

Public Employees Benefit Program – State of Nevada

Medical Management Review
January 1, 2021 – March 31, 2021

Table of Contents

Executive
Overview

- Return on Investment

Medical
Management
Summary

- Utilization Management
- Case Management
- Post-Discharge Counseling

Executive Overview

Overview

This presentation contains information for **Public Employees Benefit Program** and provides an overview of the **Utilization Management, Case Management, and Post-Discharge Counseling**.

All data included is as of **March 31, 2021** and covers the reporting period of **January 1, 2021 – March 31, 2021**; all tables and graphs reflect the reporting period unless expressly noted. When requested, prior period comparison details are provided and indicated on the associated graphs or charts.

Return on Investment – Year Over Year Comparison

- ▶ Summary of medical management savings and ROI
 - ▶ Utilization Management savings are achieved through medical necessity reviews of inpatient bed days and outpatient services
 - ▶ Case Management savings are estimated costs that would have been incurred to the plan, had we not intervened

October 1, 2020 - December 31, 2020			
	Fees	Estimated Savings	ROI
Utilization Management	\$195,233	\$2,059,708	10.5 to 1
Case Management	\$292,015	\$538,991	1.8 to 1
Total	\$487,248	\$2,598,699	5.3 to 1

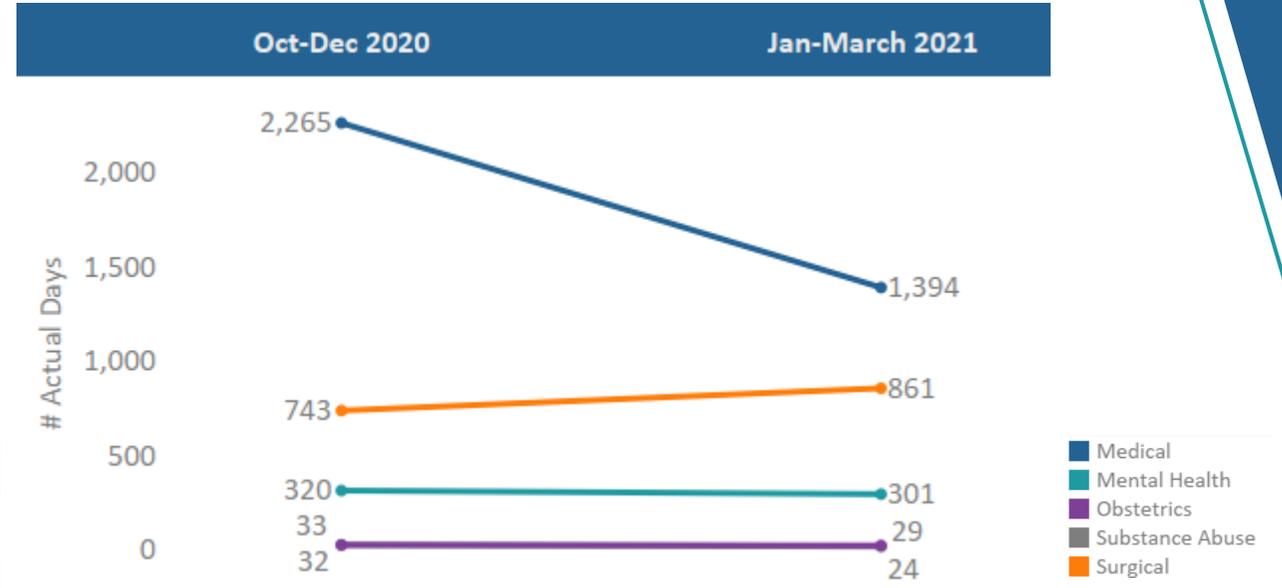
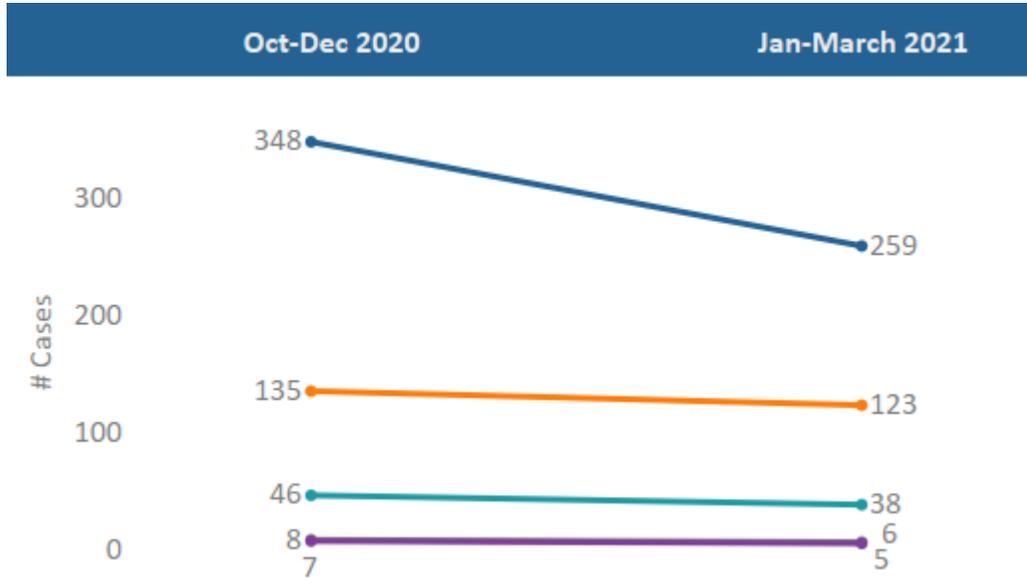
Utilization Management Breakout	
Inpatient Savings	\$1,612,418
Outpatient Savings	\$447,290

January 1, 2021 - March 31, 2021			
	Fees	Estimated Savings	ROI
Utilization Management	\$192,119	\$3,151,396	16.4 to 1
Case Management	\$287,357	\$690,145	2.4 to 1
Total	\$479,476	\$3,841,541	8.0 to 1

Utilization Management Breakout	
Inpatient Savings	\$1,392,721
Outpatient Savings	\$1,758,675

Utilization Management

Acute Inpatient Activity Summary



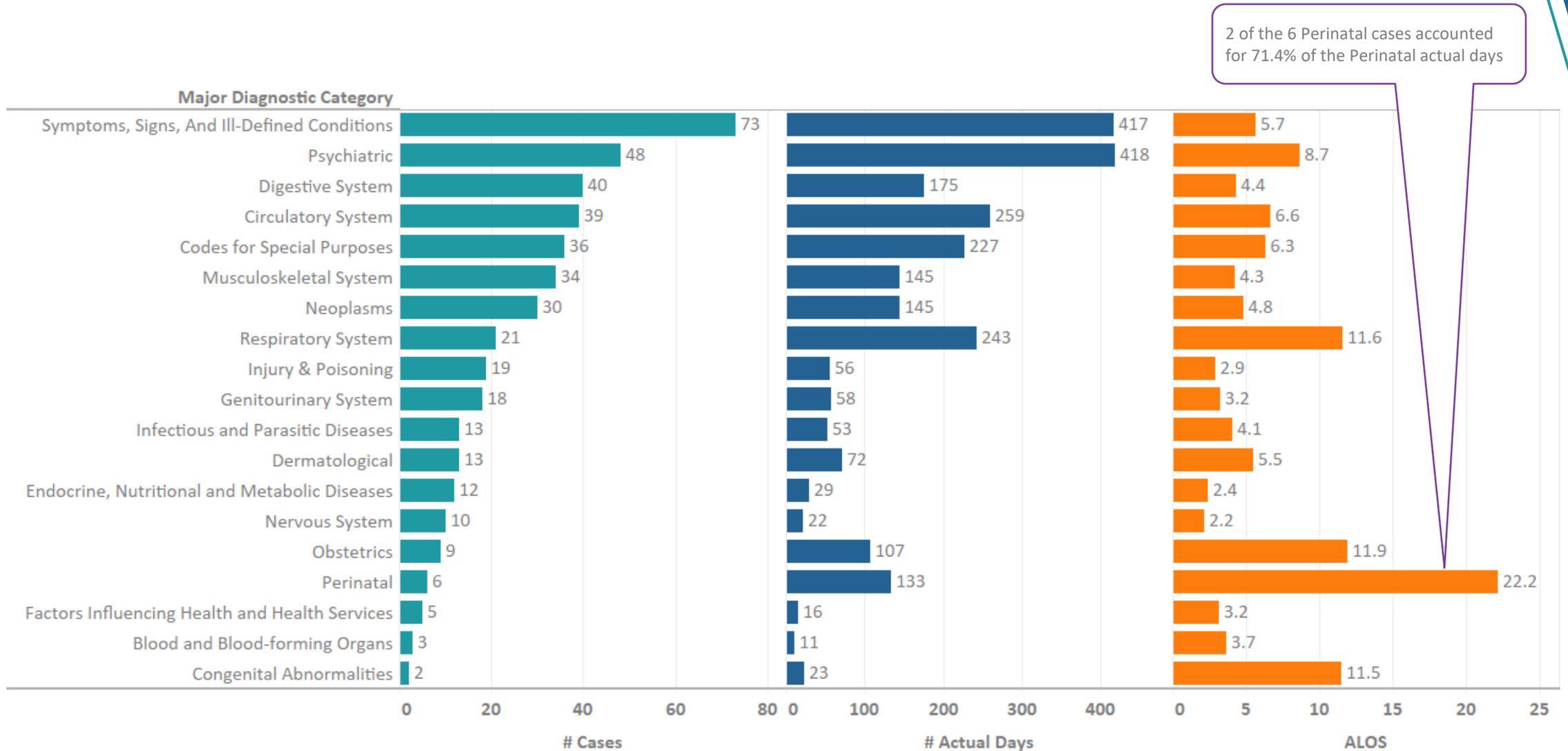
Symptoms, Signs, and Ill-Defined Conditions (318 days) followed by Codes for Special Purposes (199 days) represented the two largest diagnostic categories in Medical actual days

Utilization Review Process

Days Saved: 188
Estimated Savings: \$1,388,862

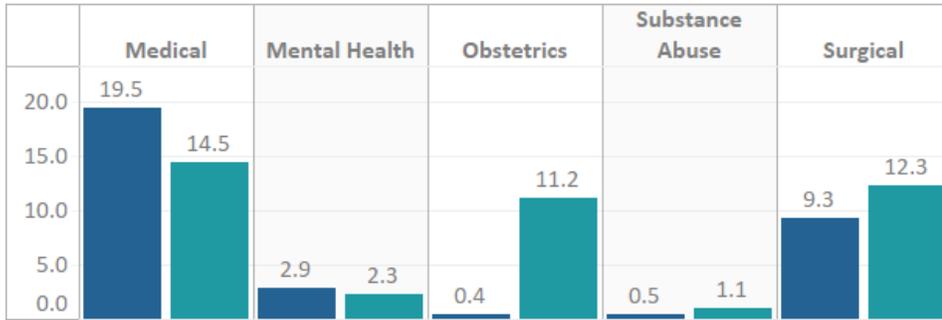
January 1, 2021 - March 31, 2021						
	Cases	Actual Days	Requested Days	Approved Days	Saved Days	Estimated Savings
Medical	259	1,394	1,404	1,306	98	\$603,516
Surgical	123	861	867	810	57	\$737,066
Mental Health	38	301	303	277	26	\$36,054
Substance Abuse	6	24	24	18	6	\$7,449
Obstetrics	5	29	30	29	1	\$4,776
Grand Total	431	2,609	2,628	2,440	188	\$1,388,862

Acute Inpatient – Case and Actual Days by Diagnostic Categories

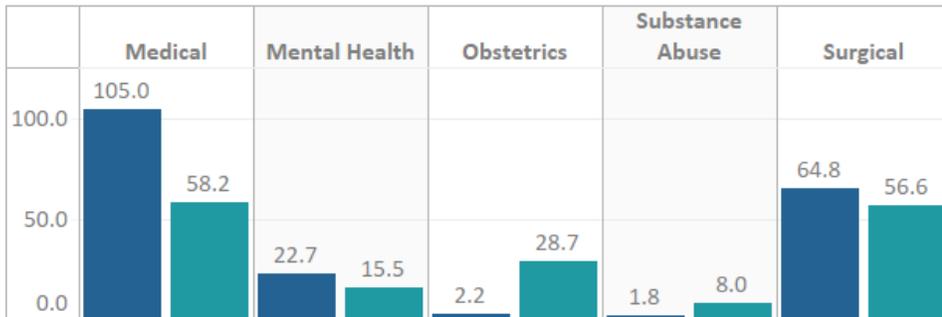


Acute Inpatient Activity – Utilization Benchmarks

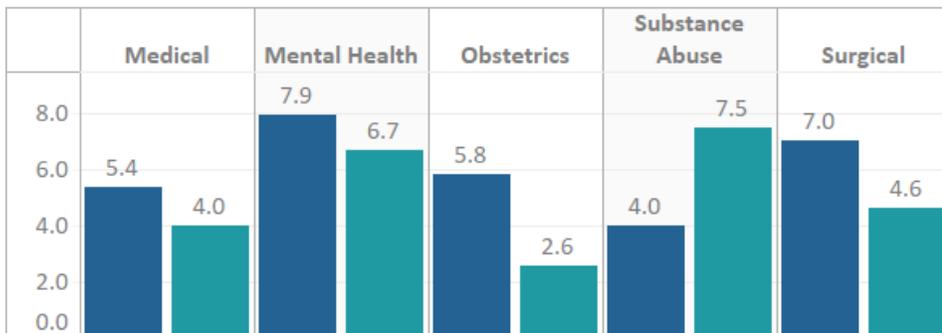
Admissions per 1,000



Days per 1,000



ALOS



Admissions per 1,000

- During the report period, all admissions per 1,000 were at or below the Milliman Benchmark except for Medical.
 - 26 medical members had 2 or more inpatient admissions

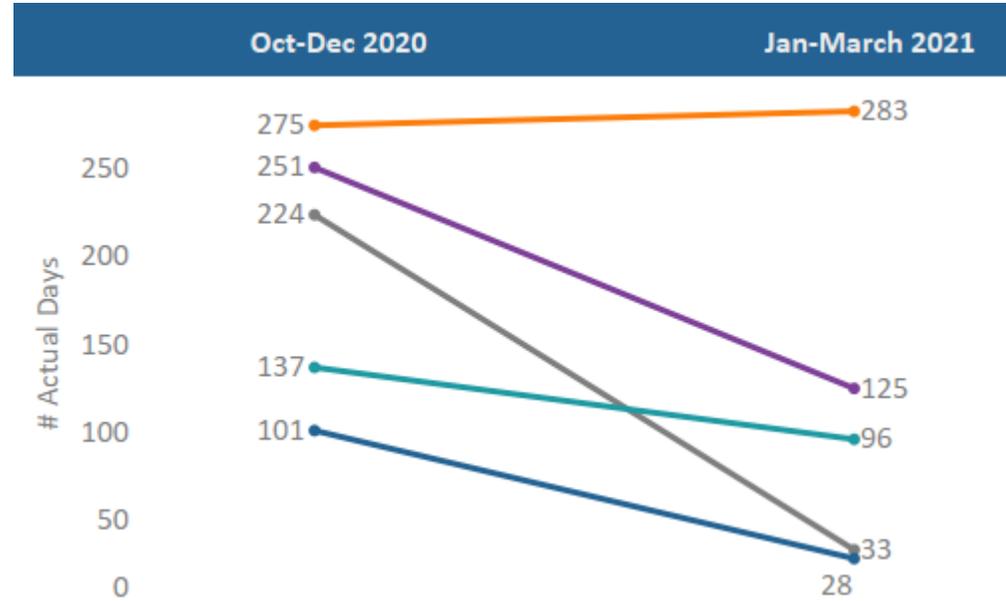
Days per 1,000

- During the report period, medical, mental health, and surgical acute inpatient days per 1,000 were above the Milliman benchmarks
 - 22 medical cases utilized 14 or more days during the report period
 - 3 mental health cases utilized 21 or more days during the report period
 - 1 surgical case utilized 88 days during the report period

Average Length of Stay

- During the report period, the average length of stay for medical, mental health, obstetrics, and surgical were above the Milliman benchmarks
 - 84 of the 259 medical cases were above the benchmark
 - 17 of the 38 mental health cases were above the benchmark
 - 3 of the 5 obstetrics cases were above the benchmark
 - 41 of the 123 surgical cases were above the benchmark

Non-Acute Inpatient Activity Summary



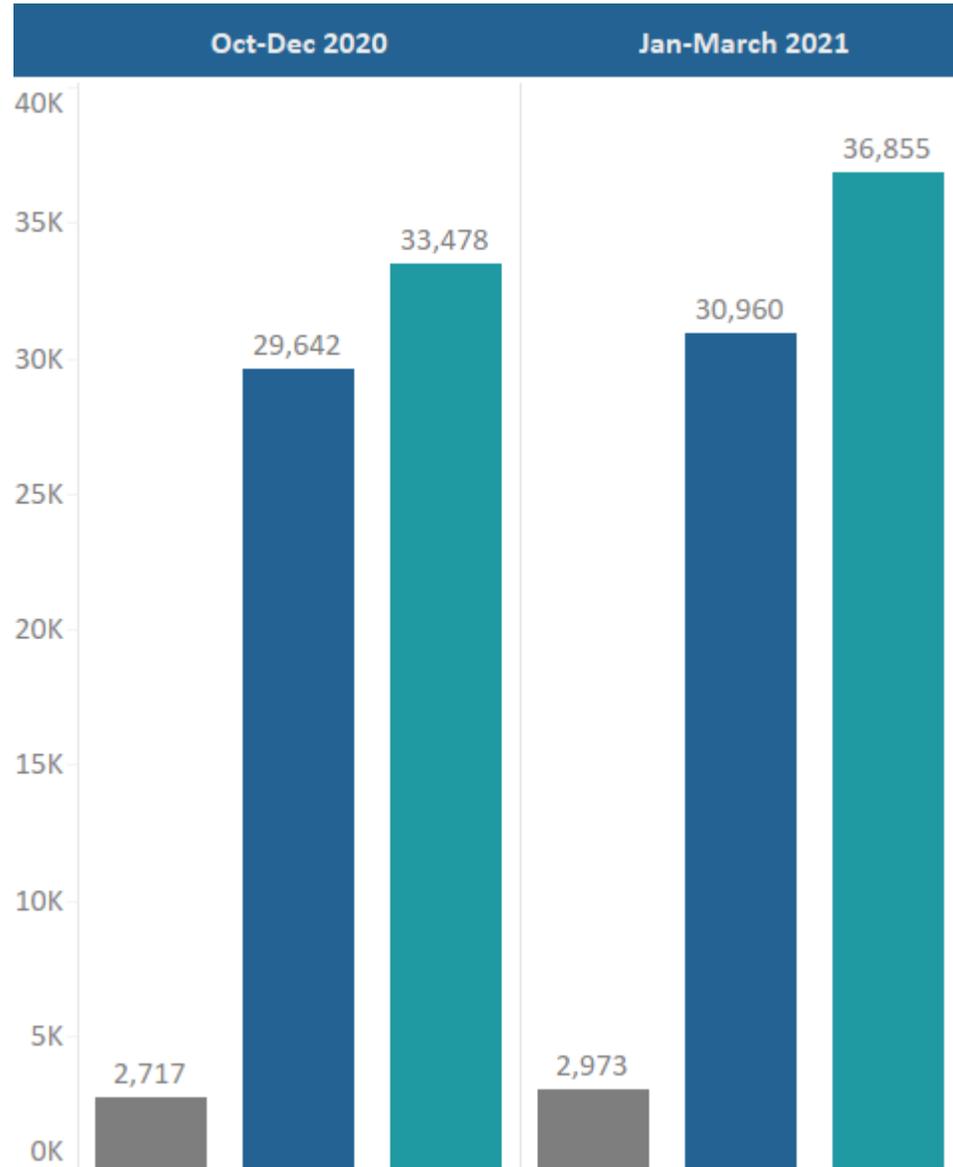
- Long Term Acute
- Medical Rehab
- Residential Mental Health
- Residential Substance Abuse
- Skilled Nsg Facility

Utilization Review Process

Days Saved: 1
Estimated Savings: \$3,859

January 1, 2021 - March 31, 2021						
	Cases	Actual Days	Requested Days	Approved Days	Saved Days	Estimated Savings
Skilled Nsg Facility	11	283	283	283	0	\$0
Medical Rehab	10	96	96	96	0	\$0
Residential Mental Health	4	125	125	125	0	\$0
Residential Substance Abuse	3	33	33	33	0	\$0
Long Term Acute	2	28	28	27	1	\$3,859
Grand Total	30	565	565	564	1	\$3,859

Outpatient Activity Summary



January 1, 2021 - March 31, 2021					
Outpatient Setting	# Cases	# Units Requested	# Units Approved	# Units Saved	Outpatient Savings
Diagnostic Test	1,782	2,321	2,078	243	\$253,764
Surgery	591	1,078	1,055	23	\$34,245
DME	226	25,248	20,159	5,089	\$28,623
Med Treatment	225	4,570	4,233	337	\$1,400,286
Home Health	72	973	862	111	\$25,961
Home Infusion	33	1,392	1,386	6	\$0
MH/SA	26	419	409	10	\$0
PT/OT/ST	13	630	554	76	\$15,796
Home Enteral Feeding	3	93	93	0	\$0
Hospice Home	2	131	131	0	\$0
Grand Total	2,973	36,855	30,960	5,895	\$1,758,675

- # Cases
- # Units Approved
- # Units Requested

Utilization Review Process

Units Saved: 5,895
 Estimated Savings: \$1,758,675

Case Management Referrals from Utilization Management

A critical function of Utilization Management is to identify members who are in need of more extensive Case Management services. One procedure that fulfills this function is the trigger of Utilization Management cases that meet specific requirements to Case Management.



Inpatient Referrals					
	# Cases	# Cases Referred to CM	% Cases Referred to CM	# Referrals Accepted in CM	% Referrals Accepted in CM
Q1 2021	461	277	60.1%	191	69.0%

Outpatient Referrals					
	# Cases	# Cases Referred to CM	% Cases Referred to CM	# Referrals Accepted in CM	% Referrals Accepted in CM
Q1 2021	2,973	722	24.3%	21	2.9%

Case Management

Case Management Summary

The following tables illustrate overall case activity and total savings achieved for the report period

Total Case Management Savings

\$690,145

Average Savings per Case = \$1,721

Based on 401 cases in an open state between 01/01/2021 – 03/31/2021

Number of Cases

Case Activity	Oct-Dec 2020	Jan-March 2021
# Beginning Cases	180	193
# Opened Cases	213	208
# Closed Cases	200	218
# Ending Cases	193	183



Case Type	Jan-March 2021
Short Term CM	101
Continuing Care Coordination	90
Bariatric	48
Advocacy	48
Oncology	40
Medical Case Management	20
Psych/SA	17
Neonatology/Peds	16
Transplant	10
Rehabilitation	6
Maternity Case Management	3
Research and Review	2
Grand Total	401

Total number of closure reasons may be greater than the number of cases as cases may have more than one closure reason.

Case Management – Savings by Case Type

Case Type	Oct-Dec 2020	Jan-March 2021
Continuing Care Coordination	\$20,710	\$397,073
Oncology	\$259,375	\$228,057
Neonatology/Peds	\$29,486	\$39,852
Medical Case Management	\$16,792	\$14,808
Research and Review	\$0	\$10,355
Transplant	\$178,745	\$0
Maternity Case Management	\$12,868	\$0
Rehabilitation	\$11,435	\$0
Psych/SA	\$9,580	\$0
Grand Total	\$538,991	\$690,145

Case Management – Savings by Source

Savings Type	Case Type	Oct-Dec 2020	Jan-March 2021
Managed	Transition to Alternate Level of Care	\$12,694	\$213,389
	Averted Inpatient Admission	\$163,220	\$125,920
	Averted Medical Complications	\$37,502	\$80,881
	Averted Usage of Services	\$77,185	\$47,190
	Services Not Medically Necessary	\$80,000	\$34,793
	Steerage to Network Providers	\$0	\$31,979
	Days Saved via Intervention	\$20,710	\$31,065
	Services Reduced via Intervention	\$0	\$12,122
	Steerage to Transplant Network	\$147,200	\$0
	Alternative Payer Source Identified	\$480	\$0
Negotiated	Acute Care	\$0	\$107,806
	Transportation	\$0	\$5,000
Grand Total		\$538,991	\$690,145

Post-Discharge Counseling

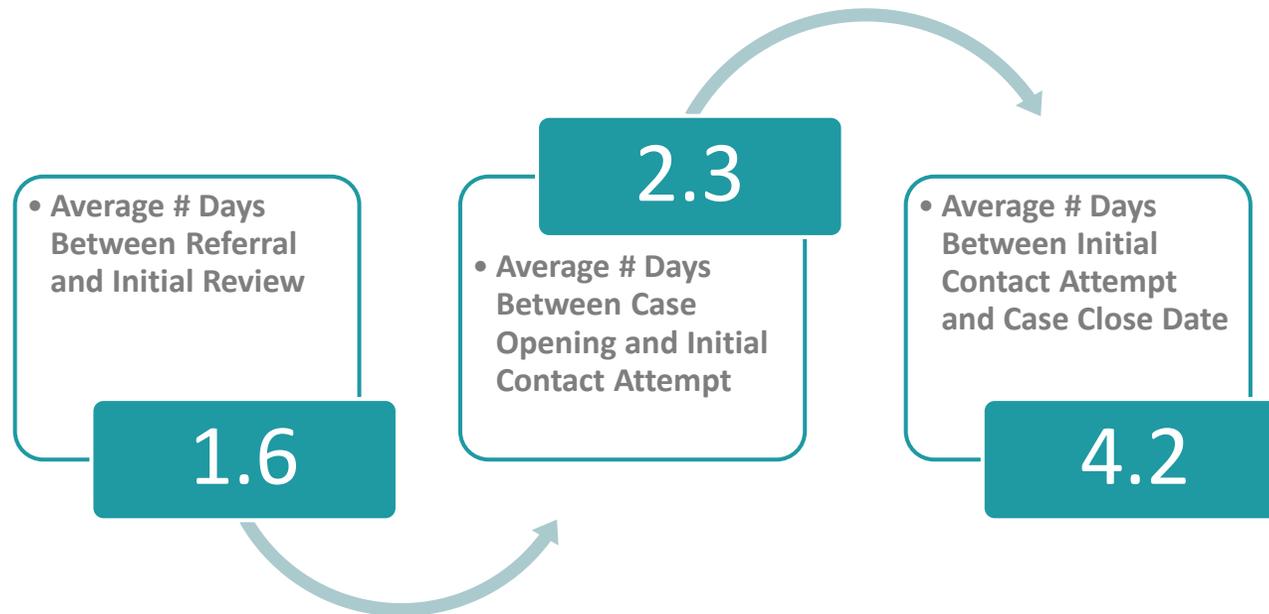
Post-Discharge Counseling – Participation Summary

Program Metric	January 1, 2021 – March 31, 2021	AHH BOB
# Cases Identified	230	AHH BOB Percent of Cases with Successful Outreach
# Participating Cases	63	
% of Cases with Successful Outreach	27.4%	51.5%



Post-Discharge Counseling – Turnaround Time

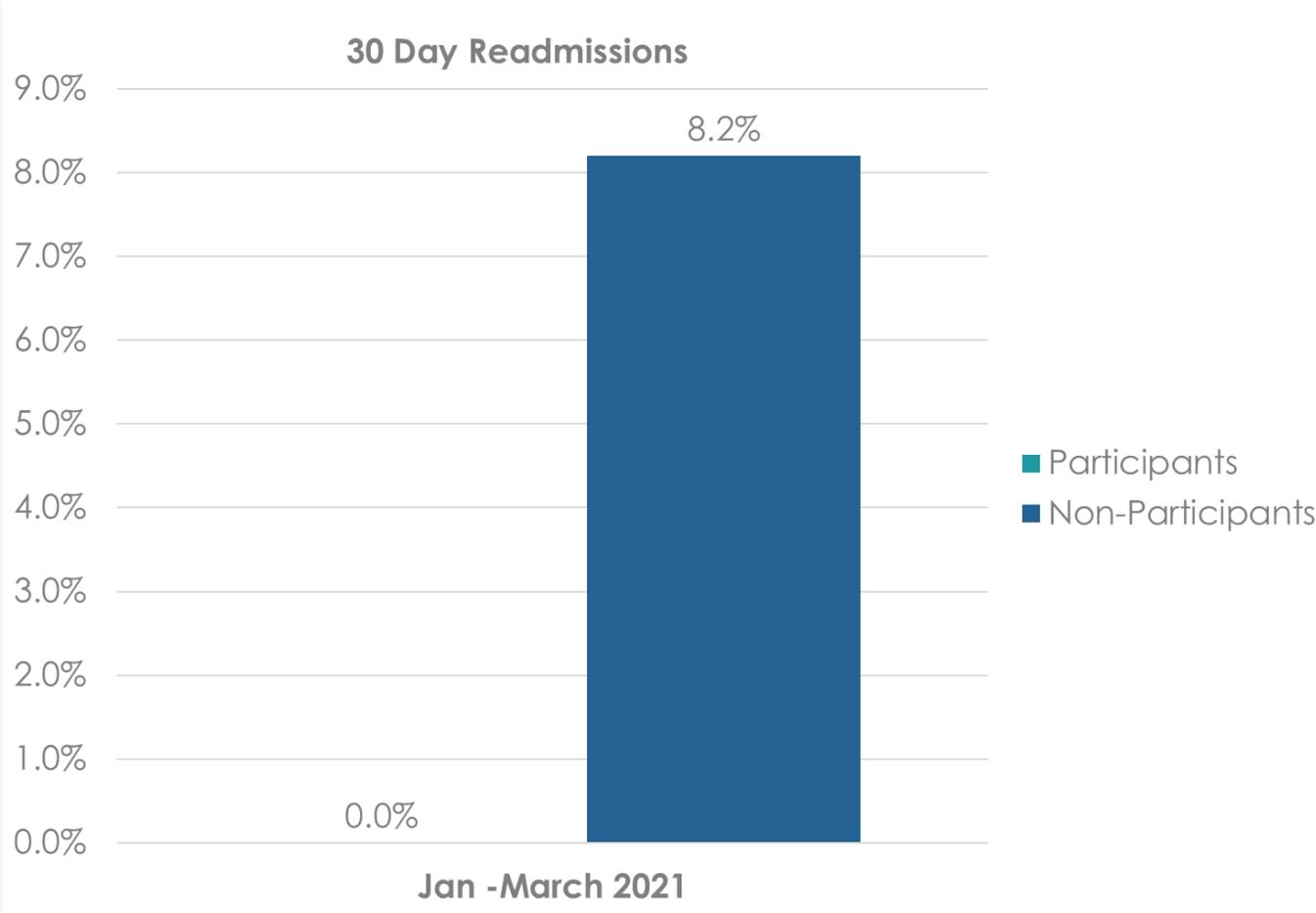
Below is a summary of the average turnaround times for the Post-Discharge Counseling program. Following a referral to the Post-Discharge Counseling program, the CMC will complete an initial review of the case and determine if the case is appropriate for the program. Once the case is reviewed and deemed appropriate, the case will be referred to a case manager who will review the case and subsequently make an initial contact attempt.



*Note that the average number of days between a referral for the Post-Discharge Counseling program and the initial contact attempt was 7.6 days

Post-Discharge Counseling – 30-Day Readmission Rate

There were zero (0) members with 30-day readmissions that participated in the Post-Discharge Counseling program during the report period. The 30-day readmission rates for participants in the program were below the rates for non-participation, illustrating the effectiveness of the Post-Discharge program.



Post-Discharge Counseling – Case Closure Reason

Post-Discharge Counseling cases are closed for a variety of reasons and a case may have more than one closure reason. The following graph presents the number of closed cases by closure reason during the report period.

