



Fall 2020

IMPACT REPORT

Transforming the health of the community, one person at a time.

Continuous program development improves access

The distribution of Nebraska’s population creates unique challenges in ensuring members have access to services. While members in urban communities and surrounding areas have high levels of access to providers, access is more limited in greater Nebraska. Regardless of location, complex circumstances can make accessing care challenging. Innovation around access to care makes it possible for members to have options to improve their health.

Expanded provider network

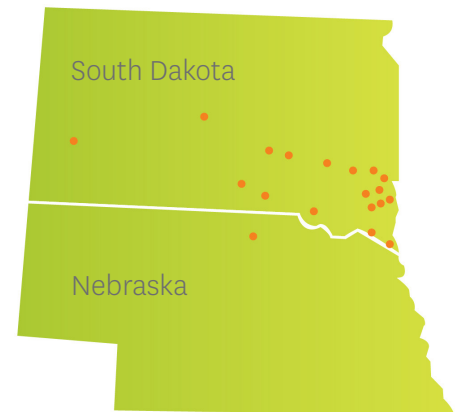
The Network Development team has assessed every available and appropriate Nebraska provider for inclusion in the Nebraska Total Care network. However, for many members the best provider options may be outside of Nebraska. To improve access to care for members in northern areas of Nebraska, Nebraska Total Care added **Sanford Health** to our provider network. This South Dakota based hospital system includes:

25 hospitals

**Over 1,300
practitioners**

**Extensive specialties,
including pediatric**

For members along the northern border of the state, this adds additional hospitals and providers at a more manageable distance. For individuals with complex care needs or experiencing a medical crisis, access to the nearest possible provider can have a significant impact on their ability to consistently receive care.



**Sanford Health locations near
Nebraska Total Care members**

In-home assessments

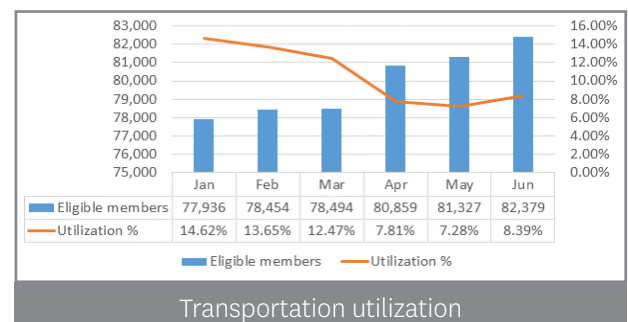
For members with an indication of complex needs with limited access to care, in-home assessments give an accurate picture of a member’s health and gaps in care.

Members receive an extended face-to-face appointment with a health professional. Assessments include diagnostic tests, identification of home safety concerns, and evaluation of social determinants of health. The results of the assessments allow Nebraska Total Care and the Primary Care Physician to develop a care plan. Because many members in need of assessment have conditions that increase their risk, professionals providing assessments were able to quickly change their approach and complete assessments via telehealth. Over 300 assessments have been completed in 2020.

Transportation

For some members, transportation is a significant barrier to seeking medical care. Lack of transportation can cause members to neglect preventive and routine care, and instead wait until they have an emergency to see a doctor.

Prior to COVID-19, up to 15% of members were accessing transportation services. Utilization is beginning to increase again.



Medicaid Expansion

After extensive planning, program development, and collaboration with Nebraska Medicaid and Long-Term Care, Nebraska Total Care began serving individuals eligible for coverage through Medicaid Expansion on October 1, 2020. We immediately began evaluating service requests to ensure new systems were supporting the increased membership.

ASSESSING MEMBER NEEDS

6,400

HHA members added in October and November

6%

of HHA members meet medically frail criteria

Utilization of services for Heritage Health Adult (HHA) is notably higher through the first six weeks of implementation than for traditional Heritage Health. This demonstrates unmet need for medical care prior to HHA coverage.

- HHA utilization of inpatient services is **182% higher** than for Heritage Health.
- HHA utilization of outpatient services is **205% higher** than for Heritage Health.

Members with prior authorizations

	Inpatient authorizations	Outpatient authorizations
Heritage Health	2.8%	5.3%
Heritage Health Adult	5.1%	10.9%

- Behavioral Health requests are higher for HHA members than for Heritage Health.



Inpatient authorizations

	Behavioral Health authorizations	Medical authorizations
Heritage Health	22%	78%
Heritage Health Adult	24%	76%

Outpatient authorizations

	Behavioral Health authorizations	Medical authorizations
Heritage Health	17%	83%
Heritage Health Adult	34%	66%

ASSESSING MEMBER ACCESS

1 day

average authorization review time

4 days

average claims processing time

With the increased demand for services, it has been critical that we evaluate our response times.

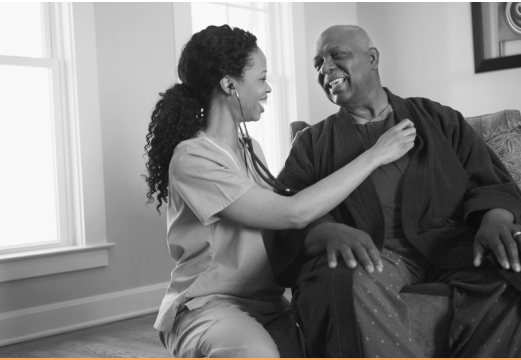
Data demonstrates:

- Members are accessing providers. Prior authorization requests are submitted by providers, and the high number of authorizations indicates that members are receiving treatment services.
- Increased requests have not caused delays. Authorizations are typically reviewed and responded to within one day.
- Processed claims show that HHA members are accessing services at a higher rate than Heritage Health members. Providers with the highest claims are for PCP visits, therapies, and specialty appointments.

Additionally, we remain committed to ensuring providers receive the level of service previously experienced. Provider claims continue to be processed within an average of four days.

Member Impact: Heritage Health Adult

Access to healthcare and the services of Nebraska Total Care has had an immediate impact on the health and quality of life for HHA members.



A member has been homeless and without insurance for several years. He was previously diagnosed with a neuromuscular disorder. Untreated, the member was suffering from symptoms of extreme fatigue, muscular weakness, trouble swallowing, and difficulty breathing. The illness can be controlled with medication, but prior to Heritage Health Adult coverage he could not afford it. He is now receiving medication daily and quickly beginning to experience a decrease in his symptoms. Daily functioning and quality of life have significantly improved for the member.

A member was found to have multiple malignant tumors early in 2020. She was uninsured and ultimately had to choose between paying medical bills and rent. The member became homeless to continue treatment, but still could not afford care and stopped going to her appointments. The progressing health issues made her unable to work and perform basic daily living activities, along with the mounting stress of knowing her health issues were not being treated. With Heritage Health Adult she has resumed treatment, and has been cleared for surgery to remove the tumors. Nebraska Total Care has also helped her access housing, home health services, and other services to meet her basic needs.



A member has a history of significant substance use and was attempting to manage recovery, but without coverage she was unable to access consistent, intensive treatment. Without the necessary treatment she continued to struggle in spite of her commitment to sobriety. Nebraska Total Care was able to arrange for the member to be on a waiting list for inpatient treatment, and receive outpatient treatment while she waits. Additionally, we are working with her on healthy lifestyle choice such as using the YMCA membership benefit and helping her reconnect with her family for additional emotional support.

A member spent the last year focusing on achieving and maintaining sobriety. After remaining sober in a homeless shelter for nearly a year, she is ready to move forward toward new goals. However, she suffers from chronic back pain and could not access the surgery she needed to correct the problem. She is now scheduled for surgery in December, and has a new pair of eyeglasses she badly needed. She is excited for the next step in her journey, and Nebraska Total Care will support her toward better health.



A member has long-term pancreatic issues, but did not have a treatment plan because she could not access care. Nebraska Total Care helped her choose providers and arrange appointments. We are supporting her to understand her health condition and be actively involved in creating her individual treatment plan. Ongoing illness had led to additional needs and we are assisting her to access resources to address Social Determinants of Health needs.

BOARD OF DIRECTORS

Effective oversight for quality care

The Nebraska Total Care Board of Directors represents independent and diverse perspectives on the needs of members and providers in Nebraska. Their involvement supports our commitment to excellence through the review and evaluation of:

- Strategic planning
- Compliance activity
- Fiscal responsibility
- Quality service to members and providers
- Industry updates and best practices

Members of the Board are healthcare leaders from Nebraska communities, and includes both medical providers and healthcare administrators.

Current board members:

Jeanette Wojtalewicz
Omaha

Stephen Russell, MD
Lincoln

Ken Shaffer, MD
Kearney

Kris McVea, MD
Omaha

Judy Halstead
Lincoln

Pat Connell
Omaha

We appreciate the dedication of these professionals to high quality care for Nebraska Total Care members.

JENNIFER CINTANI, VICE PRESIDENT OF COMPLIANCE

Nebraska Total Care is excited to welcome Jennifer Cintani as our new Vice President of Compliance.

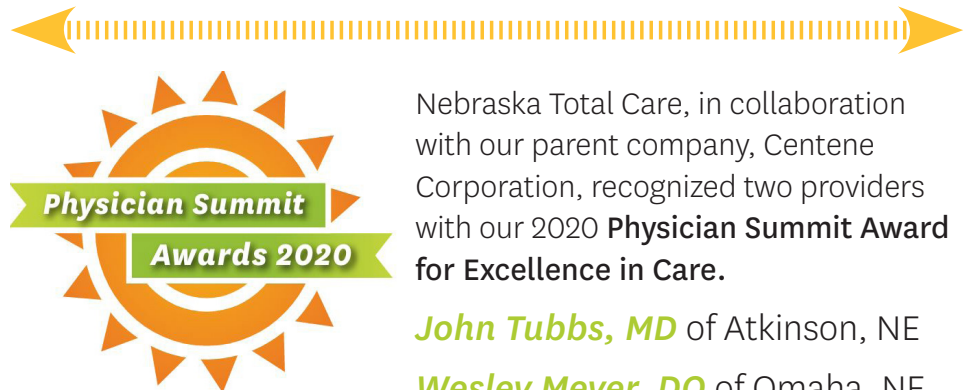
Jennifer comes to Nebraska Total Care from Blue Cross Blue Shield of Nebraska, where she served as the Director of Government Programs Compliance and Medicare Advantage Compliance Officer. Prior to Blue Cross Blue Shield, she had extensive experience supporting patient care through process improvement, regulatory, security, and compliance roles.



Jennifer sees Compliance as foundational to ensuring that businesses hold themselves to high standards. The Compliance Department works in partnership with employees to support their understanding of how contractual and legal requirements shape their day-to-day responsibilities. In her role with Nebraska Total Care, Jennifer direct our efforts to continue to fulfill the requirements of our contract with MLTC, meet all state and federal regulations, and protect the privacy of our members.

Jennifer resides with her family in Lincoln. She is active in the community and has served on the board of a variety of non-profit organizations supporting Lincoln.

“Compliance is central to every role within the business. That’s what I really love the most, the opportunity to engage each employee so they can provide the best possible services.”



Nebraska Total Care, in collaboration with our parent company, Centene Corporation, recognized two providers with our 2020 **Physician Summit Award for Excellence in Care.**

John Tubbs, MD of Atkinson, NE
Wesley Meyer, DO of Omaha, NE

Practitioners are selected each year for this national award based on their exemplary performance in a number of quality measures. Centene has sponsored this annual award since 2008.

“With the Physician Summit Award for Excellence in Care, we thank Dr. Tubbs and Dr. Meyer for their dedication to healthcare outcomes improvement. Their service to our members represents the best in quality medical care.”

Dr. Michael Skoch, Chief Medical Director, Nebraska Total Care