



ICA Impact

About ICA

ICA is a leading provider of strategic interoperability and intelligent care coordination solutions for the healthcare market – provider organizations, public and private Health Information Exchanges (HIEs), Accountable Care Organizations (ACOs) and health plans; and is one of the few independent HIE vendors.



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Real Conversations

The Upper Peninsula Health Plan (UPHP) is one of the nation's best Medicaid health plans ranking 18th among Medicaid managed-care plans in the United States and sixth among Michigan health plans. UPHP manages 30,000 Medicaid patients, including 500 SNPs (special needs patients) who require a high touch approach to ensure the continuity of their care. UPHP management realized that workflow and processes required for cost effective care coordination needed to be more efficient; that the manual approach currently in place was antiquated and impacting both cost and outcomes.

UPHP has access to patient information through the Upper Peninsula Health Information Exchange (UPHIE) for which ICA is the technology vendor; but identifying and retrieving the right information proved challenging.

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Real Challenges

UPHP needed a way to improve the cumbersome, time-consuming and costly workflow processes around patient discharges; and they looked to ICA to help solve the problem to more effectively manage transitions of care.

UPHP has both a contractual requirement and clinical responsibility for care coordination post-discharge. And while they knew when patients had been admitted, the only way UPHP had of determining when patients had been discharged was to make daily telephone calls to all the local facilities to determine which patients had left and to get discharge instructions faxed.

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This process was time intensive and costly and often left gaps in care depending on the time of discharge. UPHP management knew they need to improve their care coordination efforts to ensure quality, cost effective care for those defined populations.

Key Issues to Resolve

Considerable workflow is still accomplished with phone calls and faxes to a range of providers (hospital discharge/admit nurses, transport services, home health, pharmacies, etc.) as well as to their patients.

Needed a more effective way to broadly communicate and share the right patient information.

There is no way for the Care Coordinators to know when patients are discharged without repeated calls to the hospitals.

Different populations can have different workflows therefore need tailored alerts, content and delivery.

Real Solutions

Since ICA is the HIE partner, UPHP engaged in conversations to learn how using the HIE could benefit UPHP care coordinators and the patients they serve. With ICA's Direct messaging service in place and the CareAlign portal accessible, ICA suggested UPHP extend their basic interoperability by adding intelligence with SmartAlerts – tailored, event based notifications - to automate population identification and risk stratify patients to give the right care coordinator the right information on the right patients at the right time.

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ICA suggested key first steps around optimizing workflow to improve care coordination through enhanced communication and data sharing.

UPHP currently runs about 1:150 for normal medical cases and 1:30 for behavioral health cases; with an impending growth bubble in dual-eligible cases (several thousand) increasing ratios will be critical to improving bottom-line return.

SmartAlerts automates workflow processes by creating rules around:

Defining patient sub-populations to plan for differing activities depending upon which defined sub-population a patient belongs.

Identifying plan membership (UPHP-SNP)

Sorting patients by hospital to optimize phone time when calling discharge nurses

Sorting patients by diagnosis (along with frequency of admits) to prioritize high cost potential patients

The initial pilot was implemented to deliver discharge alerts and showed immediate value to the care coordination teams – now, instead of daily phone calls for each patient, care teams are notified in real time when a patient is discharged so immediate action can be taken. Care coordinators can now make sure other care providers have the information they need, patient care plans are in place and the patient is supported with personal contact.

In addition to the discharge alerts now being delivered, care coordinators have learned to use the CareAlign portal that gives them access to patient health information in the same system delivering the alerts...one less system to access – more time saved.

How does ICA support care coordination for populations

Intelligent interoperability allows UPHP to manage populations more effectively by leveraging risk profiling capabilities available to prioritize patients and focus resources.

Combining existing claims data with real-time clinical data results in the best care plan for each patient.

SmartAlerts are configurable and expandable based on the data available.

More data = more value to improve efficiency and patient care.

