

Care Management Solutions

Integrated care and service.
Total population health.



Our Qualifications

- Recognized as a Quality Improvement Organization-like entity by CMS.
- Multidisciplinary team of experienced clinicians.
- Customer-focused operations.
- Population identification, stratification and decision support tools.
- Powerful data mining and analytics.
- Recognized history of successful outcomes across multiple states.

Our Cost Savings Results

- \$33 million in avoided costs in the first year for a state Medicaid UM Program
- \$3.5 million in annual avoided costs through UM representing about 75,000 commercial lives
- \$500,000 decrease in claims from just 22 high-cost members in the first 12 months of the CM program
- \$1.5 million saved by decreasing re-admissions for State Medicaid CM

The phrase “the left hand doesn’t know what the right hand is doing” easily applies to healthcare. Fragmented systems make it nearly impossible for providers to have a full understanding of their patients’ needs. This creates suboptimal care that puts patients at risk and drives up the cost of services.

With Care Management Solutions from Conduent, you can connect the dots and integrate and analyze member health information in one place. We help you continuously improve the value of your health management programs by using information systems, data analytics and care management services to improve healthcare outcomes.

Our tailored solutions monitor and measure healthcare trends, costs and quality across the continuum of healthcare. That gives you a “whole person” view that breaks down the barriers to incomplete patient care and helps you deliver top-of-the-line services, empower individuals to manage their own care and manage your health program more effectively.

Care Management Services

Our Care Management program integrates utilization management, case management, disease management and advocacy services to provide a member-centered approach to managing care.

Utilization Management

We help members navigate appropriately through the continuum of care, steering them towards in-plan providers and cost-effective care options. We conduct medical necessity reviews using nationally recognized benchmarks and guidelines that result in appropriate use of benefits in access to services. When services do not meet medical necessity criteria, our physician peer reviewers can prevent unnecessary services and help achieve cost-effective management for your plan.

Case Management

Case Management identifies high-risk, high-cost members. The program promotes collaborative care planning involving the member, family and healthcare team to enhance outcomes. Care managers are skilled at integrating all aspects of care within the care continuum.

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More Savings for Your Program

- Health Plan Evaluator increased high-deductible plan elections from 5 percent to 21 percent in just three years for a self-funded employer program.
- Health Navigator identified incorrect discount calculations, leading to more than \$100,000 in refunds for another self-funded employer program.

Powerful Web-Based Solutions

Complementing our services are web-based tools that help you identify and support population health, enabling your members to manage – and stay engaged in – their own care.

Health Navigator

Our Health Navigator analytical suite can improve decision-making and measure plan results, providing a picture of your healthcare program's landscape. It integrates pharmacy and medical claims with eligibility data. You can customize benefit mappings for reporting; analyze, benchmark and model claims data which transforms your health plan data into actionable information.

Health Plan Evaluator

Health Plan Evaluator is a consumer health plan modeling tool that provides personalized, bottom-line employee cost-benefit analysis. It educates employees and helps them determine which client health plan options best meet their family's needs. It provides better understanding of overall healthcare costs.

You can gain savings through avoiding hospital admissions, ER visits and medical complications by educating members, monitoring progress and coordinating with providers for early intervention, including wellness visits, preventive screenings follow-up appointments and more.

Condition and Disease Management

Our Condition Management program provides expertise in targeting members with chronic health issues who aren't managing their health needs well. Because better self-management makes a difference in quality of life, we support and empower members to make better health and lifestyle choices that improve their health, reduce their risk of complications and exacerbations and reduce medical costs.

24/7 Nurseline

This service offers members toll-free access to Registered Nurses who offer advice using evidence-based guidelines. It also provides Rapid Triage Screening to quickly identify and respond to serious health issues, helping members make informed healthcare decisions and avoid unnecessary emergency room visits.

Advocacy

Sorting through the multiple providers, services and claims found in a health plan can be confusing. We can help your members with unbiased navigational support which makes them better healthcare consumers. Using highly experienced and trained professionals, Health Advocacy helps your members navigate around barriers and concerns regarding their healthcare benefits.

Absence Management

For employers, we can also help control absence-related costs by determining the medical necessity of proposed leave times. If an absence is needed for FMLA and short-term disability, we establish appropriate health goals and coordinate the leave process. Once your employee meets their goals, we facilitate their return to work.

Improving Health through Integrated Care

Your healthcare program's ultimate goal is improving population health. We help you achieve it through our integrated utilization and care management programs, population health management solutions and clinical expertise. With a clearer picture of your members' needs and a more efficient way to gather and share information with other healthcare systems, you empower people to live healthier lives – one member at a time.

You can learn more about us at www.conduent.com/caremanagement.

