

The Centers for Medicare & Medicaid Services' Office of Research, Development, and Information (ORDI) strives to make information available to all. Nevertheless, portions of our files including charts, tables, and graphics may be difficult to read using assistive technology.

In some cases due to size or complexity, we were not able to make files fully accessible using assistive technology. Persons with disabilities experiencing problems accessing portions of any file should contact ORDI through e-mail at ORDI_508_Compliance@cms.hhs.gov.

CARE MANAGEMENT FOR HIGH COST DEMONSTRATION

Village Health “KEY TO BETTER HEALTH” FACT SHEET
Updated 7/1/09

Demonstration Overview	<ul style="list-style-type: none"> • The three year demonstration tests whether provider-based intensive care management services improves quality of care and reduces costs for fee-for-service beneficiaries who have one or more chronic diseases and generally incur high Medicare costs.
Village Health “KEY to Better Health” (KTBH)	<ul style="list-style-type: none"> • Initial three year Medicare fee-for-service population model demonstration approved for the period November 1, 2005 through October 31, 2008 • Demonstration Authority: Section 402 of Public Law 90-248, as amended (42 U.S.C. 1395b-1) • Three year extension approved began November 1, 2008 • Focus on Chronic Kidney Disease (CKD) and End-Stage Renal Disease (ESRD)
Geographic Area	<ul style="list-style-type: none"> • New York: Nassau, Suffolk, Queens, Kings, Westchester, Rockland, Bronx, and Richmond Counties
Disease Management Benefit	<ul style="list-style-type: none"> • Provide intensive disease management directed by nephrologists in supplementary clinics to identify potential problems and avoid complications, coordinate early intervention plans and prevent acute hospitalization • Health evaluations to identify beneficiaries’ health care needs and any early warning signs of other conditions • 24-hour phone line access to nurses to answer questions and give support • Educational materials, including a newsletter • Access to a pharmacist to help understand and manage the drugs beneficiaries are taking • Help to understand Medicare benefits and the prescription drug plan • Field based nursing support • Early referral to a nephrologist
Contact	<ul style="list-style-type: none"> • Diane Ross, (410) 786-1169; Diane.Ross@cms.hhs.gov