

**Anthem**  

*BlueCares for You*

# Disease Management in Managed Care

- Next generation of “Managed Care”
  - Disease Management for populations
  - Advanced Care Management for Individuals
- What kind of DM?
  - Analyze populations
    - Find out what your opportunities are
    - Diseases with high prevalence and medium to high cost, or maybe low prevalence and very high cost
    - Quality is lagging behind best practice

# Disease Management in Managed Care

- What makes a good disease for management?
  - Consensus on treatment recommendations
  - Course of disease is modifiable
  - Gap between best and current practice
  - Large populations can be cost-effectively managed
- Most common DM programs:
  - Diabetes, CHF/CAD, Asthma/COPD
  - Rare diseases, cancer, neonatal, ESRD

# BlueCares for You Disease Management Programs

- Available to all Anthem West members as of 9/02
  - Diabetes
  - Coronary Artery Disease
  - Congestive Heart Failure
  - End Stage Renal Disease (with subvendor)
- Goal: treat the **WHOLE** Person, rather than one specific disease with integrated programs

# BlueCares for You Program Highlights

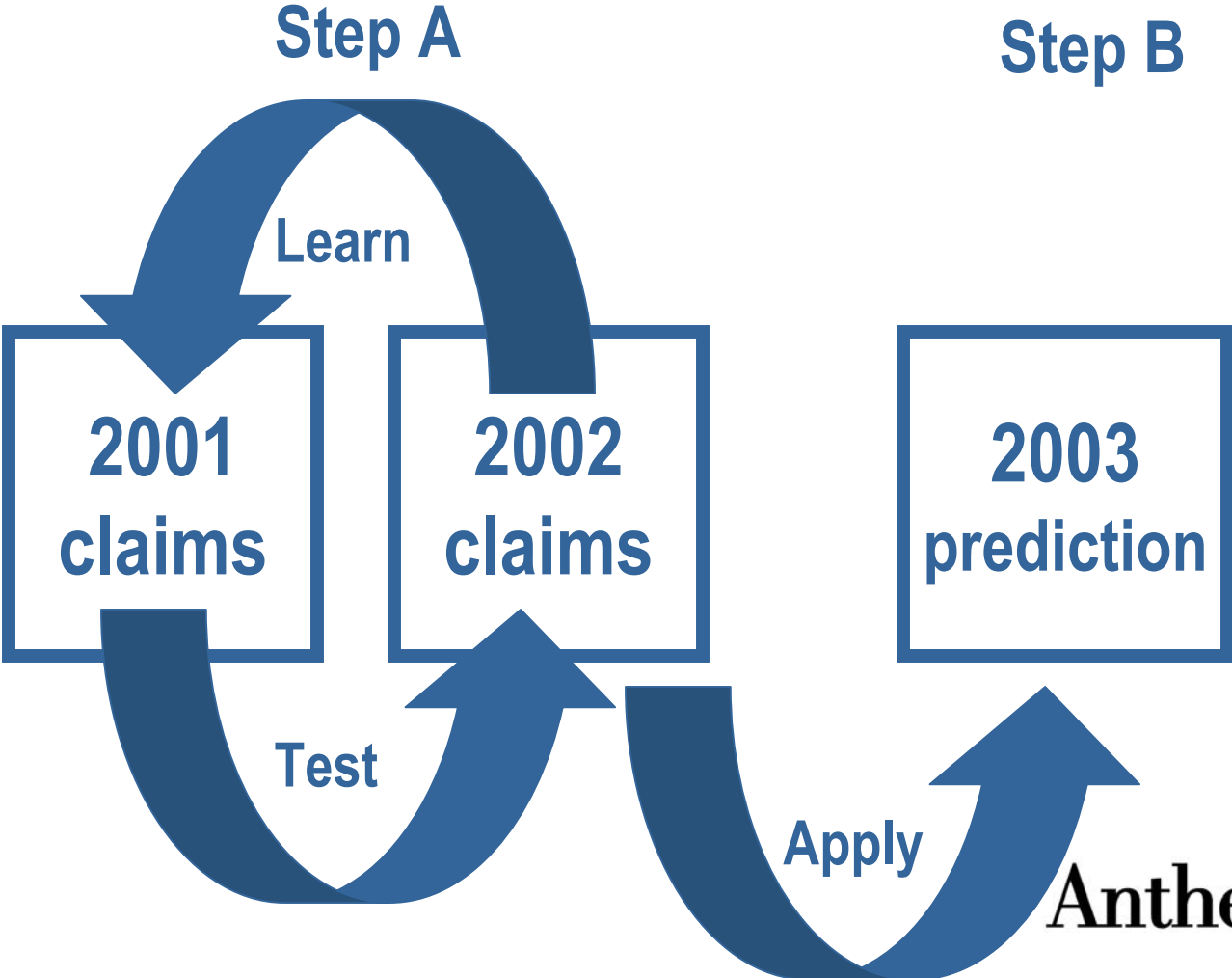
- Offered to members at no additional charge
- Completely confidential and voluntary
- Delivered primarily through telephonic RN contact with the member
- Provides nurse access 24-hours, 7 days per week

# Identify the Right Members

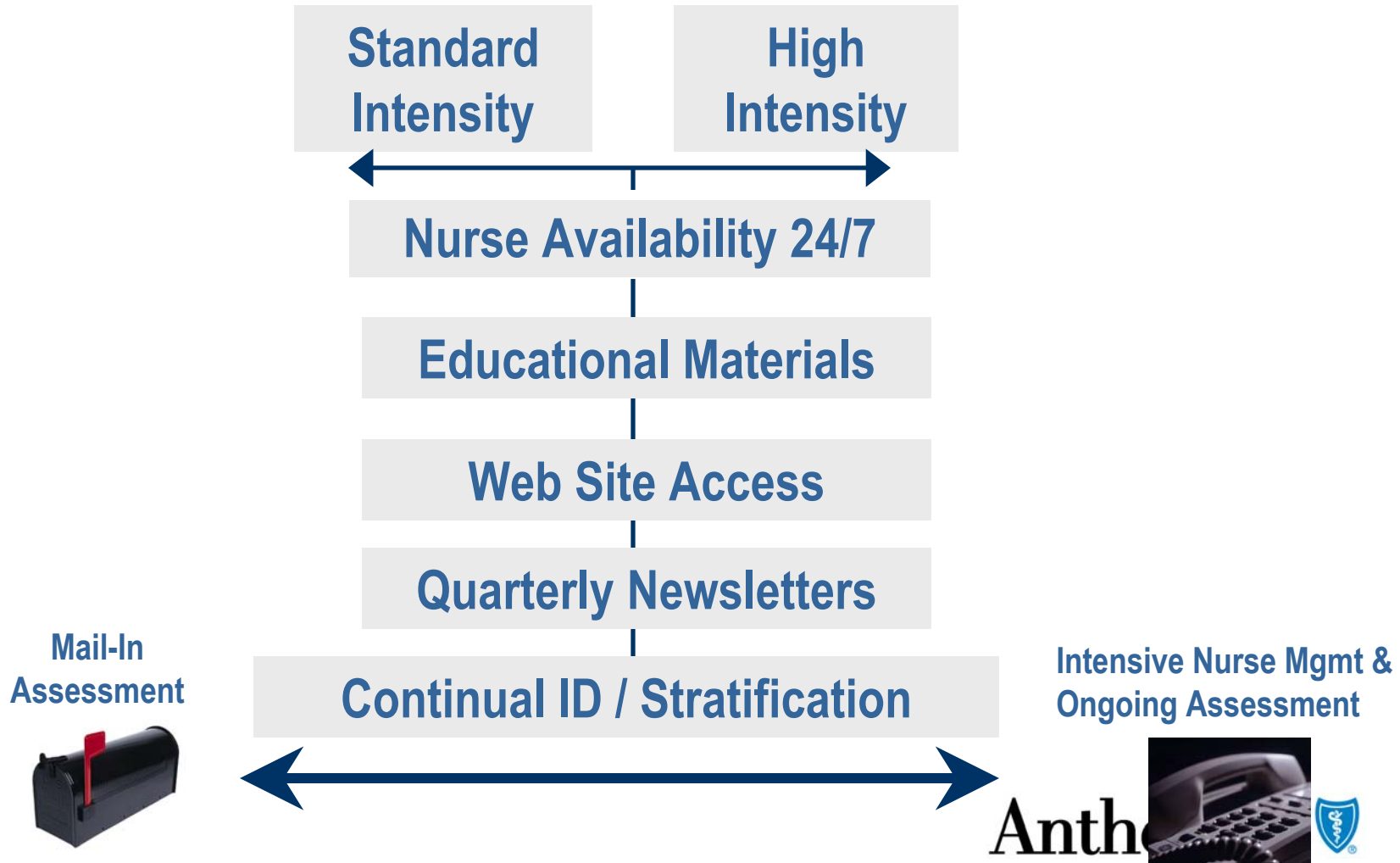
AccuStrat<sup>(sm)</sup> HMC's  
Predictive Model  
provides better  
allocation of resources  
to members who will  
benefit most.



# Building AccuStrat Predictive Model



# Patient Management





# How Do Members Enter the Program?

- Predictive Model utilizing claims data
- Medical Management (CM, UM) referrals
- Physician referrals
- Self-referral
- Service Operations referrals

## Diabetes Care

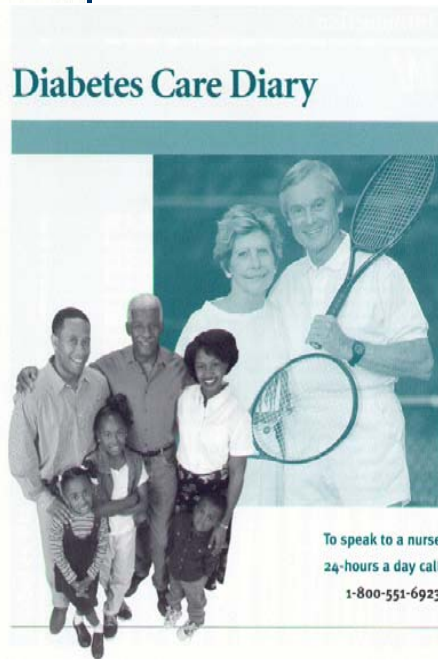


### TOPICS

1. What is Diabetes?
2. Types of Diabetes
3. Signs and Symptoms
4. Risk Factors
5. Medical Care
6. Self-Care
7. Other Health Problems Related to I
8. Diabetic Emergencies

*This brochure is not meant to take the place of ex care or treatment. Follow your health care provid differs from what is given in this guide.*

# Patient Communications



- Broad-based communications
- Frequent delivery
- Content to impact outcomes
- Address co-morbid
- Prevention-focused

# Intervention Plan

- Starts with thorough patient assessment
- Integrates the physician's plan of care
- Incorporates all dimensions of participant condition
- Focuses on participant barriers to adherence
- Establishes participant goals
- Targets interventions to achieve outcomes

# Physician Communication

- Physician notified of member's participation in the program
- Nurses will work with the physician to promote and reinforce plan of care
- Program is a coordinated effort between physician and program Care Manager

# Actionable Information for the Physician

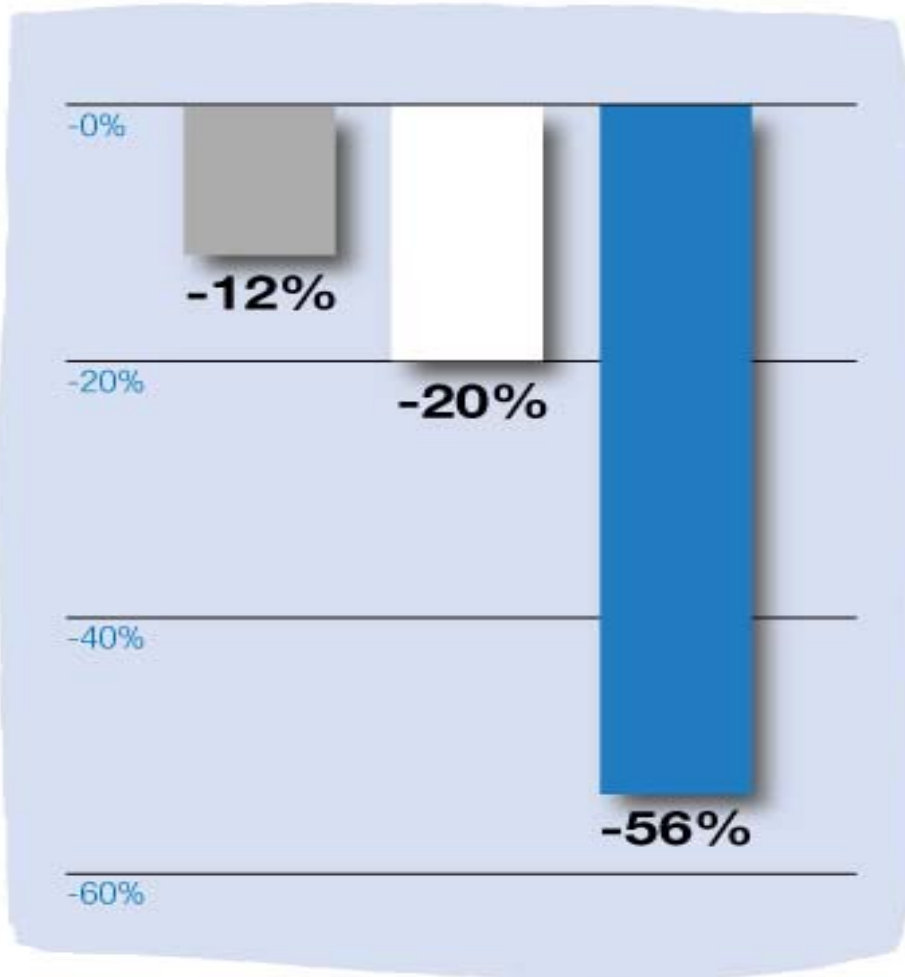
- Physician Communication Tool
- Quarterly Actionable Reports
- Exception Reports
- Urgent Fax and Phone Alerts

# Benefits to Physician

- Reinforces physician plan of care and improves compliance
- Provides additional resource for physicians and their patients
- Results in improved patient health outcomes

# HMC's Impact on Outcomes

# Diabetes Claims Reductions



**NOTE:** Diabetes results were stable for outpatient facility claims and outpatient professional claims.

## Claims Reduction Categories

-  Inpatient Days
-  Inpatient Admissions
-  Outpatient Professional Claims
-  Outpatient Facility Claims
-  ER Visits



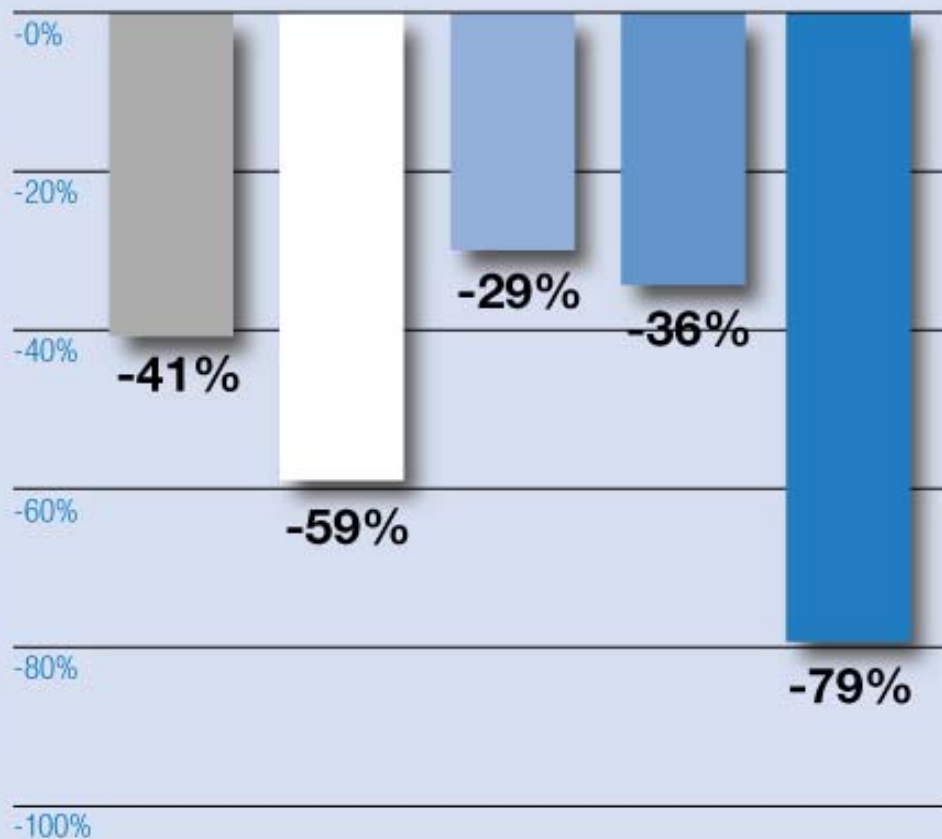
# Congestive Heart Failure (CHF) Claims Reductions



## Claims Reduction Categories

-  Inpatient Days
-  Inpatient Admissions
-  Outpatient Professional Claims
-  Outpatient Facility Claims
-  ER Visits

# Coronary Artery Disease (CAD) Claims Reductions



## Claims Reduction Categories

- Inpatient Days
- Inpatient Admissions
- Outpatient Professional Claims
- Outpatient Facility Claims
- ER Visits

# Financial Models

- Payment of vendors vary from 0 risk to 100%+
  - Case rate
  - PPPM rate
  - PMPM rate
  - Gain share
- Generally the higher the risk, the higher the cost
- Financial and quality targets
- Align incentives between plan and vendor

# Financial Analysis

- If no risk, internal ROI analysis
- If any risk, vendor/plan reconciliation
  - How to compare baseline and intervention group?
  - Claims: what's in/what's out
  - How to adjust for rising health care costs
  - Adjust for any changes in benefits/population etc.
- Best advice: KISS!



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Questions?