

## CHRONIC OBSTRUCTIVE PULMONARY DISEASE

The following recommendations were derived from the most current clinical practice guidelines for COPD.

### Recommended Management

- Spirometry testing to confirm diagnosis of COPD
- Pulmonologist referral
- Medication management
  - Ensure medication reconciliation completed
  - Review medications to follow Guidelines for Exacerbation and Maintenance Management (from Global Initiative for Chronic Obstructive Lung Disease)
- DME referral for oxygen support
- Pulmonary rehab referrals must be made within 14 days from discharge
  - Rehab can last up to six weeks post-discharge
- Referral to Humana Florida Medicaid Case Management for Regions 1-11
  - FL\_MMA\_CM\_Referrals@humana.com
  - Case management phone main line: 1-800-229-9880

### Guidelines for Pulmonary Rehabilitation

Pulmonary rehabilitation reduces hospitalization among patients who have had a recent exacerbation.

- Goals of pulmonary rehabilitation:
  - Improve health for patients with COPD
  - Decrease utilization and readmissions
  - Reduce/mitigate pulmonary hypertension
  - Provide instruction to improve patient's well-being
- Effective action:
  - Patients with documented COPD hospitalized for a COPD event should be referred to pulmonary rehab no later than 14 days after discharge.
- Guidelines:
  - Patient admitted with COPD should be approved for pulmonary rehab no later than 14 days post-discharge if patient has not received rehab in three years.
- Duration of rehab:
  - Up to six weeks post-discharge

### MCG for Outpatient Pulmonary Rehabilitation Authorizations

Pulmonary rehabilitation may be indicated when ALL of the following are present:

- Moderate to severe respiratory dysfunction, with one or more hospital admissions
- SpO2 less than 90% (room air or supplemental oxygen)
- Acute exacerbation of COPD
- Decreased ability to perform activities of daily living
- Increased dyspnea impeding patient's level of function **Referrals should include clinicals and signed plan of care.**

References used were: *Management of COPD exacerbations: a European Respiratory Society/ American Thoracic Society guideline. Eur Resp J* 2017;49:1-16.  
*Prevention of Acute Exacerbations of COPD; American College of Chest Physicians and Canadian Thoracic Society Guideline. CHEST* 2015;147:894-942.  
*Global Initiative for Chronic Obstructive Lung Disease: 2019 Report. www.goldcopd.org*