

CSG Medicaid Leadership Academy

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Focusing on life outcomes and knowledge development, skilled professionals with support from digital assets (data, applications, AI) proactively respond to member social and health needs

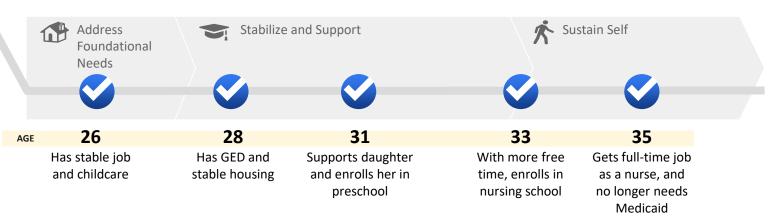




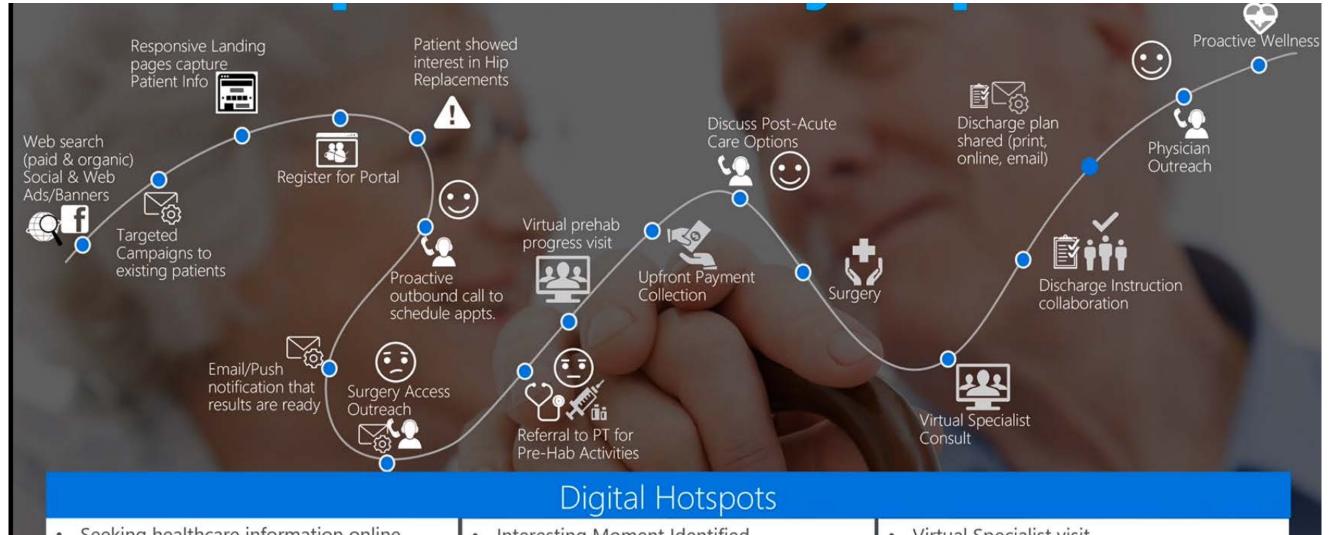
Lori is a **25 year old, pregnant single mother living in** transitional housing. She suffers from anxiety and post-traumatic stress disorder stemming from childhood abuse. She didn't graduate high school and can only find part-time, minimum wage jobs with rotating shifts. She frequently has difficulty finding child care to cover her unpredictable working hours and has trouble holding a steady job as a result. Lori frequently eats fast food because it's cheap, convenient, and familiar. Combined with lack of exercise, Lori's poor diet has contributed to obesity and gestational hypertension.



TOMORROW - Resilient, Supported and Self Sustaining



Journey map's identify areas where "predictive analytics" s can be applied to build trust, transfer knowledge and create sustainable change with each member in a unique and meaningful way



- Seeking healthcare information online
- Proactive outreach for existing and potential high Urgent Care Utilizers
- Campaign Automation
- Portal Registration

- Interesting Moment Identified
- Proactive outreach to patient (acquisition, surgery access, payment, PAC options, etc.)
- Virtual & Tele-health visits

- · Virtual Specialist visit
- Discharge instruction collaboration and omni-channel distribution
- Automatic outreach to physician to update on patient's progress
- Personalization on patient portal

Unique Persuasion Profiles developed from enriched longitudinal data and machine learning tools inform the "next best action"



STEP 1: Aggregate

Traditional and non-traditional data, ethically, to create a unified member/patient record for clinician and patient access



Traditional Healthcare Sources

EHR, Claims, Case Management, Labs, Pharmacy, Clinical Trials, patient portal



Ecosystem Sources

Social sources, Bio-metric, Digital Wellness & Prevention, HIE, Integrated Clinical Networks



- ✓ Member Sources

Apple Health, Google Fit, PHR, Alexa



Connected Care Sources

Patient-Reported Outcomes, Glucose Monitor, Cardiac Monitoring, Medication Adherence



STEP 2: Curate

A personalized health blueprint from a library of health solutions with next best actions



Enriched Longitudinal Health Record

Unified and enriched w social source data, Consumer / Behavioral / Preferences



Co-Development Analytics Platform

Develop predictive, prescriptive and AI based models



Commercial App Development Platform

Low Code, Pro Dev, human-centered design UX/UI, emerging UI



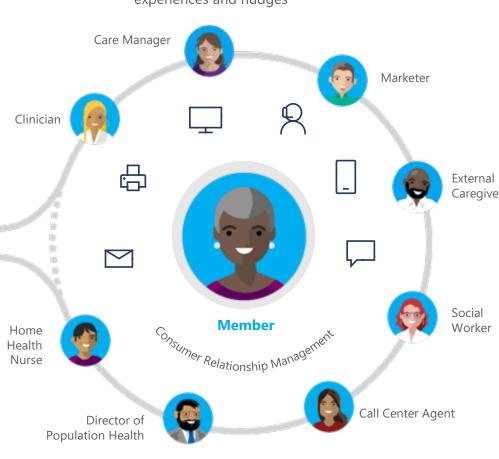
Solution Store

Personalization Engine, Behavior Change, Next Best Actions



STEP 3: Orchestrate

Patient/Member, Clinician, and Caregiver experiences and nudges



The future journey and experience of a high-risk pregnancy patient

Gj

Using a **Teams** Telehealth conference, Jim and the Physician, Dr. Jeffries, can work with the Patient to keep track of recommendations









Power BI

Power BI dashboard is referenced to find a local obstetrician, using **Caritas Atlas**, who has the best outcomes for high-risk patients





Lori receives outreach from

Jim, via phone call to set up

regular, weekly

appointments

Key aspect of Dr. Jeffries' plan is for Lori to monitor weight gain and the potential for gestational diabetes

Caritas provides an internetconnected scale and blood glucose monitoring device that collects Lori's weight and blood glucose levels throughout her pregnancy and send data to Caritas through the using Azure FHIR IOMT API





One recommendation is to join a mothers' support group, made up of women being treated for OUD (opioid use disorder) who are pregnant or who have recently given birth. Lori joins the group on a weekly **Teams** video chat, as part of her OUD treatment plan



Lori attends natural childbirth, contraception, and lactation classes using **Teams** Telehealth to ensure better outcomes for mother and baby and lower overall healthcare costs



Lori is connected to a dietician on the Caritas mobile app who helps her with food choices and receives food delivered through a partner on Caritas health platform





EXAMPLE



Because she is at risk for postpartum depression, Lori is prompted on her mobile app, every 2 weeks with a 5-question mental health questionnaire







Eliza is at risk of withdrawal; she is monitored in the hospital for 5 days outside the NICU; her care team monitors and collaborates on her status using **Teams**

At her first post-partum treatment, Lori wants to decrease her buprenorphine dose since her cravings have diminished. Dr. Jeffries develops a 3-month plan. Lori continues to attend the new mothers' support group.

In her last trimester, Lori's buprenorphine was increased because of cravings; this is a common occurrence in pregnancy, the **AI** pathway anticipated the possibility of such an increase and did not require prior authorization for the dosing change

Lori delivers an

ounce baby girl, Eliza, through normal delivery.

An IUD is placed

8-pound 5-

in-utero

immediately

As a learning organization, Caritas ingests all longitudinal data, complex data from multiple sources, onto their health platform, to be able to continue to use sophisticated analytics that drive the best maternal and neonatal outcomes. The goal is to ingest such data in order to continuously update and modify algorithms given new treatments (like for Hepatitis C), new data inputs (as more IoMT devices come online), and new knowledge (from the medical literature) in order to create informed, personalized patient pathways.