

Improve Outcomes and Reduce Costs Proven Results for Health Plans, TPAs and Other Risk-Bearing Providers



There is no one-size-fits-all calculation for measuring results. The ROI for your healthcare initiatives can be influenced by any number of variances, including program priorities, incentives or reimbursement models, stakeholder expectations and involvement, and the makeup and size of patient populations. While these factors play a role in determining what health plans, TPAs and other risk-bearing providers seek to measure and achieve, there is much to be learned from the way others approach ROI with success.

In this special report, we share a snapshot of some of the proven results across our customer base to improve quality, financial results, operational efficiencies, and clinical and care management programs.

Improving Financial Results

Some customers focus on determining the financial returns through an investment in care or utilization management or by reducing costly inefficient use of services. We work with our customers in their priority areas of focus to improve their performance and capture pre- and post-metrics to help them prove success.

Customer Results

62%

Reduction in patients transferred to skilled nursing facilities after total joint replacement

This customer also saw a 30% increase in patients discharged to their homes with self-care or home health care after elective joint replacement surgery.

17%

Reduction in average length of stay

This customer also achieved \$821,000 in estimated savings, and nearly 8% reduction in hospital readmission rates for patients in skilled nursing facilities.

10%

Lower total cost of care

This translated into nearly \$1,000 savings per patient per month by leveraging our technology with a high-risk population to improve patient care and efficiency across multiple care settings and reduce hospital admissions.

32%

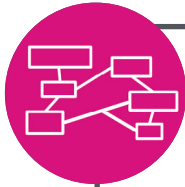
Decrease in costly ED utilization and 181% increase in PCP utilization

This was achieved by improving collaboration and communication across a wide range of care services in the region while delivering comprehensive medical, behavioral, and social service care to the community's most high-risk patients. These results were verified through a successful NY state Medicaid Health Home redesignation audit.

Improving Operational Efficiency

Some customers focus on improving the efficiency of care or utilization management, optimizing processes to save costs.

Customer Results



Improvements in equipment rental returns saved \$1.3 million per year

A large multi-state health insurance organization performed a deep dive into its existing processes to improve operational workflow standardization and optimization. One optimization initiative focused on improving the return of short-term durable medical equipment (DME) rentals. Using data from the Medecision digital platform, the team established a new workflow to collaborate with ordering providers and/or members to confirm whether DME is still medically necessary.

Recovering even one month's unnecessary rental on just one type of DME alone — wearable defibrillators — saves the company \$1.3 million per year.

Nearly \$448,000 in projected savings during the first 3 months of a prescription savings program

The customer moved from a manual process to a fully integrated workflow. This enabled pharmacists to collaborate with utilization management, condition management, care management, and wellness teams, while measuring success from within their existing Medecision implementation.

Projected savings for a full year of interventions is \$1.5 million for the health plan and another \$280,000 in member savings.



57% faster authorization turnaround times were achieved

A customer moved to the Medecision digital platform from their home-grown system. Authorization requests were automated and integrated directly into the platform, with efficient, expedited workflows and auto-approval rules that reduced turnaround times and the time and expense associated with more manual processes.

This automation improved average turnaround time by 57% to less than a day, not only reducing costs but improving provider and member satisfaction.

315 minutes of data entry time were saved per day

The Medecision team leveraged deep knowledge of care management and utilization management workflows to find system navigation efficiencies that included using a "speed copying" feature to apply information across multiple services simultaneously.

This alone resulted in a bottom-line benefit of \$56,000 a year.



Improving Clinical and Care Management Results

Some customers measure ROI based on clinical or patient behavioral objectives such as reducing costly readmissions or ED usage, reducing hospitalizations for poorly managed chronic diseases, or changing how patients receive care. Other customers look at whether patients are improving through care coordination and care management.

Customer Results

11.3%



Reduction in average length of stay

For patients admitted with congestive heart failure, the average length of stay was reduced to 5.47 days. This customer also increased the volume of all patients discharged to home with self-care or with home health care by 11.8% to 71.8%, and reduced readmissions after 90 days post-discharge by 30%.

66%



Reduction in admissions with a cost savings of \$98K for the top 22 utilizers

This was achieved through an intensive care management program enabling identification of social determinants of health issues, information sharing, and collaboration across ambulatory and community-based settings to track and coordinate issues, goals, and interventions.

68%



Graduation rate was achieved

This was achieved in a program helping individuals with serious mental illness transition from the hospital to the community via medication management, collaboration with community providers, housing support, and skills-building and engagement.

83%



Of graduates transitioned successfully into the community

This customer also saw a 17% increase in connecting patients to the most appropriate and timely services, with 87% of participants attending a behavioral health appointment within 30 days of discharge, and 74% attending a primary care physician (PCP) appointment within 90 days of discharge.

Improving Quality

Some customers are looking for ways to demonstrate their commitment to quality and exceptional customer experiences.

Customer Results



Successful 3-year NCQA accreditation was achieved

This customer leveraged Medecision's deep expertise with NCQA and regulatory policy to prove their commitment to quality and obtain accreditation. Medecision provided a comprehensive evaluation of policies, procedures, and workflows against NCQA standards, and helped align the customer's delivery model with the standards.

In doing so, this customer **earned a 3-year accreditation for case management and four population health programs** (Diabetes, CHF, COPD, and High-Risk Pregnancy), a noteworthy accomplishment in comparison with the more typical two-year period and a significant achievement for a first-time accreditation.

This accreditation demonstrates the customer's focus on quality and member satisfaction and gives the organization a more prominent position in the healthcare marketplace to support attracting new business.

Projected Savings for Your Business

As part of your implementation, we will collaborate with you to identify the specific programs that may have the most impact for your business model so you can achieve your goals in a more effective way.

For many customers, influencing the behavior of their members to improve self-care and preventive health management and to delay the onset of complications can have a significant impact.

While each disease is different, we have projected the savings of using the Medecision digital platform to influence two high-cost diseases as examples:

Diabetes disease management

\$3.67

1-Year Savings
per Member

\$11.01

3-Year Savings
per Member

Chronic kidney disease management

\$1.53

1-Year Savings
per Member

\$4.59

3-Year Savings
per Member

Adding digital, multi-modal engagement has the potential to further improve results, by as much as 3 to 5 times that of care management alone.

Medecision is putting in place quantitative programs so our customers can measure and trend their results.

Working with Customers to Achieve Results

We believe that a strong, collaborative working relationship with our customers ultimately makes them successful—which makes Medecision successful. We work with each customer to align Medecision capabilities with their business model, their programs, the populations being served, and the metrics that matter to the organization. We will even work with you to establish baseline measures so that you can prove your success over time.

This partnership approach enables you to leverage our expertise to meet the needs of your stakeholders and populations, improve the efficiency of your work, and ultimately support better patient outcomes.

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