

Chronic Care Management Programs Help Kootenai Care Network Reduce Costs, Improve Outcomes

Kootenai Care Network (KCN) of Coeur d'Alene, Idaho, is a large, clinically integrated network (CIN) of medical facilities across northern Idaho and Spokane, Washington. KCN has over 200 providers across more than 25 specialties and is responsible for its accountable care organization (ACO), Kootenai Accountable Care.

According to the Centers for Disease Control and Prevention (CDC), 6 in 10 adults in the United States have one chronic disease, while 4 in 10 manage two or more. It is estimated that two-thirds of the 40 million Medicare fee-for-service beneficiaries are diagnosed with more than one chronic condition. Chronic care management (CCM) is an effective practice that improves patient health outcomes and helps providers increase their revenue through several forms of reimbursement.

Kootenai has partnered with Lightbeam since 2016 to manage its population health efforts. Together, in 2020, they instituted a centralized CCM program that serves over 1,000 patients. Using Lightbeam's industry-leading analytics to organize and track utilization, in one year, Kootenai Clinic realized over \$740,000 in savings and generated \$50,000 per month in revenue for CCM billing across three contracts.

Background

Kootenai originally approached Lightbeam searching for an end-to-end solution to organize and oversee their value-based care initiatives. Kootenai manages CCM for three contracts: a Medicare Shared Savings Program (MSSP), Blue Cross of Idaho Medicare Advantage (BCID MA), and Pacific Source Medicare Advantage.

The requirements of chronic care management programs were not a struggle for Kootenai to implement, but efficient CCM is a high-standing priority for managed Medicare plans. In response, the Kootenai and Lightbeam Advisory Services teams decided to discuss better ways to leverage the Lightbeam solution to identify patients in need of the CCM program and track their financial expenditures and utilization metrics trends.



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Elena Kutko

Manager Pop Health Modeling & Analytics, Kootenai Care Network

Kootenai Care Network

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Outcomes

- 12% decrease in total medical PMPM expenditures
- 16% decrease in total professional PMPM expenditures
- 13% decrease in total inpatient PMPM expendituress
- 26% decrease in hospital admissions per thousand patients
- 15% decrease in ED visits per thousand patients
- Savings of \$740,000 in medical expenditures

Solution

Lightbeam's Population Health Management Solution & Services



Insights-Powered Action

Utilizing data aggregated within Lightbeam's various analytic platforms, Advisory Services quickly identified patients who fit the CCM program's criteria. They learned that, on average, patients who participated in CCM at Kootenai Clinic received approximately 4.5 services per patient. There were 440 "active" MSSP, BCID MA, and Pacific Source members engaged in CCM, meaning they received three or more months of CCM billed over 12 months. More than 70% of those members were engaged in CCM with Kootenai Clinic for 18 months or longer.

Lightbeam Advisory and KCN got to work on building cohorts to target specific patients, with a focused cohort of individuals with comorbid congestive heart failure (CHF). CHF affects approximately 6.2 million adults and costs the healthcare system an estimated \$30.7 billion annually.

To enhance their existing CCM program, KCN deployed what they call "nurse navigators." This team of registered nurses provides intentional patient management and engagement while remaining on top of CCM billing. Collectively, the nurse navigators at KCN logged 5,000 minutes of CCM each month, conducting telephonic management, ensuring medication adherence, setting appointment reminders, and acting as the patient's direct point of contact with any questions to avoid ER visits and admissions.

Results

Close examination of the Lightbeam metrics helped Kootenai identify a 12% decrease in total medical per-member-per-month (PMPM) expenditures, a 16% decrease in professional PMPM expenditures, and a 13% decrease in inpatient PMPM expenditures for engaged CCM patients from the calendar year (CY) 2019 to CY 2020. Additionally, these same patients saw a 26% decrease in hospital admissions per thousand patients and a 15% decrease in emergency department visits per thousand patients.

By trending these important financial and utilization metrics across 2019 and 2020, Kootenai Care Network realized an estimated savings amount of \$740,000 in medical expenditures in 2020 from the 309 MSSP, BCID MA, and Pacific Source MA members actively engaged within the CCM program for 18+ months alone. Knowing how easy it is to access and monitor the program, KCN looks forward to expanding CCM and enjoying the benefits of additional revenue and less waste.



