

Public Employees' Benefits Program – State of Nevada

Medical Management Review

October 1, 2020 – December 31, 2020

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Executive Overview

Overview

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

All data included is as of **January 31, 2021** and covers the reporting period of **October 1, 2020 – December 31, 2020**; 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

July 1, 2020 - September 30, 2020			
	Fees	Estimated Savings	ROI
Utilization Management	\$196,284	\$1,548,817	7.9 to 1
Case Management	\$293,587	\$860,907	2.9 to 1
Total	\$489,871	\$2,409,724	4.9 to 1

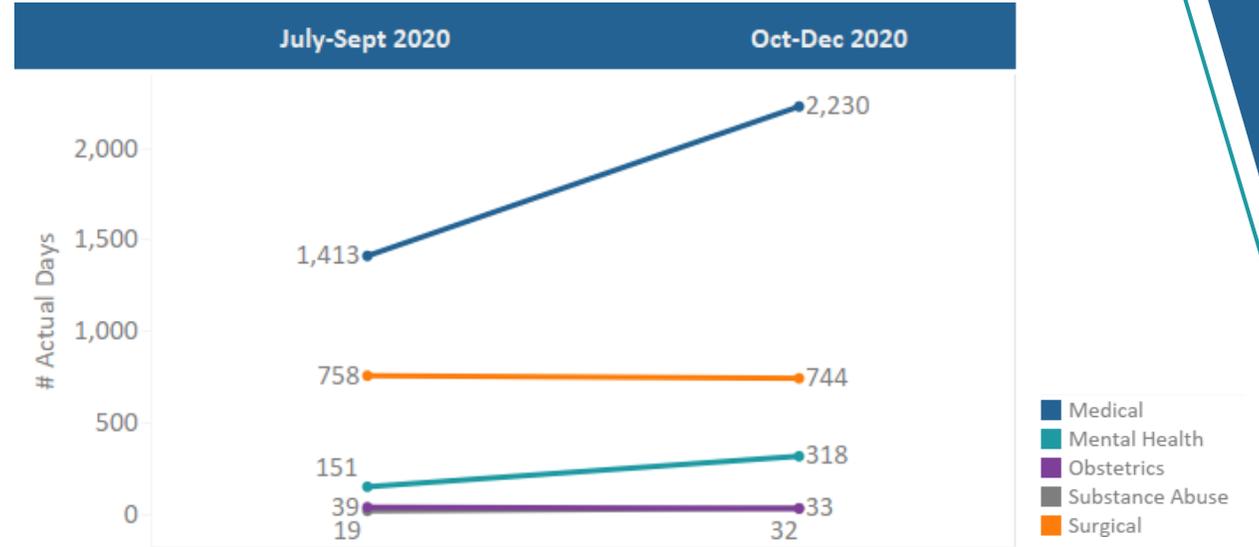
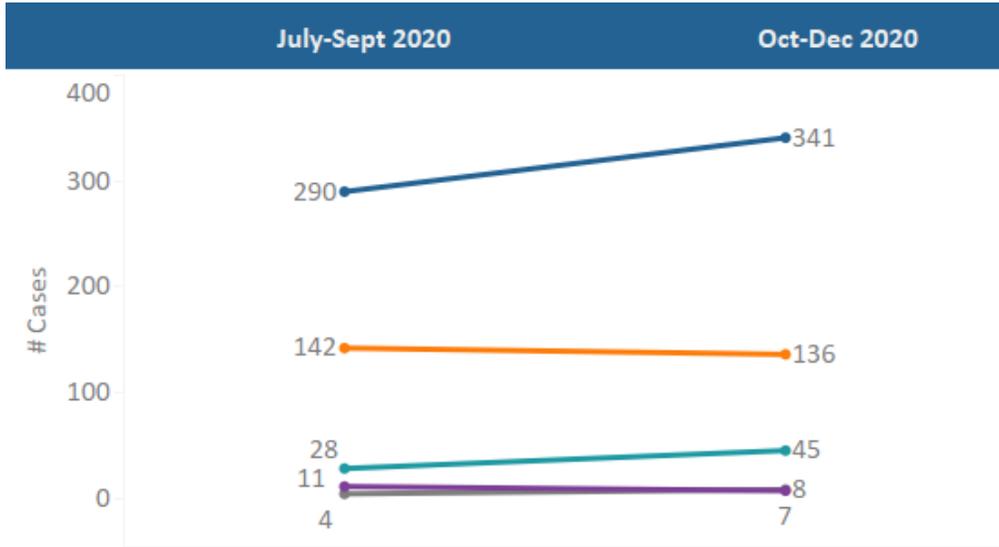
Utilization Management Breakout	
Inpatient Savings	\$951,453
Outpatient Savings	\$597,364

October 1, 2020 - December 31, 2020			
	Fees	Estimated Savings	ROI
Utilization Management	\$195,233	\$2,116,466	10.8 to 1
Case Management	\$292,015	\$518,281	1.8 to 1
Total	\$487,248	\$2,634,747	5.4 to 1

Utilization Management Breakout	
Inpatient Savings	\$1,662,913
Outpatient Savings	\$453,553

Utilization Management

Acute Inpatient Activity Summary

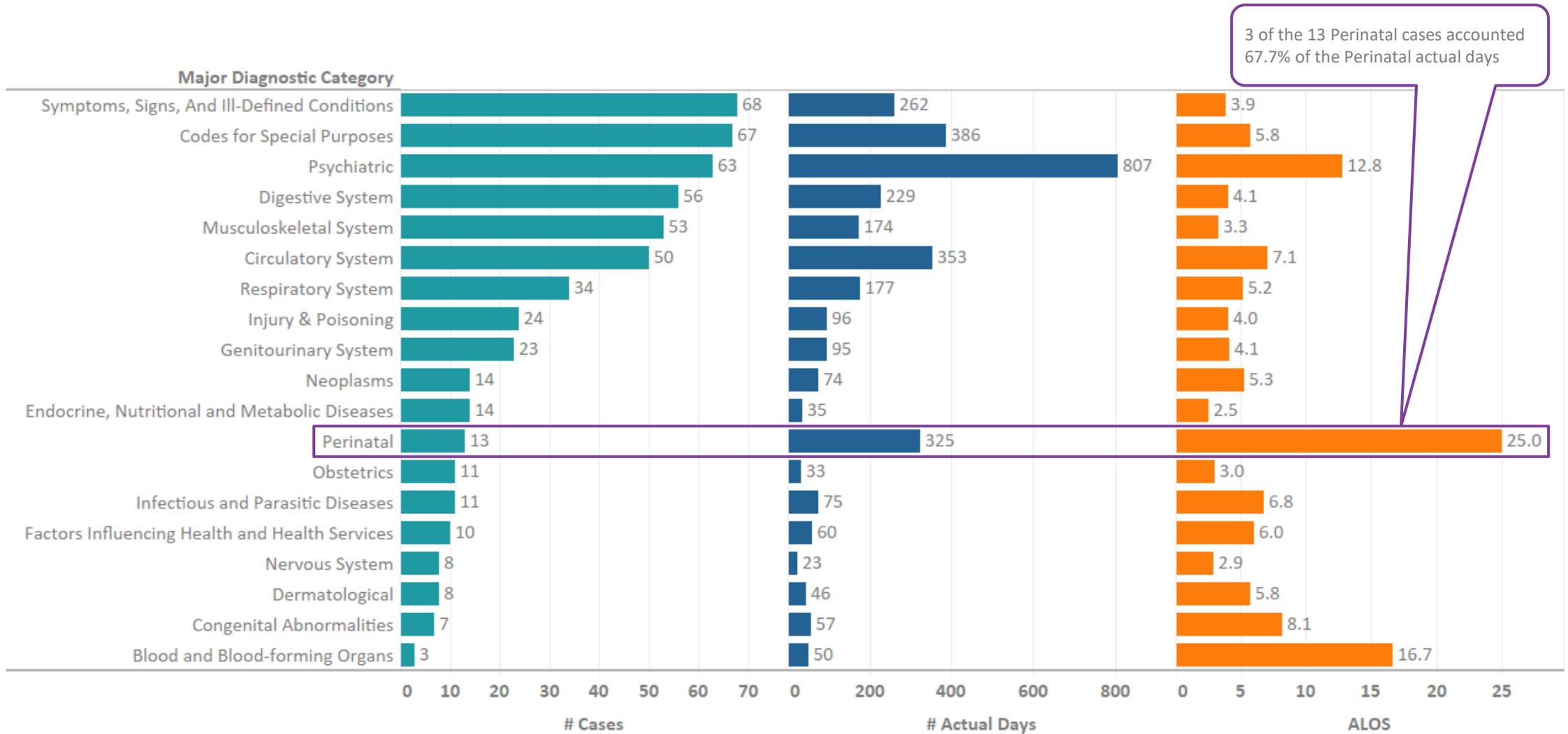


Utilization Review Process

Days Saved: 254
Estimated Savings: \$1,644,309

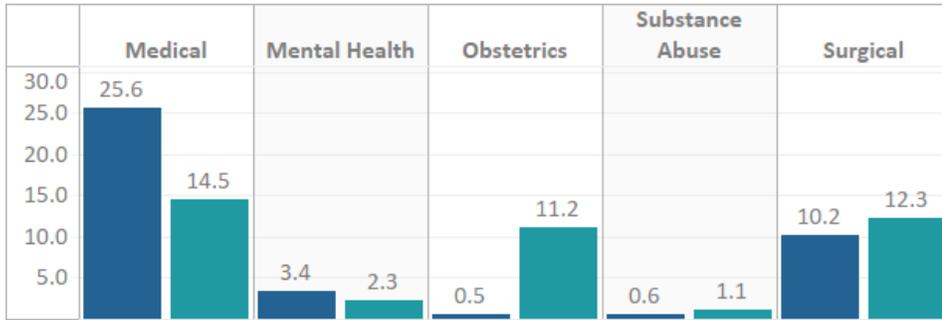
October 1, 2020 - December 31, 2020						
	Cases	Actual Days	Requested Days	Approved Days	Saved Days	Estimated Savings
Medical	341	2,230	2,245	2,020	225	\$1,385,624
Surgical	136	744	532	513	19	\$245,689
Mental Health	45	318	318	314	4	\$5,547
Substance Abuse	8	33	33	27	6	\$7,449
Obstetrics	7	32	32	32	0	\$0
Grand Total	537	3,357	3,160	2,906	254	\$1,644,309

Acute Inpatient – Case and Actual Days by Diagnostic Categories

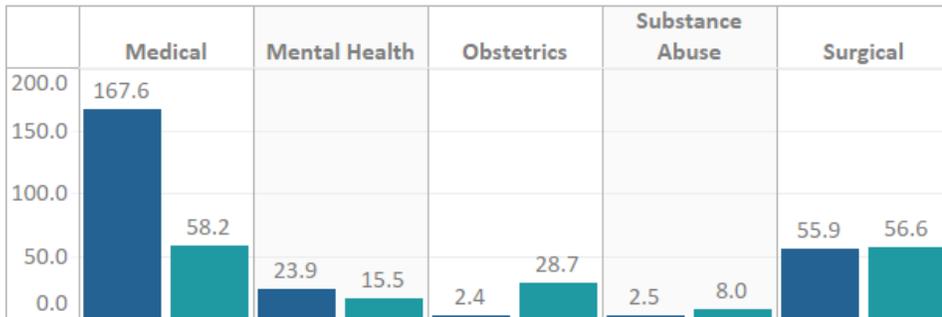


Acute Inpatient Activity – Utilization Benchmarks

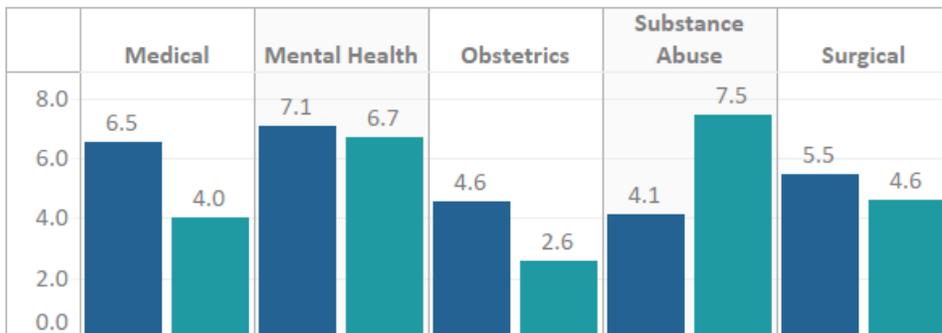
Admissions per 1,000



Days per 1,000



ALOS



Admissions per 1,000

- Medical: Admissions were 76.6% higher than the Milliman Benchmark.
 - 43 members had 2 or more inpatient admissions
- Mental Health: Admissions were 47.8% higher than the Milliman Benchmark.
 - 6 members had 2 or more inpatient admissions

Days per 1,000

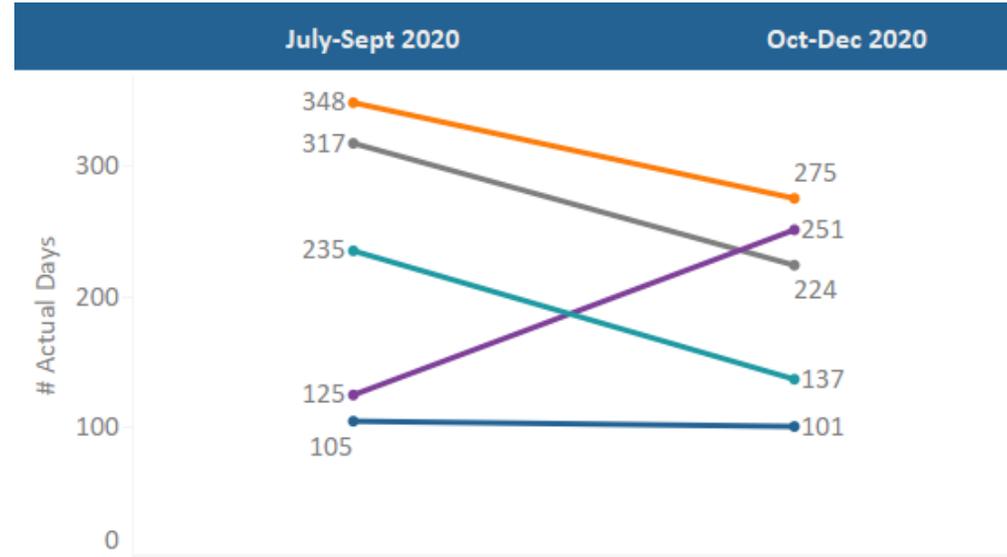
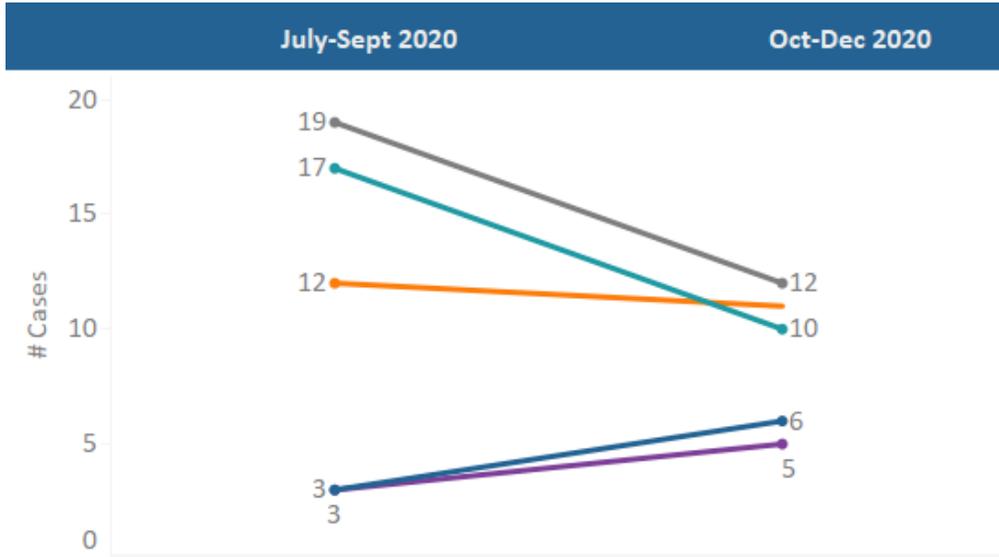
- Medical: Days were 188.0% higher than the Milliman Benchmark.
 - 52 cases utilized 9 or more days during the report period
- Mental Health: Days were 54.2% higher than the Milliman Benchmark.
 - 3 cases utilized 13 or more days during the report period

Average Length of Stay

- Medical: ALOS was 2.5 days higher than the Milliman Benchmark.
 - Removal of 19 outlier cases that consumed 21 or more days each resulted in an ALOS of 4.1
- Mental Health: ALOS was 0.4 days higher than the Milliman Benchmark.
 - Removal of 1 outlier cases that consumed 53 days resulted in an ALOS of 6.0
- Obstetrics: ALOS was 2.0 days higher than Milliman Benchmark.
 - Removal of 3 outlier cases that consumed 5 or more days each resulted in an ALOS of 3.0
- Surgical: ALOS was 0.9 days higher than Milliman Benchmark.
 - Removal of 1 outlier case that consumed 219 days resulted in an ALOS of 3.9

Due to federal mandate regulations, not all Obstetrics cases require pre-certification; therefore, Obstetrics ALOS should be interpreted with caution.

Non-Acute Inpatient Activity Summary



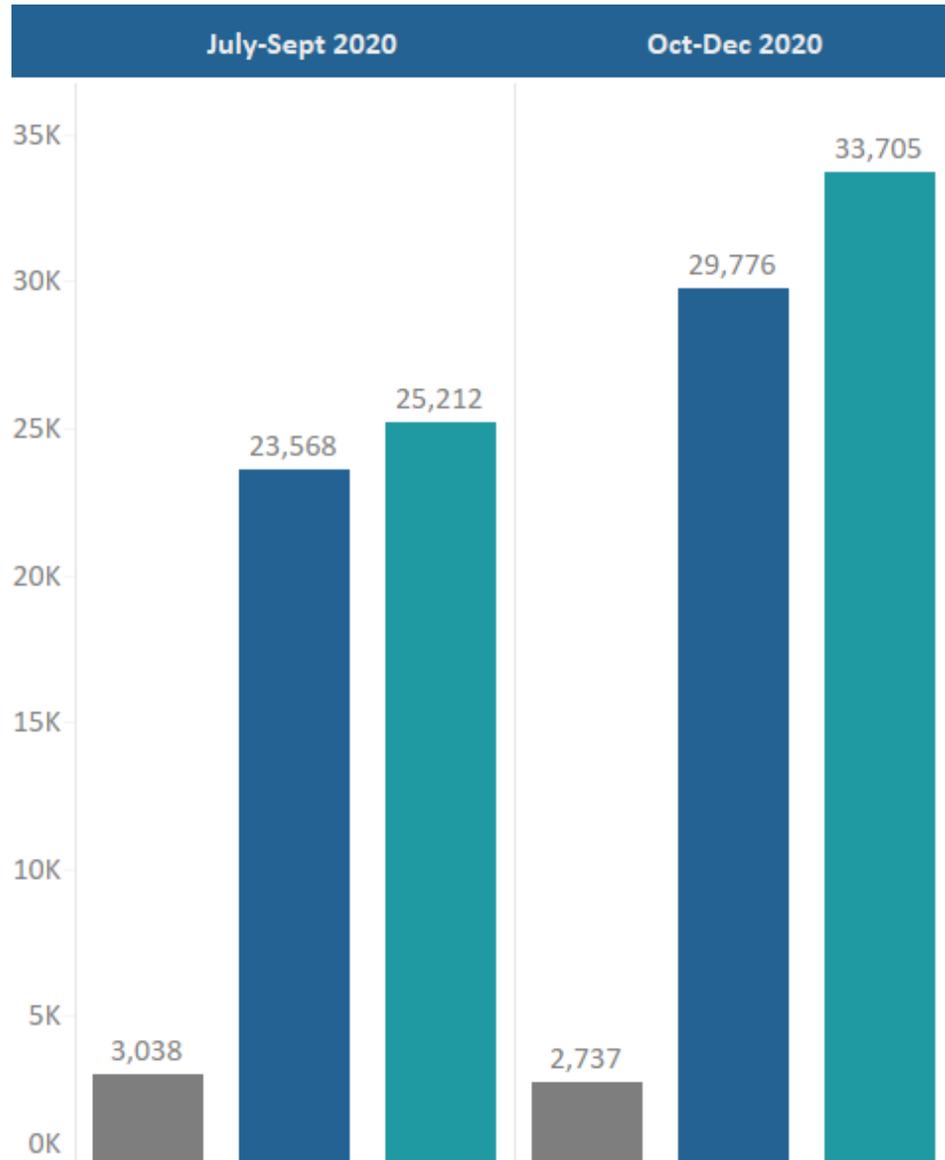
- Long Term Acute
- Medical Rehab
- Residential Mental Health
- Residential Substance Abuse
- Skilled Nsg Facility

Utilization Review Process

Days Saved: 19
Estimated Savings: \$18,604

October 1, 2020 - December 31, 2020						
	Cases	Actual Days	Requested Days	Approved Days	Saved Days	Estimated Savings
Residential Substance Abuse	12	224	226	225	1	\$903
Skilled Nsg Facility	11	275	275	274	1	\$681
Medical Rehab	10	137	137	137	0	\$0
Long Term Acute	6	101	101	99	2	\$7,718
Residential Mental Health	5	251	266	251	15	\$9,302
Grand Total	44	988	1,005	986	19	\$18,604

Outpatient Activity Summary



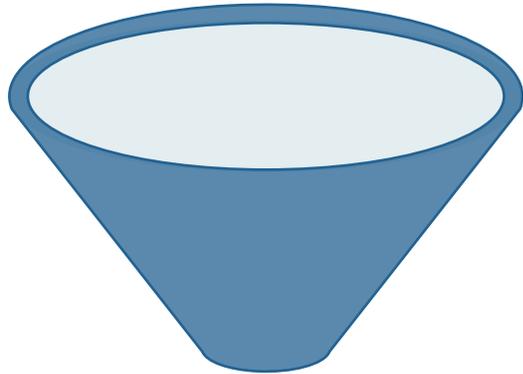
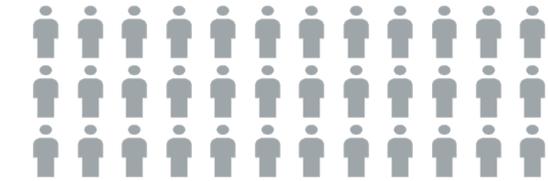
October 1, 2020 - December 31, 2020					
Outpatient Setting	# Cases	# Units Requested	# Units Approved	# Units Saved	Outpatient Savings
Diagnostic Test	1,599	1,977	1,901	76	\$84,140
Surgery	558	1,002	978	24	\$30,568
DME	249	22,301	18,671	3,630	\$36,027
Med Treatment	214	4,854	4,777	77	\$282,407
Home Health	59	808	752	56	\$10,712
MH/SA	28	459	457	2	\$0
Home Infusion	21	1,504	1,479	25	\$0
Home Enteral Feeding	4	542	542	0	\$0
PT/OT/ST	3	169	149	20	\$2,987
Hospice Home	2	89	70	19	\$6,712
Grand Total	2,737	33,705	29,776	3,929	\$453,553

- # Cases
- # Units Approved
- # Units Requested

Utilization Review Process

Units Saved: 3,929
 Estimated Savings: \$453,553

Case Management Referrals from Utilization Management



- ▶ 581 inpatient cases were completed in Utilization Review
 - ▶ 2,737 outpatient cases were completed in Utilization Review
-

- ▶ 353 inpatient cases (60.8%) automatically triggered to Case Management
 - ▶ 694 outpatient cases (25.4%) automatically triggered to Case Management
-

- ▶ 231 inpatient cases (65.4%) were deemed appropriate for Case Management
- ▶ 22 outpatient cases (3.2%) were deemed appropriate for Case Management

Case Management

Case Management Summary

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

Total Case Management Savings

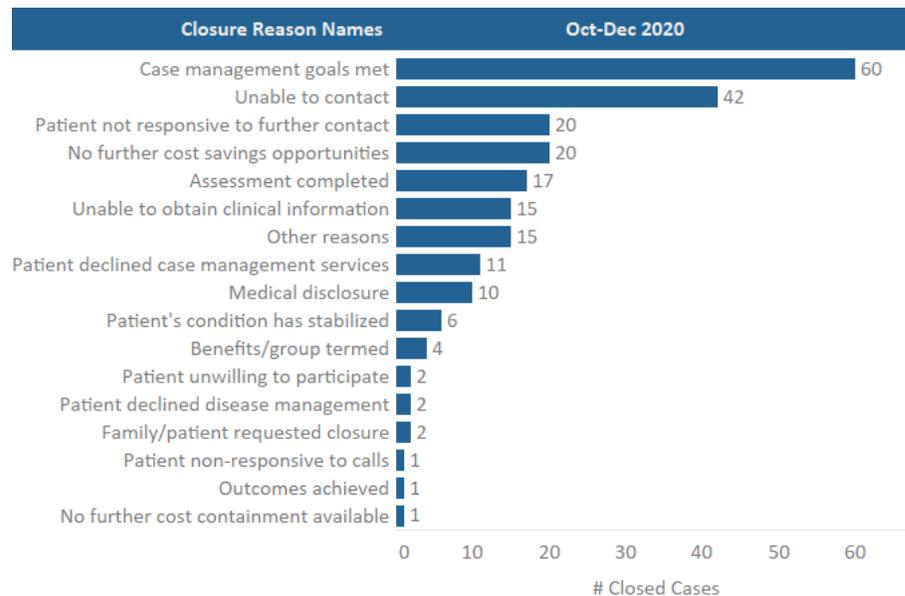
\$518,281

Average Savings per Case = \$1,336

Based on 388 cases in an open state between 10/1/2020 – 12/31/2020

Number of Cases

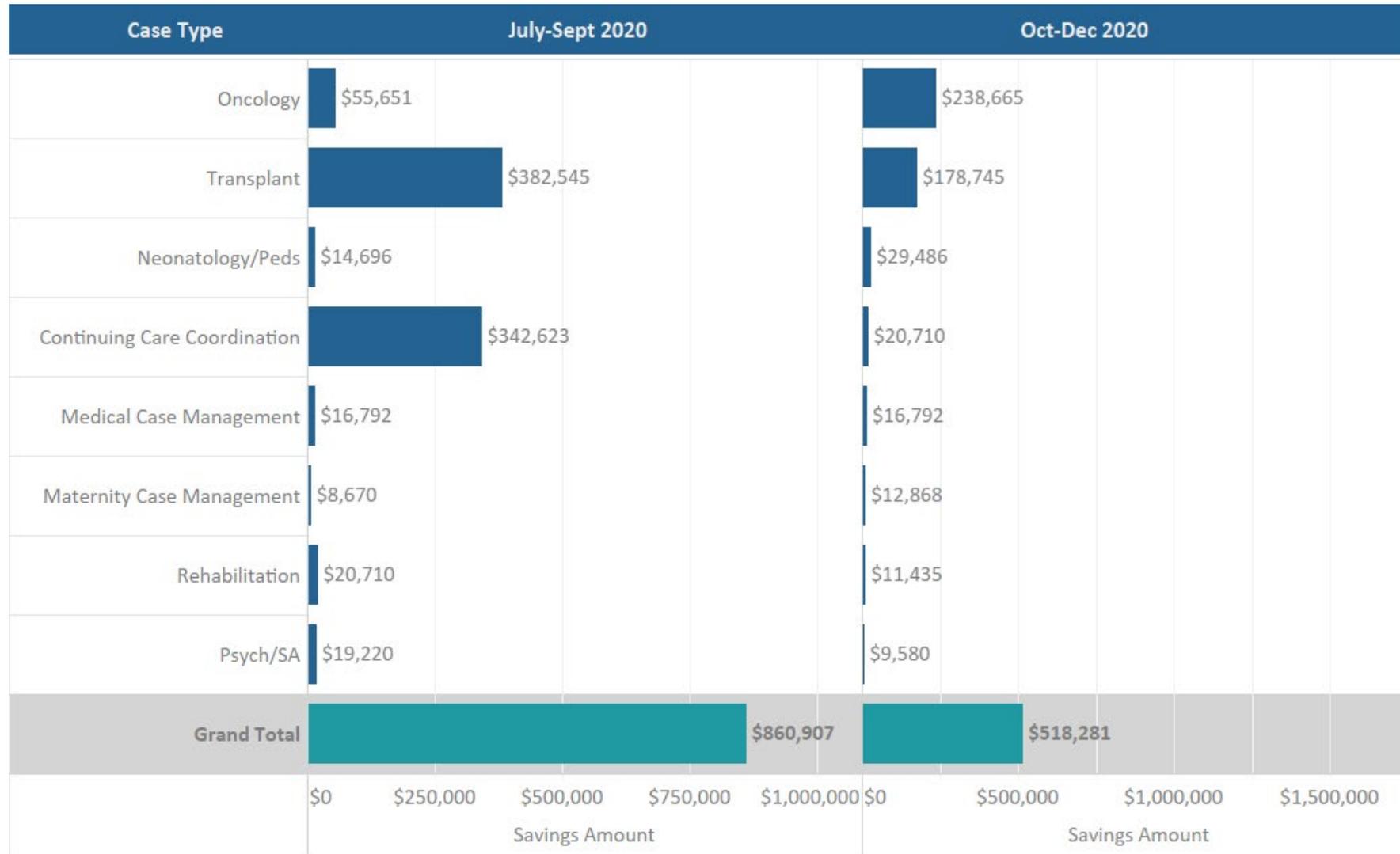
Case Activity	July-Sept 2020	Oct-Dec 2020
# Beginning Cases	203	177
# Opened Cases	187	211
# Closed Cases	213	200
# Ending Cases	177	188



Case Type	Oct-Dec 2020
Continuing Care Coordination	111
Short Term CM	90
Bariatric	44
Advocacy	43
Oncology	37
Medical Case Management	18
Psych/SA	17
Neonatology/Peds	13
Transplant	9
Rehabilitation	2
Maternity Case Management	3
Research and Review	1
Grand Total	388

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 Management – Savings by Source

Savings Type	Case Type	July-Sept 2020		Oct-Dec 2020	
Managed	Steerage to Transplant Network	\$631,560		\$147,200	
	Averted Inpatient Admission	\$60,445		\$142,510	
	Services Not Medically Necessary	\$3,936		\$80,000	
	Averted Usage of Services	\$80,013		\$77,185	
	Averted Medical Complications	\$41,420		\$37,502	
	Days Saved via Intervention			\$20,710	
	Transition to Alternate Level of Care	\$15,940		\$12,694	
	Alternative Payer Source Identified			\$480	
	Steerage to Network Providers	\$2,295			
	Services Reduced via Intervention	\$11,700			
Negotiated	Residential Treatment	\$13,598			
Grand Total		\$860,907		\$518,281	
		\$0	\$500,000	\$1,000,000	\$0
		Savings Amount		Savings Amount	

Post-Discharge Counseling

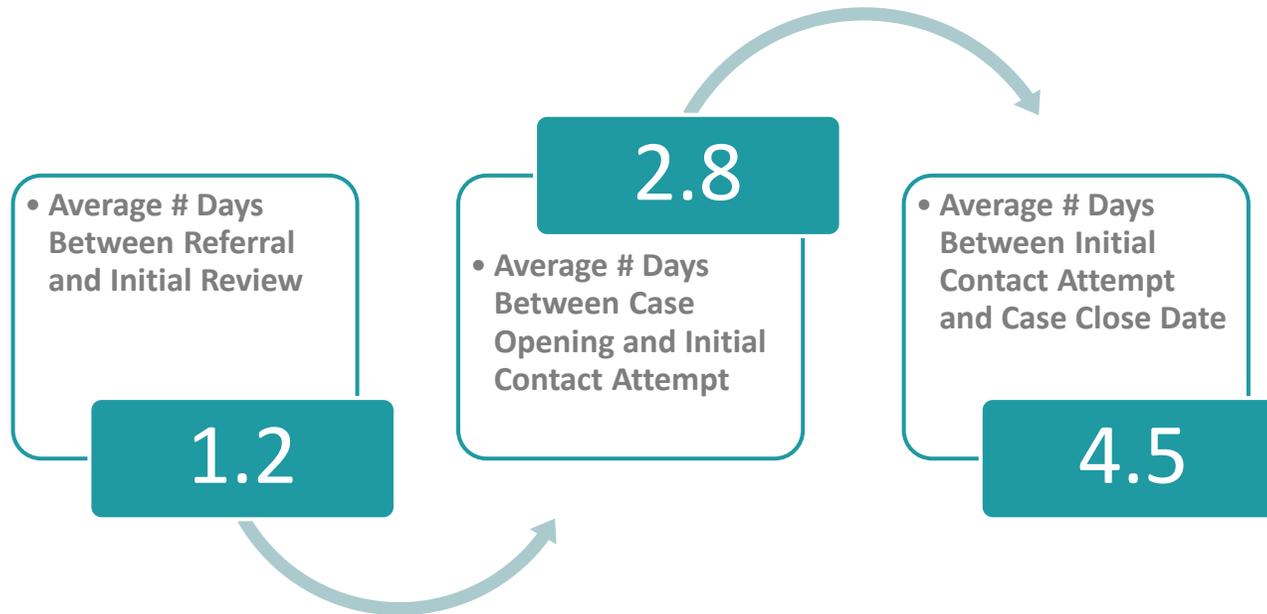
Post-Discharge Counseling – Participation Summary

Program Metric	October 1, 2020 – December 31, 2020	AHH BOB
# Cases Identified	250	AHH BOB Percent of Cases with Successful Outreach
# Participating Cases	76	
% of Cases with Successful Outreach	30.4%	51.5%



Post-Discharge Counseling – Turnaround Time

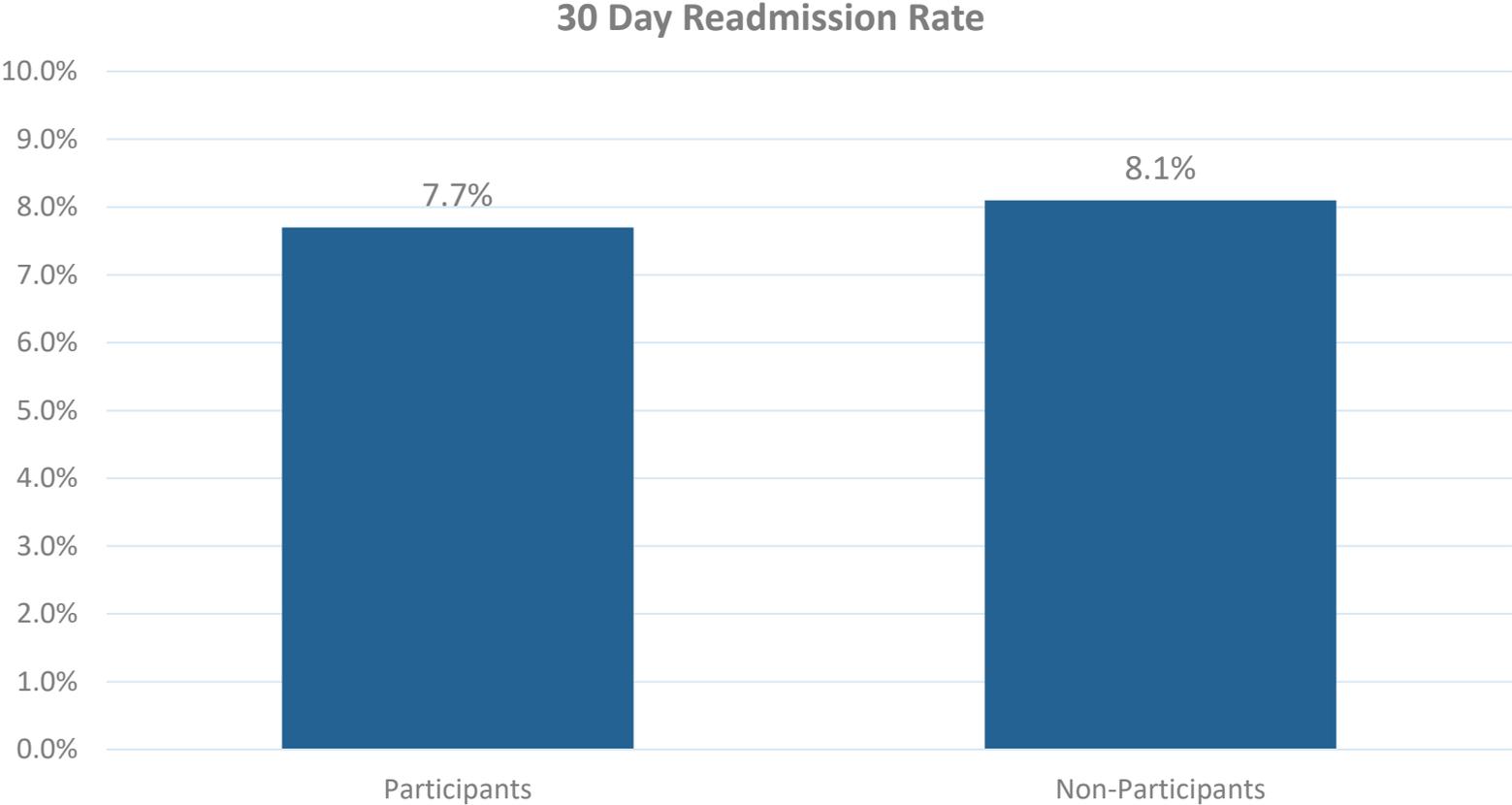
Below is a summary of the average turnaround times for the Post-Discharge Counseling program. Following a referral to the Post-Discharge Counseling program, the CMC will complete an initial review of the case and determine if the case is appropriate for the program. Once the case is reviewed and deemed 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 6.2 days

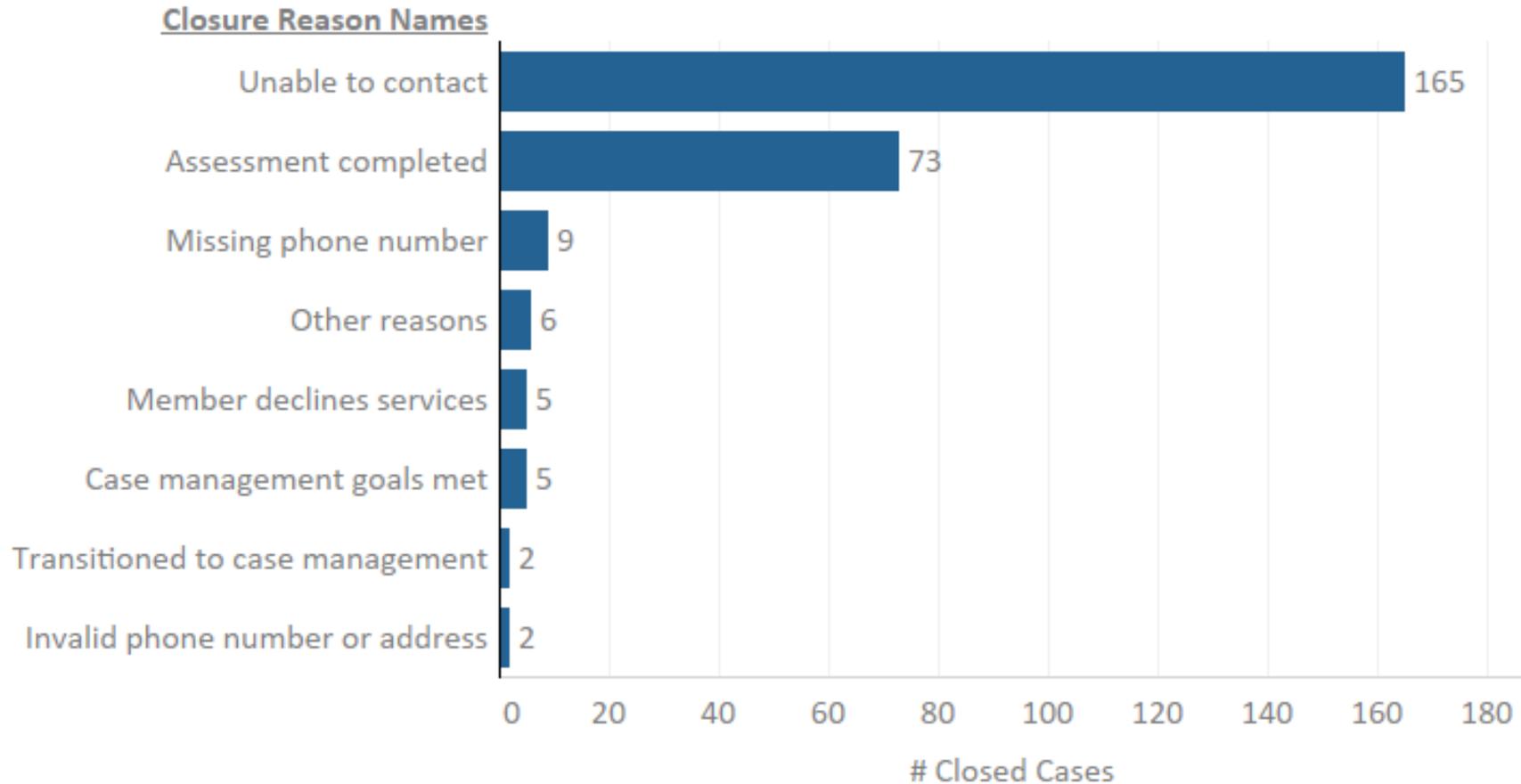
Post-Discharge Counseling – 30-Day Readmission Rate

There were 2 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.



Observations and Insights



Observations

- ▶ Medical experienced a 57.8% increase in actual days in the current time period over the prior quarter
- ▶ Medical and Mental Health were higher than the Milliman benchmark for acute inpatient admissions, days, and ALOS
- ▶ Outpatient saw a 33.7% increase in units requested and a 26.3% increase in units approved in the current time period over the prior quarter
- ▶ Continuing Care Coordination made up 28.6% of case management case types



Insights

- ▶ Psychiatric followed by Codes for Special Purposes diagnostic categories represented the largest percentage increase in Medical actual days
- ▶ 3 members accounted for 463 of the 2,230 (20.8%) Medical actual days during the current time period
- ▶ Outpatient increase in units approved and requested is due to an increase in DME with the majority in the Nervous System diagnostic category
- ▶ Psychiatric and Neoplasms major diagnostic categories accounted for 63.1% of open CM Continuing Care Coordination cases