

Optum and Optima Health — One team, one goal, one member at a time



Optima Health Community Care® faced a big challenge in rolling out a new managed care program to fragile and vulnerable enrollees in the Commonwealth of Virginia’s Medicaid LTSS Medicaid plan.¹

Although Optima Health had more than 22 years of on-the-ground experience working with Medicaid members in the state, moving this population quickly from fee-for-service into managed care required a huge ramp-up of staff, resources and operational readiness. What they needed was a partner with national experience rapidly implementing robust programs with similar populations. They found their solution with Optum®.

A seamless external face

Working hand-in-hand with the health plan, Optum brought in experienced health care professionals to supplement and support Optima’s outreach and engagement activities. The Optum team — including care coordinators and call center professionals — along with Optima Health’s internal professionals, manage all aspects of care for the members. They work on the Optima clinical management platform, use the Optima email system and identify themselves as Optima, thus providing a seamless outward face.

Working as a single entity, they also collaborate on individual cases and care coordination strategies. This one-team approach is making a difference in the lives of the Medicaid enrollees most in need. The result, says Randy Ricker, Vice President of Optima Health Community Plan, “... is a great relationship.”¹



Vulnerable and emerging risk individuals comprise 21% of the Virginia Medicaid population. Many do not understand their benefits — and have no one to turn to for guidance. Optima and Optum teamed up to change this.

A passion to engage, listen and serve

A care coordinator is assigned to each member — and their job is to help ensure the member's needs are heard and addressed. Typically, social workers, registered nurses or LPNs serve in these roles and engage the Optima members. Interactions between care coordinator and the member are personalized, compassionate and member focused. The engagement includes health risk assessments, covering a member's physical and mental health as well as social determinants of health. The latter is especially important for this population.

"Before we can even talk about health care we need to cover the basics," says Beth Old, BSN, CCM and associate director in Optum Population Health Management. "If you don't take care of people's primary needs — housing, clothing, food — it doesn't matter if they go to the doctor." For this reason, food and housing are verified and included in the care coordination plan. The care coordinators introduce members to corresponding community agencies and set up meetings on their behalf. "Ultimately," says Old, "the goal is to assign each member to a provider and to get them to see this provider on a regular basis."

Setting goals, improving lives

Part of the Optum role in this project, and in health care today, is to educate people about their benefits and how to best leverage the services available to them to improve their health and well-being. Goal-setting is a big part of this educational outreach. The care coordinators work one-on-one with the members, helping them set and track goals. "That idea of a member having goals for their life ... you don't do that in insurance. This is a different program," says Ricker.¹

Collaboration, innovative approach and a single focus on the member have resulted in an extraordinary program that is making a difference for Virginia's Medicaid population. As Medicaid expands, Optum is committed to forging new paths to make the health system work better.

Source:

1. One team, one goal, one member at a time. go.optum.com/buffy/optima.mp4. Last updated Nov. 28, 2017. Accessed Feb. 15, 2018.

To learn more about how Optum can help find, engage and support your Medicaid members:

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