Risk Adjustment & Quality Programs: Lessons Learned from COVID-19

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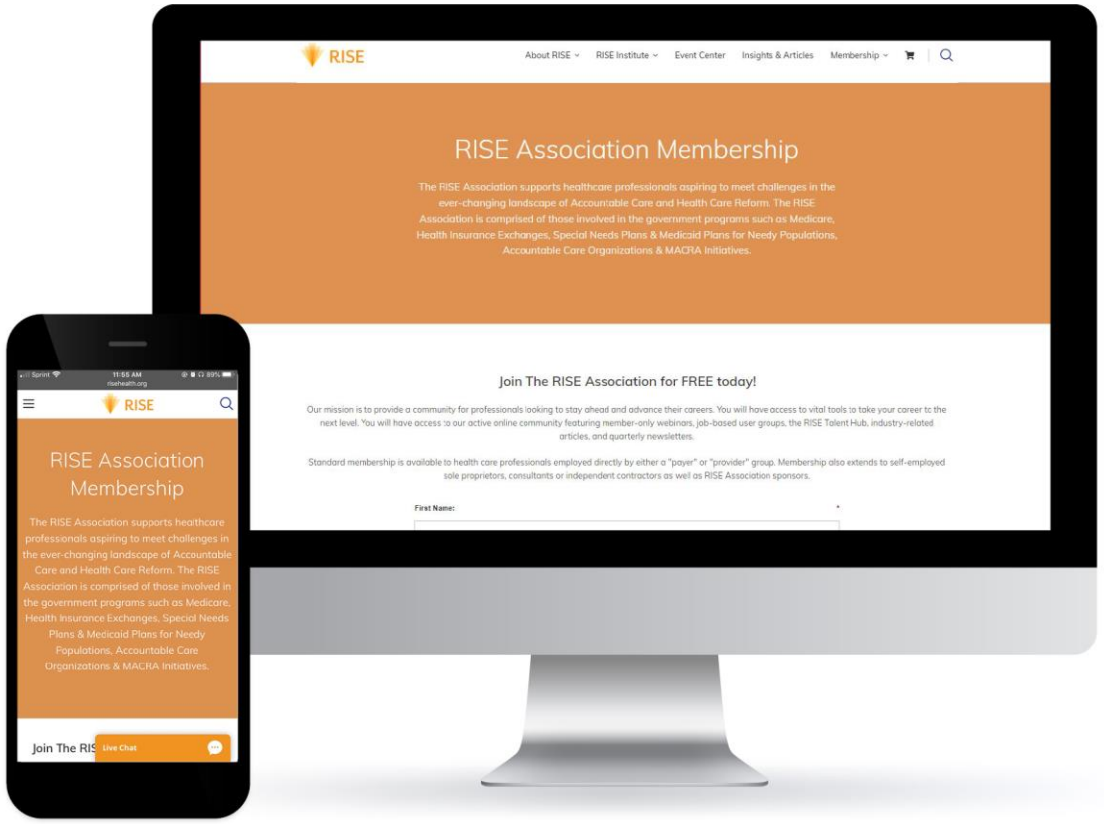

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AGENDA

- Impacts of COVID-19 Trends & Projections
- Early Impacts of COVID-19
- Catapult to Change
- Regulatory Changes
- Telehealth

Impacts of COVID-19 Trends & Projections

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Impacts of COVID-19 – A Quick Roundup

- **Estimated $125 to $200 billion in incremental US health system cost** from ongoing impact of COVID-19[1]
  - Ongoing needs = layers of costs beyond immediate impact of COVID-19 diagnosis
  - Drivers: exacerbations of some chronic and episodic conditions due to deferred or cancelled treatment and new or worsening behavioral health concerns

- **Boom in Telehealth**[2]
  - In the five years preceding 2019, telemedicine had **grown by 44%**[2]
  - Pre-COVID-19 total annual revenues of US telehealth players = estimated **$3 billion**[3]
  - Post-COVID-19 = potentially **$250 billion** in care could be virtualized[3]
  - **New regulations** for Medicare and Medicaid
  - Adoption by providers and patients

- **What has to happen?**
  - **Improved information** exchange
  - **Broader access** and integration of technology
  - **New models** and ways of working with technology providers, clinical providers, plans and members

[1] McKinsey & Company, "Understanding the hidden costs of COVID-19's potential impact on US healthcare", Sept. 4, 2020; [2] GlobalMed, "Why Telemedicine, Why now?", Sept. 3, 2019;
[3] McKinsey & Company, "Telehealth: A quarter-trillion-dollar post-COVID-19 reality?", May 2020

Early Impacts of COVID-19

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Early Impacts To The Organization

Advantasure provides technology and services for our health insurance and health care provider clients. Our work is centered around improving member health outcomes and client business performance. A key value driver is our ability to work with members and health care providers.

COVID-19 interrupted that. We had to quickly mobilize how we do what we do to mitigate this disruption.

- **Quickly pivoted our technology and service provision models** to find alternate ways to reach members and providers to complete critical work
- **Mobilized our associates** to work remotely, expanded communications plans to assure business continuity and associate well being.
- **Found exciting ways to connect** and enhance our working relationships to foster employee engagement.
- **Developed COVID-19 work plan** to track incoming regulatory information, change processes and provide guidance for our clients to help advocate for regulatory changes to mitigate impact of COVID-19.

Early Impacts To The Organization

- Analyzed CMS guidance on 2021 Star ratings to quickly assess the impact for clients and create and share multiple client-facing and executive views
- Developed initial estimates on the impact of COVID19 to Risk Adjustment revenue for all RA clients and worked with client actuary teams to reforecast multi-year budget projections
- Developed and executed a survey of employee skills to facilitate decisions connected to potential staffing re-alignment (e.g., protect work currently vended, absorb new work created by COVID-19, etc.)
- Mobilized vendor partner relationships to assure each had a continuity plan and closely monitor performance. Vendor partners largely had significant remote capability and performance was not materially impacted.

Early Impacts Quality Programs

- ✓ Conducted Member Wellness Outreach to check-in with members and let them know we were here for them, provide information on telehealth options, the 24-hour nurse line, and a text program for COVID-19 updates relevant to their location. In-home test kits were also offered to provide additional options for screenings.
- ✓ Surveyed members, 84% of which said that they appreciated the outreach
- ✓ Added additional safety protocols to initiatives with direct member contact such as mobile screenings, service centers, and in-home visits. Provided peace of mind information on actions we were taking such as additional cleaning and sanitizing, and new procedures to allow social distancing and waiting for your appointment in your car.
- ✓ Added COVID messaging to materials as appropriate, encouraging members to leverage resources available to them and notifying them of enhanced benefits due to the pandemic.
- ✓ Expanded capacity for alternative sites of care (mobile screenings, in-home kits) to ensure members had options for services, and expanded care outreaches and assistance with appointment scheduling.
- ✓ Reinforced member incentive opportunities to encourage completion of services including in-home options.

Early Impacts Risk Adjustment Programs

- ✓ Pivoting to EMR access for retrospective coding activities (over 60% of all physician EMRs)
- ✓ Pivoting to remote physician engagement & education activities through PHI secured remote exchange of clinical diagnosis information
- ✓ Repurposing our physician engagement coordinators for COVID-19 related activities (member outreach, regulatory processes, analytics, etc.)
- ✓ Pivoting to an accelerated launch of the electronic physician engagement program through data exchange of suspected conditions directly into the physician EMR
- ✓ Working closely with our health plan actuary and finance teams to reforecast revenue projections and establish modeling approach for COVID-19 impact
- ✓ Evaluating physician telehealth capabilities and designing a program to enhance this activity

Early Impacts Risk Adjustment Programs

Additional steps taken to adjust operations and mitigate impact well into the shut down and then after re-opening:

- ✓ Launched the electronic EMR solution
- ✓ Supported telehealth in home assessments, physician visits through incentives and technology
- ✓ Monitored state re-opening status and designed a re-entry plan for our physician engagement program

Early Impacts Health Management Programs

- ✓ Deep dive review of the business continuity plan with the team.
- ✓ Review of most recent CDC guidelines by medical directors and clinical team. Ongoing review and team training/education as additional information becomes available.
- ✓ Implemented specific COVID-19 reporting to facilitate proactive outreach to members with confirmed diagnosis or suspected exposure.
- ✓ Reinforcement with Customer Service and 24x7 Nurseline of referral workflows to ensure timely assistance for members with questions, concerns, etc.
- ✓ Continued review and interpretation of COVID-19 CMS guidance internally and with clients.

Early Impacts Health Management Programs

Additional steps taken to adjust operations and mitigate impact well into the shut down and then after re-opening:

- ✓ Care Managers dedicated to ongoing member outreach with confirmed diagnosis or suspected exposure.
- ✓ Social worker dedicated to help connect impacted members with needed social/community support.
- ✓ Re-evaluation of collaboration/linkages with Behavioral Health resources and supports.
- ✓ Ongoing evaluations and adjustments to resources/workflows operating in a 100% remote environment.

POLL QUESTION #1

Catapult to Change

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Catapult To Change – Communications

- **Associates** – Creation of centralized communications hubs for reports and materials
- **Associates** – Information Technology teams quickly expanded technologies like Zoom and Microsoft Teams, greatly expanded use of video vs voice only
- **Associates** – Interdisciplinary workstreams that covered all functional areas of the business to coordinate and collaborate on responses
- **Clients** – Communicated regarding COVID-19 related CMS guidance, anticipated impacts, and interpretation. Additionally we provided ongoing updates regarding implementation progress.
- **Membership** – Increased training of our teams that interact with members to help facilitate COVID-related member education
- **Membership** – Proactive outreach to members with confirmed diagnosis and suspected exposure
- **All Parties** – Update of website and network management/relations teams on key regulatory changes to prior authorization process related to COVID. Also allowed for prior authorization extensions.

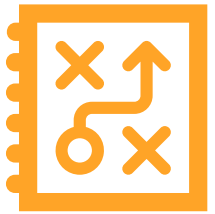
Catapult To Change – Support

- **Associates** – Created and implemented creative ways to maintain connection across our employee base
- **Associates** – Rolled out additional educational/training content for employees to help navigate working in a remote environment, stress management, and other remote learning/training opportunities
- **Associates/Members** – Redeployed some staff (Provider Engagement Coordinator's) to provide support for member outreach, analytics and other tasks while they could not work onsite with providers
- **Providers** – We restructured work processes for provider offices when we could not be on site and when they were increasing the use of telehealth
- **Clients** – Advantasure worked quickly to make adaptations needed for reimbursement, access, monitoring and other changes

Catapult To Change – Cultural Change

- Improved capacity to connect and deliver online with clients
- Strengthened culture of innovation
- Strengthened relationships with vendors and partners as we collaborated to meet needs
- Implemented workgroups to leverage lessons learned beginning mid-year 2020
- Continue to build on learnings from COVID-related member outreach and evaluate and integrate additional clinical and social solutions
- Continue to reinforce to members with chronic conditions the importance of ongoing management of their conditions to mitigate the adverse cost of care impact of deferred/delayed care
- Continue to explore how to better leverage technology to engage members
- Continue to expand analytics
- Ongoing focus on training, performance, and continuous improvement

Catapult To Change – Long Term Strategies



- Identified changes in expectations as a result of COVID impacts:
  - Customers want more self-service, automation, contactless connection and electronic transaction options and reporting
  - Need ongoing support for telehealth and expansion of telehealth services
  - Need even more reporting capabilities and options to track data and monitor performance
  - Need to continue strong and flexible support for provider engagement and care management solutions
- Continue to build integrated AI and predictive analytics capabilities.
- McKinsey identified three core categories for Virtual Health: Telehealth, Digital Therapeutics, Care Navigation

Regulatory Changes

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Regulatory Changes Risk Adjustment

REGULATORY CHANGE	DESCRIPTION
Reprioritization of PACE, Medicare Parts C and D Program, and Risk Adjustment Data Validation (RADV) Audit Activities	CMS suspended RADV activities related to the payment year 2015 audit and will not initiate any additional contract-level audits until after the public health emergency has ended.
Applicability of diagnoses from telehealth services for risk adjustment	Diagnoses resulting from telehealth services can meet the risk adjustment face-to-face requirement when the services are provided using an interactive audio and video telecommunications system that permits real-time interactive communication.
Medicare Advantage and Part D Plans: CMS Flexibilities to Fight COVID-19	CMS is reprioritizing scheduled program audits and contract-level Risk Adjustment Data Validation audits for MA organizations, Part D sponsors, Medicare-Medicaid Plans, and Programs of All-Inclusive Care for the Elderly organizations.

Regulatory Changes Quality/Health Management

REGULATORY CHANGE	DESCRIPTION
Medicare and Medicaid Programs; Policy and Regulatory Revisions in Response to the COVID-19 Public Health Emergency (Interim Final Rule)	The IFR suspends reporting requirements for Star Ratings in 2020, allowing the CMS to continue to use their 2020 scores.
Important Information on 2020 Data Validation of Medicare Part C and Part D Reporting Requirements Data	CMS is suspending the 2020 Data Validation of 2019 Part C and D reporting requirements data, with the exception of data for the following reporting sections: Part C Special Needs Plans (SNPs) Care Management and Part D Medication Therapy Management (MTM) Programs. Data submitted for these two reporting sections are the basis for two measures used in the 2021 Star Ratings, which will be used for 2022 payment. *No final regulation associated with this, as it was an HPMS memo distributed directly to plans.
2020 Medicare Health Outcomes Survey (HOS) and HOS-Modified (HOS-M)	CMS commenced the 2020 Health Outcomes Survey (HOS) and HOS-M surveys in mid-August (no specific date noted).
Laboratory Improvement Amendments (CLIA), and Patient Protection and Affordable Care Act; Additional Policy and Regulatory Revisions in Response to the COVID-19 Public Health Emergency (Interim Final Rule, CMS-3401-IFC)	CMS adopts changes to its extreme and uncontrollable circumstances (EUC) policy within the MA and Part D Star Ratings program to account for the fact that COVID-19 has affected the entire country.
Reporting Requirements for HEDIS® Measurement Year (MY) 2020, HOS, and CAHPS® Measures, and Information Regarding HOS and HOS-M for Frailty	This memo contains the Healthcare Effectiveness Data and Information Set (HEDIS) measures required for submission on June 15, 2021, by all Medicare Advantage Organizations (MAOs) and other health plan organizational types as designated by CMS.
Medicare and Medicaid Programs, Clinical Laboratory Improvement Amendments(CLIA), and Patient Protection and Affordable Care Act; Additional Policy and Regulatory Revisions in Response to the COVID-19 Public Health Emergency (Interim Final Rule, CMS-3401-IFC)	Set new requirements for testing in long term care facilities, expanded use of telehealth codes, and reporting information from hospitals and CAHs.

POLL QUESTION #2

Telehealth

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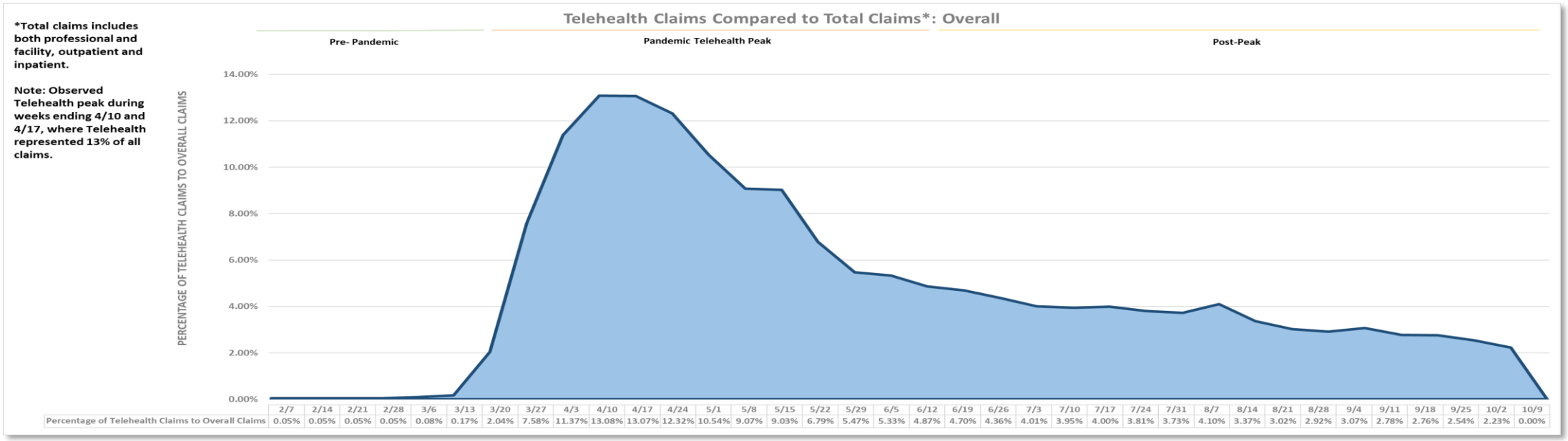
Telehealth

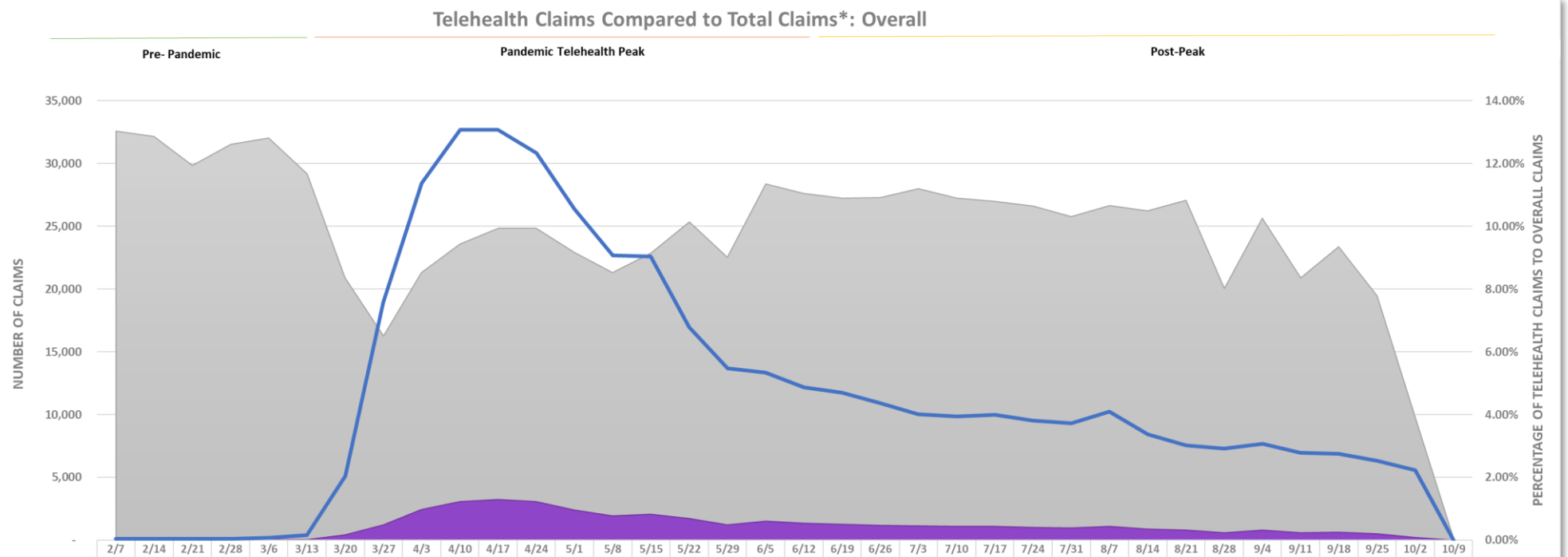
We observed Telehealth claims as a function of all claims **increase by over 12,000%** from early February / March (0.07% of all claims were Telehealth) to peak Telehealth period of late March - May (8.51% of all claims were Telehealth)



Telehealth

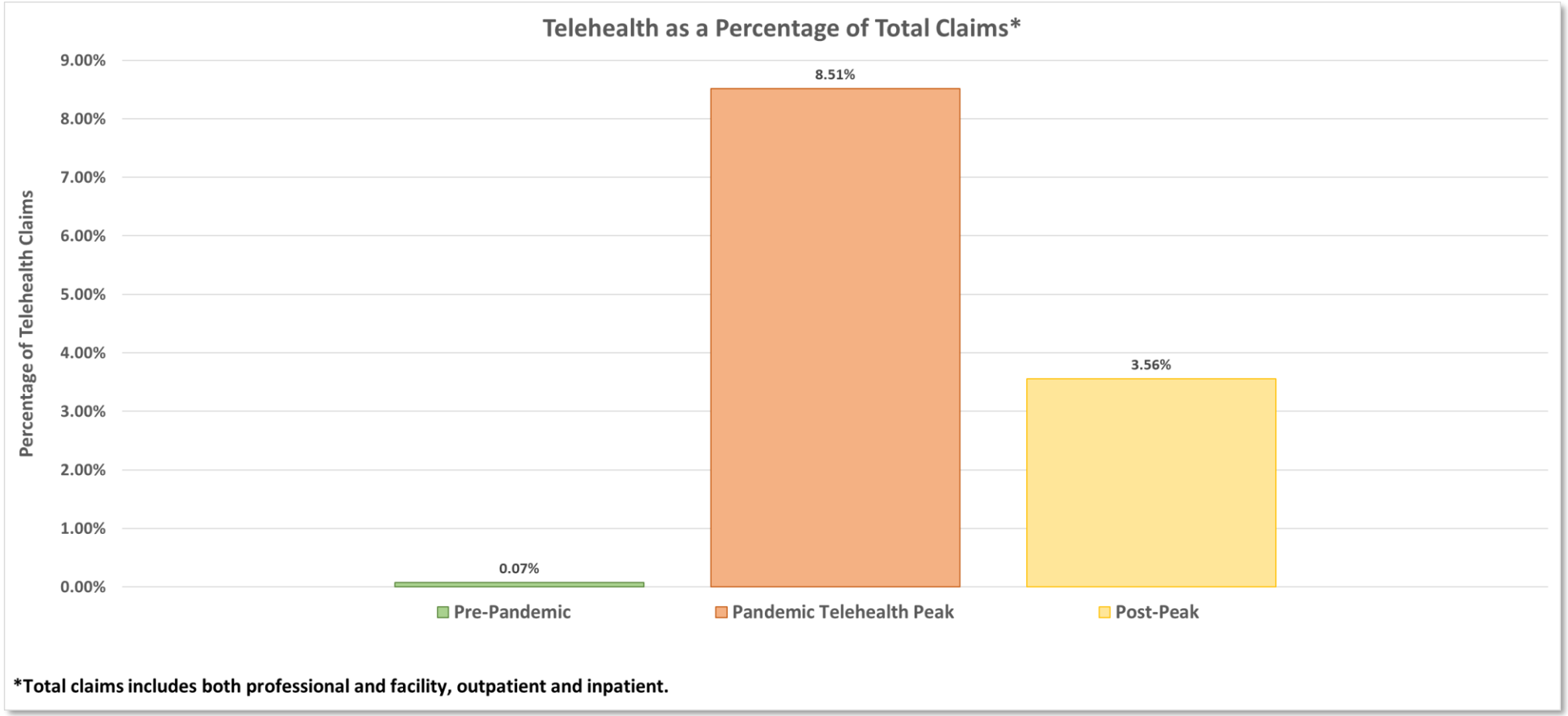
*Total claims includes both professional and facility, outpatient and inpatient.

Note: Observed Telehealth peak during weeks ending 4/10 and 4/17, where Telehealth represented 13% of all claims.



	2/7	2/14	2/21	2/28	3/6	3/13	3/20	3/27	4/3	4/10	4/17	4/24	5/1	5/8	5/15	5/22	5/29	6/5	6/12	6/19	6/26	7/3	7/10	7/17	7/24	7/31	8/7	8/14	8/21	8/28	9/4	9/11	9/18	9/25	10/2	10/9
Total Claims Received	32,583	32,137	29,851	31,524	32,037	29,149	20,904	16,266	21,328	23,600	24,822	24,830	22,918	21,315	22,854	25,337	22,521	28,355	27,600	27,254	27,262	27,980	27,221	26,999	26,613	25,775	26,638	26,238	27,073	20,029	25,660	20910	23357	19,473	9,696	159
Telehealth - All Procedures and Diagnoses	16	16	15	16	27	49	426	1233	2426	3086	3245	3060	2416	1934	2,064	1,720	1,233	1,512	1,343	1,280	1,188	1,121	1,075	1,079	1,013	962	1,091	885	818	585	787	581	644	494	216	0
Percentage of Telehealth Claims to Overall Claims	0.05%	0.05%	0.05%	0.05%	0.08%	0.17%	2.04%	7.58%	11.37%	13.08%	13.07%	12.32%	10.54%	9.07%	9.03%	6.79%	5.47%	5.33%	4.87%	4.70%	4.36%	4.01%	3.95%	4.00%	3.81%	3.73%	4.10%	3.37%	3.02%	2.92%	3.07%	2.78%	2.76%	2.54%	2.23%	0.00%

Telehealth



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Q & A

Thank You