

A photograph of a doctor in a white lab coat with a stethoscope around her neck, leaning forward to examine a baby. The baby is being held by a smiling woman in a blue shirt. The scene is set in a clinical or hospital environment. The image is overlaid with a semi-transparent white filter.

# Unlocking Value: Complex Behaviors Session



# Introductions

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Optum



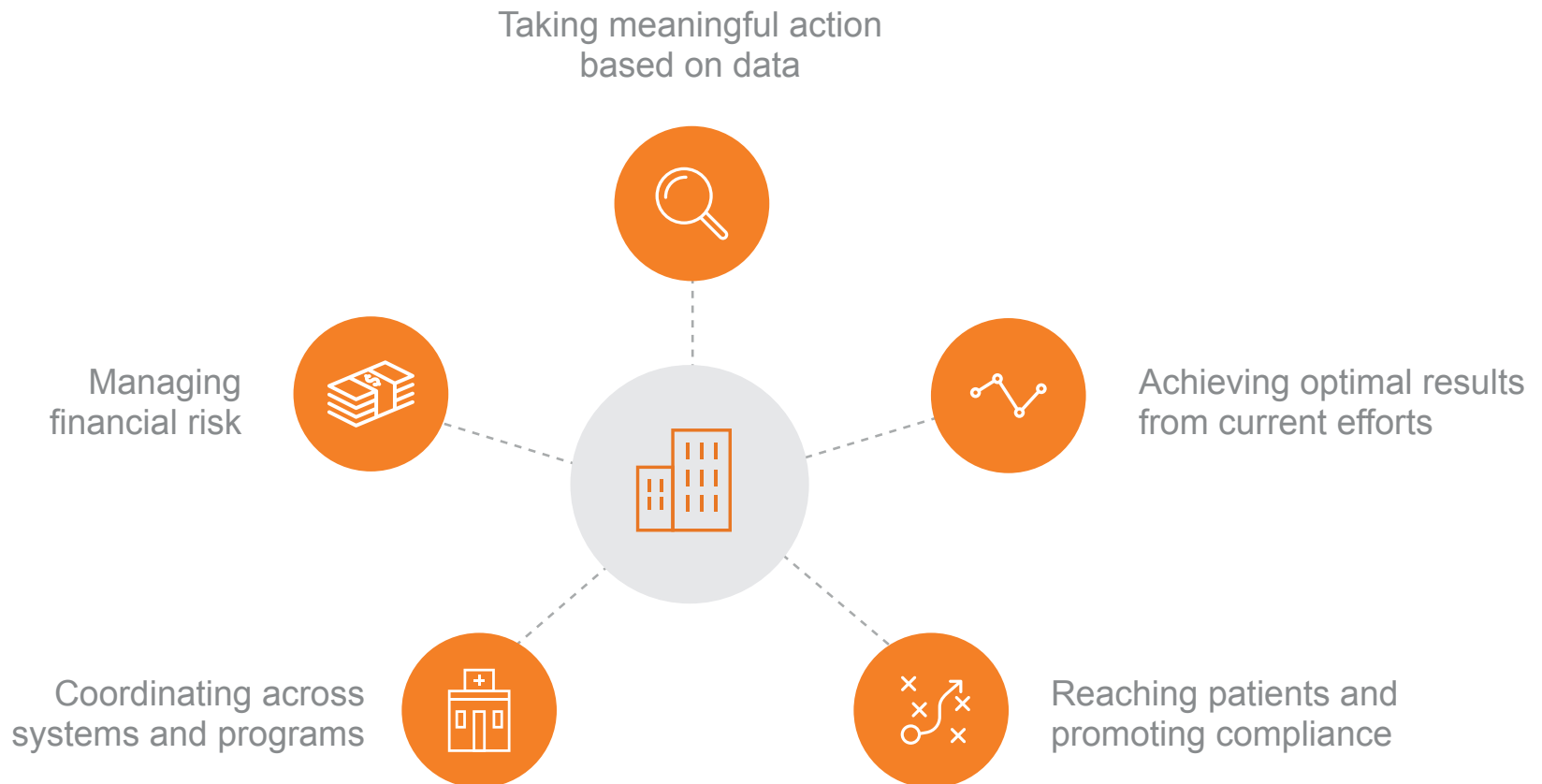
# Discussion

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- Current Challenges
- Define New Models & Importance of Emerging Risk
- Engaging members – moving from data to action
  - Explain different methods needed to capture the next generation of outcomes data
  - Use of this data for value-based contracts and risk-sharing arrangements
- Roadmap ahead for Medicaid

# Do you face these challenges in managing the health of your population?

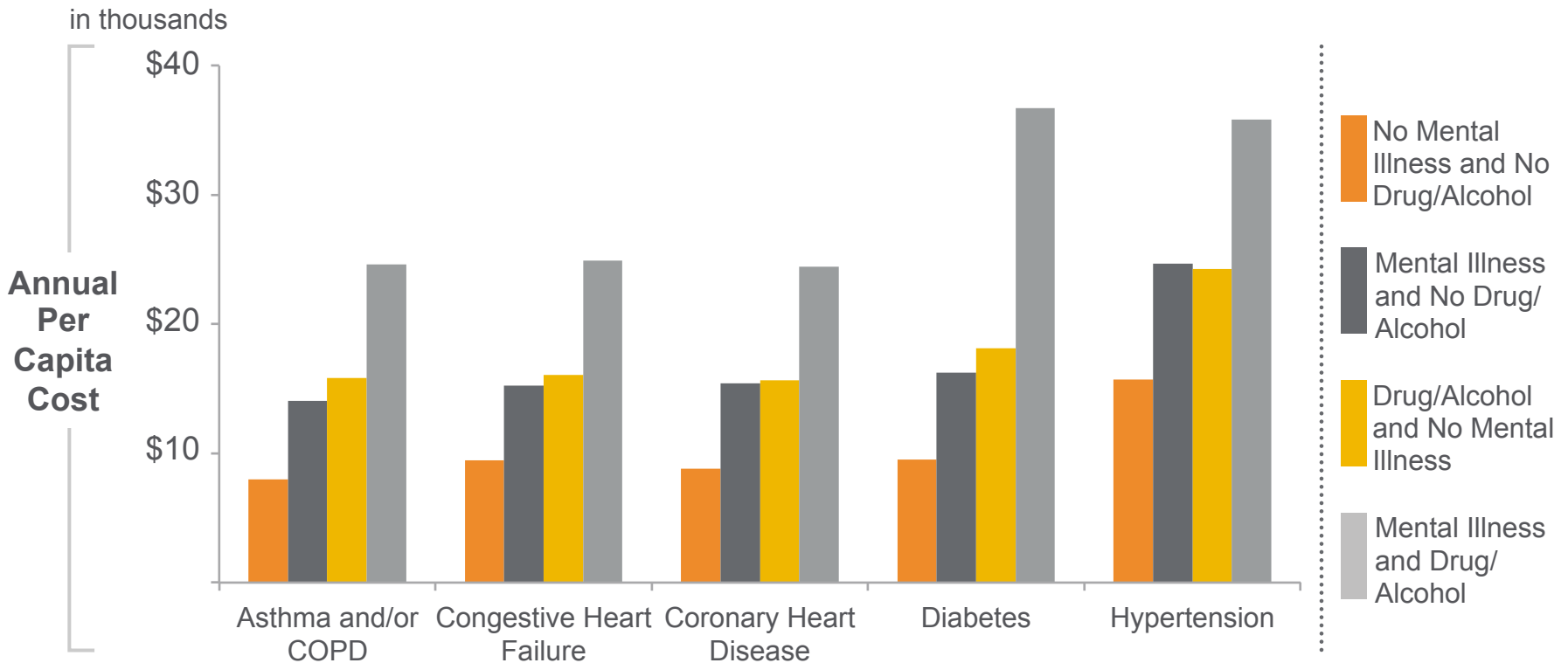
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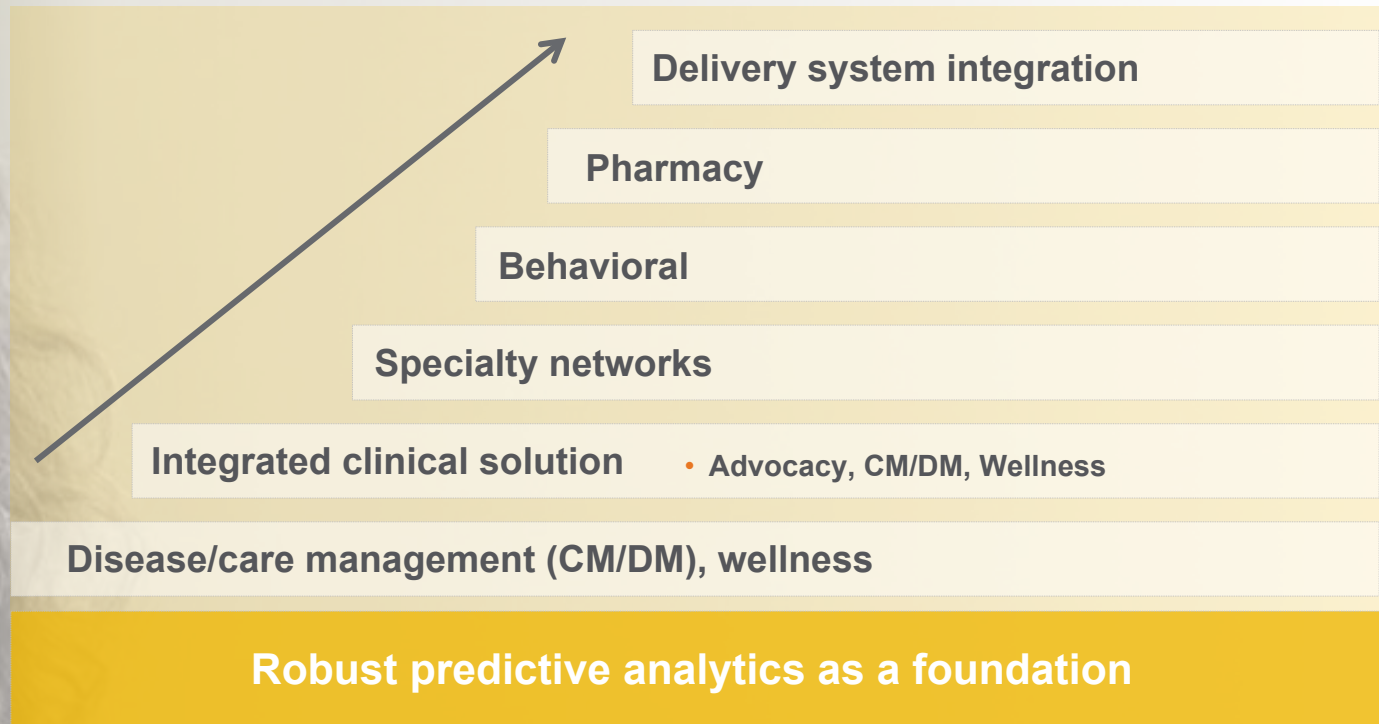
# Part 1: Understanding the interconnectivity

## Per Capita Medicaid Costs

### Implications of Behavioral Health Comorbidity



# Evolving the health management approach into a whole person model of care is foundational to improved outcomes



## Maximizing economic and health outcomes



Rx



Behavioral Health



Specialty



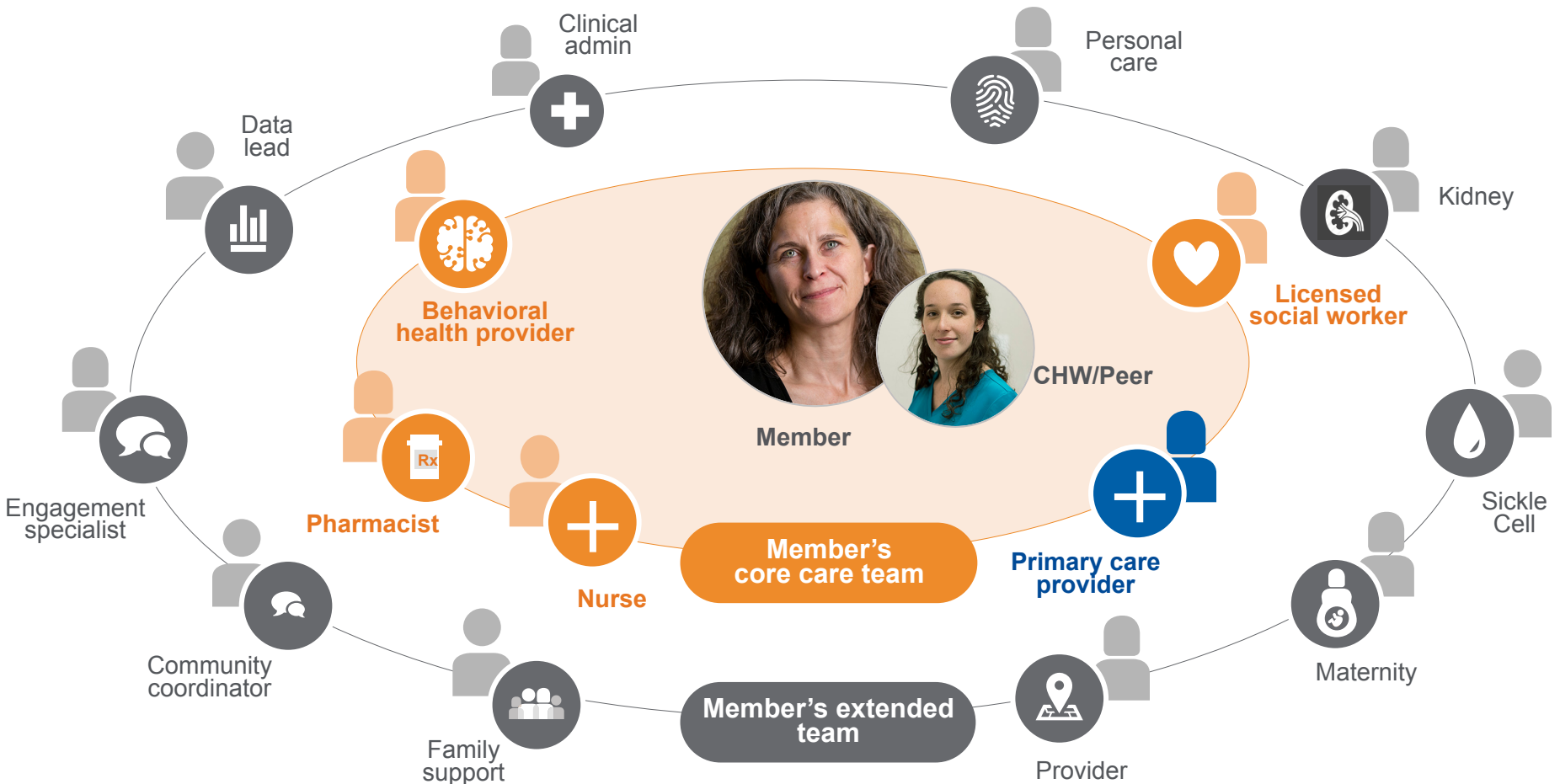
Social Services



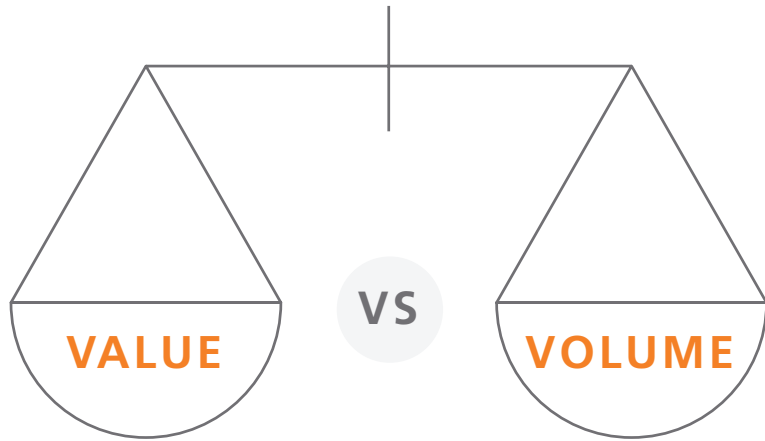
Medical

# Member-centric integrated care team

One team. One structure. One care plan.



# Part 2: The big picture: Moving from volume to value



EFFECTIVELY MANAGE POPULATION HEALTH GROUPS TO:



Increase revenue



Improve patient experience



Improve clinical outcomes



Designing, implementing and managing solutions is a significant and serious burden



# Identifying and stratifying the population for the right engagement and interventions is key

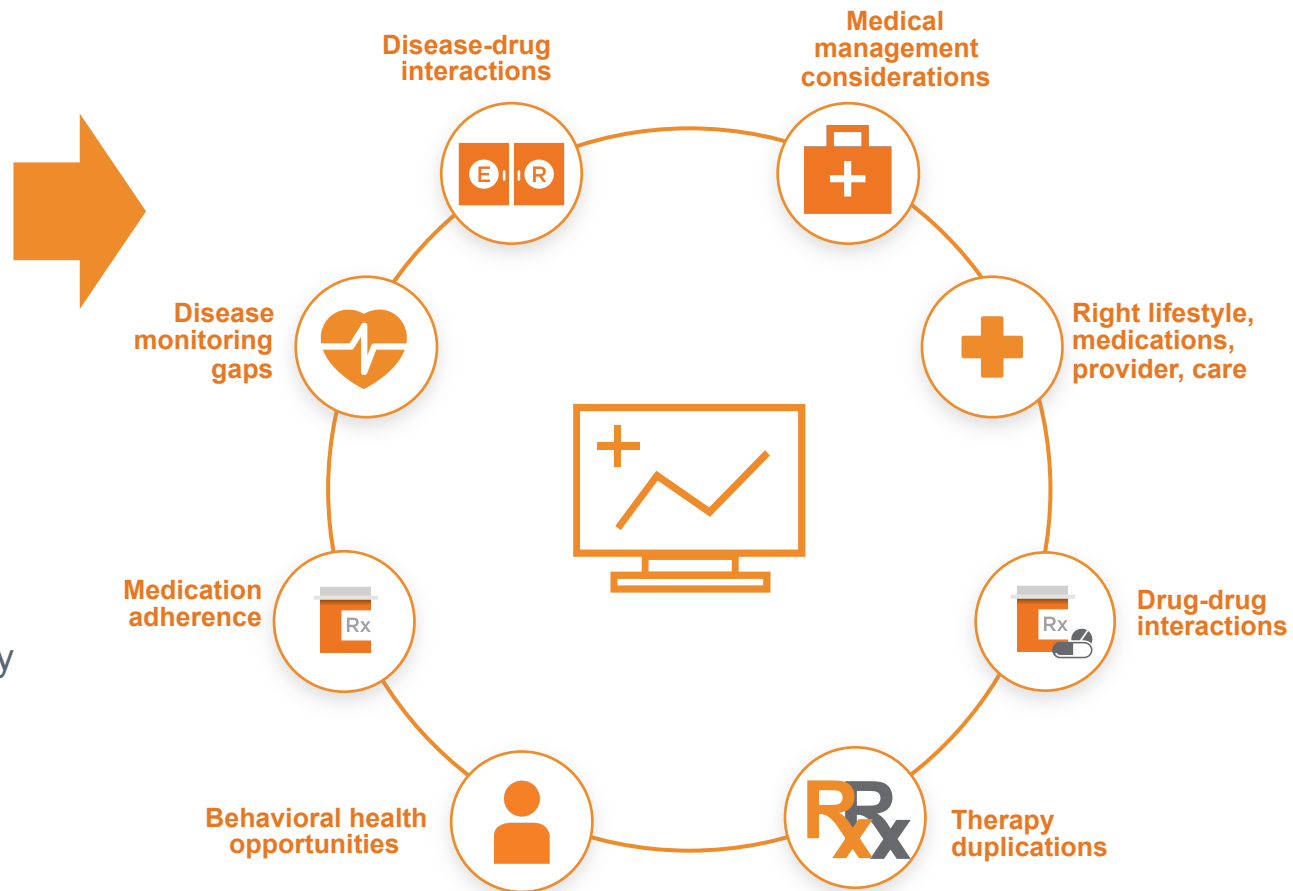
Low risk		High risk	
<b>Healthy</b> 85%	<b>Emerging Risk/ Co-Morbid</b> 6% - 15%	<b>Specialized Condition Focus</b> 3% - 6%	<b>Super Utilizers</b> 1% - 3%
<ul style="list-style-type: none"> <li>• Health promotion</li> <li>• Outreach</li> <li>• Digital Solutions</li> </ul>	<ul style="list-style-type: none"> <li>• 20% become high risk in a given year</li> <li>• Early identification Identify before they become Emerging High Risk Co-Morbid</li> </ul>	<ul style="list-style-type: none"> <li>• Leverage analytics to identify</li> <li>• Deploy resource to develop and coordinate care</li> </ul>	<ul style="list-style-type: none"> <li>• 80% typically have 3 or more conditions</li> <li>• Members complex physical, behavioral and social needs must be coordinated</li> </ul>

# Engaging members starts with known clinical information

Clinical system capabilities serve as the foundation

Diverse data points to predict and monitor population needs

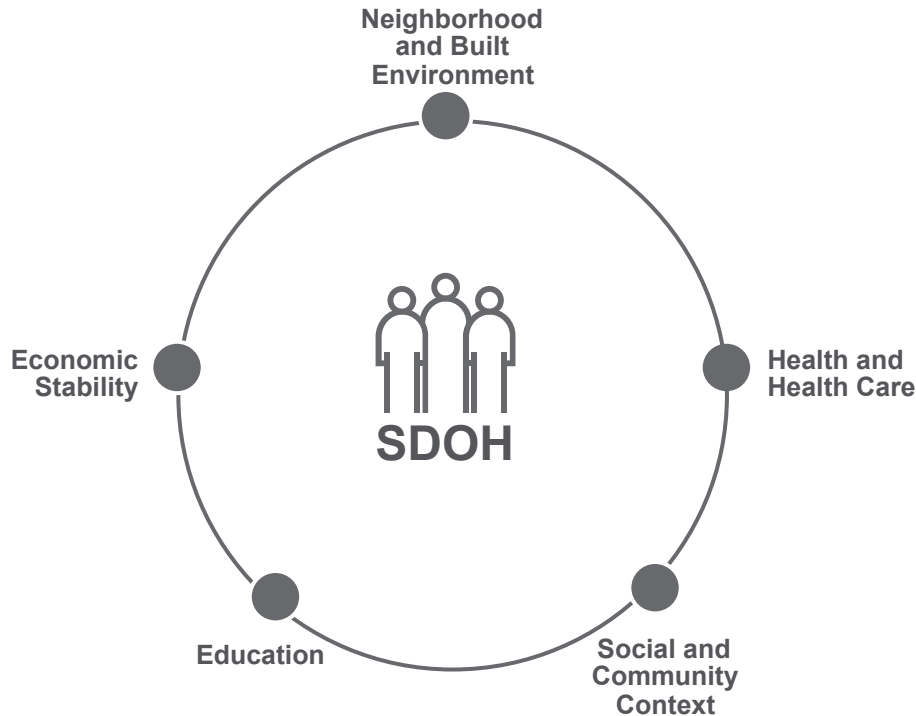
- Claims data
- Behavioral health data
- Lab data
- Pharmacy data
- Electronic medical records<sup>1</sup>
- Admit/Discharge/Transfer (ADT)
- Health assessment results
- Network, quality and efficiency rated physician utilization



# Incorporate social determinants and consumer analytics

**5**  
social  
determinants

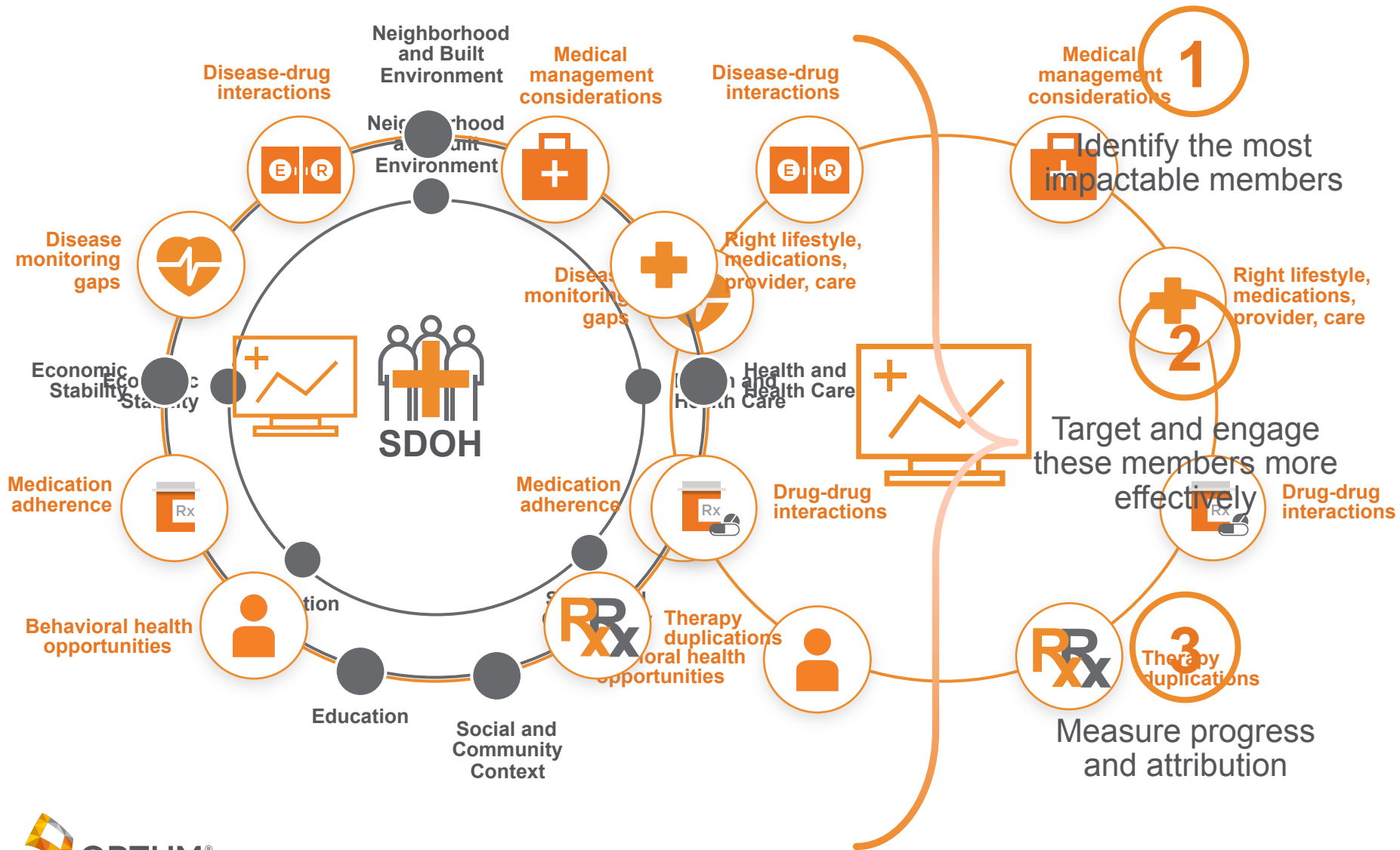
impact **40%**  
of health outcomes\*



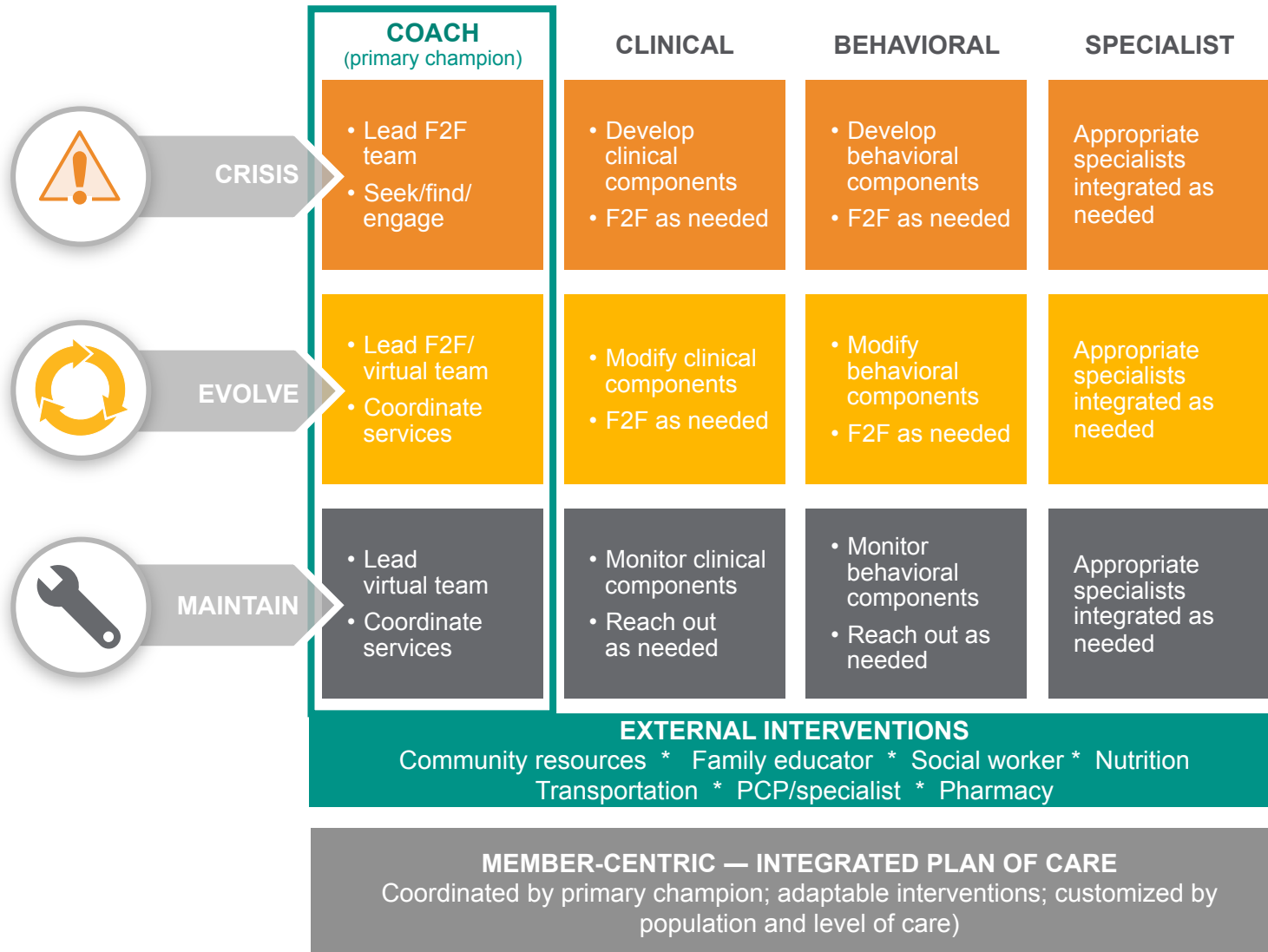
Factors that influence health:

- Access to care
- Education
- Employment
- Income
- Family and social support
- Community safety
- Air and water quality
- Housing and transit

# Using consumer analytics and social determinants of health helps identify & engage members at risk

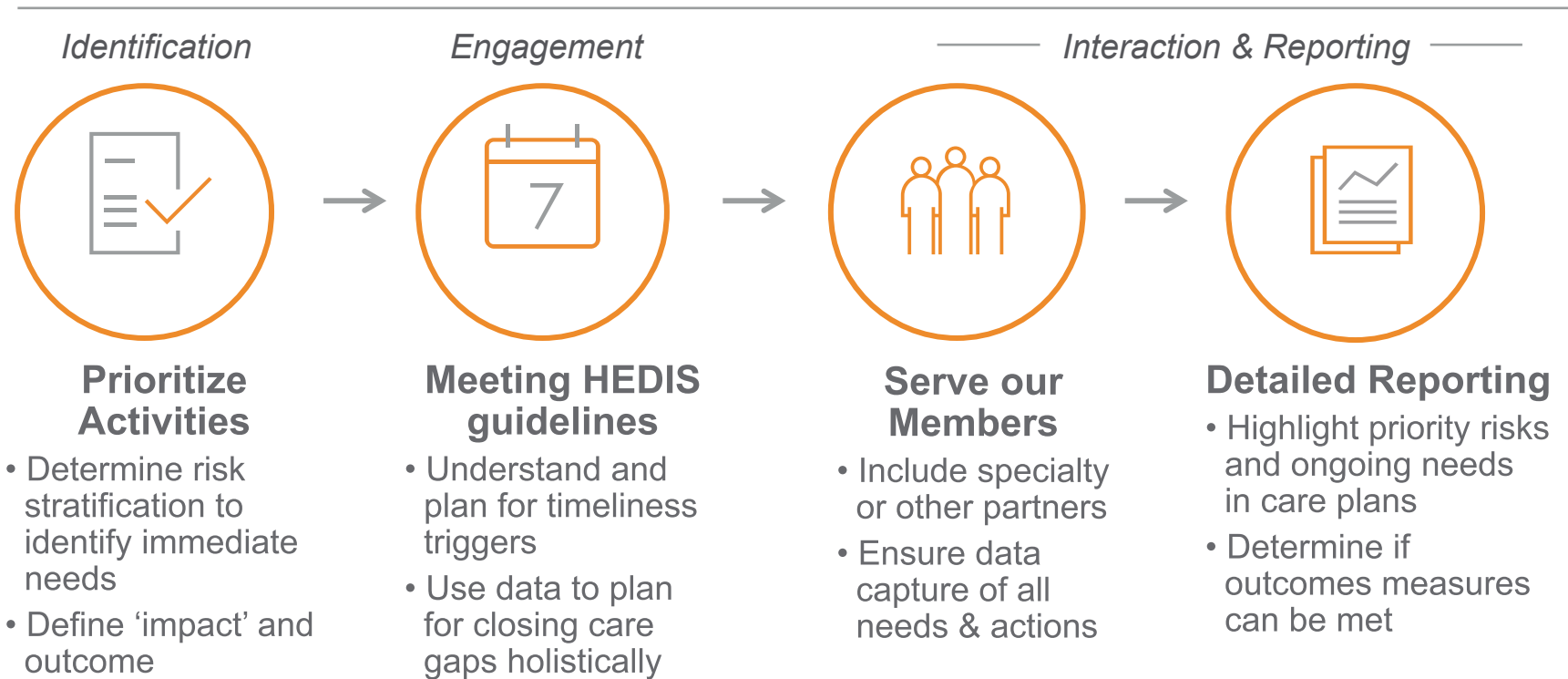


# Adjust interventions based on stratification and level of risk



# Methods for capturing Outcomes Data

Value Based Contracts or Shared Savings/Risk



## Determine Right Data Capture to Trend Outcomes

- These activities must be designed around the whole person not traditional conditions, either medical or behavior or social but **all areas** that impact a person's quality of life and health
- Utilize best practice tools and partners to ensure value-capture for payment accuracy

# Roadmap ahead for Medicaid

## Key Data Requirements

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- VBC / ACO growth here to stay – strong payer/provider intent but the ‘how’ remains an open question
  - Provider investments for population health traditionally came from state, federal, or payer payments
  - Groups purchasing data or technology for the first time are still learning so needs for good partners is important for quality and financial success
- Despite federal cutbacks, states are looking for ways to maximize dollars on behalf of their beneficiaries
  - Opioid epidemic remains a hot topic not just for behavioral health but also for medical pain management (trends)
  - Greater focus on provider management and care coordination activities
- **Conflict Free** Case Management guidance continues
- Path to “Pay for Value” must be defined in terms of shared risk arrangements
  - Requires new investments in population health management, analytics tools, and internal expertise to tie to relevant outcomes for measurement

# Thank you

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