

FOR IMMEDIATE RELEASE

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## **Three Critical Skills Help Health Plans Bid, Win And Deliver On Government-Sponsored Managed-Care Contracts**

*Performance Clinical Systems and Optima Health Show that Agility, Efficiency and Compliance are the Secrets to Success for Health Plans in Medicare and Medicaid*

**VIRGINIA BEACH, Va. (March 7, 2019)**— Today marks the 18-month anniversary of the Optima Health and Commonwealth of Virginia contract go live to provide managed long-term services and supports (MLTSS) to Medicaid recipients through the state's Commonwealth Coordinated Care Plus program. Optima Health is the health insurance division of Norfolk, Va.-based Sentara Healthcare.

Optima Health partnered with Performance Clinical Systems (PCS) on the project after determining that the existing case management platform used by Optima Health could not accommodate its model of care (MOC) in the timeframe required by the MLTSS program. Optima Health already had been successfully using PCS' cloud-based care management platform, Symphony, to support new member assessments for its Medicare Advantage plan. Symphony made it possible for Optima Health to bid, win and deliver on its new MLTSS contract.

"Without Performance Clinical Systems and the Symphony platform, we would not have been in a position to win, or even respond to, the MLTSS RFP," said Thomas G. Lundquist, M.D., senior vice president and Chief Medical Officer, at Optima Health.

In the 12 months since winning the contract, PCS and Symphony have been instrumental in fulfilling obligations by Optima Health to the state and, more importantly, to the needs of program enrollees. "PCS has been a great partner to Optima Health. They have worked closely with our team to configure the platform for our model of care and address the detailed needs of Virginia's MLTSS program and the complex populations it represents," said Randy Ricker, vice president for MLTSS at Optima Health. "Now we are leveraging their platform to optimize our operations further to deliver the best services to these members with even greater efficiency."

Symphony gave Optima Health—and can give any health plan seeking government managed-care contracts—the three skills needed to succeed under a value-based care contract: agility, efficiency and compliance.

"These skills are important for any health plan to have," said Brian O'Neill, CEO of PCS. "But they're necessities for health plans with value-based reimbursement contracts with government agencies, which require highly prescriptive member engagement models and reporting, with the goal of driving improved outcomes, lower costs and better member experiences."

Here's why, according to PCS and O'Neill:

**1. Agility.** The request-for-proposal (RFP) process for government managed-care contracts from the release of the RFP to the response deadline is a matter of weeks. Virginia's Department of Medical Assistance Services (DMAS) issued its MLTSS RFP on April 29, 2016, with a response deadline of June 30, 2016. Optima Health retained PCS to provide a platform to support the requirements for the MLTSS contract. PCS worked with Optima Health to optimize its new MOC to support the MLTSS program and configure Symphony to ensure an efficient workflow design aligned with the new MOC. In just four weeks,

PCS configured a demo environment using Symphony for Optima Health's MOC, and Optima Health was able to demo its MOC to the state as part of the RFP process. In February 2017, the DMAS awarded one of six MLTSS contracts to Optima Health with a go-live date of Aug. 1, 2017. PCS began configuring Optima Health's MOC Symphony-based platform in April 2017 and completed the project in just 14 weeks for the scheduled go-live. During this process, PCS configured more than 100 custom role-based workflows for Optima Health, taking advantage of the platform's agility. The workflows included clinical modules, scenarios and unique care management/utilization management roles.

**2. Efficiency.** To win at value-based government managed-care contracts, health plans need to operate as efficiently as possible. If not, plans risk low member satisfaction, poor outcomes and missed financial goals. Symphony streamlined health risk assessments (HRAs) for Optima Health, including screening for social determinants of health. The system tailors HRAs to each member's unique health and demographic information. Leveraging Symphony's efficiency, Optima Health care coordinators are completing an average of 3,500 member assessments per month. Symphony then automated the distribution of care management assignments based on care coordinator licensure and skill-set levels. That frees up time for more advanced and higher-cost clinicians to care for members who need specialized interventions. Symphony gave Optima Health a platform through which 380 multidisciplinary care team members can communicate and collaborate on treatment plans based on data captured by the system. These care team members include care managers, care coordinators, social workers, physicians, clinical subcontractors, and non-clinical member service coordinators. Symphony defined roles for care coordinators in each care plan and configured workflows for each team member. Everything is coordinated with no wasted effort. Symphony also gave Optima Health a customized and scalable way to meet the clinical, utilization management, appeals and grievances documentation requirements in the contract.

**3. Compliance.** Commercial health plans that enter into Medicare or Medicaid managed-care contracts with federal and state governments take on an incredible compliance burden. They have to comply with all state and federal health regulations. They have to comply with all state and federal quality reporting requirements. They have to comply with all contractual obligations. They have to meet all accreditation standards. All require intelligent and intuitive tracking, auditing and reporting of compliance data. PCS designed workflows with Optima Health that facilitate the complete and accurate collection of all data necessary to meet all the disparate compliance requirements, including the detailed requirements of DMAS, for the Medicaid recipients being served by Optima Health in the program.

For Optima Health, the three PCS-enabled attributes—agility, efficiency and compliance—add up to great care for Medicaid recipients in Virginia at a great value for the state of Virginia. Symphony can be used by health plans to support care management and population health services under any type of commercial or government-sponsored managed-care program or contract.

### **About Performance Clinical Systems**

Performance Clinical Systems is a privately held healthcare information technology company based in San Francisco, Calif. Its cloud-based workflow accelerator platform, Symphony™, proactively manages member outreach and encounters across various roles and clinical settings within team-based care models. Algorithms tailor “on the fly” workflows based on case-specific care needs, prior member encounters, payer contract requirements, and the specific role of a care team member. This approach enables efficient and scalable member engagement models which are highly personalized. Additionally, Symphony ensures regulatory-compliant engagement and creates an electronic trail for care and contract compliance reporting. For more information, visit [www.performanceclinical.com](http://www.performanceclinical.com).

**About Optima Health**

Optima Health, based in Virginia, provides health insurance coverage to more than 510,000 members. With more than 30 years of experience, Optima Health offers a suite of commercial products including consumer-directed, employee-owned and employer-sponsored plans, individual health plans, employee assistance programs and plans serving Medicare and Medicaid enrollees. Its provider network features 26,000 providers including specialists, primary care physicians and hospitals across Virginia. Optima Health also offers programs to support members with chronic illnesses, customized wellness programs and integrated clinical and behavioral health services, as well as pharmacy management—all to help members improve their health every day. The company's goals are to provide better health, be easy to use and offer services that are a great value. Optima Health is a service of Sentara Healthcare. To learn more about Optima Health, visit [www.optimahealth.com](http://www.optimahealth.com).

**For More Information:**

Robert Murphy

Vice President, Marketing

Performance Clinical Systems

[rmurphy@performanceclinical.com](mailto:rmurphy@performanceclinical.com)

415-830-3435