altruista HEALTH

Customer Success Story

Strong Partnership Serves Up Comprehensive Support To Duals

A multi-state Midwestern health plan with nearly 2 million members needed the right technology and partnership to manage care for its membership. After scanning the market, they landed on Altruista Health's GuidingCare® platform, the most widely adopted platform of its kind in the nation. This customer joined Altruista in 2019 for care management of its members, while seeking some extra help in re-tooling its Service Plan capability for dual-eligibles.

Dual-eligibles – individuals qualifying for both Medicaid and Medicare – are especially vulnerable because of medical complexity and frailty, serious mental illness, or intellectual and developmental disabilities. They want what most people would want – the opportunity to remain as independent as possible in their own homes instead of being cared for in institutions. It takes special support to accomplish this.

No Two Situations Alike

Under Medicaid rules, duals can receive long-term services and supports under home and community-based services waivers (HCBS Waivers), for their best chance at remaining in their homes. HCBS costs do have to be managed, however; under program rules HCBS cannot cost more than caring for that person in an institutional setting. Another requirement is that services follow an "individualized and person-centered plan of care." This is where a comprehensive whole-person planning approach comes in.

The non-profit health plan chose Altruista and GuidingCare for its member-centric approach, and wanted to collaborate with Altruista Health in re-tooling its Service Plans for non-medical supports required to meet HCBS requirements.

Smart Service Plans Help Payers Stay Compliant

An Altruista Health customer health plan serving the Midwest and South adopted the GuidingCare® technology platform for care management. As they implemented the platform, plan executives also wished to re-tool their Service Plans intended to support dual-eligible members under home and community-based services waivers. Service Plans for these members can be just as important as Care Plans. Deep listening and teamwork between Altruista and its customer created a solution that other health plans may be able to deploy.

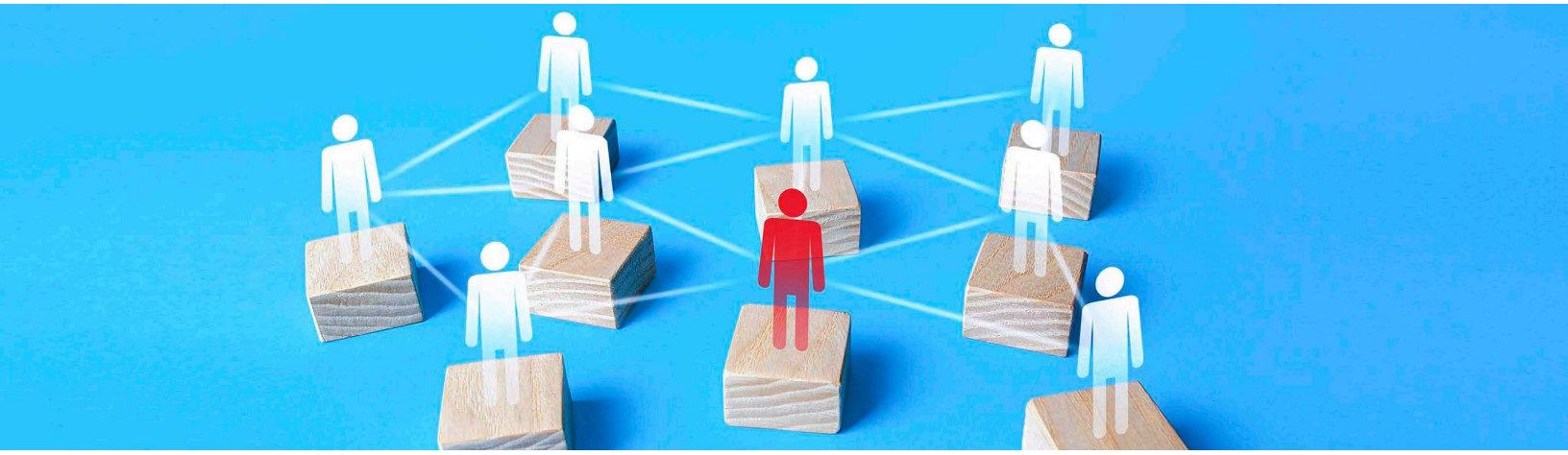
To meet their mission of person-centered and individualized care as well as contractual obligations due to state and federal regulations, the health plan turned to Altruista Health to develop a member-centric solution that would not only streamline the incredible complexity of managing and tracking member needs from a process standpoint – no two individuals and situations are alike – but also to keep these critical benefits within the regulatory cost requirements. The effort required multidisciplinary teams from both organizations who brought valuable but different perspectives to the table. The assembled team had representation from clinical, architecture, software development, IT and product.

These aren't linear problems or solutions; they are multi-dimensional. Without coordination, the solution fails – Amy Bannister, Altruista clinical manager

"We spent a lot of time trying to understand each others' languages, asking 'what do you mean by this term or that term?'" said Altruista clinical manager Amy Bannister.

"After a lot of discussion among all parties, it was clear why our solution to serving these members was going to be so complex and difficult to navigate," Bannister said. "These aren't linear problems or solutions; they are multi-dimensional. Without coordination, the solution fails. Fortunately, everyone who was involved in the project enjoys a challenge."

It was a quest that the teams took very seriously: "We are trying to help the most vulnerable people you can imagine," Bannister said. "We had to get it right."



Feedback Loop Supports Success

The starting point for the customer health plan was a set of tools they had developed on their own.

"We showed Altruista our home-grown system and together we identified the gaps," said the health plan's business operations lead. "Our internal team met often to really dig down into the basic requirements of our contractual obligations, so we could be open to a new way of documenting the services, and to shed thoughts of how we had always done it."

Altruista and customer teams looked at clinical workflows and aimed for solutions that would let care managers create Service Plans in their day-to-day work. They needed to be able to connect with the Care Plan and wrap other services around it, like transportation and in-home visits.

"A lot of these services are delegated to vendors, so it's important to have some kind of feedback loop," Bannister said. "We needed both the provider and delegated vendor to acknowledge with the care manager that they've received an order for the service, and care managers need to know whether the service was completed or was canceled."

One of the features the two teams came up with that was especially helpful to member-centric care was a monthly planner. Instead of working week to week, care managers can now plan and balance a month's worth of services at a time, working comprehensively and reducing manual labor. That helps the care manager prioritize and manage units of service for maximum value within allotted benefits. The ability to view and edit information is helpful as situations are often in flux. The system is configured so that the care manager does not view any benefit or provision for any service for which a member does not qualify. That keeps the care manager from activating a resource that won't be covered.

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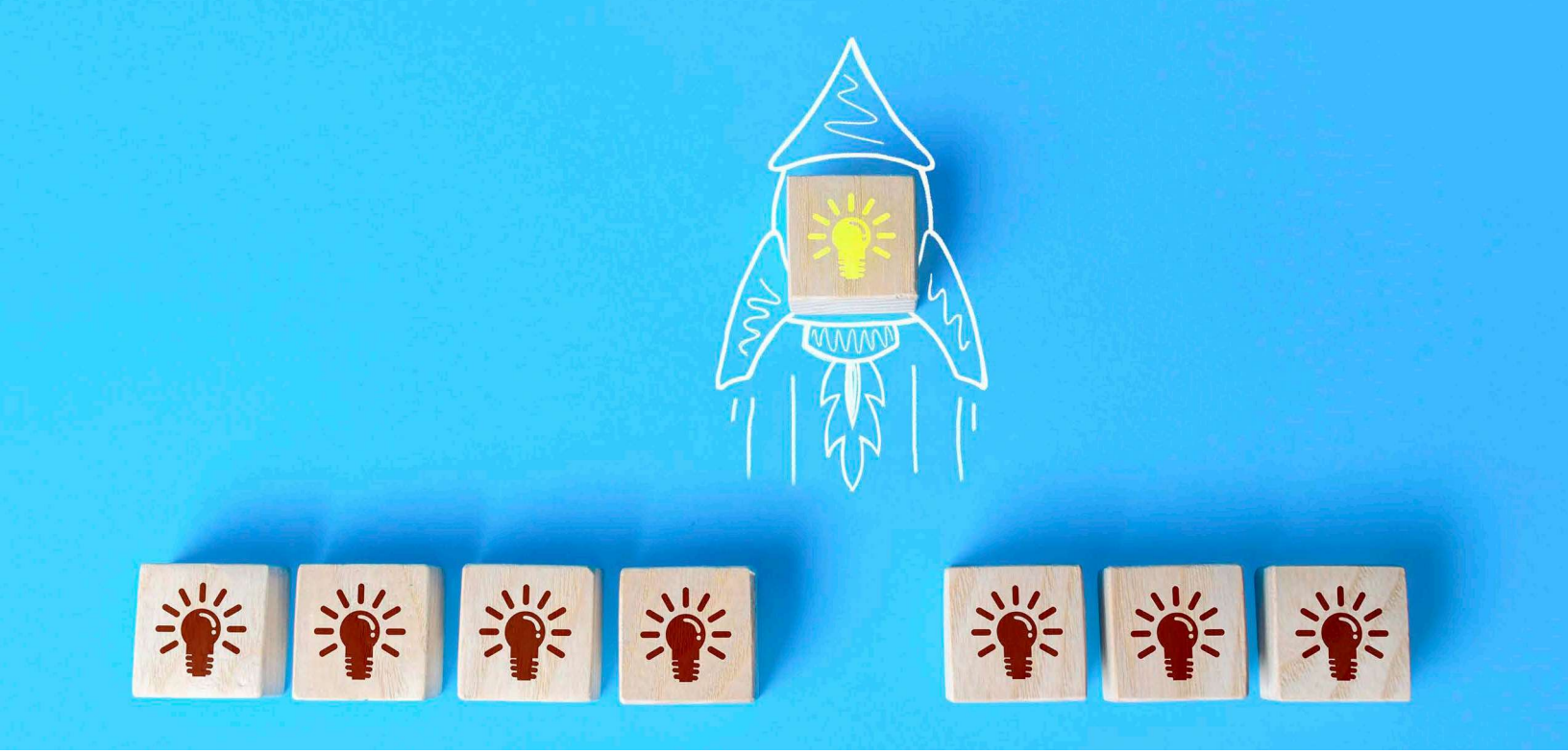

Dream Big and Plan Ahead

The comprehensive approach works well for very complex situations and the Service Plan is robust in displaying fields and notes to meet that complexity. This approach creates a big picture for the care manager. For example, it becomes highly relevant for a vulnerable population whether there is any family member or other person to help the individual over a holiday weekend if a need arises. Is there a back-up plan? Does the person live in an evacuation zone if there's a natural disaster pending? Where factors like these would not be a challenge for healthier members with adequate supports, they can be critical for the health and safety of vulnerable people.

The Service Plan feature was also configured with flexible provider fields so care managers can easily change or acknowledge new providers for these members.

"As providers sometimes move in- and out-of-network, it's important to be able to search and update that field quickly," the health plan's business operations lead said.

"It took an incredible amount of vision on Altruista Health's team to create a Service Plan function that met all the requirements we produced for them," she said. "They were very inclusive of our team in the process, allowing us to 'dream big' and make lots of suggestions to improve the user interface and experience."

This Altruista customer intends to add Service Plan to its other lines of business and foresees possibilities beyond their own organization.

"Both sides put a lot of time, energy and thought into the process and creation of Service Plan, creating workflows and planning future enhancements," the operations leader said. "This will bring value not only to our organization but future business partners of Altruista Health. It will be crucial in meeting our members' needs and the future growth of our company."

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