





#### **CERTIFICATION OF DISABILITY MANAGEMENT SPECIALISTS COMMISSION**

# **Informed Advocacy:**

# **Empowering Knowledge For Case Managers and Those They Serve**

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of the regulations, laws, and

guidelines that impact their practice.

By Chikita B. Mann, MSN, RN, CCM, Commissioner, Commission for Case Manager Certification

dvocacy is the heart of case management practice. The Code of Professional Conduct for Case Managers from the Commission for Case Manager Certification (CCMC's Code) states that "case management is a means for improving client health,"

wellness and autonomy through advocacy, communication, education, identification of service resources, and service

facilitation." Board-certified case managers are obliged to adhere to the rules and standards of the Code as they provide access to the right care and treatment at the right time, in support of goals set by the individuals they serve.

Advocacy is most effective, of course, when case managers have full knowledge of the regulations, laws, and guidelines that impact their practice. This is what I've come think of as "informed advocacy." With informed advocacy, knowledgeable case managers can empower themselves with evidence-based best practices as they also empower their clients (known in some practice settings as "patients") and their support systems/families.

My specialization of workers' compensation case management is impacted by regulations that differ from state to state; therefore, as an informed advocate, I must stay

Chikita Mam, MSN, RN, CCM, is a commissioner of the Commission for Case Manager Certification (CCMC), the first and largest nationally accredited organization that certifies case managers, and chair of the CCMC Ethics Committee & Professional Conduct Committee. She is also a disability RN case manager for GENEX Services Inc., for the State of Georgia, and she is responsible for workers' compensation, short- and long-term disability, and legal nurse consulting. She is a member of the Honor Society of Nursing, Sigma Theta Tau International. Her areas of expertise are cultural competency, workers' compensation case management, medication reconciliation, and virtual case management. She has a blog called "Case Management 411" that explores issues that directly and indirectly affect care coordination.

up-to-date with regulatory changes that affect workers' compensation cases. Similarly, disability case managers and certified disability management specialists (CDMSs) must know workplace laws and regulations (both federal and state) such as the Family Medical and Leave Act (FMLA) and the Americans with Disabilities Act (ADA). (CDMSs are also governed by their own Code.) Case managers in acute care,

primary care, and other settings need to be well versed in Medicaid and Medicare rules, such as those impacting reimbursement.

For all case managers across the health and human services spectrum, there are rules and standards for professional and ethical prac-

tice: CCMC's Code and the Standards of Practice for Case Management from the Case Management Society of America (CMSA's Standards). In addition, each of our professional disciplines, such as nursing, social work, and vocational rehabilitation, have codes of ethics and practice standards. Combined, these standards and rules allow us to practice at the top of our certification and licensure to advocate for and protect consumers of case management services.

#### **Informed Advocacy in Action**

Here are five ways informed advocacy can help elevate case management practice:

1. Advocate for what the law (or coverage) allows: Workers' compensation provides an excellent illustration of informed advocacy in action. State regulations stipulate eligibility for certain types of services and interventions and under what circumstances or conditions. For example, if a person is unable to return to his or her job because of a permanent disability resulting from a work-related injury or illness, state law may allow that individual to receive vocational training. With this information, case managers can help open more possibilities for a

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person who is adjusting to a life-altering illness or injury. Accessing vocational services can expand a person's skills, improve employability, and increase self-esteem. Similarly, a disability case manager can investigate what resources might be available through the employer's Employee Assistance Program (EAP). Certified disability management specialists explore return-to-work and stayat-work options to help ill/injured employees, pending medical approval, remain productive as they heal. Case managers in acute care, primary care, or similar settings can identify treatment options that are covered by the individual's health plan as well as communitybased resources. Across the health and human services spectrum, informed advocacy is grounded in the knowledge of what the regulations and/or insurance coverage allow.

- 2. Understand regulatory and insurance coverage **limitations.** There are times, however, when the individual cannot access a certain resource or provider. With a workers' compensation case, it may be a state law limitation. For nonoccupational illnesses and injuries, the person's health insurance plan may not cover a particular treatment option, or a provider may be out of network, which poses a financial burden beyond the person's means. While these limitations may feel like restrictions, they can actually empower the case manager's advocacy by channeling efforts into what is allowed. The case manager can present the options available to empower the individual and his/her support system in making informed decisions in support of their goals.
- 3. Keep ethics and standards top of mind. CCMC's Code and CMSA's Standards should be reviewed regularly not just when a problem or dilemma arises. I suggest my staff do so about every 3 months. Case managers should also review the standards and ethics of their professional discipline, such as nursing, social work, vocational rehabilitation, or other fields. Keeping these standards fresh in one's mind improves knowledge and instills confidence when interacting with other health and human services professionals as part of interdisciplinary teams.
- **4. Ask questions, seek clarifications.** When confronted with an ethical dilemma or managing a complex case in which there may be conflict among the stakeholders, case managers should never feel as if they are going it alone. Help is available. For example, a case manager who was new to workers' compensation practice was asked by an insurance carrier if she could deliver a recording

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of surveillance activity of an injured employee to the attending physician. The case manager was asked because she had regular face-to-face contact with the physician. The case manager was not comfortable with the request and came to me, as her supervisor, for clarification. I explained that the workers' compensation board in our state prohibits any rehabilitation supplier (ie, case manager) from participating in surveillance activity of any type or from delivering or viewing any surveillance footage. In addition, our company policies prohibit case managers from participating in any type of surveillance activity. This clear-cut information supported the case manager and provided clear language on how to respond to the insurance company's request.

As this example shows, in the midst of an ethical dilemma or complex situation, case managers should reach out to a supervisor, a more experienced peer, and/ or the ethics panel at their workplace. Consult CCMC's Code, CMSA's Standards, and the case management employer's company policies. If all other resources have been exhausted, an advisory opinion can be requested from CCMC's Ethics Committee.

5. See rules and laws as informative, not punitive. Rules do not restrict, they protect. Like the guardrails on a highway, they show the way to go and avoid danger or difficulty. State laws and regulations, the Code and Standards for case management practice, and professional discipline guidelines exist to protect the practitioner and those they serve. To be an informed advocate, case managers must regularly revisit these resources as helpful guides to support ethical practice.

Advocacy reminds all case managers why we practice: to serve those who benefit most from case management services. It is up to each individual case manager to stay informed of the rules and regulations governing case management practice and their particular specialization. By knowing the parameters of eligibility for services under state law or insurance coverage, and where and how to "make the case" for our clients, we are more effective as informed advocates and uphold the integrity of our practice.  $\square$