



June 22, 2015

The Honorable Orrin Hatch, Chairman  
Senate Committee on Finance  
219 Dirksen Senate Office Building  
Washington, DC 20510-6200

The Honorable Ron Wyden, Ranking Member  
Senate Committee on Finance  
219 Dirksen Senate Office Building  
Washington, DC 20510-6200

The Honorable Johnny Isakson  
Senate Committee on Finance  
219 Dirksen Senate Office Building  
Washington, DC 20510-6200

The Honorable Mark Warner  
Senate Committee on Finance  
219 Dirksen Senate Office Building  
Washington, DC 20510-6200

Dear Chairman Hatch, Ranking Member Wyden, Senators Isakson and Warner:

On behalf of Altegra Health, I am pleased to send our thoughts and suggestions based upon our experience improving the health of Medicare Advantage beneficiaries with chronic conditions.

## About Altegra Health

Altegra Health operates in all 50 states from 7 regional offices, as well as its headquarters in Miami Lakes, Florida, to provide a complete range of services to health plans, health plan members, and providers, including:

- **Risk adjustment:** Risk analytics, encounter reporting, and chart audit/coding solutions
- **Quality performance:** HEDIS®/quality solutions; member healthcare communications
- **Program assistance:** Identification and assisted enrollment into government-funded healthcare programs, community assistance programs, and privately-funded programs through our My Advocate™ service
- **Advisory services:** Consulting services that improve performance for health plans and providers

Altegra Health works with some of the largest health plans and providers in the nation, including:

- **Payers:** More than 150 Medicare Advantage (MA), Managed Medicaid, and Commercial Market plans
- **Providers:** Hospital systems, provider groups & integrated delivery networks
- **Other markets:** Accountable Care Organizations (ACOs), health insurance marketplace, ICD-10 transition

The mission of Altegra Health is to help healthcare organizations and their members receive the financial resources and other benefits to which they are entitled, enabling quality care at the right time, leading to improved health at a lower cost, and overall, a better quality of life. Altegra Health utilizes health plan data and Altegra Health's proprietary predictive analytics algorithms to assist health plans in delivering integrated health-related interventions that are specifically tailored to their members. In



carrying out this mission, Altegra Health is committed to maintaining the strictest regulatory compliance and data security for health plans and the members that they serve.

## **Altegra Health Recommendations**

Altegra Health's work with MA plans, providers and beneficiaries focuses on addressing the following issues that increase costs and diminish outcomes of chronic conditions:

- While many MA plans offer disease and utilization management services, they are resource-intensive and therefore are often limited to the most complex MA beneficiaries, leaving low-risk, moderate and moderately high-risk individuals to independently monitor and manage their own care, while seeking medical assistance based upon their own judgement.
- Low-income MA beneficiaries may lack resources to proactively access preventative and on-going care that prevents the escalation of chronic conditions. Both providers and MA plans may not focus on challenges of these MA low-income beneficiaries and how these challenges negatively impact their ability to engage with the broader health care system.
- Both primary care providers (PCP) and specialists are not privy to MA beneficiary conditions and care management between appointments.

Altegra Health addresses the above issues by providing a variety of services for both MA beneficiaries and providers to improve outcomes and reduce costs related to chronic condition management. These programs, which are not typically included in MA plan disease management programs, utilize multi-channel technology to remotely engage MA beneficiaries. In carrying out these services, Altegra Health complies with all relevant regulatory guidance regarding patient privacy and is committed to protecting health information provided by MA beneficiaries. Altegra Health's services:

- Educate and engage MA beneficiaries with chronic conditions, collecting information that they volunteer about their conditions on an on-going basis;
- Provide continuous clinical information from engaged MA beneficiaries to their plans and providers for review and proactive consultation;
- Provide pre-emptive alerts to providers and MA plans when conditions escalate, preventing further escalation;
- Screen and enroll MA beneficiaries in community-based programs that mitigate barriers to care, such as prescription drug co-pays and transportation assistance; this includes a self-assessment and enrollment tool available to the public, My Advocate™; and
- Proactively assists to facilitate MA beneficiary PCP appointments.

The STAR program provides MA plans with financial incentives for reaching clinical metrics that contribute to the care management of chronic conditions. However, the STAR program falls short of addressing the holistic approach needed to fully manage many chronic conditions. Additional incentive programs such as accountable care organizations (ACOs) and the dual eligible demonstrations touch limited populations and provide broad incentives, but do not specifically address chronic conditions. Incentive programs could include:



- Adjustments to the MA risk adjustment model for chronic condition management programs, including community-based programs. In Altegra Health’s work with the risk adjustment program, there are a number of opportunities to include requirements for MA beneficiary disease management and community program access within the risk model;
- Enhancements to the STAR program and the physician quality reporting system (PQRS) to include remote, continuous monitoring of chronic conditions and enrollment in community-based programs;
- Creation of a zero-sum MA plan incentive program for specific chronic condition management programs, including remote technology and telemedicine;
- Benefits for MA beneficiaries for on-going participation in chronic condition management utilizing remote technology linked to their PCP or specialist; and
- Benefits for MA low-income beneficiaries to participate in community-based programs related to chronic condition care.

Based upon its experience serving over 13 million MA beneficiaries, Altegra Health would be happy to serve as a resource to the Senate Finance Committee to discuss any of the above recommendations. To provide more context, the following sections detail the services provided by Altegra Health to MA beneficiaries that address chronic conditions and increase access to community-based programs.

### **SMART Connect™**

Altegra Health’s SMART Connect product helps improve health outcomes for MA beneficiaries by connecting them with care management support solutions. SMART Connect provides on-going, customizable and personalized eligibility, enrollment and healthcare education information for MA beneficiaries. Specific programs include, but are not limited, to:

- Managing chronic conditions
- General and specialized health risk assessments
- Hospital discharge program
- Emergency room (ER) avoidance program
- Glaucoma testing
- Controlling blood pressure

SMART Connect utilizes multi-channel outreach to MA beneficiaries, including automatic interactive voice response (IVR) messages, text messages, Smartphone apps, and live outreach calls. MA beneficiaries can choose to interact based upon their communication platform preference in the language of their choosing.

Altegra Health brings the strength of synergy between its analytics capability and automated communications services. Altegra Health monitors MA beneficiary responses through its web-based SMART Connect dashboard to each of the programs offered through SMART Connect and reports the impact to MA plans and their care managers.

SMART Connect’s dashboard allows care managers to track MA beneficiary interaction so that they can help beneficiaries access needed services in the most efficient manner. Care managers can utilize the



dashboard to work with MA beneficiaries to access the most appropriate follow-up care. Care managers also are alerted in real time to MA beneficiaries who need immediate support. Results show that these alerts allow care managers to intervene and avoid more serious and costly health issues.

This beneficiary-level interaction has resulted in improved access to care for health plan members. SMART Connect has been successful in receiving responses from approximately 80 percent of the members to whom it reaches out. The average impact of automated communications is between 3 – 12 percentage points of improvement in compliance levels. For instance, if mammogram rates are currently 65 percent for the health plan, the post-call rate can be expected to be between 68 and 77 percent. Additionally, members are overwhelmingly supportive of the information and interventions that SMART Connect provides.

### **SMART Appointment Scheduling™**

Similar to SMART Connect, SMART Appointment Scheduling increases the quality of care delivered to MA beneficiaries by utilizing multi-channel outreach to help them schedule needed appointments with their healthcare provider.

Altegra Health integrates data and analytics to formulate a complete and holistic view of a MA beneficiary's needs. Valuable information outlining clinical history, critical elements needing provider attention, services to be ordered and diagnoses that might be missing are designed to fit in a one-page document called the SMART Confirmation™. This document is made available to providers to help facilitate an effective and productive visit.

Additionally, Altegra Health sends a SMART Care Card™ to each MA beneficiary for whom it schedules an appointment. The SMART Care Card is a customized half-page card that lists only the health screenings the MA beneficiary still needs to address in a given year and also provides space on the back to list their medications and any questions they would like to review with their provider. The MA beneficiary can take it to their provider's office to ensure that the screenings they need are addressed during their appointment.

Interventions through SMART Appointment Scheduling have resulted in improved appointment compliance by MA beneficiaries and improved health outcomes.

### **Altegra Health's Eligibility and Enrollment Services**

Altegra Health assists low-income MA beneficiaries to secure needed assistance through the following programs:

- **Medicare Savings Programs (MSPs):** Altegra Health identifies MA beneficiaries who may benefit from dual enrollment in a MSP, including payment of their Part B premiums, and assists them as an authorized representative in applying to the appropriate state Medicaid agency.
- **Part D Low-Income Subsidies (LIS):** Altegra Health identifies MA beneficiaries who may qualify for the Medicare Prescription Drug Coverage LIS and assists them in applying for these benefits.



Altegra Health's COMMUNITY Link™ product guides MA beneficiaries, particularly vulnerable populations, through an extensive database of more than 9,000 public and privately-sponsored community programs for which they may qualify. Altegra Health proactively reaches out to these beneficiaries using multi-channel communications to advise them about the COMMUNITY Link service and its benefits. In addition to its proprietary database which maintains information about the programs that a beneficiary may qualify for in his/her geographic area, Altegra Health utilizes a proprietary eligibility evaluation tool to determine the programs to which a beneficiary may qualify in a single interview. Further, Altegra Health provides advocacy and enrollment assistance to help beneficiaries access these programs.

COMMUNITY Link program categories include, but are not limited to:

- Energy & utility assistance
- Home care & repair
- Nutritional assistance
- Rx discounts
- Telephone assistance
- Transportation assistance

Additionally, My Advocate is an internet-based eligibility screening tool designed to help MA beneficiaries enroll in these programs, whether through Altegra Health's assistance or on their own. My Advocate uses information volunteered from the MA beneficiary such as state of residence, coverage type, marital status, earnings and unearned income, and assets to identify programs to which they may qualify and calculates the potential benefit and savings for each program. From the system, MA beneficiaries can access the websites for specific community program sponsors in order to learn more.

In addition to the website, the My Advocate app can be utilized by MA beneficiaries to enroll in these programs. In addition to community program enrollment assistance, the My Advocate app provides educational programming specific to the health needs of the MA beneficiary; a chat function to encourage direct dialogue between the beneficiary and MA plan; and clear, relevant insights for MA plans to view, track and measure engagement data with the beneficiary.

In 2014, Altegra Health helped more than 50,000 MA low-income beneficiaries enroll in MSP. Altegra Health has helped MA low-income beneficiaries secure approximately \$1.8 billion in Part B premium savings. Altegra Health helps health plan members in all markets secure approximately \$150 million in financial benefits through Community Link annually.

As you may know, low-income MA beneficiaries are more likely to have multiple chronic conditions. Altegra Health's experience has shown that these benefits can positively impact a MA beneficiary's overall health and well-being, as well as deliver financial assistance to those in need of these services. Additionally, low-income MA beneficiaries are more likely to be satisfied with their MA plan when their social determinants of health are addressed, which positively impacts the MA plan's STAR ratings.



## Conclusion

Altegra Health appreciates the opportunity to share its experience helping MA beneficiaries address their chronic conditions. Please feel free to reach out to me or our team if we can be of further assistance.

Sincerely,

A handwritten signature in blue ink that reads "Kevin C. Barrett". The signature is enclosed in a thin black rectangular border.

Kevin C. Barrett  
President & CEO