



## **DAUPHIN COUNTY BOARD OF COMMISSIONERS**

### **LEGISLATIVE MEETING**

**DECEMBER 2, 2020**

**10:00 A.M.**

### **MEMBERS PRESENT**

Jeff Haste, Chairman  
Mike Pries, Vice Chairman  
George P. Hartwick, III, Secretary

### **STAFF PRESENT**

Chad Saylor, Chief Clerk; Tim DeFoor, Controller; Joseph A. Curcillo, III, Esq., Solicitor; Randy Baratucci, Director of Purchasing; Mike Yohe, Director of Budget & Finance; Fran Chardo, District Attorney; Steve Libhart, Director of Public Safety; J. Scott Burford, Deputy Chief Clerk; Donna Miller, Commissioners' Office; Melissa Bradley, Human Resources; Darla Mathis, Human Resources; J. Kiss, Public Safety and Richie-Ann Martz, Assistant Chief Clerk

### **GUESTS PRESENT**

Dr. Avis Hendrickson

### **MINUTES**

### **CALL TO ORDER**

Mr. Haste, Chairman of the Board, called the meeting to order at 10:03 a.m.

### **MOMENT OF SILENCE**

Everyone observed a moment of silence.

## **PLEDGE OF ALLEGIANCE**

Everyone stood for the Pledge of Allegiance.

## **APPROVAL OF MINUTES**

**It was moved by Mr. Hartwick and seconded by Mr. Pries that the Board approve the November 18, 2020 Commissioners' Workshop/Legislative Meeting Minutes; motion carried.**

**It was moved by Mr. DeFoor and seconded by Mr. Pries that the Salary Board approve the November 18, 2020 Salary Board Meeting Minutes; motion carried.**

**It was moved by Mr. Haste and seconded by Mr. Hartwick that the Election Board approve the November 16, 2020 Election Board Meeting Minutes and the November 23, 2020 Election Board Meeting Minutes; motion carried.**

## **EXECUTIVE SESSIONS HELD BETWEEN MEETINGS**

No Executive Sessions were held between meetings.

## **PUBLIC PARTICIPATION**

There was none.

## **DEPARTMENT DIRECTORS/GUESTS**

- A. Gary Holtzapple, Senior Client Manager  
Nick Miller, RPh  
Tia McClung, Clinical Consultant
- 1. Highmark 2021 Strategic Solutions

Mr. Holtzapple welcomed everyone. He indicated that his team will be going through the presentation virtually. A printed copy of the presentation was provided to the Board and is attached to these minutes.

Mr. Miller discussed the specialty drug management program. This will provide members with safe, cost-effective site of administration alternatives for select medical infusion drugs, which historically have been administered in a hospital outpatient setting. The expanded alternate locations include member home, infusion centers and the physicians' office.

The Commissioners asked questions regarding the program.

Ms. McClung discussed the transforming utilization management program. Highmark's health management strategy has long included utilization management (UM) programs and services for medical, pharmacy and behavioral health to ensure quality, safety, and cost-efficient care for members. Highmark is taking the opportunity to adjust its pricing structure to enable self-funded clients to only pay for what their members utilize.

The Commissioners asked several questions. They indicated that they will be in touch with Highmark to seek further explanations on concerns that they have.

### **SALARY BOARD**

A complete set of Salary Board Meeting Minutes are on file in the Commissioners' Office.

### **HUMAN RESOURCES**

Ms. Mathis reported that there were no changes, and no questions were asked.

**It was moved by Mr. Hartwick and seconded by Mr. Pries that the Board approve the Personnel Packet.**

**Question:** Mr. Haste – Aye; Mr. Pries – Aye and Mr. Hartwick – Aye; motion carried.

### **PURCHASE ORDERS**

Mr. Baratucci reported that the budget adjustments were made. No questions were asked.

**It was moved by Mr. Pries and seconded by Mr. Hartwick that the Board approve the Purchase Order Packet.**

**Question:** Mr. Haste – Aye; Mr. Pries – Aye and Mr. Hartwick – Aye; motion carried.

### **BUDGET & FINANCE DIRECTOR – MIKE YOHE**

Mr. Yohe provided the following Report:

#### **Report from the Office of Budget & Finance December 1, 2020**

- **November 20, 2020** transferred **\$3,625,854.07** to the **Payables** account and **\$2,220,881.32** to the **Payroll** account from the County's Concentration account to cover expenses for the week.

- **November 27, 2020** transferred **\$5,042,783.62** to the **Payables** account from the County's Concentration account to cover expenses for the week.
- **Wire Payments since last report: \$1,156,738.86**
- **Debt Service Payments since last report: \$104,591.40**
- **Term Investments**
  - None
- **Balance today in PA INVEST: \$21,170,553.64 rate 0.068%**
- **Balance today in First National Bank: \$106,420.33 rate 0.450%**
- **Balance today in S&T Bank: \$1,130,955.74 rate 0.120%**
- **Balance today in Santander Bank: \$1,122,066.10 rate 0.100%**
- **Balance today in Customers Bank: \$24,426,867.07 rate 0.500%**
- **Balance today in PLGIT Prime: \$24,962,768.39 rate 0.080%**
- **Balance today in Riverview Bank: \$3,713,857.01 rate 0.210%**

**No T.R.A.N. Line of Credit required for 2020.**

### **CHIEF CLERK/CHIEF OF STAFF'S REPORT - CHAD SAYLOR**

Mr. Saylor had no report, and no questions were asked.

### **SOLICITOR'S REPORT – JOSEPH A. CURCILLO, III, ESQ.**

Mr. Curcillo reported that Item K should be pulled due to some concerns that were raised by the Treasurer. No questions were asked.

### **MATTERS REQUIRING BOARD ACTION**

- A. Ratification of Declaration of Disaster Emergency – November 27, 2020.
- B. Purchase of Service Agreement between Dauphin County (Conservation District) and Kerwin and Kerwin, LLP for legal services for the Dauphin County Agricultural Land Preservation Program.
- C. Coroner's Office NMS Labs 2021 Fee Schedule.
- D. Agreements for Legal Services (Court Appointed Counsel) between Dauphin County and:
  1. Law Offices of Jason R. Carpenter LLC (Kelli Brownewell Statt) – Domestic

- Relations Special Counsel
- 2. Watson Legal Services PLLC (Lisa M. Watson) – Attorney to Represent Alleged Incapacitated Counsel in Guardianship cases
- 3. Lavery Law (Andrew Norfleet) – Attorney to Represent Alleged Incapacitated Counsel in Guardianship cases
- 4. Keefer, Wood, Allen & Rahal, LLP (Bradford Dorrance) – Attorney to Represent Alleged Incapacitated Counsel in Guardianship cases
- 5. Law Offices of Dan Stern (Dan Stern) – Conflict Divorce Master
- 6. Law Offices of Silliker & Reinhold (Mark Silliker) – Guardian Ad Litem Juvenile Dependency
- 7. Watson Legal Services PLLC (Lisa M. Watson) – Guardian Ad Litem Private TPR
- 8. Law Offices of Heather Paterno (Heather Paterno) – Guardian Ad Litem Private TPR
- 9. Archer Law (Jennifer Archer) – Guardian Ad Litem Private TPR
- 10. Law Offices of Gina Carnes (Gina Carnes) – Guardian Ad Litem Private TPR
- 11. Archer law (Jennifer Archer) – Counsel for Child Private TPR
- 12. Law Offices of Natalie Burston (Natalie Burston) – Counsel for Child Private TPR
- 13. Krevsky & Rosen, P.C. (Sanford Krevsky) – Custody Conference Officers
- 14. Law Offices of Jennifer L. Lehman (Jennifer Lehman) – Custody Conference Officers
- 15. McShane Law Firm LLC (Justin McShane) – Mental Health Counsel
- 16. Purdy Law Office, LLC (Pamela Purdy) – Paternity Counsel
  
- E. Ratification of a 1-month time extension for the completion of Part 1 Construction Inspection - Agreement No. L00252 – Greenbelt SR0039 to Fort Hunter (ECMS 102757) – deadline will be December 30, 2020.
  
- F. 2021 Commissioners' Meeting, Salary Board and Election Board Meeting Schedule.
  
- G. Juvenile Court Judges Commission Juvenile Program Services Grant Award - \$237,616.55 for the period July 1, 2020 to June 30, 2021.
  
- H. Partial Refund of 2020 Real Estate Taxes – Parcel #58-009-011 (216 Elm Street) and Parcel #58-009-012 (214 Elm Street) – Gordon & Janet Trump - \$95.07.
  
- I. Satisfaction Piece for Denise E. Caputo on the property located at 45 Ann Street, Middletown, PA 17057 - \$5,000.00.
  
- J. Satisfaction Piece for Cynthia D. Harden on the property located at 2105 Boas Street, Harrisburg, PA 17103 - \$3,000.00.
  
- K. Request to Waive Penalty and Interest on 2018-2019 Tax – Parcel #35-033-091 (200 N. Mountain Road) – M57 Inc. - \$2,637.56. **PULLED**
  
- L. Contract for Construction of a Small Project between Dauphin County (Facilities Maintenance) and Shaw Contract Flooring Services, Inc. d/b/a Spectra Contract Flooring – Administration Building Flooring Project.
  
- M. Intergovernmental Agreement between Dauphin County (Domestic Relations) and the Dauphin County Sheriff's Office, effective October 1, 2020 through September 30, 2025.
  
- N. U.S. Department of Homeland Security Federal Fiscal Year 2020 State Homeland Security Grant Program Agreement between Dauphin County (South Central Counter Terrorism Task Force) and the PA Emergency Management Agency.

- O. Ratification of the Grant from Center for Tech and Civic Life for Voter Registration/Elections in the amount of \$482,164.50 for the expenditure of election administration needs.
- P. Service Solutions Contract between Dauphin County (Facilities Maintenance) and Automated Logic for HVAC Mechanical Service at ARC/Schaffner Building.
- Q. Purchase of Service Agreement between Dauphin County (Children & Youth) and Children's Home of Reading, Inc.
- R. Adoption Assistance Agreement #2020-46.
- S. Amendment #1 to Adoption Assistance Agreement #2020-31.
- T. Custodianship Subsidy Agreement #2020-03.
- U. Subordination Agreement for Brandon L. Russ on the property located at 2030 N. 4<sup>th</sup> Street, Harrisburg, PA 17102.
- V. Subordination Agreement for Amado M. Margarito on the property located at 2505 Hoffer Street, Harrisburg, PA 17103.
- W. Satisfaction Piece for Cheri L. Greene on the property located at 108 N. 31<sup>st</sup> Street, Harrisburg, PA 17111 - \$4,993.00.
- X. Satisfaction Piece for Brendon T. Bretz on the property located at 704 N. Harrisburg Street, Harrisburg, PA 17113 - \$2,710.00.
- Y. Subordination Agreement for Jose J. Macias on the property located at 1523 Swatara Street, Harrisburg, PA.
- Z. Purchase of Service Agreements between Dauphin County (Drug & Alcohol) and:
  - 1. Lamar
  - 2. Vector Media Holding Corp. (Advertising space)
  - 3. Vector Media Holding Corp. (Production)
- AA. Training Packet.

**It was moved by Mr. Pries and seconded by Mr. Hartwick that the Board approve Items A through AA listed above under Matters Requiring Board Action, noting that Item K was pulled.**

**Question:** Mr. Haste – Aye; Mr. Pries – Aye and Mr. Hartwick – Aye; motion carried.

## **FORMER BUSINESS**

There was none.

## **NEW BUSINESS**

There was none.

## **COMMISSIONERS' DISCUSSION & ACTIONS**

There was none.

## **CORRESPONDENCE**

The following correspondence was received in the Commissioners' Office and will be handled by the staff appropriately.

- A. Notification from Mellott Engineering, Inc. advising that SUEZ Water Pennsylvania, Inc. is applying to DEP for a Water Obstruction & Encroachment Permit for the Patton Road @ Paxton Creek Crossing.
- B. Notification from JMT advising that the PA Department of Transportation is applying to DEP for a NPDES Permit for stormwater discharges associated with the SR 0083-079 Contract A project in Dauphin county.
- C. Receipt of a letter from the PA Public Utility Commission regarding the Application of Norfolk Southern Railway Company for approval of the abolition of the at-grade public highway/railroad crossing where Inglenook Road (DOT 518 105 Y) crosses the tracks of Norfolk Southern Railway Company in Reed Township, Dauphin County.
- D. Notification from TeamAg advising that Lamar High is applying to DEP for a NPDES Permit for the Lamar High Farm Project in Washington Township, Dauphin County.
- E. Notification from AECOM advising that The Hershey Company is applying to DEP for a NPDES Permit Renewal for stormwater discharges associated with the non-contact cooling water and stormwater to Spring Creek Project.

## **PUBLIC PARTICIPATION**

There was none.

## **ADJOURNMENT**

**There being no further business, it was moved by Mr. Hartwick and seconded by Mr. Pries that the Board adjourn; motion carried.**

Transcribed by: Richie-Ann Martz

## Highmark Strategic Solutions



CLINICAL INNOVATION | STRATEGIC COLLABORATION | TARGETED SOLUTIONS | PROACTIVE ENGAGEMENT



### Targeted Solutions

When value becomes the center of attention, insurers and doctors team up to find the most cost-effective, quality solutions. Our product, network, and reimbursement strategies combine to promote value and high-quality outcomes. This results in healthier and more productive employees.

## Specialty Drug Management

### Medical Specialty Site of Care

Save time

Save money

Worry less

#### Program Overview:

- Provides members with safe, cost-effective site of administration alternatives for select medical infusion drugs which historically have been administered in a hospital outpatient setting
- Expanded alternate locations include **Member Home**, **Infusion Centers**, and **the Physicians Office\***.

#### The Results

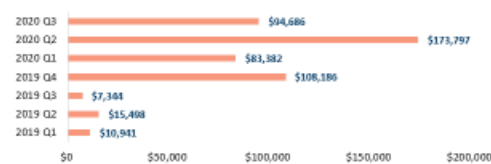
Our capability to access both medical and prescription information has provided you with total care and cost management. We have effectively identified members that were able to worry less about their treatments all while providing savings\*\*.

Savings for Dauphin County for Site of Care since 1/1/2019: \$493,834  
Projected fees: \$4000 per quarter

#### Savings by Setting\*\*



#### Savings by Quarter\*\*



\*Physician Office and Infusion centers not affiliated with a hospital  
\*\*Savings includes plan cost and member cost share

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## Copay Armor Background

### What is Copay Armor Copay Assistance Program?

- Copay Armor is a copay coupon solution for high cost medications (mostly specialty). The solution leverages manufacturer coupon dollars to optimize the copay
- The goal of the program is to reduce/eliminate costs for our members and decrease plan cost
- Copay Armor is the Highmark product name for this coupon program

### Who is PillarRx?

- PillarRx Consulting is the vendor we are working with to implement Copay Armor

### How will PillarRx interact with Highmark members?




- PillarRx's Care Management team will assist with enrolling patients into the program via letter campaigns and phone calls for any eligible member on one of the medications defined by the Copay Armor drug list

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## Market Watch

The Market Watch Drug program ensures that members are paying the lowest possible costs for their prescriptions. This program takes a proactive approach with reviewing certain drugs.

There are three drug lists available in this program:

High Cost Low Value	New to Market	Rx with OTC Equivalents
 <p>High cost products with limited clinical value will be excluded from coverage under this program. These are drugs that cost hundreds or thousands of dollars per month but have lower cost alternatives. Examples include:</p> <ul style="list-style-type: none"> <li>Vimovo (esomeprazole and naproxen)</li> <li>Duexis (famotidine and ibuprofen)</li> <li>Glumetza and Fortamet (metformin ER/Glucophage XR)</li> </ul>	 <p>The New to Market drug program will exclude new medications from coverage upon initial market launch. This will allow for detailed medication review for clinical efficacy, safety and value of the new product, as well as rebate implications, prior to formulary placement. Targeted products will include newly approved medications where another cost-effective drug already exists to treat the same condition in a similar fashion.</p>	 <p>The Rx with OTC Equivalents program excludes prescription medications that have formulations that are available over the counter (OTC). The prescription version will no longer be covered under the prescription benefit as the member will be able to purchase the medication over-the-counter. Examples of these medications may include:</p> <ul style="list-style-type: none"> <li>Prilosec</li> <li>Nexium</li> <li>Zyrtec</li> </ul>

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## RationalMed

Identifying and addressing safety risks across your employee population is important to everyone. What if you could do that and also see plan savings?

The RationalMed Program identifies your employees' health risks and alerts pharmacists and physicians, so that they can make decisions that improve employees' health and safety.

By leveraging the power of integrated medical and pharmacy claims data, the program uses systematic rules to target specific clinical categories that include:

- Adverse drug interactions
- Adverse drug-disease interactions
- Excessive dosing
- Prescription drug duplication
- Failure to adhere to medication routines as directed by the physician
- Omission of drug-related testing/diagnostics
- Omission of care

Potential Savings  
\$18,257



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## RxAdherence

### Staying In Front of Nonadherence

Gaps in Essential Care Lead to Higher Medical Costs. Medication-related waste, or nonadherence, is on pace to reach \$3,720 per person. This is a national issue.

**Enhances engagement by enabling patient choice of channel and tailored solution.**

Early Detection	Patient Engagement	Tailored Solutions	
<ul style="list-style-type: none"> <li>Identifies patients at-risk for future nonadherence</li> <li>New engagement opportunities generated daily</li> <li>Predictive modeling scores recalculated weekly</li> </ul>	<ul style="list-style-type: none"> <li>Outbound diagnostic call</li> <li>Outbound specialist pharmacist call</li> <li>Letter w/ Adherence tips</li> <li>Inbound diagnostic call</li> <li>Just Diagnosed-primer</li> <li>Member Website</li> <li>Mobile app</li> </ul>	<ul style="list-style-type: none"> <li>Based on member's reasons or barrier for nonadherence</li> <li>Behavioral</li> <li>Clinical</li> <li>Cost-savings</li> <li>Based on members condition stratified to TRC resource</li> </ul>	



Based on a Highmark sub client size which is typically under 20,000 lives, the average RxAdherence savings is \$1.00 PMPM, which takes into account \$0.75 PCPM fees paid

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## Strategic Collaboration

New ways of working together to make care better, more accessible everywhere. More flexible "open system" of collaboration with providers to better leverage value for you, manage your costs, and drive positive industry change.

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## Transforming Utilization Management

Enhanced Processes  
Expanded Requirements  
Transparent Pricing



Highmark's health management strategy has long included utilization management (UM) programs and services for medical, pharmacy and behavioral health to ensure quality, safety and cost-efficient care for our members. Along with the enhancements outlined below, we're taking the opportunity to adjust our pricing structure to enable self-funded clients to only pay for what their members utilize.

### Right Care. Right Place. Right Time.

#### Enhanced Processes

As part of our strategy to increase value to our clients, Highmark has enhanced UM activities, including authorization requirements, for both inpatient and outpatient services.

#### Expanded Requirements

Our expanded services include in-area, out-of-area, and out-of-network services, regardless of where members are seeking care.

#### Transparent Pricing

Rather than including a fixed UM fee within the base administrative fees, the new activity-based pricing structure allows for greater transparency. Clients will only be charged a fee when an authorization is done. As a result, clients will see a reduction in base fees and potential savings achieved by enhanced UM services.

#### Average Savings Per Authorization



**\$1,500**  
per Inpatient Authorization



**\$150**  
per Outpatient Authorization

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## Transforming Utilization Management

### What value does Highmark UM services provide?

UM activities focus on opportunities to reduce clinical variation in the delivery of services, to ensure clinically appropriate levels of care, to assist with timely and effective discharge planning, to facilitate the appropriate use of benefits, and promote high quality clinical care services. UM programs and services help to ensure quality, safety and cost-efficient care. Your client management team will provide you with an overview of your projected costs and projected savings based on your specific historical experience.

### What is the fee?

Clients will not be charged a "per employee per month" fee for utilization management in their base administrative fee. Instead, Highmark will bill clients only for the UM services that we perform on their behalf. Clients will be billed \$110 per UM authorization which includes re-authorizations.

### Why are we shifting our pricing model?

Smarter, efficient, and transparent billing. We're creating customer value by assessing fees only when your members use UM services. We'll ensure appropriate billing via your monthly invoice, based on utilization of our UM services.

### What savings can I anticipate?

By leveraging all of Highmark's inpatient and outpatient UM activities and authorization requirements, you may save an average of \$1,500 per inpatient authorization and \$150 per outpatient authorization. This translates to an average \$800 savings per requisition or an ROI of 7.3 to 1.

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## Well360 Utilization Management Impact of Enhanced Inpatient/Outpatient Authorizations

Enhanced processes. Increased opportunity. Transparent pricing.

NOW	PRIOR PROGRAM
Projected Inpatient Utilization <b>249 auths</b>	2019 Inpatient Utilization <b>249 auths</b>
Projected Outpatient Utilization <b>280 auths</b>	2019 Outpatient Utilization <b>299 auths</b>
Projected UM Fees <b>\$58,194</b>	
Projected UM Savings <b>\$397,068</b>	
ROI <b>7.82</b>	
<p>These projections are intended to provide an estimate of program utilization and cost savings and are based on both book-of-business and client-specific data. Actual utilization and cost savings may differ and may vary, as they are dependent on factors that may change from year-to-year.</p>	
<p> <input checked="" type="checkbox"/> Average cost savings \$1500 per IP auth  <input checked="" type="checkbox"/> Average cost savings \$150 per OP auth         </p>	

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## Integrated Care Team

How does this compare to standard (UM)?

Our real-time member listening system identifies ICT appropriate members through sophisticated algorithms and machine learning at the point of admission and prior authorization. This allows complex case management to begin immediately where standard case management typically begins at discharge. A consistent nurse reviewer and dedicated case management nurse collaboratively work with the member throughout their inpatient stay on care, discharge planning, condition management, and transition of care needs.

What UM and CM activities contribute to the savings?

With ICT, the member's discharge planning begins at the admission. The UM nurses work to begin the discharge discussion as early as when the patient is admitted. This is the primary difference between standard UM and ICT UM. The dedicated case management nurses are hyper-focused on the highest risk impactable population. The early and ongoing engagement by this dedicated team begins upon admission and leads to better outcomes.

Is there a fee?

Clients will be charged a case rate per member who is engaged in ICT. This means that clients will only be charged when their members are actually enrolled in the program, rather than broadly charging a flat per employee fee.

Who would benefit from ICT?

Between 0.5% to 1.5% of the population will benefit from ICT intervention. This may include members with multiple co-morbidities like brain dysfunction, acute heart disease, diabetes, and lung diseases. Other examples may include complicated births, neonates, major traumas, sepsis, and other admissions that forecast high claims costs.

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## Well360 Integrated Care Team (ICT) Opportunity

Real-time Intervention  
High-Intensity Care Management  
Remarkable Results

ICT Cases Triggered  
**43\***

Estimated Savings Per Case  
**\$1,417**

Total Gross Savings  
**\$60,921**

Total Fees  
**\$17,200**

Net Client Savings  
**\$43,721**

Client ROI  
**3.54**

These projections are intended to provide an estimate of program utilization and cost savings and are based on both book-of-business and client-specific data. Actual utilization and cost savings may differ and may vary, as they are dependent on factors that may change from year-to-year.



✓ ICT case rate \$400

✓ 2:1 ROI

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## STRATEGIC SUCCESS

### Integrated Care Team (ICT) Program

#### Working Through the Unexpected

While receiving chemotherapy at an infusion center, a member started experiencing chest pain and was admitted to one of our partner hospitals. Cardiac testing returned normal results the following day. However, the member's chemotherapy treatment had been interrupted, and the cancer diagnosis had the potential to complicate future decisions.

The hospital's director of case management reached out to Highmark's Integrated Care Team (the plan-embedded nurse case manager) to determine best next steps for the patient. The discussion focused solely on the member: what was the safest, most timely, least costly decision for her?

This real-time collaboration resulted in the member being placed in observation. She remained at the hospital and received her chemotherapy the following day as an outpatient, avoiding disruption of her regimen and significantly lowering her out-of-pocket costs. Our member was very satisfied with her care.



#### Results At-A-Glance

- The member received a higher level of support from our integrated care team members.
- The real-time collaboration resulted in the member being placed in observation.
- She was able to avoid disruption to her cancer treatment while being carefully monitored for her other symptoms.

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## STRATEGIC SUCCESS

### Integrated Care Team (ICT) Program

#### Helping a Family in Deeper, More Meaningful Ways

A group customer contacted Highmark to request assistance for a member who did not seem able to return home alone as hospital discharge discussions were underway. He'd been independent prior to his recent health care crisis. He would likely need long-term care (personal care or more), and his daughter (an only child) needed support in making these plans.

At a moment's notice, the Integrated Care Team, including the plan embedded nurse case manager sprang into action, working closely with the hospital, the family and the post-acute team. The Highmark case manager's name and contact number were given to the daughter and to the patient for any questions or needs after discharge. From that first connection onward, the daughter felt well-informed and emotionally supported.

We surrounded this member's daughter with powerful support. As a team, the hospital, the plan and the skilled nursing facility worked closely with the daughter to see her father safely transitioned to a post-acute setting to get stronger. The Integrated Care Team stayed connected, using this time to help her adjust to the new reality of her father's condition and make longer-term plans for personal care. This deeper engagement in the member journey is what happens when plan and provider work as one.



#### Results At-A-Glance

- The member and his family received a higher level of support from our integrated care team members.
- The member was safely transitioned to the most appropriate post-acute care setting for his situation.
- Member's daughter felt informed and emotionally supported throughout the process.

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Thank you.

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