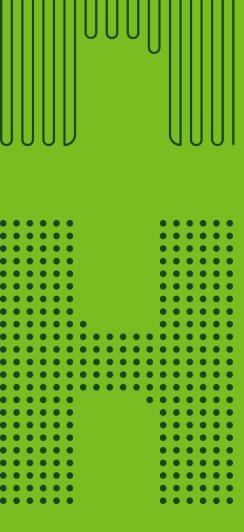
Medicaid Oversight & Advisory Committee July 7, 2022



Healthy Horizons™ in Kentucky





Agenda

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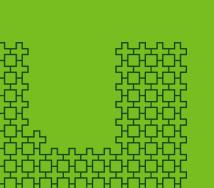
01 | Ensuring Network Adequacy

02 | Support of Rural Healthcare Providers

Measuring Efficacy of SUD Treatment

03 | Ensuring Healthcare Delivery Equity

Initiatives to Improve Health



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Network Adequacy

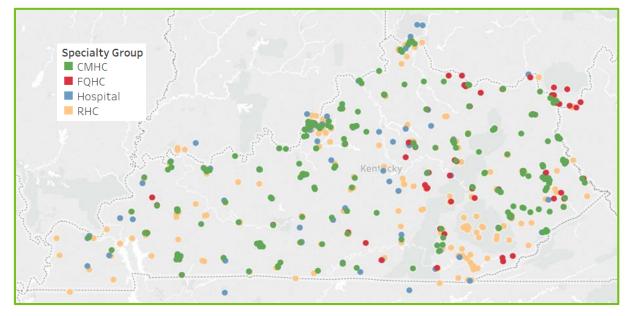
Humana continues to focus on broad access to services across the Commonwealth and beyond

Contracted all Medicaid registered providers for the following specialties:

- ✓ Acute Care Hospital
- CMHCs
- ✓ LTC Hospital
- ✓ Inpatient Psychiatric
- ✓ Critical Access Hospital
- ✓ FQHCs
- Psychiatric Residential

More than 6,000 PCPs, 700+ OBGYNs, and key facilities and providers in bordering states that offer exceptional, quality services are participants in our network

Humana's Medicaid network is bolstered by our significant Commercial and Medicare relationships



Access Summary

Specialty	Members with Access	Provider Count	
Hospital	99%	92	
Primary Care	100%	6,153	
BHSO	99%	182	
Cardiology	100%	640	
Dental	100%	660	
Surgery	100%	634	
Neurologist	99%	389	
Obstetrics	99%	707	
Oncologist	99%	278	
Orthopedics	100%	577	
Psychiatrist	100%	660	
Urologist	100%	240	

52%, 48% PC	P Urban/Rural
92% Act Pat	cepting New cients

Monitoring and Expanding Network Access

Humana's local Kentucky Provider Network development team deploys a wide array of tools to ensure we continue to maintain a robust network and proactively address adequacy concerns



Geo-access analysis which is the use of geographic data to analyze the accessibility of our health care network



Provider Satisfaction Survey



Access and Availability Survey



Quest Analytics (QES) Provider Network Management Platform software to identify Medicaid and non-Medicaid prospect providers who could contribute to the adequacy in areas with adequacy gaps



Non-par Utilization Analysis and review of the "single case agreements" to identify providers who could improve network capacity and offer a contract for participation

Supporting Rural Health Providers

Humana recognizes the key role that rural providers and facilities play in ensuring access for Kentuckians

52% One-half of our enrollee base resides in rural communities

37% Nearly forty percent of overall FFS claims payments are made to rural community providers

90% MLRs among rural community enrollees have exceeded 90%

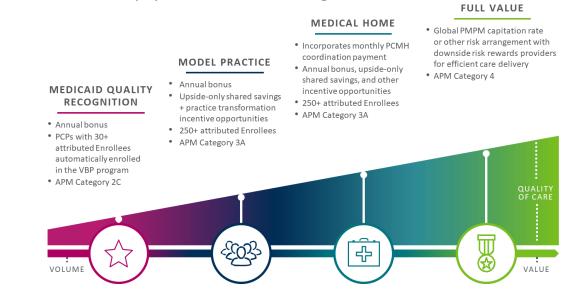
Directed Payments-

Directed and supplemental payments are made across provider community, including:

- HB320 Quarterly Enhanced Payments
- Ambulance
- Supplemental payments to hospitals

Value-Based Payments

- Maintain coordination of care/access fee payments to strategic provider partners to ensure access in rural communities
- Nearly 4,000 providers operating in rural counties qualify for value-based payments and more than 90% of our enrollees are aligned to PCPs eligible for Quality Recognition Bonus payments
- Continue to expand contracting through the path to value continuum, included expanding shared savings opportunities
- Specific to behavioral health sub-populations, we're focused on innovative model-of-care/payment-for-value arrangements



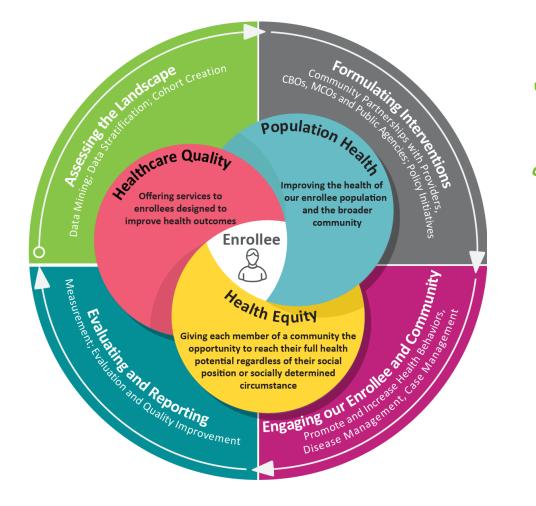
Ensuring Healthcare Equity Across Kentucky

Humana defines Health Equity as the elimination of unjust, avoidable and unnecessary barriers in health and healthcare

Humana currently serves 168K Kentuckians (11% of MCD enrollment) and has been in the Kentucky Medicaid Managed **Population Health Focus** Care program since 2013. **Bold Goal** Community Serving members throughout the Commonwealth (percent of Humana members by region) The Humana Foundation and Humana's Bold Goal aims to build Supporting sustainable health systems by Humana, Inc. have contributed our Home working with our partners to help nearly \$50M to KY non-profits and 6% connect those in need to organizations since the beginning community resources of the pandemic. Advancing health equity and improve health outcomes for marginalized **Health Equity** population in Louisville and throughout the world. An integrated, multi-12% disciplinary collaborative between Humana and UofL, with deliberate focus on **Innovation Hub** health equity, SDOH, and DH&A 14% Continuing to prioritize greater availability and access to telehealth services **Telehealth &** Member Cohorts through vended partnership, reimbursement policy and investments in rural **Digital Divide** communities impacted by digital divide 49% Expansion Rural 52% Families & Children (<19) 29% Urban 48% Workforce The Western Kentucky workforce development program is designed to tap into Families & Children (>19) 10% **Development &** the talent that all Kentucky communities possess, ensuring that we prosper SSI 6% SUD 12% together Western KY Dual Eligible 5% Opioid Use 8%

Population Health Focus

Our approach to improving health and well-being outcomes for the Kentucky Medicaid population stems from our long-standing presence in the Commonwealth, and experience serving similar Medicaid-eligible populations for more than two decades







Stratification & Identification

- Data integration from multiple systems and sources
- Stratification, predictive modeling, identification of chronic conditions and risk severity scores

Engagement

- Tailor programming to address unmet needs for key subpopulations
- Engagement with enrollees across entire care continuum, including incentivizing healthy behaviors and self-management



Interventions

Person-centered interventions, including partnership with key stakeholders to maximize impact of care and resources



Measurement & Evaluation

Data integration, outcome measures, and application of continuous quality improvement actions across all steps

Initiatives Aimed at Improving Health

We continuously test and learn, through implementation of enhancements to our program offerings



Digital Applications

Enhanced SDOH assessment,

basic needs support

Quality Improvement

identification and integration, driving

referrals for housing, depression, and

Increased emphasis on colorectal

cancer early and overall screening

rates in order to increase early

detection and outcomes



Value-Added Services

Go365 Healthy Rewards platform provides incentives to enrollees, empowering them to make healthy, proactive wellness decisions

Providing more than **\$500 in enrollee incentives**, expanded **dental and vision** benefits, post-discharge **meals program**, & **workforce development**

Pacify for **prenatal and newborn** support, providing 24/7 virtual support

VIDA for enrollees impacted by **prediabetes and Type II diabetes**, providing unlimited access to digital tools for enhance selfmanagement

Population Health

VOA Partnership offering **Community Health Worker access** as an important link to healthcare services for complex members

MDLive Access and Where to Get Care Campaign focused on ER diversion

Expanded **HIE integration**, providing greater real-time visibility of ED visits and CM outreach

ASSESSING OUTCOMES

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- Year over year improvements across HEDIS measures including:
 - Blood pressure 140/90 or less
 - HbA1c < 8</p>
 - Timeliness prenatal care
 - Postpartum care

- Increased prenatal (up 12%) and postnatal (up 15%) office visit adherence
- Increased medication, testing adherence (up 50%) and increased PCP utilization (up 29%)
- Improved ratio of non-emergent services provided via UCC vs ED by 9%
- More than one-third of our members are making healthy choices and earning rewards

Measuring Effectiveness of SUD Treatment

Humana manages the largest percent of SUD members, requiring focused clinical programming



Clinical Support

- Expanded discharge planning assessments completed ensuring greater access to follow-up care and referrals
- SUD and maternity-focused Care Managers, ensuring best practice implementation in collaboration with providers
- UM teams trained extensively in ASAM criteria to monitor best practice implementation and prevent insufficient or inappropriate care



Quality Review

- Focused medical record reviews for SUD providers, ensuring quality and compliance
- Written and in-person quality education campaign aimed at reducing gaps in care among SUD population
- Innovative contracting agreements with SUD providers incentivizing payment for achieving improved outcomes



Oversight

- Claims analytics to identify outlier and non-compliant billing
- Monitor provider-level trends for FWA in collaboration with KDMS
- Quality of care investigation team and CM staff co-investigate any quality of treatment reports
- ALOS and readmit rates monitored regularly supporting member and provider engagement addressing barriers/gaps in care

Outcomes Demonstrating Effectiveness of SUD Treatment

Overdose continues to be a significant concern for Kentuckians with Substance Use Disorders:

- 28% decrease of overdose fatalities 2020-2021 (not exclusive to Opioids)
- Care Management team gets real-time notifications of enrollee admits to ER with Opioid diagnosis and/or for a service related to overdose (for ER's participating with HIE partner)

Improving Gaps in Care	MY2020	MY2021	MY2022 Goal
Follow-Up After Hospitalization for Mental Illness (FUH), 7-day	35.75%	1 40.20%	44.85% (67 th)
Follow-Up After High-Intensity Care for Substance Use Disorder (FUI), 7-day	42.73%	1 44.19%	49.13% (90 th)
Follow-Up After Emergency Department Visit for Substance Abuse (FUA), 7-Day	24.65%	1 28.04%	29.30% (95 th)
Pharmacotherapy for Opioid Use Disorder (POD)	34.80%	↓ 29.26%	30.52% (50 th)
Diabetes Screening for People With Schizophrenia or Bipolar D/O Who Are Using Antipsychotic Meds (SSD)	81.51%	1 82.92%	85.57% (95 th)
Initiation and Engagement of Substance Lise Treatment Disorder (IET)	57.73%	↓57.29%	59.03% (90 th)
Initiation and Engagement of Substance Use Treatment Disorder (IET)	31.40%	↓ 28.29%	28.28% (>95 th)

