

CORRECTIONAL MANAGED HEALTH CARE POLICY MANUAL	Effective Date: 8/15/2012	NUMBER: G-51.10 Page 1 of 2
	Replaces: 1/4/2012	
	Formulated: 08/03 Reviewed: 04/16	
CHRONIC CARE PROGRAM		

DEFINITION:

Chronic illnesses require care and treatment over a long period of time and usually are not cured. The goal of treatment is to restore and maintain a person's normal functioning to the extent possible. Examples of chronic illnesses include but are not limited to: asthma/COPD, heart disease, diabetes, hypertension, hyperlipidemia, HIV/AIDS, chronic liver or renal disease, seizure disorders, extended dental care, and psychiatric disorders.

POLICY:

- I. A chronic care program identifies and manages offenders with chronic illness with the goals of decreasing the frequency and severity of symptoms, preventing disease progression and fostering improvement in functioning.

- II. Each offender with a chronic disease must have an Individual Treatment Plan (ITP) developed and documented in writing or electronically by a qualified health practitioner within 30 days of identification and/or diagnosis of the disease. The plan will include:
 - A. Instructions to the patient and/or other health care staff about diet, exercise, personal hygiene, wellness and preventive care, as clinically indicated.
 - B. Medications prescribed and medication compliance record
 - C. Type and frequency of diagnostic testing and laboratory studies
 - D. Subjective and objective findings
 - E. Frequency of ITP appointments for evaluation and treatment adjustment
 1. The ITP should follow current Pharmacy and Therapeutics Committee disease management guidelines unless clinically contraindicated.
 2. ITP intervals are based upon patient acuity and clinical judgment of the practitioner, but may not exceed 6 months for HIV/AIDS, mental illness, and diabetics and 12 months for all other chronic illnesses.
 3. An ITP will be reviewed and revised, if necessary, during each follow-up visit.
 4. An ITP for mental health will include current diagnosis and treatment goals.

- III. Each facility will maintain a list of offenders being followed in chronic care clinics.

CORRECTIONAL MANAGED HEALTH CARE POLICY MANUAL	Effective Date: 8/15/2012	NUMBER: G-51.10
	Replaces: 1/4/2012	
	Formulated: 08/03 Reviewed: 04/16	Page 2 of 2
CHRONIC CARE PROGRAM		

IV. Intra-system Transfers

- A. Transfers from one facility to another that both have access to the electronic medical record (EMR) must continue the follow-up schedule established by the previous facility or may, at the discretion of the receiving provider, be seen sooner. If the ITP is incomplete or not current a new ITP must be completed within 30 days of arrival.
- B. Transfers to a facility without access to the electronic medical record (EMR) must be scheduled for completion of an ITP within 30 days of arrival at the receiving facility.

V. Mentally ill offenders housed in the outpatient setting who are receiving psychiatric treatment are followed in a chronic care program.

VI. Medical Alert Codes will be updated upon changes in the offender's health status in the TDCJ mainframe and the appropriate codes will also be assigned in the offender's electronic medical record.

References: 2008 NCCHC Standard P-G-01, Chronic Disease Services (essential)
ACA Standard 4-4359 (New) Chronic Care (Mandatory)