



Healthcare and Pega Dynamic Case Management

Personalized Care Management Enables Healthcare Organizations to Improve Patient Outcomes and Lower Costs

Healthcare organizations are under tremendous pressure to simultaneously improve the quality of patient care and lower costs. This has become even more critical in the U.S. with the new reform mandates requiring medical insurance coverage for a much larger percentage of the population. One way to accomplish both objectives is by taking a holistic, patient-centered view and cohesively managing the entire spectrum of health services across the continuum of care. Healthcare payers who want to be innovative leaders in their market have committed to a strategy of transforming their organizations to deliver a more unified model of care. With this model, healthcare organizations can offer a more proactive approach to care instead of having to react to acute care situations that represent the majority of costs today. Ultimately, improving the overall quality of care in a covered population and avoiding costly adverse events like hospitalizations and exacerbation of disease results is a win-win-win situation for the patient, provider, and health plan.

In this article, we describe how Pega's Care Management Solution enables healthcare organizations to realize their vision of a unified care model. Care Management, along with Pega solutions available for other industry verticals, takes advantage of Pega Dynamic Case Management capabilities. For the remainder of this article, when describing those capabilities in Pega Care Management, we will abbreviate as "Pega DCM" in order to avoid confusion with a set of specific activities some healthcare practitioners perform called "patient case management".

Care Management is typically comprised of four types of programs: Utilization Management, Case Management, Disease Management, and Wellness Management. These distinct and complex care programs require software that can improve how the healthcare organization communicates and collaborates with their patients, physicians and other stakeholders in the care equation. For readers unfamiliar with these programs, *Utilization Management* is the approval (or denial) of benefits based on the patient's entitled benefit packages. For example, a physician preparing to admit a patient in a hospital may need preauthorization from the health plan so that the hospital stay will be covered. *Case Management* is engaging patients in an acute care or complex medical scenario, such as hospitalization due to an accident. The health plan develops and implements a specific care plan with the patient to improve the quality of care and help reduce the cost of services provided during their hospital stay. *Disease Management* targets a subset of the patient population having a particular chronic disease (or diseases) that the payer and/or provider feel will be better served by engaging and implementing educational or other programs to improve patients' well-being, while also minimizing the worsening of the disease for each patient. *Wellness Management* programs are also population-centered programs focusing on prevention to help "healthy people stay healthy" and help at-risk patients avoid future health problems.

Traditionally these four Care Management programs are siloed, but innovative healthcare organizations have recognized that improvements in clinical, financial and operational outcomes can be achieved using an integrated, fully unified care management platform like Pega DCM to share information across these programs.

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Care Management applies Pega DCM to organize work in a holistic way that provides both structure and flexibility to adapt to the unique attributes of the care activities or “work” it manages. An important theme of Pega DCM is organizing work into a hierarchy of cases and subcases. A case can be thought of like a manila folder that captures and organizes all of the related elements for the work that needs to be completed — including goals, participants, tasks, correspondence, document attachments, dependencies, rules (or policies), as well as related events that can trigger specific activities. The following graphic helps illustrate Pega DCM concepts in Pega Care Management:



Business Objectives

- Tailor plans to improve patient outcomes
- Maximize efficiency of care professionals
- Lower cost of delivering care
- Respond quickly to change

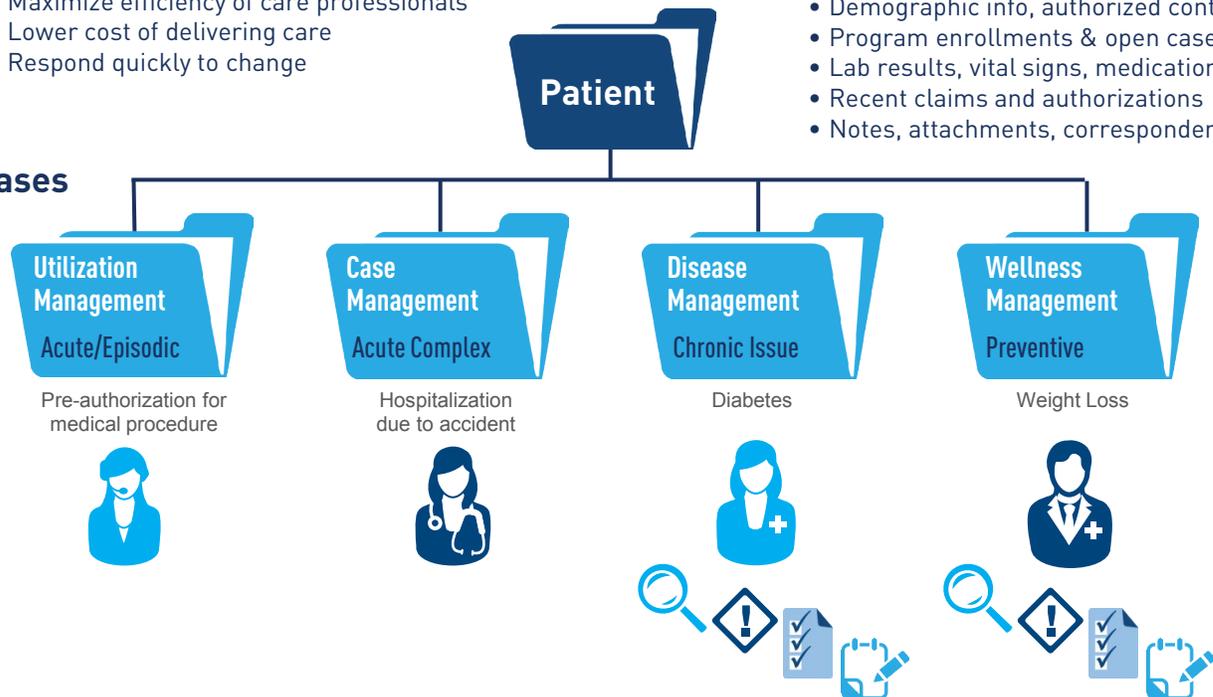


Patient Profile

Comprehensive, shared view of patient

- Demographic info, authorized contacts
- Program enrollments & open cases
- Lab results, vital signs, medications
- Recent claims and authorizations
- Notes, attachments, correspondence

Sub-Cases



Pega Care Management organizes all of the activities and participants around the core subject of all the work that needs to get done - namely, the patient. Using the terminology of Pega DCM, the patient is the *parent case*. The patient profile captures detailed information including demographics, program enrollments, open requests, clinical data, recent claims, authorized contacts – and can also attach documents, notes and other correspondence. The data in the fully-integrated, patient-centric platform can be updated and modified by the care manager, sourced directly from existing enterprise systems or both. As shown in the graphic above, utilization management, case management, disease management and wellness management programs are sub-cases of the patient parent case. Because of Pega’s integrated patient view and the flexibility of the solution, healthcare organizations can get started quickly using the solution for one area of care, such as managing disease or wellness programs, and then easily expand to also support utilization management and/or patient case management.

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Pega Care Management includes *assessment and care program templates* which care teams can easily customize to meet their needs and accommodate their unique workflows. A specific diabetes program to help affected patients manage their disease is an instance of the disease management program “case type” in Pega DCM, and uses Pega’s best-in-class automated processing to improve consistency, accuracy and productivity. Workflow activities can be easily configured to invite patients to participate in a program, maintain ongoing multi-channel engagements with them and capture specific goals and tasks for each participant. This allows care teams to establish best-practice workflows, schedules and tasks to optimize the care delivered through the care program. Specific events can be configured to pause or end participation in a care program if a patient experiences one of these. For example, if a patient is hospitalized due to an auto accident, their participation in a smoking cessation wellness program is no longer a top priority in the near term and needs to be reprioritized while the patient completes the care for his or her injuries with coordination between the health plan, hospital and physician. For this patient, Pega will increase the priorities of the utilization and case management cases while lowering the priority of the smoking cessation wellness program.

Pega Care Management also helps care teams identify, segment and target patients from across the member population so they can invite them to participate in specific care programs. *Alerts* can be configured to run on a regular basis to scan the member base and create a follow-up set of activities to inform those prospects about a disease or wellness program that may be relevant to them and track their enrollment and participation. Alerts can scan information such as patient claim history to check for the inclusion or absence of certain information (such as a claim’s primary diagnostic code) that helps determine whether a particular care program may be relevant for the plan member.

Pega is easily configured to route and escalate work to the right experts needed to make a decision or move patients forward in their treatment. Decision rules can automate approval of certain requested services, while escalating other types of requests to utilization managers or medical staff for other requested services where human expertise or an individual review of the patient’s circumstances is necessary. As decisions are made by nurses and other experts or by the software, Pega automatically routes the work to the next stakeholder who needs to perform a particular task and manages the entire set of activities against defined Service Level Agreements (SLAs). Because of the case hierarchy enabled by Pega DCM, different SLAs can be set for individual sub-cases such as a disease or wellness program.

Pega Care Management is designed to be deployed rapidly. This is achievable in part because it is built upon Pega’s award-winning Business Process Management (Pega BPM) core technology and extends it with healthcare industry subject matter expertise. Healthcare organizations can enable their business and IT teams to collaborate from day one right within the Pega software to define and document requirements, prototype critical functionality, customize, test and deploy the solution. (We call this *Direct Capture of Objectives*, or DCO.) Pega’s many built-in capabilities are designed to minimize if not entirely eliminate manual coding, and all users—including developers—access Pega using a web browser. Pega Care Management allows easy customization of pre-built templates to incorporate the organization’s own unique requirements into the solution. *Pega’s Build for Change*® technology enables healthcare payers to remain agile and easily adapt to address their unique workflows and new market opportunities, or to quickly react to changing healthcare industry regulations. Pega Care Management is designed to comply with industry standards such as HIPAA-compliant data usage and other standards.

As the post-reform healthcare market continues to evolve, new payment and delivery models will emerge and change the concept of collaboration of care. Having the right technology with the flexibility to manage and adapt to all these changes will continue to be one of the most important decisions healthcare organizations can make. Pega Healthcare and Pega DCM solutions are helping leading organizations improve the quality of care and reduce costs by automating work and optimizing the patient experience.

To learn more, visit the [Care Management Solution web page](#) and take a look at the [solution datasheet](#).

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