



**Iowa Policy Oversight Committee Meeting**  
November 3, 2015

# WHO WE ARE

## **Committed.**

Connecting more than 6.9 million members with critical, high-quality health care services.

## **Experienced.**

Delivering proven, integrated health care services in 16 states and the District of Columbia.

## **Multifaceted.**

Providing Medicaid, Medicare, behavioral health services, pharmacy benefit management, third-party management and administrative services.

## **Rooted.**

We began as a mission-driven neighborhood health plan in West Philadelphia and are proud of our passion to serve those most in need.

## **Nimble.**

Customizing solutions based on our members' and partners' needs.

## **Award winning.**

NCQA Multicultural Health Care Distinction Award recipient.

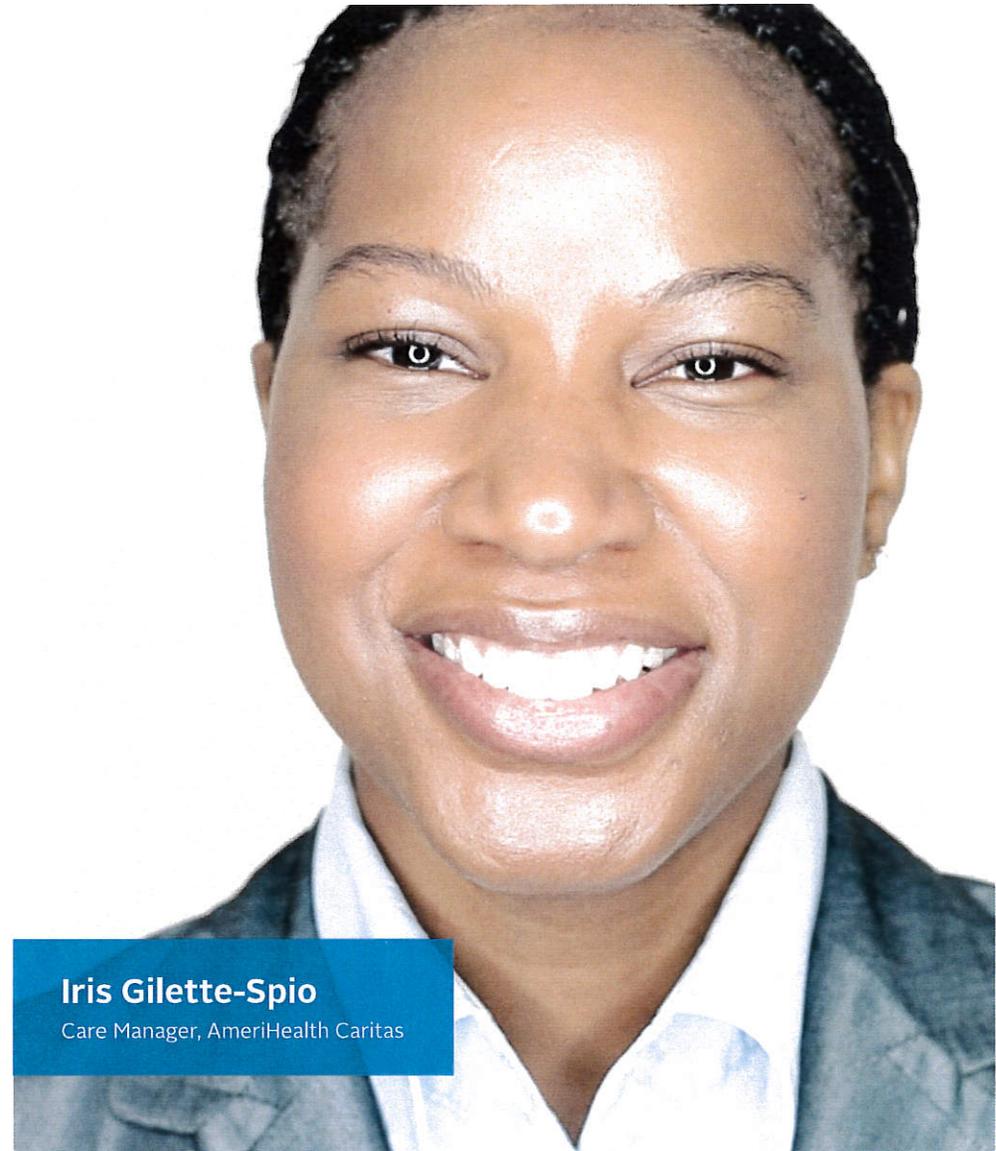
## **Evolving.**

An industry thought leader giving its customers the edge with innovative, evidence-based products and services.

# Driven by our mission. Focused on care.

Health care is personal, and that's our approach to care. We help people get the comprehensive, personalized care they need to stay well and build healthy communities by:

- Creating a framework for an integrated approach to care.
- Coordinating care through ongoing collaboration.
- Treating members with the dignity and respect they deserve.



**Iris Gilette-Spio**

Care Manager, AmeriHealth Caritas

# Lessons Learned.

With more than 30 years of experience serving Medicaid populations, AmeriHealth Caritas understands that our members face socio-economic and health factors that play an important role in access to quality health care and the type of programs that are required to improve health status. Our innovative approach to serving members identifies and focuses on the unique needs of each individual—from their physical health to the broader range of behavioral, social support, long-term services and other needs that impact the member's current and future health.

## Social Issues

- Poverty
- Language Barriers
- Education
- Homelessness
- Transportation
- Food Access
- Personal Safety

**MEMBERS  
WE SERVE**

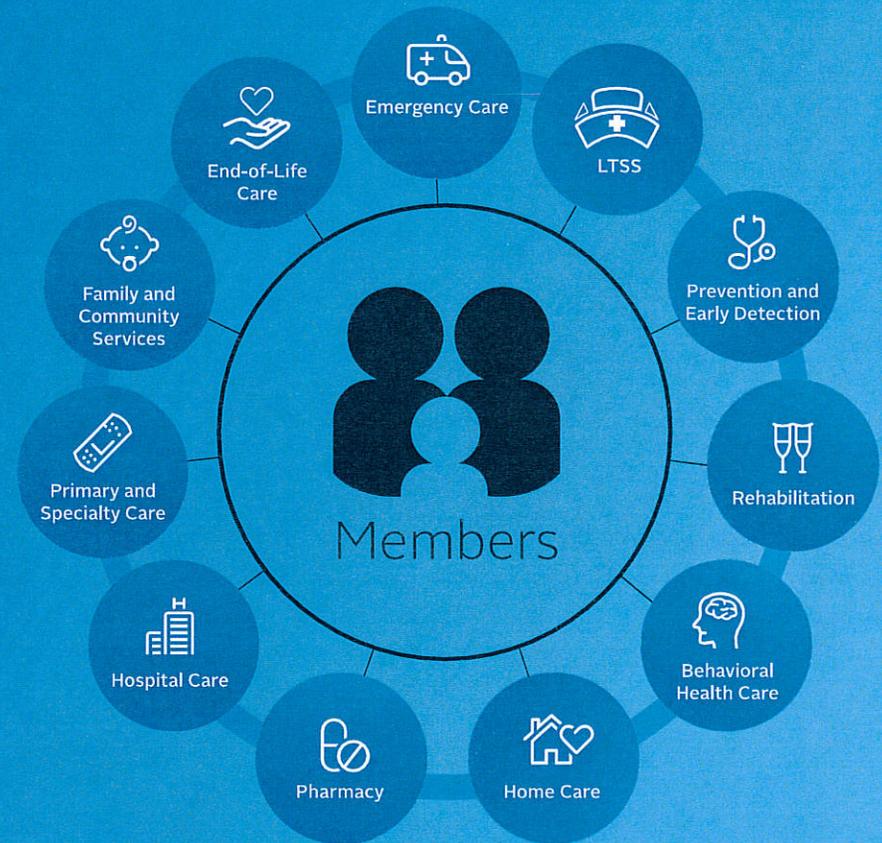
## Health Issues

- Health Literacy
- Co-Morbidities
- Behavior Health
- Substance Abuse
- Polypharmacy
- Drug Adherence

# Creating a framework for an integrative approach to care.

Our multifaceted approach addresses the needs of our members, connecting them with the health care and services they need to get well and stay well. Our approach includes:

- Engaging, educating and empowering members to actively participate in improving their health outcomes.
- Providing members with the information they need when they need it through our use of technology and member portals.
- Involving members, parents or guardians, care team members, providers, behavioral care providers, social services and community group representatives in the care planning and management process.
- Utilizing community-based services to avoid or delay institutional-based care, supporting members who desire to remain in the home- and community-based setting.
- Incentivizing and rewarding healthy member-specific behaviors.



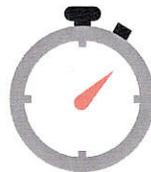
# Coordinating care through ongoing collaboration.

AmeriHealth Caritas Iowa is in the community, offering individualized support and coordinating the full spectrum of care services and resources that address our members' unique needs.



## Community Care Management Team

A multidisciplinary care team that works in the community, meeting our members in the neighborhoods where they live and coordinating with the PCP practice.



## Rapid Response

Staff who help members by assisting them with accessing providers, setting up appointments, adhering to medication regimens, arranging transportation and connecting to community resources.



## Community Outreach Solutions Team

Special group of community health workers who locate difficult-to-engage members to reconnect them with care management and provide hands-on coordination.



## Embedded Care Managers

Nurse and social worker care managers embedded into the practice site of key providers to collaboratively manage the care of members.

# Our members. Our stories. Our mission.

Every day we make care the heart of our work, and our member stories are proof of our commitment.

## Creating a dialogue about health care.

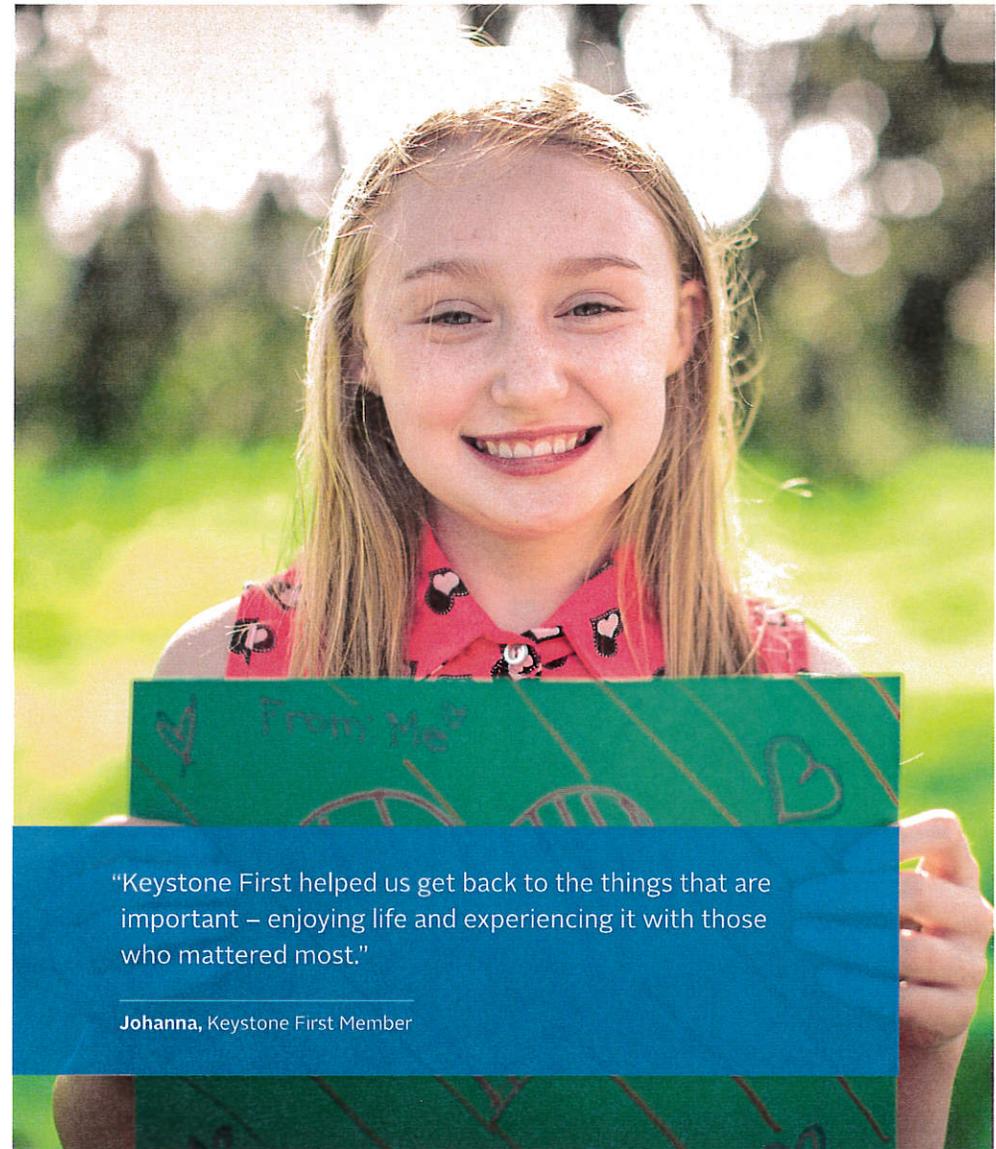
“AmeriHealth [Caritas] District of Columbia engages people, making members feel that they are a part of the health plan. The Member Wellness Advisory Council meeting that I attended was awesome. Members shared opinions and I love the idea that we can come together. The health plan does not dictate [to] us, but includes us in the decision and policy making.”

## Ensuring members have the right care at the right time.

“The very next morning I got a call from Kevin at AmeriHealth Caritas Louisiana, saying he had an appointment for me with a dentist in Baton Rouge. How wonderful is that? ... Kevin is just so precious. He called me numerous days and I could talk to him just like a best friend—very caring, very sympathetic.”

## Teaching healthy habits.

“My health plan taught me how to manage my diabetes by eating healthy, keeping up with all my appointments and seeing my doctor when I feel that my sugar levels are high.”



“Keystone First helped us get back to the things that are important – enjoying life and experiencing it with those who mattered most.”

Johanna, Keystone First Member

# Our partners. Our stories. Our mission.

Every day we make care the heart of our work, and our partner stories are proof of our commitment.

## Working together for a common goal.

"Providers can count on AmeriHealth Caritas to: ensure access for members through robust provider networks and telemedicine strategies for rural populations; collaborate closely with hospitals, primary care physicians, specialists and other providers; deliver value by conveying the information needed to improve patient care..."

David Friel, Vice President, Geisinger Health System

## Investing in the community.

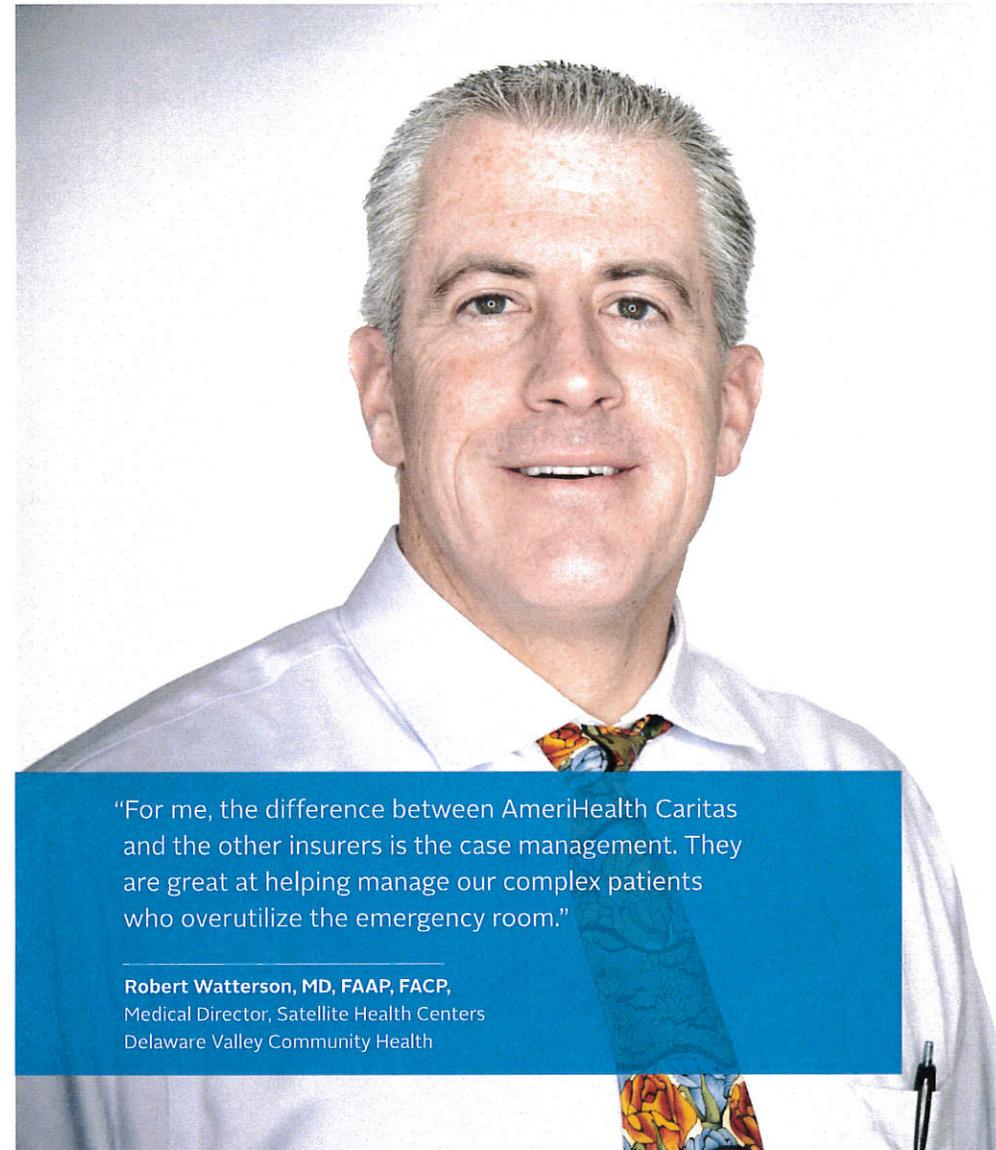
"Select Health is passionate about serving the community, making life better for children and helping nonprofit organizations with missions that align with that passion. This company stands out as one whose culture is caring and making a difference."

Barbara A. Bond, Executive Director and CEO, Ronald McDonald House Charities of Charleston

## Keeping care personal.

"In the areas of access, cost and quality, AmeriHealth Caritas Louisiana's performance has been key in helping our Bayou Health program demonstrate early success. They have developed or tailored their programs to our members' needs, which vary significantly by geographic region within the state."

Ruth Kennedy, Medicaid Director, State of Louisiana, Department of Health and Hospitals



"For me, the difference between AmeriHealth Caritas and the other insurers is the case management. They are great at helping manage our complex patients who overutilize the emergency room."

Robert Watterson, MD, FAAP, FACP,  
Medical Director, Satellite Health Centers  
Delaware Valley Community Health

# Bringing communities together in wellness.

At the core of our community-focused approach is strategically placed Community Wellness Centers. These state-of-the-art centers act as resource hubs that improve access to health care services by connecting members, providers and social service organizations.



Members, Providers and Community

## AmeriHealth Caritas Community Wellness Center



Healthy  
Cooking  
Classes



One-On-One  
Health and  
Wellness  
Coaching



Health  
Education  
Programs



Fitness  
Classes



Social  
Services  
Support



In-Person  
Customer  
Service and  
Benefit  
Assistance



Provider  
Meetings

# Coordinating resources to improve health outcomes.

## IDENTIFICATION

Multiple sources to identify members with non-clinical service needs (housing, food, transportation, education, etc).

Members/care givers.

AmeriHealth Caritas associates - intake calls, care managers, field teams, member services, contact center.

Providers via "Let us know" program.

## CONNECT AND COORDINATE

Member aligned with stratified menu of services based on needs.

- Information and referral.
- Navigational support for member to access service.
- Ongoing coordination with social service resource.
- Crisis support.

## INFRASTRUCTURE SUPPORT

Plan-based Social Service Expert Unit.

- Established relationships with social service providers.
- Community asset maps.
- Trained associates at all levels of service.
- Standardized escalation procedures.
- Technology/data management resources.
- Analysis and reporting.

# Increasing access to care through telemedicine.

AmeriHealth Caritas supports the use of telemedicine to improve access to care for rural populations and will support and enhance current telemedicine offerings in Iowa.

## Our objectives include:

- Increasing access to care in rural areas.
- Improving timeliness to diagnosis and treatment planning.
- Improving quality of care.
- Supporting the continued education and retention of rural providers.



## Removing barriers through mobile care.

To effectively reach our members in areas where access is an issue, AmeriHealth Caritas leverages mobile health units to offer care direct to the community.

- We proactively identify the areas with the greatest potential due to provider shortages.
- The mobile vans are designed to address the most pressing member needs, such as maternity and primary care.

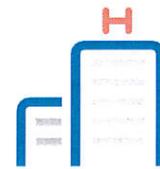


# Partnering with physicians to achieve quality improvement.

PerformPlus® represents a suite of unique quality incentive programs available to physicians (primary care and specialists), hospitals and integrated delivery systems developed to reward providers for timely, appropriate care and positive patient outcomes.

As an example, PerformPlus Shared Savings addresses the needs of patients effectively across multiple care settings, reducing fragmentation and duplicative services, and ultimately resulting in better clinical outcomes.

## The incentive pool is allocated across six potential domains.



- Potentially preventable admissions.
- Potentially preventable emergency room visits.
- Potentially preventable readmissions.



- Neonatal intensive care metrics.
- Obstetric (OB) and primary care quality measures.



- Potentially preventable complications.

## Fostering collaboration to streamline care.

We coordinate member care among primary care providers (PCPs), specialists, behavioral health providers, community resources and pharmacy benefit managers to avoid duplicative services and increase quality outcomes.

An example of this approach is our Breathe Easy. Start Today. (B.E.S.T.) program, a collaborative effort among AmeriHealth Caritas, PerformRx (a pharmacy benefits manager) and primary care providers. Through this program, participating doctors dispense asthma medications and products directly from their offices. The member receives the asthma medication and supplies while still in the physician's office, along with any education and training on the use of the supplies. The primary goals include:

- Improving medication adherence and reducing acute hospitalization.
- Enhancing the capabilities of the member's PCP as the primary point of service for asthma care.
- Improving the member experience of care.



# Improving medication adherence – a key to better health care.

- In 2013, AmeriHealth Caritas undertook an enterprise effort to incorporate education and refill reminder efforts in our care coordination programs to improve adherence for members prescribed the following:
  - Asthma controller medications.
  - Hypoglycemics.
  - Statins.
  - Antihypertensives.
- Analysis indicates members with asthma prescribed an asthma controller medication saw the greatest reductions in inpatient admissions and total medical costs.
- AmeriHealth Caritas is now adding prescription refill reminders to our mobile application.

Medication Class	Percent Change in Proportion of Days Covered
Asthma controller medications	5.2%
Hypoglycemic	22.4%
Statins	25.5%
Antihypertensive	24.1%

# Lowering hospital readmissions.

- AmeriHealth Caritas focused on reducing readmission rates for members with at least one dominant chronic condition or the moderate chronic condition of asthma by redesigning transition management processes and new member education campaigns.
- To further demonstrate the effectiveness of the enhanced discharge protocols, we also analyzed readmission rates by the number of successful contacts. Successful follow-up calls led to statistically significantly lower 30-day readmission rates.

Readmissions per 1,000 member year				
Line of business	12 months ending Nov. 2013	12 months ending Nov. 2014	Absolute Change	% Change
Keystone First	19.39	17.70	-1.69	-8.7%
AmeriHealth Caritas Pennsylvania	8.49	7.60	-0.89	-10.5%
AmeriHealth Caritas Louisiana	13.70	11.28	-2.42	-17.7%
Select Health	9.07	8.34	-0.74	-8.1%
Arbor Health Plan	7.08	5.00	-2.07	-29.3%

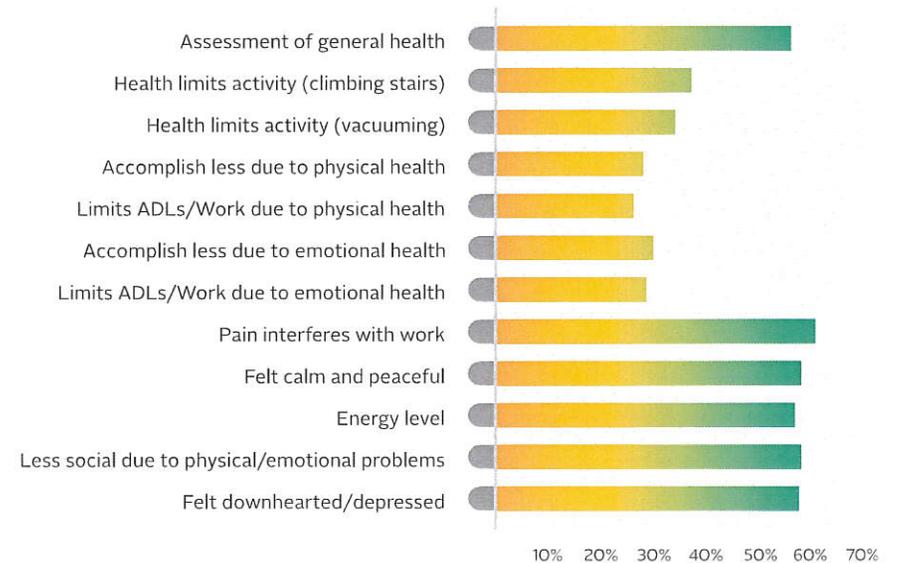
Note: AmeriHealth Caritas District of Columbia removed due to insufficient historical data (prior to May 2013).

Current 12 months vs. prior 12 months — claims incurred through Nov. 2014 and paid through Feb. 2015 to allow for 90 days runoff.

# Enhancing members' perception of health.

- Members receiving complex care management services were assessed during the initial engagement phase and then every 6 to 12 months they were in the program.
- Members reported improvements in all aspects measured by the assessment tool. Greatest improvements were seen in the following:
  - Assessment of general health.
  - Energy level.
  - Feeling calm and peaceful.
  - Less interference of pain.
  - Less feelings of being downhearted or depressed.

Percent Indicating **Improvement** from Initial Assessment





**OUR  
MISSION**



We help people get  
care, stay well  
and build healthy  
communities.

# APPENDIX

---

**Together with our valued partners, we are delivering the next generation of health care.**

- Expanding access.
- Building healthy communities.
- Maximizing value.
- Partnering long-term with customers.

# Benefits of managed care.

Managing special populations, including behavioral health, intellectually and developmentally disabled, and those with long-term care needs, through a capitated full-risk Medicaid managed care model is an important step to improve access, quality and coordination of care, while controlling costs in Iowa.

<b>Access</b>	✓	Managed care organizations are responsible for building provider networks to achieve greater access for Medicaid beneficiaries.
<b>Quality</b>	✓	Managed care organizations are contractually mandated to maintain quality standards, including national accreditation through NCQA.
<b>Coordination</b>	✓	As the primary payer and coordinator, managed care organizations have access to all information required to manage their members and serve as a primary advocate for their care.
<b>Financial</b>	✓	Managed care allows states to achieve budget predictability and shift financial risk for the Medicaid program to the managed care organizations.

In successful programs, managed care organizations serve as strong partners for its state customers and will serve as an active advocate for members to ensure they get access to appropriate health care at the right time and in the right settings.



## Building healthy communities.

Healthy communities start with healthy residents. AmeriHealth Caritas Iowa is committed to making lasting improvements in the well-being of the families and communities we serve by ensuring they have access to the care and services they need. We collaborate with local organizations and providers to address the needs of our members right where they live through:

- Wellness centers.
- Social services experts.
- Telemedicine.
- Mobile health units.

Our members. Our stories. Our mission.

## ‘Tell me your worries ... I’ll see what I can do.’

Earlier this year, AmeriHealth Caritas joined a government initiative in South Carolina to improve health care coordination for dual eligibles, or people eligible for both Medicare and Medicaid. Coverage for members began February 1, 2015, provided by First Choice VIP Care Plus. Already, members are learning firsthand about our commitment to care for those most in need.

Latonia Pearson, who is a Community Health Navigator on the South Carolina Medicare-Medicaid Plan (MMP) Care Management Team, helped make a difference.

“Lillian,” 75 years old, moved from Florida to Hampton, South Carolina, to live near her family. She had not visited a doctor in four years and didn’t have a phone where she lived.

When Latonia was unable to reach Lillian by phone, she drove nearly 70 miles to her home and knocked on her door. Lillian welcomed Latonia into her home and accepted her offer to help.

“Lillian said her knees hurt,” Latonia said. “She agreed to go to a doctor.” Latonia worked with Lillian to select a primary care provider and scheduled an appointment. At Lillian’s request, Latonia said she would visit the doctor with her.

During her visit, Latonia learned Lillian had other concerns. “I said, ‘Tell me your worries and I’ll see what I can do,’” Latonia said.

Lillian had more than \$1,000 in overdue electric utility bills and her water heater was not functioning properly. Latonia contacted a social worker for assistance. The electricity bill was paid, and the landlord said he would install a new water heater.

Latonia said helping members such as Lillian brings her joy. “It’s a blessing to help others,” she said. “I work for a company passionate about our members and the elderly,” she said.

Our members. Our stories. Our mission.

## AmeriHealth Caritas Northeast care manager removes member's barriers to care.

"Maria" is a seven-year-old AmeriHealth Caritas Northeast member who has made several emergency room visits over the past few months due to asthma attacks. This pattern triggered a referral to Jean Kline, RN, CCM, Pediatric Care Manager, AmeriHealth Caritas Pennsylvania and AmeriHealth Caritas Northeast.

Since Maria's mother spoke only Spanish, there was concern about the language barrier. However, AmeriHealth Caritas Northeast provided the member's family with a lot of education and constant reinforcement. Jean encouraged Maria's mother to follow up with her daughter's primary care provider (PCP), educated her about avoiding asthma triggers and provided reminders to re-schedule missed appointments.

"Addressing barriers with members is a high priority so we can ensure that they receive appropriate health care, have the opportunity to be well-educated and are in control of their own health," said Jean.

Maria's mother asked for a specialist referral for Maria. With Jean's help, and after follow-up visits with her PCP, Maria obtained a pulmonologist referral. However,

Maria's family encountered another barrier: transportation issues. Jean shared information about Medical Assistance Transportation and those issues were resolved. Maria was able to meet with a pulmonologist.

An asthma action plan was developed by her PCP to help educate Maria's mother and her school about getting Maria's asthma under control. Additionally, Jean helped Maria get a spare inhaler and spacer to keep at school in case a subsequent asthma attack occurred during school hours.

Now, Maria visits her pulmonologist regularly for better asthma management and maintenance of her medication regimen.

Jean continues to coordinate care between Maria's family and her PCP office. The PCP office accommodates the family's language preferences by providing language assistance when Maria visits.

These efforts have dramatically improved Maria's asthma control. She has not had any trips to the emergency room since her engagement in care management, and her and her family's quality of life has improved as a result.

Our members. Our stories. Our mission.

## A trusting relationship for a member in need.

For some members, going to the doctor can be an overwhelming and frightening experience. One AmeriHealth Caritas care manager used her training in motivational interviewing to determine the root cause of a member's poor health management and get her on the road to recovery.

The member, a diabetic female with a history of behavioral health issues, had missed multiple appointments with her doctor, offering various excuses such as stomach aches or car trouble. The care manager, suspecting that the excuses were not the true cause, used open-ended questions and reflexive listening to give the member a chance to share her concerns.

As the care manager patiently explored the member's rationale for the missed appointment, the member revealed that she was uncomfortable around others and did not like to go out. The care manager continued the discussion until the member acknowledged that fear was keeping her home, something she had never revealed in prior discussions.

The revelation immediately established a new level of trust between the care manager and the member. Rather than offering unsolicited advice, the care manager asked permission to offer advice and suggested that the member reestablish a relationship with a psychiatrist as soon as possible. The member agreed, and has since made an appointment to see a professional counselor and asked her primary care practitioner for a referral to a psychiatrist.

During a follow-up call, the member expressed more comfort with the care manager, asking – without any prompting – how she can protect her kidneys. The care manager immediately recognized this as “change talk” and acknowledged the member's concern and fear with an affirmation statement. The care manager followed the statement with permission to offer advice. The member consented and the care manager was able to provide education on the consequences of uncontrolled diabetes, the protective qualities of using appropriate medication to protect the kidneys and the importance of medication compliance.

Our members. Our stories. Our mission.

## Making connections that build a healthy life.

One of the care managers at AmeriHealth VIP Care in Pennsylvania was trying to get in touch with our member “Robert” after a referral was received shortly after his health assessment. Robert had a PHQ score of 9, indicating mild depression. When the care manager called Robert’s home, she was able to speak with his aunt and obtain background about his history. Robert is a 25-year-old and trumps many others his age. Robert stands tall at six feet eight inches, and at approximately 488 pounds, it can be difficult for his aunt to take care of him. Luckily, Robert can do his own laundry and even cook a little, despite living with developmental delays. She indicated that he did not have behavioral health issues, but spends most of his days by himself playing video games.

The care manager at AmeriHealth VIP Care wanted the opportunity to talk with Robert to create a care plan designed especially for him. After the aunt interrupted Robert from his video game, the care manager was able to speak with him for almost twenty minutes, and was able to build a rapport with the young man.

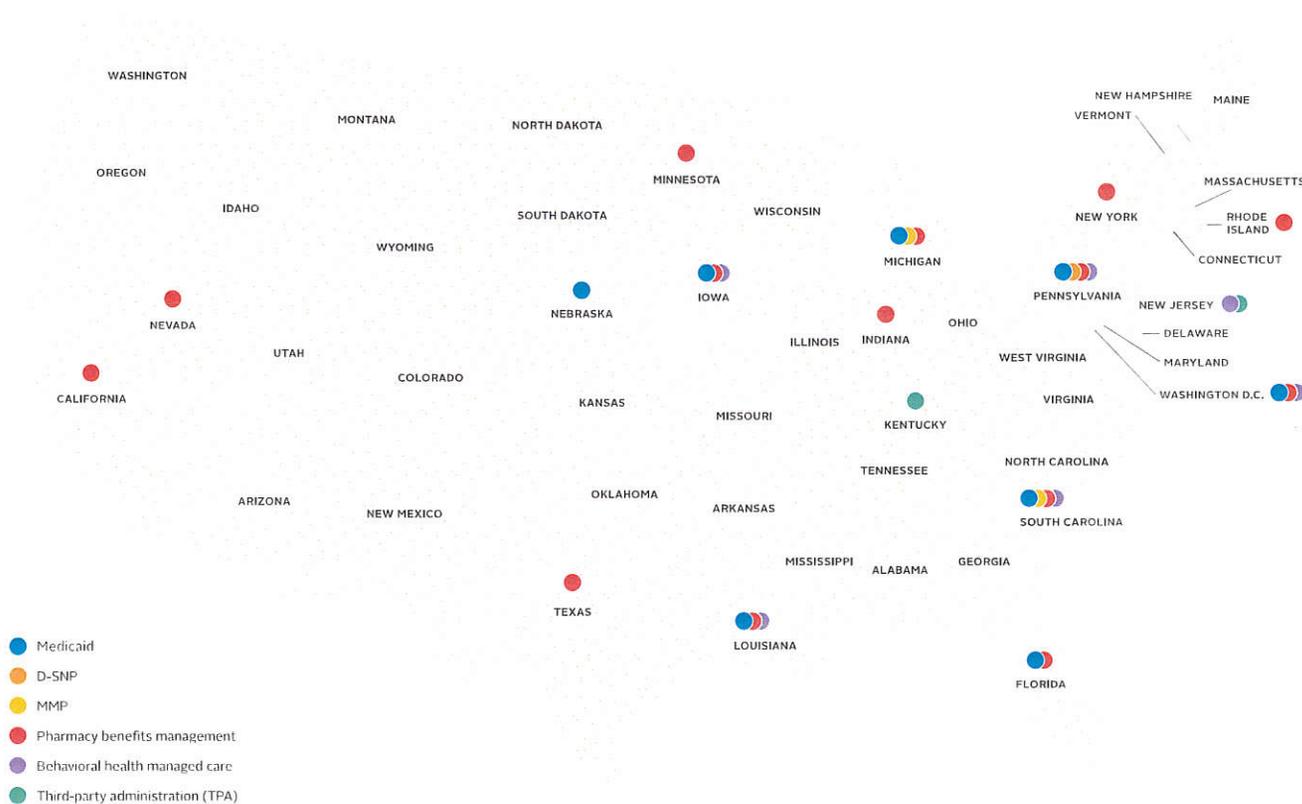
After breaking the ice over the phone, Robert confessed that he was recently in rehabilitation due to anger management and substance use issues. He also was suffering from edema and high blood pressure. He expressed an interest in joining the gym, but did not know how to go about getting a membership.

Our care manager created a care plan based on her discussion with Robert as well as his medical records. Additionally, she was able to locate a local gym and help Robert obtain a gym membership. By joining the gym, he is able to improve his physical health, find a healthy way to deal with his anger and become more social. Our care manager not only found ways to improve the member’s health through medical appointments and prescriptions, but also through community resources, where Robert can make friends, manage his high blood pressure and lose weight.



## AmeriHealth Caritas Coverage Area.

Touching the lives of more than 6.9 million members nationwide.



More than  
**30 YEARS**  
of making  
**care the heart**  
of our **work.**

