

POPULATION HEALTH MANAGEMENT

CARE MANAGEMENT REDESIGN FOR A REGIONAL BLUE PLAN

Secured approval and 100 M+ in new investment for implementation and execution of new model, which is already driving revenue and slated to drive \$200 M in savings

Client situation

- Prior Oliver Wyman actuarial analysis of the client's Care Management indicated that current programs were not delivering the financial ROI expected internally on Fully Insured members and were lower when compared to market competitors/benchmarks
- Client's ASO customers were not satisfied with key aspects of the Care Management programs they were receiving (e.g., total employees engaged, value delivered, reporting)
- Client was expanding use of vendor partners whose services were not clearly positioned within the context of the portfolio
- Based on its previous work with the client and success providing this service to other organizations, Oliver Wyman was hired to help the client take a market driven approach to redesign its care management programs

Oliver Wyman approach

- Synthesized market perspectives from Oliver Wyman survey of individual and employers and broker, provider, vendor interviews
- Defined a go-forward vision and strategy for Care Management
- Developed a new integrated Care Management program to replace the current 30+ distinct programs in place
- Analyzed the client's membership across segments to inform portfolio design, staffing and savings estimates
- Created a new portfolio of base and buy up programs
- Estimated the 5-year cost to deliver, ROI expected from medical savings, and revenue from buy ups
- Created a year-long launch plan to guide the transition from current state to the future model

Key impacts achieved

- Executive alignment on strategic direction and importance of Care Management with commitment to reach market parity
- Executive alignment on new portfolio and one Care Management operating model to replace current 30+ programs
- Secured approval and 100 M+ in new investment for implementation and execution of new model
- Contracted with two new vendors to accelerate capabilities for predictive analytics and digital engagement channels
- Significantly increased yearly value expected via claims savings and buy-up revenue
- New model is already driving revenue and is slated to drive \$200 M in savings

POPULATION HEALTH MANAGEMENT ASSESSMENT AND STRATEGY FOR A REGIONAL HEALTH INSURER

Designed a competitive PHM operating model, redesigned the care management team structure, and identified \$60 M+ savings with a significant ROI

Client situation

- The client is a regional health insurer with a significant portion of their book of business concentrated in managed Medicaid
- Upon news that the state in which this client's Medicaid business is concentrated will be releasing a new bid within the next year, the client asked for Oliver Wyman's support to ensure their offering would result in a successful RFP
- The focus of this work is to develop a best-in-class future state design for their population health management (PHM) operating model and the supporting portfolio of PHM programs

Oliver Wyman approach

- Current state baselining and benchmarking included interviews with key stakeholders and audits of current programs
- PHM operating model design resulted in the detailed documentation of all components of future state op model including people (e.g., resourcing, training), processes (e.g., ID/Strat, strategy-setting), and technology (e.g., member dashboard, analytics)
- Population analysis involved assessing current Medicaid and D-SNP population and developing a Tableau dashboard to support PHM portfolio definition
- Execution plan development resulted in a detailed plan to support future state build, including estimated ROI/impact; designed to show measurable impact prior to bid release

Key impacts achieved

- Design of a competitive PHM operating model and offering for our client to ensure a successful RFP
- Streamlined decision-making and the ability to more systematically design and evaluate programs and initiatives
- Redesigned care management team structure and composition to support more integrated, holistic management
- Defined future state PHM portfolio targeting the 8 highest value/most impactable cohorts of members
- Identified \$60M+ savings with a significant ROI
- Achieved buy-in across key leaders within the organization to support the future state design

BEST-PRACTICE CARE MANAGEMENT (CM) MEMBER IDENTIFICATION AND STRATIFICATION FOR A LARGE BLUE PLAN

Created 15+ cohorts for the client's CM program, designed and implemented a three-step stratification methodology, and designed the end-to-end Stratification logic to rank-order prioritize all identified members

Client situation

- Client's member identification algorithms were largely based on acuity metrics (risk score, total spend, etc.)
- Client's approach did not apply sophisticated stratification logic to prioritize members and instead treated all identified members similarly from a prioritization standpoint (date identified was key stratification feature)
- Client used limited data in Identification and Stratification process (primarily claims and membership information)
- Client engaged Oliver Wyman to help design a best practice set of algorithms to target and prioritize members for CM outreach

Oliver Wyman approach

- Conducted deep series of population analyses across Commercial and Medicare LOBs to identify the cohorts of members most appropriate for Care Management
- Identified holistic data sets to support enhanced ID and Strat algorithms and defined an IT plan to procure and consolidate over 60 data sources to inform analytics
- Determined specific "trigger" criteria for each cohort; client's IT team operationalized trigger criteria within a production environment to run member identification process daily
- Designed and implemented a three-step stratification methodology using data across client's, vended algorithms, SDOH, predictive models and others to ID highest priority and impactable members

Key impacts achieved

- Executive alignment on member identification and stratification process to focus on the members most impactable through payer-led interventions (i.e., many high risk/high-cost members filtered out because their profile is difficult to address via payer-led intervention)
- Created 15+ cohorts (entry points) for the client's CM program aligned to typical CM interventions
- Designed the end-to-end Stratification logic to rank-order prioritize all identified members (for any and all cohort reasons) to ensure payer's limited resources are focused on the most impactable and addressable members
- Partnered with IT team to productionalize new member identification and stratification algorithms

WORKFORCE CAPABILITY DESIGN FOR A LARGE HEALTH INSURANCE CARRIER

Enabled data-driven strategic talent management to prepare thousands of clinical and clinical support employees to deliver a transformative care model at scale

Client situation

- The client was building a new care management model that requires its clinical and clinical support staff to operate in a meaningfully new way to drive key member experience, care, and cost outcomes
- At the point of engagement, the client was preparing to pilot the new model with a few initial teams of clinical and clinical support staff (<100 employees)
- The organization has committed to scale this new care model as their core, unified clinical care strategy
- The business needs to understand how 'ready' its staff is to deliver the new model at scale

Oliver Wyman approach

- We engaged client stakeholders to precisely define requirements for the new roles in the model (e.g., education, licensure/certification, clinical experience, site of care experience, functional skills, and behavioral skills)
- Then, structured a self-reporting tool to gather relevant data across thousands of employees
- Compared individual data against requirements to identify critical skills gaps across various populations and provide guidance on "matching" employees to future state roles
- Worked collaboratively with stakeholders to validate opportunities and identify learning and development recommendations to close gaps

Key impacts achieved

- Defined future care model role requirements in detail across 14 roles
- Designed a tool to gather self-reported data at scale across a business
- Developed a repeatable sophisticated algorithm to compile and compare tool data with role requirements
- Built a new set of data on client's talent to give a clear view into their workforce
- Provided a framework for our client to transition to a more data driven approach to talent management (e.g., staffing, learning, performance)

EVALUATING THE EFFECTIVENESS OF CLINICAL TEAM TRAINING FOR A REGIONAL HEALTH PLAN

Developed focus area recommendations designed to increase alignment between L&D training practices and desired business outcomes

Client situation

- Client recently underwent a complete revamp of its clinical care management model, shifting to an integrated regional team structure, which relies on the close collaboration of multi-disciplinary care teams that are tracked against team-wide goals, individual goals, and enablers
- In order to enable clinical team members to effectively and efficiently deliver on program's goals, Oliver Wyman was engaged to examine current training and development activities and design recommendations to increase L&D's impact on optimal staff performance and achievement of business objectives

Oliver Wyman approach

- Oliver Wyman team partnered with clinical and L&D specialists to execute a three-step support approach:
 - Assess L&D people, processes and technologies to understand goals and objectives for clinical development and identify key gaps, risks, and improvement opportunities related to current training model
 - Identify and prioritize cross-industry trends, best practices, capabilities and techniques aligned to client clinical training and business goals
 - Develop an overall set of recommendations for clinical training and development

Key impacts achieved

- Leveraged engagement findings to advise analytical and process-driven improvement opportunities to maximize L&D's impact on business outcomes:
 - Developed five, prioritized, high impact process improvement recommendations for the clinical L&D training team
 - Developed and launched learning curricula assessment to identify client L&D competency and skills gaps and identify prioritized learning opportunities
 - Developed clinical staff performance evaluation framework to identify training opportunities with the largest business value