Post-Acute Care Coordination

CASE STUDY



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Post-Acute Care Coordination That Actually Works

\$45 Million in Annual Savings and Better Member Outcomes— Powered by 96% Provider Platform Satisfaction

When nearly every post-acute provider in the network actively uses the same care coordination platform, remarkable things happen: faster responses, fewer escalations, and measurably better outcomes for members.

The Arizona region of a national payer needed to tame the "Wild West" of coordinating post-acute care with skilled nursing facilities, behavioral health and home health providers.

The payer had hundreds of providers in its network, each with their own sets of processes and technologies, individual preferences for communication and frequent staff turnover.

It often took days and a flurry of phone calls, faxes and emails to identify and connect with every patient's

care team at each provider and obtain needed information to manage 4,000 to 5,000 cases a month.

These conditions constrained the plan's ability to care for members, ensure care continuity and control costs. The lack of timely, actionable insights and inconsistent provider reporting led to:

- → Increased length of stay by 2 to 3 days
- → High acute-care readmissions for its large senior population in Dual Eligible Special Needs Plans

Determined to transform its post-acute care coordination paradigm, the plan implemented an innovative cloud solution improving all key performance indicators from LOS to 30-day readmissions.





Teaming With Olio

To bring greater structure, efficiency and effectiveness to post-acute care coordination, the payer rolled out Olio's market-leading care-coordination platform to its medical and utilization management nurses and its network providers. It started with its DSNP population and 42 SNFs, where the potential gains were the greatest and which have mandatory Medicare requirements for transitions of care.

Olio handled the full implementation, at the payer and post-acute facilities, from securing buy-in, onboarding and training to sustaining daily use and providing ongoing, timely support. The litmus test: Could Olio fit into existing processes and workflows and improve provider relationships?

By the end of the first three months, the payer's teams pushed to expand Olio across all 100+ SNFs, add Medicare Advantage, Medicaid, and commercial members, and bring behavioral health and home health providers onto the platform. With the enthusiastic and sustained participation and responsiveness of the post-acute providers, they had seen a dramatic improvement in collaboration and communication, including 70% faster responses on priority notes and 90% fewer escalations. The platform also dramatically decreased their manual work and freed up more time to work to the top of their licenses and focus more on complex cases.

Given Olio's outsized success, the payer has updated its network contracts to require that post-acute providers use the platform, which the plan pays for. **Platform adoption increased 350% with 96% provider satisfaction.**

BY THE NUMBERS



77

Olio allows instantaneous communication that is a huge easy button for care managers trying to manage patients in post-acute facilities.

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Industry-First Capabilities Drive Engagement

The combination of Olio's capabilities-rich and intuitive platform and ongoing, real-time support delivers unmatched user engagement that drives seamless, high-quality transitions, better member outcomes and measurable gains in care costs and quality. Improvements include 56% more home health discharges and 72% fewer assisted living placements.

The easy-to-use platform streamlines and accelerates care coordination with such unique capabilities as:

Automated team curation.

Olio automatically connects the right members of each patient's care team, accelerating communication and enabling real-time collaboration. Previously, the plan team had a goal of three contacts with a provider per patient each week. That number has now doubled, averaging more than 6 touches per patient per week.

Medical record exchange.

To support concurrent review and faster, better-informed decision making, Olio allows the care team to attach and share patient records from any electronic health record system, eliminating the need to manually piece together patient information from siloed sources or any HIPAA issues from putting a member's information in the wrong chart. It also provides AI-enabled summaries of the clinical documentation.

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77

My team will tell you now that they can't imagine not having Olio.



Instant connection and escalation.

Team members can tag messages and mark priority assignments so an alert appears on that provider's mobile phone as well as popping up on the Olio dashboard. Olio tracks the rate and timeliness of the response from each provider.

Compliance.

Users can easily exchange important documents, such as Notice of Medicare Non-Coverage (NOMNC) forms to be signed by the member. The payer now has a 99% return rate for NOMNCs compared to 90% or less before Olio. Meeting other requirements is easier, too: When a DSNP manager adds a transition of care plan into Olio, the payer immediately meets a Medicare mandate.

Real-time data analytics.

The payer can track real-time performance by facility, staff member, patient, and outcomes and drill down to see if there's a quality issue, longer LOS, unplanned readmission or other red flags. Olio makes it easy to share pertinent information with finance, medical economics and other teams. And the data helps inform contracting and network development and management.

With most post-acute providers on contract versus owned, it was very difficult to get these insights before Olio. Previously, the plan relied on an internal platform with claims data, which is delayed by weeks or months, to track results—even to find out if someone had returned to acute care.

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77

Trying to get information back and forth was such a struggle.



Benchmarking.

SNFs within the same company have access in Olio to every facility's performance, so they can compare their KPIs to others and make changes to improve.

Long-term care placements.

Olio simplifies and streamlines efforts by integrated teams including social workers, transition coaches and clinicians, that help members apply for state-sponsored long-term care. The payer is required to coordinate any LTC applications with the state and if it misses any step, the state denies the application and the payer must start over.

Olio keeps the teams on track, providing visibility and accountability and simplifies state reporting through every application step. As a result, the plan is processing LTC applications in 21 days versus 28 days before Olio.

Given these significant benefits and 96% average satisfaction across skilled nursing facilities (SNFs), behavioral health, and home health, Olio has enabled major gains, including:

- → Weekly patient care activities up 75%
- → 70% faster response times on priority notes and 85% faster response times on case escalation notes
- → 90% decrease in escalation notes

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77

The data is so much better.

Collaborative Approach

Olio has made it easy for the plan to work with the company. It began with implementation, which was fast and required no significant IT lift from the plan's tech team. Olio simply created a SFTP to add member eligibility files into the platform.

Olio's openness to adding or modifying user features established a true partnership. "Olio is so willing to take the ideas from the people who use the platform and improve the product to fit our needs," according to one plan medical management executive. "And they're so quick about it."

Being easy to work with and responsive has strengthened the relationship, said a top plan clinician: "When looking at vendors, this is a big consideration."

Human touch

The payer and providers supplement platform communications with regular phone calls and meetings. The plan has formed joint operating committees with the SNFs, with conference calls to review all patients at each facility.

Similarly, the plan holds monthly video conferences with Olio to review performance data, including LOS, readmissions, which conditions are most prevalent, which facilities send the most patients where and so on. Olio, in turn, has quarterly meetings with the parent companies of the SNFs. The senior leadership of the payer and Olio also meet virtually twice a year.

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Olio really has allowed us a higher level of function and understanding of our post-acute network and managing our post-acute network without building the infrastructure ourselves.



About Us

Olio transforms post-acute and behavioral health care coordination by solving what other platforms can't: sustained network provider engagement.

Olio automatically connects care teams and keeps them engaged—from SNFs and behavioral health facilities to home health and hospice—delivering the actionable insights organizations need to improve outcomes and reduce costs. This isn't just participation—it's the active engagement that makes coordination work.

For more information about Olio's game-changing care-coordination platform or to request a demo, contact growth@olio.health

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