



Amalgamated Medical
Care Management

Quality Clinical Advice & Care

Promoting **Optimal** **Medical Outcomes**



Distinguished Clinical and Compassionate **CARE MANAGEMENT**



Since 1994, Amalgamated Medical Care Management has consistently distinguished itself as a clinically strong care management company committed to the highest standards of patient care. Our comprehensive suite of high quality services are provided by experienced Registered Nurses and Physicians who provide compassionate, cost-effective care that emphasize optimal patient outcomes.

Physician practices, medical groups, independent physician associations, health systems, unions, self insurers, and employers rely on us for our Utilization Management, Case Management, Disease Management, Independent Review, Nurse Helpline/Health Information services, and other vital services. Incorporated in New York, we are also a reliable resource to state and private health plans, government agencies, community health centers, hospitals and other healthcare providers, as well as case management firms. These organizations have come to know the strong value proposition Amalgamated Medical Care Management offers them and their patients/plan members:

- A full suite of essential care management services
- Large network of physicians in broad medical specialties
- Skilled clinicians averaging 20 years of experience
- Focus on value-based healthcare
- URAC, Clear Health Quality Institute Accreditations

Balancing Optimum Utilization of Healthcare Resources with Exceptional Patient Care

For each service we provide, Amalgamated Medical Care Management remains focused on our core mission:

Amalgamated Medical Care Management is a clinically strong care management company offering a higher standard of patient care across diverse medical management services. We provide comprehensive quality-driven medical management programs nationwide and in Puerto Rico. Our commitment is to deliver clinically expert, innovative services that promote cost-effectiveness, patient satisfaction and optimal medical outcomes.



A SUITE OF INNOVATIVE SERVICES CUSTOMIZED TO YOUR NEEDS

UTILIZATION MANAGEMENT

URAC Accredited Evidence-Based InterQual® Criteria and Guidelines

- 24-hour reviews
- First level pre-certification/concurrent review
- First and second level appeals
- Expedited appeals
- Disability reviews
- Retrospective, medical claim reviews and other services

CASE MANAGEMENT

URAC Accredited Certified Case Managers by the Commission for Case Manager Certification (CCMC®)

- Case Management Society of America® standards of practice for Case Management
- Care coordination
- Hospital readmission-reduction programs including transitional and post-discharge case management
- Reporting and documentation for population health management

INDEPENDENT REVIEW ORGANIZATION

URAC Accredited Comprehensive IRO: Internal and External Compliant with the Patient Protection and Affordable Care Act (PPACA)

- State and federal regulatory-mandated appeals
- Medical peer review
- Standard and expedited independent reviews
- Physician consultations
- Peer-to-peer reviews
- Disability and Accidental Death and Dismemberment (AD&D) reviews
- Experimental / Investigational reviews

HOSPITAL READMISSION MANAGEMENT

- Designed to reduce preventable readmissions by effectively addressing the post-surgical discharge needs of patients at high risk of readmission including patients discharged with congestive heart failure, with chronic obstructive pulmonary disease, and other complex medical conditions
- Supported by Patient Transition Coaching wherein a Register Nurse Health Coach contacts the recently discharged patient, assesses the patient's health status, identifies potential problem areas, educates the patient and family regarding the patient's condition, adherence to the prescribed treatment plan, problems they may encounter and when to contact their physician

- Available as a standalone program or in conjunction with a Utilization Management or Case Management program

DISEASE MANAGEMENT

- A multidisciplinary approach designed to improve patient health, while containing health care costs
- Focused on helping individuals with chronic conditions such as coronary artery disease (CAD), chronic obstructive pulmonary disease (COPD), diabetes, heart failure, hypertension and other chronic conditions
- Leveraging population health management processes and data to advance a patient's better health and measure outcomes
- Applying evidence-based practice guidelines
- Providing patient education
- Multi-pronged approach through detailed assessments identifying gaps in care across chronic disease conditions



A SUITE OF INNOVATIVE SERVICES CUSTOMIZED TO YOUR NEEDS

NURSE HELPLINE/HEALTH INFORMATION/TELEHEALTH

URAC Accredited

- Experienced Registered Nurses with diverse emergency, medical and behavioral health disciplines
- Triage services across the lifespan
- Nationally-recognized Schmitt-Thompson Clinical Content® algorithms and advanced clinical criteria
- Minimize unnecessary Emergency Department and Urgent Care visits
- Telephone triage, healthcare counseling, behavioral health and telehealth option
- Accredited to Clear Health Quality Institute standards

NURSE2DOCONNECT

Powered by MyTelemedicine, Inc.

Benefit from High Quality Care and Convenience, Reduced Emergency Department, Urgent Care and Physician Visits

- Individuals gain direct access to experienced RNs with an average of 20 years clinical experience across multiple disciplines
- No waiting times to schedule physician appointments, *Nurse2DOConnect* provides 24/7 virtual access across the U.S. to all levels of healthcare.
- With no member co-pays and coinsurance, the *Nurse2DOConnect* program produces a significant savings versus ED and Urgent Care visits
- The *Nurse2DOConnect* platform features a user-friendly dashboard and is accessible from any device—a PC, laptop, tablet or smart phone.
- Improves continuum of care by providing the member's Primary Care Physician with a copy of the encounter

OTHER VITAL SERVICES

- Disability Management
- Maternity Management
- Medical Claims Management
- Network Referrals
- Population Health Management
- Predictive Modeling
- Wellness and Positive Health Program
- Health and Central Scheduling Call Center

Amalgamated Medical Care Management is a premier national leading resource for a comprehensive suite of high quality care management services including Utilization Management, Disease Management, Case Management, Nurse Helpline/Health Information and Independent Review. The Amalgamated Family of Companies is a group of affiliated businesses which have grown from the flagship company, Amalgamated Life Insurance Company, a leading provider of comprehensive insurance solutions. Founded in 1943, Amalgamated Life operates in all 50 states, the District of Columbia and Puerto Rico. It has consistently earned the "A" (Excellent) Rating from A.M. Best Company since 1975 attesting to its strong fiscal position. In addition to Amalgamated Life, the Amalgamated Family of Companies includes: a third party administrator, Amalgamated Employee Benefits Administrators; Amalgamated Medical Care Management, a medical care management firm; Amalgamated Agency, a property and casualty broker; and AliGraphics, a printing firm.



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