admission Risk Rank

Bupa Health Dialog, on behalf of DVA, has used DVA payments data to develop and implement a DVA specific predictive admission/re-admission risk model. The model output includes an admission risk rank that identifies how likely a patient is to be readmitted to hospital within the next 12 months, against the overall DVA Gold Card population. The range of the admission risk rank is 0 – 100. The higher the rank, the higher is the risk of the patient being admitted to hospital compared to the overall Gold Card population. Factors which are included in the formulation of the admission risk rank include, but are not limited to:

- chronic conditions
- medical and hospital costs
- number of overnight admissions
- length of time since last admission
- length of time between the last two admissions
- medical procedures.

Chronic and other high risk conditions

This section highlights which of the five chronic conditions are targeted by the CVC Program:

- Diabetes
- Coronary Artery Disease
- Congestive Heart Failure
- Chronic Obstructive Pulmonary Disease
- Pneumonia,

and other selected high risk conditions that your patients may have. If your patients don't have any of these conditions, this section will be left blank.

Other selected high risk conditions include Hypertension, Depression, Cancer, Kidney disease, Osteoporosis, Lower back pain, Atrial Fibrillation, Hyperlipidemia and Asthma.

Patients who have been identified with Diabetes, Congestive Heart Failure, Coronary Artery Disease and Chronic Obstructive Pulmonary Disease at any stage will always be highlighted in this section, regardless of their current condition status.

For all other conditions listed, including Pneumonia, patients who have been diagnosed in the last 36 months only will be identified.

Services received in the previous 12 months

This section outlines the types of services and interactions the patient has received in the previous 12 months. Where applicable, further information on recent hospitalisations and medications has been provided in a separate table.

GP visits may include patient visits to their GP/s, and/or specialist/s where the specialist is also registered as a GP.

Patient history report for the past 6 months

This table outlines specific details for the patient's overnight hospital admissions over the past 6 months, prior to the date of the report.

Overnight admissions – refers to the date of the admission. Discharge date refers to when the patient left the hospital following treatment.

Diagnosis code and description – refers to the primary diagnosis made when the patient was admitted for each event.

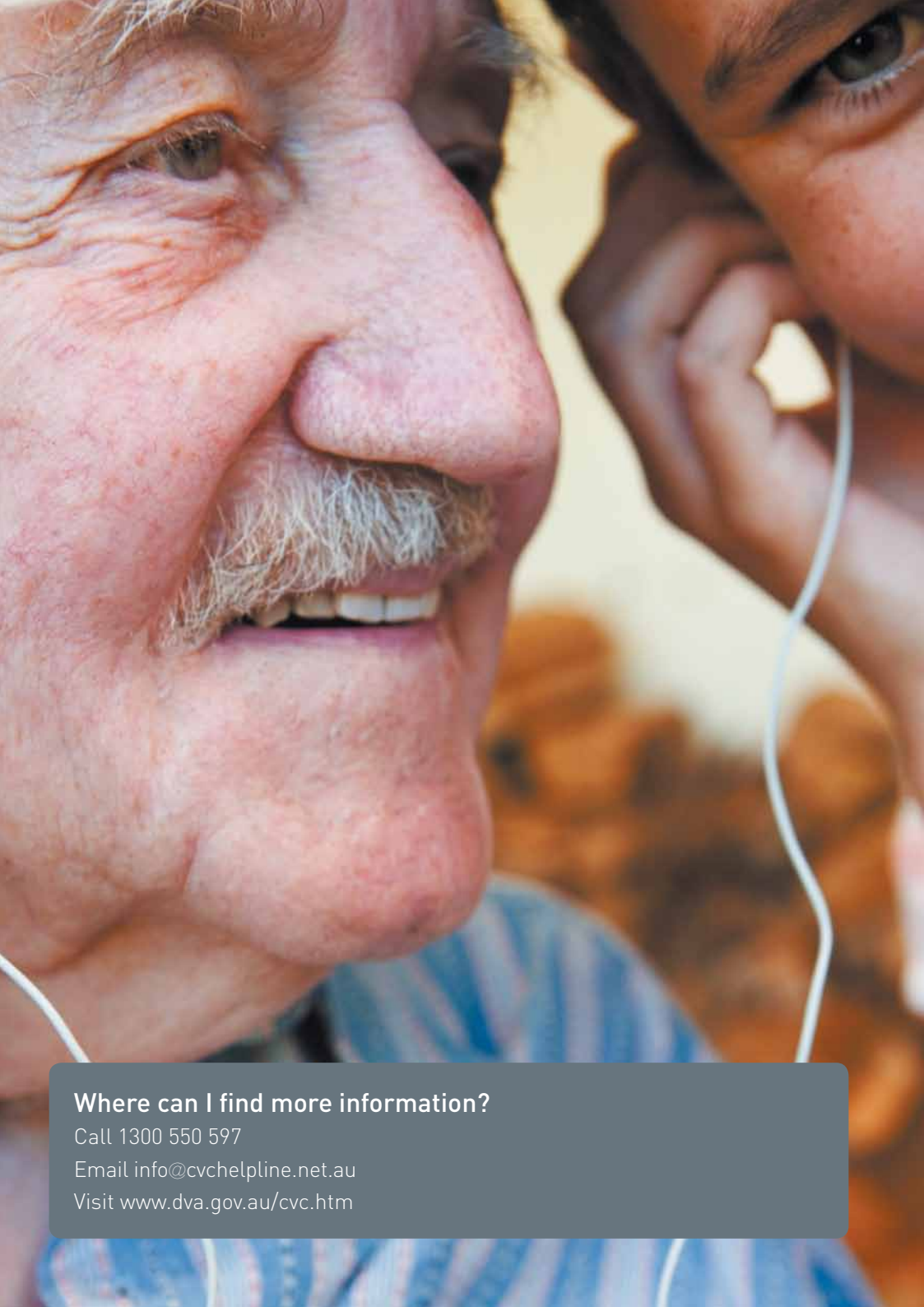
Procedure code and description – outlines the primary treatment which was applied for each admission. In some cases, this information may not appear as it may not have been received by DVA.

Medication history for the past 3 months

The medication table describes the name of the medication (drug name), strength and when the medication was filled by the patient, as reported to DVA.

Clinical Pathways Opportunities

Clinical pathways opportunities represent the tests and treatment regimes for each patient's chronic condition/s. **It is for you, the GP, to decide if the treatments listed are appropriate for your patient/s and the table should be viewed as suggested opportunities only.**



Where can I find more information?

Call 1300 550 597

Email info@cvchelpine.net.au

Visit www.dva.gov.au/cvc.htm

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The Coordinated Veterans' Care Program is a Department of Veterans' Affairs initiative, supported by primary service provider, Bupa Health Dialog.



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