

## **Finding Risk Across a Population**

# National Healthcare Manager Uses *Risk Navigator Clinical*<sup>®</sup> to Forecast and Rank Risk —and Drive Interventions

A simple, one-page checklist just wasn't going to do it anymore. That's what MED3000, a national healthcare management and information technology company, had long since concluded about its efforts to identify members needing care coordination.

A basic record of diseases and care events for members – even though it contained standard, legitimate triggers for referral – wasn't providing the precision, robust analysis and predictive prevention that MED3000 needed for its medical practice and provider network clients seeking to keep costs down and members healthier. Instead, this health plan manager needed a new tool, one it could promote, one it could use to produce financial benefits that were both prompt and long lasting, and one with which its clients could directly interface to understand their population's needs.

MED3000 selected MEDai's Risk Navigator *Clinical* solution to provide true, 21<sup>st</sup> Century, state-of-the-science predictive modeling of medical costs for the physician, hospital and health system clients that it serves. "We needed a core application to stratify the management needs of members early out – and one that would allow us to continue to use informatics to analyze results of interventions with these members," says Carla Davis RN, BSN, MS, who serves as Director of Medical Services for MED3000.

## **Sorting Through Groups with Rigor and Accuracy**

In helping its clients manage their plan populations, MED3000 had been focused on acute care events and identifying a small number of members that were currently, or in the recent past, generating the highest costs. But merely focusing on such factors as individual readmission rates within the last 30 days, or depending on primary-care doctors or members to refer, was not proving adequately proactive or dependable.

"And across tens of thousands of members, our efforts to identify just the few hundred with the highest current claims were not allowing us to take control of costs and care," says Davis.

After consulting with MEDai on the challenge, MED3000 elected to bring Risk Navigator *Clinical* online in June 2006. On behalf of its health plan clients, the company immediately began to use the impact profile and risk profile features to identify individual members for possible management. MED3000's clients included plans with large numbers of members participating in Medicare or TANF (Temporary Assistance to Needy Families), or other categories of age, disabled or income-dependent programs.

Focusing especially on members with risk drivers such as asthma, diabetes, CHF, COPD, and complex, multiple conditions, MED3000's case managers used sophisticated and dependable health-risk assessments developed by major medical centers to capture the raw data for risk

stratification. Based in part on scores for acuteness and chronicity, Risk Navigator *Clinical*, in turn, provided a risk category (rated from 1-5) for each plan member.

With the new solution in place, MED3000 could now show reports at any time sorted by health plan, disease state and risk category. The system's proven predictive weighting is based not just on diagnosis and demographics, but also on service usage, lab results and other factors.

"It's automated and readily at hand for us and our clients. We can closely study the profile of members – individually or as a group – and see what is driving costs the most," notes Davis. "Ultimately, cost savings are built one member at a time. We all know that, and so the point is to show that ramping up that process with a precision informatics solution like this produces a solid return on investment for our client plans."

### **To Find Subsets of “Costers” Before It’s Too Late**

MED3000 incorporates Risk Navigator *Clinical* in its supervisory workflow by providing the outputted lists to its support coordinator, who triages the cases to the appropriate case manager. After studying the member's status (including cost impact and risk profile), the case manager develops a care plan, combining and delivering the functions of care coordination in the hands of a single staff member. As case managers continue to intervene in the member care regimens and to update data, they can refer back to Risk Navigator *Clinical* to confirm the ranking of each member's status.

"This solution has helped us especially in identifying and stratifying members in our Medicaid and related populations," explains Patricienn Moreno, a data analyst at MED3000. For example, within the company's client plans, Risk Navigator *Clinical* data confirmed that individuals over 51 years of age who suffered from coronary artery disease (CAD) and asthma were the most expensive subpopulation of Social Security income (SSI) members.

Case managers could also now more easily select members in one high-risk disease category who were having problems because they were also in a second risk category. In this way, Risk Navigator *Clinical* has assisted MED3000 in managing members with multiple comorbidities. For instance, the costs of members suffering from congestive heart failure (CHF) were up because, in reality, they were failing to manage their diabetes. Staff could make this determination and respond to the appropriate need of the member often without as much direct, time-intensive follow-up, thanks to the system flagging noncompliant members who failed to maintain care criteria, in terms of visits, medications and other factors.

"In the past, we just didn't have the same level of surety that we were capturing everyone who needed this kind of attention, and that they were the right individuals for case management at the right time – or if we were effective in responding to them," says Dana Barnes, who serves as Manager of Case Management at MED3000. "Now we have a data-driven tool that keeps us on top of it."

### **Benefits for All in Navigating Risk**

Put simply, the result of using Risk Navigator *Clinical* was that members who needed case management were receiving it. For one of MED3000's client plans, for example, use of the solution brought a 250-percent jump (400 members to 1,000 members, approximately) in the number of members receiving disease management.

“We’ve exceeded the goal that our primary client plan has given us for members in disease management, which is a positive position to be in when it comes to member costs at end of year,” says Davis. “After we began using Risk Navigator, the portion of our total members in case management not only jumped significantly but then stabilized at the new levels, as the cost per member either held steady or, in some plans, dropped significantly. Clients were pleased.”

### **Actionable Reporting for Everyone**

The MEDai solution posts the case data on an easy-to-use web interface. The reports stratify members by need for intervention, alert the staff to members who aren’t receiving adequate management, and provide clients with profiles by employer group.

MED3000 has trained clients to run certain reports or pull saved reports from the portal. Clients have also enjoyed taking advantage of this capability, through which they can compare their enrollees to the population as a whole and look at disease prevalence in their group compared to benchmarks.

In addition, Risk Navigator *Clinical* can point out physicians who use a high level of medical services per member. Medical directors can use this profiling for physician comparisons, and for consulting with practices.

“The plans can engage physicians by providing them with online access to actionable information, including evaluation of medication compliance,” explains Davis.

### **Helps with Staff Allocation as Well**

Another group happy with the system and the information received from it are the case managers who intervene in member care. The reports help them know what to focus on when they call members, so that they are asking questions appropriate to the management needs of the particular case.

“Case managers don’t have the time to go through claims data to do this, so it’s been great for them to know what to pursue in these calls. That way, they don’t go out on tangents but can get straight to productive counseling,” observes Davis. “The Medicare population, for example, is thrilled that we know so much about their needs anytime we contact them.”

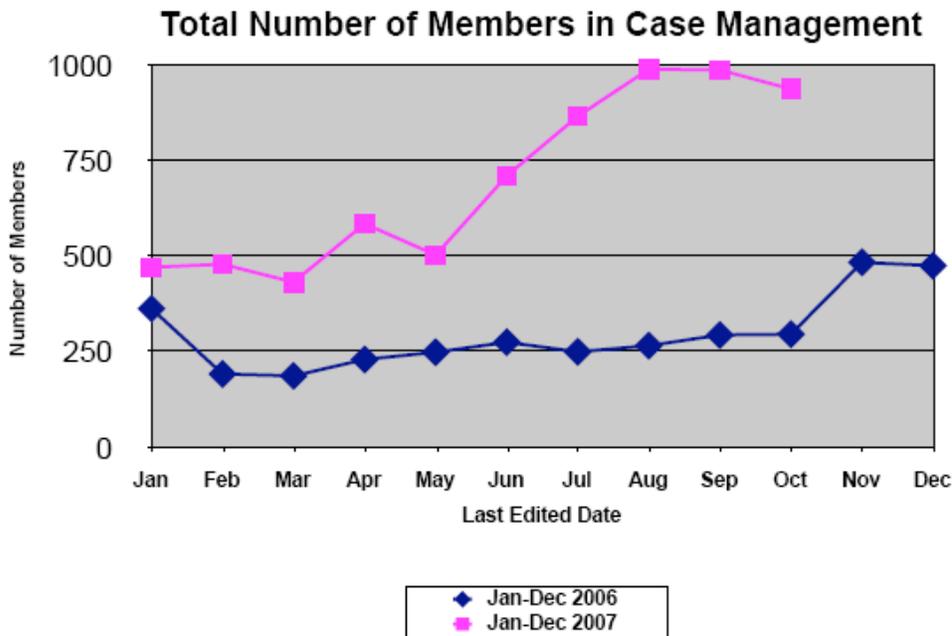
Plus, Risk Navigator *Clinical* is allowing MED3000 to analyze the acuity of the caseloads of its case managers. This will assist in efforts to determine what level of acuity, per given member load, its case managers can handle.

### **A Fit with Strategic Direction**

With Risk Navigator *Clinical*, MEDai is achieving its goal of helping insurers and healthcare managers to improve clinical outcomes, operational results and financial returns through advanced knowledge. The system bridges the gap between the random and highly individualized nature of member populations and the insight needed for better efficiency, favorable revenues and improved health protection. The solution identifies characteristics and patterns in groups, drilling down to individuals.

MED3000 likes the way the solution fits into its broader efforts as well. “For us as an information-technology company, this tool helps to justify our investment in better care-coordination solutions – as part of our Population Health Management Program – because we can direct those activities to the right subsets of members,” says Davis.

The company takes pride in the way this tool has enhanced its predictive modeling services and provision of front-end information to clients. “We are passionate about Risk Navigator *Clinical* because we can show our clients how to apply the findings with evidence-validated approaches,” concludes Davis. “That helps us all to avoid missed opportunities in managing cases and controlling costs.”



*In just one year of using Risk Navigator Clinical, the healthcare management company helped its primary client plan to dramatically increase its number of members in case management. MED3000 attributes the resulting savings in cost per member per month to having identified the right individuals in the appropriate populations to manage, and thereby delivering interventions where and when they can be most effective.*