# LUMERIS Health Plan Operations Solution



Lumeris' Health Plan Operations solution offers payers full turn-key business process outsourcing and management services to design, build, operate, measure, and optimize a health plan. These services are based on Lumeris' decade of experience as a collaborative payer — operating a consistently high-rated Medicare Advantage Prescription Drug (MAPD) health plan and a virtual integrated delivery network (vIDN) of primary care physicians, specialists, hospitals, and ancillary service providers. Our seasoned team of executives, medical directors, physicians, nurses, IT professionals, and actuaries has been involved in the establishment of more than 30 health plans in their careers.

Given mandates for medical loss ratio contained in the Patient Protection and Affordable Care Act, payers can benefit by outsourcing the management and operation of their health plan by utilizing Lumeris' **expert team, proven processes and systems, medical management experience and commitment to continuous process improvement.** Under this arrangement, Lumeris partners with its Health Plan Operations' clients to share the fee risk and success of the health plan.

Our approach to Health Plan Operations comes from our Collaborative Payer® Model, a care delivery innovation developed jointly by a payer and provider group. This model is built on a foundation of reciprocal accountability, aligned patient and provider incentives, cultural and data transparency, and information and technology tools that support continuous process improvement and behavior change. It favors the wellness of patients and fosters stewardship of health care resources in pursuit of the Triple Aim *Plus One*: better health outcomes, lower costs and improved patient *plus* physician satisfaction.

With this model as the backbone for Health Plan Operations, Lumeris provides its clients with turn-key business process outsourcing and management services based on the 22 core competencies needed for health plan success:

## **Culture and Financial Alignment**

Accountable leadership and governance

Continuous learning culture development

Benefit design

Provider network development and management

Collaborative business culture enablement

Member engagement and education

### **Enhanced Care Delivery**

Care management

Preventive and proactive care

Value-driven utilization

Quality standards management

Care access optimization

#### Accountable Decision Enablement

Data liberation and rationalization

Clinical and financial decision support

Systems integration

Role-based data transparency

Point-of-thought actionable intelligence delivery

Performance assessment and management

Value improvement analytics and predictive modeling

### **Operational Excellence**

Stakeholder support services

Timely and accurate claims processing

Workflow optimization

Provider engagement and education

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## CULTURE AND FINANCIAL ALIGNMENT — EXPERT TEAM

Lumeris provides expertise at every step of the way to design, build, operate, measure, and optimize a health plan. Lumeris performs day-to-day functions necessary to direct, plan and run a CMS-compliant organization. These functions include: guiding state and CMS applications; establishing accountable leadership and governance; designing health plan benefits; developing a network of participating and engaged physicians, specialists, hospitals, and ancillary service providers; contracting for provider, administrative and management services; providing staffing and support functions, such as human resources, finance and accounting; and advising on legal, privacy and regulatory compliance. An example of Lumeris' expert team in action includes:

• Health Plan Benefit Design — Lumeris experts, who have started more than 30 health plans in their careers, believe in improving health care access and making health care simpler, easier and more affordable for members. Their experience has led to the creation of all-in-one health plans that combine hospital, medical and prescription drug coverage, with extra benefits that remove barriers to care such as \$0 premiums, transportation assistance and health club memberships. This has helped make Essence Healthcare (a plan managed by Lumeris) a consistently high-rated MAPD health plan.

## ACCOUNTABLE DECISION ENABLEMENT — PROVEN PROCESSES AND SYSTEMS

Lumeris' proven processes and systems support the automation of business functions essential to the operation of a health plan, including information systems for enrollment, Medication Therapy Management Program, claims processing, billing, data analytics, reporting, performance assessment and management, and accountable-decision enablement. An example of Lumeris' proven processes and systems in action include:

• Accountable Delivery System Platform (ADSP)® – Lumeris' purpose-built solution for accountable decision support helps the health plan and its networked physicians meet clinical quality-, operational- and patient-satisfaction-related Star ratings and HEDIS® measures. The platform aggregates and analyzes data from across the continuum of care — including claims, EMR encounter data, lab, and pharmacy data — to provide a comprehensive view of patient care. It then sends actionable clinical and financial intelligence to physicians and other stakeholders at the point of medical decision-making to enable timely, value-based health care decisions. The ADSP is available to providers via single sign-on.

## ENHANCED CARE DELIVERY — MEDICAL MANAGEMENT EXPERIENCE

Lumeris knows that helping clients manage quality, cost and utilization starts with the right tools for managing populations and keeping patients healthy. That's why the Lumeris-operated health plan spends more than fee-for-service does on healthier patients and utilizes the ADSP to stratify and proactively outreach to at-risk patients to close gaps in care. Medical management programs monitor member health status and recommend age-appropriate screenings and tests that prevent disease and chronic conditions. These programs improve clinical quality-, operational- and patient-satisfaction-related Star ratings, HEDIS measures and CAHPS scores. Examples of how Lumeris helps physicians manage risk and prevent costly care transitions include:

- Risk Adjustment and Coding Lumeris' medical management experience includes a proven Enhanced Encounter® Program for
  helping physicians ensure accurate documentation and coding, which results in maximum reimbursement and mitigated risk. Lumeris'
  prospective health assessment, supported by tools, engagement and education, has a near 70 percent completion rate among
  physicians participating in the program.
- Care Management Lumeris' Care Management solution helps physicians and the extended care team effectively deliver better care at lower cost for patients with multiple health and social needs. Complex care management, transition management, medication management, and advance care planning support the reduction in hospital readmissions and high-risk events.

#### OPERATIONAL EXCELLENCE — CONTINUOUS PROCESS IMPROVEMENT

At a 4.5 Star-rating\* for the past three years, the Lumeris-operated health plan believes in delighting its stakeholders. That is why so much time and energy is spent on continuous process improvement in the areas of member communications, member services, customer service, and CMS-mandated guidelines for handling member complaints, grievances and appeals. Health Plan Operations clients also benefit from consultative services in the areas of broker relations, HIPAA and CMS compliance, sales, public affairs, and marketing. An example of Lumeris' proven process for provider engagement and education includes:

• The Nine C's® — Lumeris' Accountable Primary Care Model<sup>sM</sup> offers physicians a playbook for transforming their practice from volumeto value-based care delivery. Lumeris helps providers — and health plans —understand their risk and the fundamental processes, work-flows and behavioral approaches that must be adopted to achieve the Triple Aim *Plus One* and ensure health plan success.

<sup>\*</sup>Plan performance Star ratings are assessed each year and may change from one year to the next.

