TCS HEALTHCARE™
TECHNOLOGIES

CEO PERSPECTIVE

The IT Factor: Years of Study Reveal Healthcare Trends

Rob Pock, Founder & CEO, TCS Healthcare Technologies

Over the past six years, a dynamic team of experts in the care management field has researched how health information technology (IT) trends are influencing the practice of case management (CM) and population health management programs. The *Health IT Survey Series,* which took place in 2008, 2010, and 2012—was designed to identify and analyze the primary trends in health IT systems, particularly care management software applications and specific health IT system functionality within those applications. More than 1,500 individuals participated in one or more of the three bi-annual surveys.

In 2013, the research team analyzed the results of all three surveys, revealing dozens of insights into the evolution of health IT applications and its impact on case managers and other providers. A nine-part report series was published over the past year that not only examined the most current results, but tracked key IT trends since 2008. To the best of our knowledge, this is the most in-depth study of care management software applications and functions ever completed. The findings are now available online at *www.tcshealthcare.com.*

CLINICAL INSIGHTS

Targeting High-Risk Patients through Population Health

Debb Keller, RN, BSN, CMCN, Director of Client Services, TCS Healthcare Technologies

There have always been substantial gaps in healthcare services for the higher-risk populations. Despite the best intentions of structure managed care programs introduced as early as the 1970's, these gaps persist.

This isn't breaking news—over the past two decades, the term "vulnerable populations" has gained prominence in the healthcare industry. Messaging in the late 1990s to early 2000s was consistent: Certain populations are at greater risk because of who they are and where they live, regardless of their actual health condition.
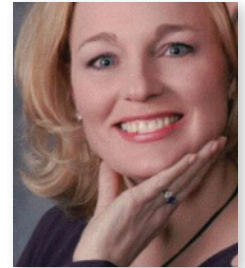
Of course, along with evolving healthcare trends come new buzzwords. One of the most common is Population Health Management (PHM), a concept that has made significant inroads during the emergence of integrated delivery systems such as accountable care organizations, patient-centered medical homes and hospital-based readmission prevention programs.

As a result, the practice of case management is evolving to accommodate some of these new opportunities. The emerging PHM approach overlaps significantly with existing care management programs, but

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also includes additional tactics to improve the clinical and financial outcomes of the targeted populations. As more complex care management interventions and evolving PHM strategies are deployed and integrated, case managers directly engaged in population health activities with patients need to understand the changing landscape.

The PHM Model

PHM aims to improve health outcomes by providing better access to care, improving the quality of care, and increasing preventive care. In doing so, PHM has the potential to improve the entire health care system while reducing costs.

PHM is defined as, "The health outcomes of a group of individuals, including the distribution of such outcomes within the group." (Kindig D, 2003) The PHM model involves coordinated care efforts that go beyond managing specific "cases" or "situations." It also includes improving the health outcomes of *populations* by providing a spectrum of services directed at behavioral change and healthy lifestyles to obtain optimal outcomes.

The model is based on utilizing a team of caregivers, including case managers, attending physicians, other providers and family members. Populations and individual patients are targeted across a wide range of medical conditions and social and physical environments. The flexibility and comprehensive nature of the PHM approach is one of its hallmarks.

Population health management is now more important than ever due to shifting reimbursement strategies, such as performance-based compensation. For example, hospital revenues are moving from inpatient care to outpatient, and physician reimbursements are transitioning from individuals to entire patient populations, and from volume to value. For a PHM program to be successful, stakeholders must leverage advances in technology such as varied forms of communication, provide culturally competent support services, and identify relevant metrics for a continuous evolution that fits the needs of the population being served.

Healthcare Technology Advances

In recent years, healthcare technology has grown in its ability to easily identify vulnerable populations. This capability has resulted in improved development and performance of interventions to manage health risk associated with access barriers. Advances in healthcare technology have been an integral part of making the management of these at-risk populations possible.

For example, through the use of simple algorithms, care management solutions can flag patients as "at-risk" due to geography, and ensure the member is connected to a provider to receive appropriate intervention.

Two of the most dramatic examples of using technology to reach patients with poor accessibility to care are the implementation of telemedicine and telehealth. These terms are often considered interchangeable, but they are not—telemedicine is the remote delivery of healthcare services via technology, while telehealth is a broader term for using technology to advance medicine, such as advanced practitioner training, continuing medical education and delivery of non-healthcare services.

Leveraging remote monitoring, smart phones and wireless communications also can help optimize PHM strategies and outcomes. With the growing reliance on electronic health records, telemedicine platforms and technology applications to promote affordable, high-quality, person-centered healthcare, a better understanding of the new mobile environment is now a necessity.

PHM information technology programs rely heavily on informatics and data analytics to identify and measure the effectiveness of population-based interventions and help promote an interconnected healthcare system. Being able to aggregate and summarize patient health histories, along with the creation of detailed care plans, is essential to managing the ongoing care of the targeted individuals within a group.

Care managers must have access to IT systems that can support the PHM model, including implementing risk-assessments that help create customized care treatment plans, promoting automated workflows and documentation, stratifying opportunities to identify and manage targeted populations, and tracking/reporting financial and clinical outcomes—among other capabilities. It also will be nearly impossible to provide the reporting these programs require without the use of IT systems.

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Enhanced Communication

Dozens of factors go into the design and implementation of a successful PHM program. Of course, face-to-face meetings and telephonic interactions will remain indispensable, but leveraging emerging communication assets are also important. Easy tools are necessary to encourage patient education, engagement and self-management.

For instance, millions of patients use the Internet to review test results, schedule appointments, get health information, and email their physicians. The rise in social media interactions to support patient health is another rapidly expanding communication trend. Similarly, text messaging, email, online video chat, VOIP-based telephone systems, and other communication channels will increase our ability to stay connected with family, caregivers, providers and others.

Leveraging remote monitoring, smart phones, and wireless communications also can help optimize PHM strategies and outcomes. With the growing reliance on electronic health records, telemedicine platforms, and technology applications to promote affordable, high-quality person-centered healthcare, truly understanding the new mobile environment is now a necessity.

Changing Mindsets

The Patient Protection and Affordable Care Act has the potential to improve access to healthcare, and while the approaches to increase the number of insured Americans varies, most people believe everyone should have access to healthcare. The enactment of the Affordable Care Act has exposed many people to previously unknown healthcare issues.

The Office of Minority Health and Health Equity defines vulnerable populations as groups that fall either outside society norms or do not engender much awareness by society. For example, the push for wider understanding and acceptance of individuals within the lesbian, gay, bisexual, transgender and questioning (LGBTQ) society has helped diminish barriers to appropriate healthcare. Health risk assessments and health surveys now ask specific questions to align healthcare to the gender and sex of the patient.

Efforts to address the needs of other populations, with historically limited access to healthcare, has ensued. For example, the push to educate our broader society about

HIV/AIDS has reduced the stigma of the disease that for many years forced patients to seek treatment far from their homes, or not at all.

Unfortunately, while significant gains have been made to remove the stigma of behavioral health disorders, many barriers remain including social barriers to patients seeking and receiving behavioral healthcare. Certain serious mental illnesses such as schizophrenia are often identified as a vulnerable population for this reason.

Conclusions

Although vulnerable populations have always existed, the disparities in the healthcare they receive have been under the radar. The previous division of people without health insurance—low-income families, and racial and ethnic minorities and the rest of society—is beginning to shrink as healthcare experiences a paradigm shift to a focus on population health management. The needs of these vulnerable groups are now being addressed. If society strives to identify the people most at risk and invests in building the tools and talent to take care of them—and more importantly for them to take care of themselves—the definition of "society" is retained.

In healthcare, this means continuing to develop technology that helps address barriers to healthcare access, enhancing communication outlets and remaining educated about vulnerable populations. ■

1 Kindig D, Stoddart G. What is population health? American Journal of Public Health. 2003; 93:380–383. [PMC free article] [PubMed]

The 24th Annual CMSA Conference and Expo—Come See Us!

Join us in Cleveland, OH, June 17–20 at the Cleveland Convention Center & Global Center for Health Innovation. TCS is looking forward to the seminars, educational sessions and networking with case managers and other industry professionals.

The Case Management Society of America's Annual Conference is designed to deliver clinical, professional, regulatory and personal growth for the present and future of cross-continuum case management. Come by and see us at **booth 231**—we would love to chat! ■

CLIENT SPOTLIGHT

Jai Medical Systems Successfully Implements *ACUITY Advanced Care™* Management System

Jai Medical Systems (JMS), a Medicaid Managed Care Organization (MCO) that provides Medicaid health insurance benefits for the State of Maryland, has successfully implemented TCS Healthcare Technologies' *ACUITY Advanced Care™ (ACUITY)* care management system to support their managed care organization model. *ACUITY* is a patient-centered care management software system that performs integrated utilization, case and disease management.

After a comprehensive evaluation and selection process, JMS chose TCS Healthcare Technologies over other care management software vendors for several reasons. "As a managed care organization, we are continually looking for ways to improve patient outcomes," says Chardae Buchanan, RN, director of utilization management for JMS. "Our goal was to improve the integration of our current utilization review and case management systems and increase reporting capabilities while integrating evidence-based clinical data. It was important to find a system that could be easily customized to meet both our internal and external requirements. *ACUITY* met those needs."

According to Leah Allen, JMS director of quality assurance, "*ACUITY* provides improved systems integration for our organization that has improved our overall care management capabilities. With the help of the TCS implementation team, we are refining the product more and more each month. The largest benefit has been the ability to simplify our internal processes."

Deborah Keller, RN, BSN, director of client services for TCS, says the implementation team is comprised of members with technical and managed care backgrounds. "We understand both ends of the spectrum and work with our clients every step of the way," she says. "Having both the clinical and technical expertise really differentiates TCS from competitors."

Christine Charlton, JMS' director of system management concurs. "The TCS implementation team was more than willing to work with us on an extremely condensed timeline," she says. "The flexibility of *ACUITY* allows us to configure workflow processes and business rules to meet our requirements. TCS was accommodating and helpful during the implementation."

According to Jai Seunarine, CEO of JMS, "The *ACUITY* product helps us continue to improve the services we offer to our members, while helping us meet our mission objectives. We selected *ACUITY* based on its superior service offering and cost advantage."

According to TCS Founder and CEO Rob Pock, the TCS clinical and technical staff worked closely with the JMS implementation team to ensure the timeline and technical criteria were addressed. "We have a passion for care management," he says, "which means working with our clients throughout the implementation process to provide training, configuration and interfaces that ensure the technology, processes and clinical content meet their needs." ∎

ACUITY ANYWARE

ACUITY AnyWare Version 7.00 Available Now!

TCS has rebuilt *ACUITY* AnyWare's (AAW) interface from the ground up, featuring a dashboard of activities that allows for easier navigation, improved search functionality and workflow efficiency.

The tracking and support of patient case management has never been more user friendly, with less time needed to become proficient in using the application, and in return, improve and report clinical outcomes. AAW Version 7.00 is feature-packed and easy to use. ∎

CEO Perspective

Key Trend Highlights:

- **Social Media & Wireless Communications on the Rise.** Our research shows increased use in emerging social networking applications by case managers, including Facebook, as well as use of text messaging, remote wireless monitoring and similar applications to engage patients.

- **CM Software Functionality Varies.** All three surveys asked the respondents about their health IT system functions, including workflow automation, creation of care plans, population stratification and predictive modeling, clinical and financial outcomes reporting, time management tracking, and reporting capabilities. In most cases, those respondents reported that their CM software functionality increased overtime, but in some areas, certain key functions appeared to lose some traction.

- **Transition of Care (TOC) Programs in Full Swing.** The importance of managing patients and populations over a period of time and in various settings is now a national health priority. In fact, about half of the survey participants reported using one or more software resources to support TOC programs.

- **Patient Engagement Strategies Expand.** According to the most recent research, increased use of mobile devices and technology-driven applications is driving the expansion of patient engagement strategies, allowing providers and patients access to new tools that enrich communication channels. The research also confirms that at least 70% of survey participants believe patients listen closely to their primary care physicians, specialist doctors, and advice from their case managers.

- **Challenges in IT Infrastructure Optimization.** While the research indicates a greater reliance on IT systems to support the storage and flow of data processed through various clinical and payer settings, these systems are not as well-integrated as one might expect.

- **Caseload Levels Remain High, Unstandardized.** For years, case managers have complained of inconsistent and inappropriate CM caseload sizes. Survey results appear to support industry complaints of continued inconsistent, and sometimes inappropriate, caseload sizes.

- **Moving to an Information Age.** The research took a detailed look at how case managers and others can access data trends, predictive modeling information, and other types of reports. The majority of survey respondents noted that accessing dashboards is important to support helping manage their patients' health. As case managers and other providers move into the informatics age, challenges remain, including the fact that most survey participants do not use a predictive modeling or data stratification solution.

- **Blurring the Lines between CM & EHR Applications.** One of the more interesting findings is that EHR systems may be encroaching on some of the traditional functions supported by CM software applications, and vice versa. In some ways, this is good news because it shows the increased integration of overlapping IT systems. However, this also might explain why some of the general findings show a decrease in some of the traditional case management IT functions due to the convergence with EHR applications, which have not traditionally supported population management requirements.

Final Thoughts

Without a doubt, the interface between the practice of case management and the technology platforms that support case managers will only grow in importance. Case managers and their IT colleagues must remain vigilant to make sure they are purchasing and implementing the right software at the right time, with the right functions, and at the right cost level. These findings reinforce TCS' mission to support our clients to help navigate these challenges. ∎

UP CLOSE AND PERSONAL

India Carson, Clinical Implementation Specialist

TCS Healthcare Technologies is pleased to welcome India Carson, RN, MSN, to the team. India is looking forward to sharing her passion for population health management and extensive nurse informatics experience with TCS and its clients.

Originally a financial planner, India spent most of her time talking to elderly people about their healthcare concerns. "They weren't worried about investments... they were concerned about healthcare," she says. "I had compassion for them, and I wanted to do something more to make a difference." This realization led India into the field of nursing.
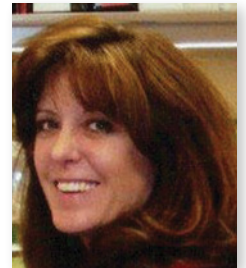
Her role as a TCS implementation specialist entails working with clients on both the technical and clinical sides of implementations. Technically, she assists with the configuration, and working with nurses to figure out workflow processes and making the system as automated and efficient as possible. India pulls from her nursing background to assist clients from the clinical perspective, helping build out the necessary reports and letters in their systems and training users prior to going live.

"Since joining TCS in November 2013, India has been a key contributor from both the technical and clinical perspective," notes Debb Keller, RN, BSN, director of client services. "Her knowledge of Special Needs Plans (SNP) in the post Affordable Care Act environment has been invaluable to TCS and our clients."

"I love working with our clients because they are on the front line, helping their members' live healthier lives," says India. "They are extremely dedicated to what they are doing, and it is a good feeling to be able to customize the tools they are using so that they can reach out to more members."

"*ACUITY* is a tremendous asset to case managers as they work towards the goal of population health management. One of the major benefits is its ability to support dual eligibility and provide health plans with the ability to authorize services separately under Medicare and Medicaid plans. This is a major differentiator for the TCS product suite," she concludes.

Outside of the office, India enjoys spending time with her family and is an avid reader. ■

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