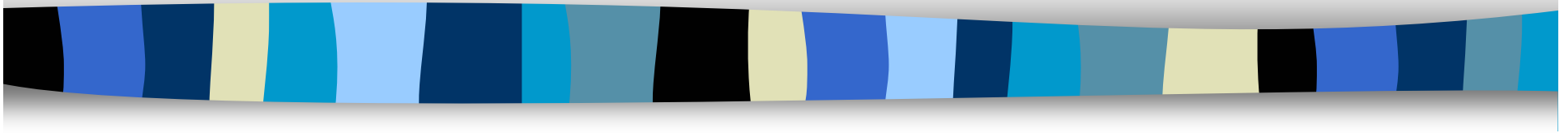


Wisconsin's SSI Expansion Predictive Model Report



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Structure

- Identification
- *for each identified new enrollee, the report compares the individual's score with the population norms for:*
- Primary Care Quality
- *Ambulatory Sensitive Conditions*



Structure Cont'd

- Complexity and Co-Morbidity
- *CDPS Diagnostic Groups*

- Risk and Resource Intensity
- *CDPS predictive value and Predictive Model Scores*



Structure Cont'd

- Adherence
- *Mean Possession Ratio by Therapeutic Class of Drug*
- *Number of prescriptions filled by therapeutic drug class*



Process

When a Managed Care Organization (MCO) enrolls a new member with Medicaid eligibility, a new record is added to the Medicaid Managed Care Enrollment List.



Process Cont'd

- Every month, each “added/new” member on the list trigger’s a short Business Objects (BO) report that selects fields from the “SSI PM” tables, which are generated once per year for everyone in the Wisconsin SSI/Medicaid population.



Process Cont'd

- The short report for each new enrollee is sent to the MCO via BO InfoView Mail (secure internet).
- The report is reviewed by the MCO, which may select cases for further information via interactive queries with BO Web -I.



Outcome

- Once per month, a BO Web-enabled person at the MCO receives (BO InfoView mail) a short BO report for each new Medicaid enrollee, which is forwarded to a reviewer.



Outcome Cont'd

- The reviewer sorts through the information about each enrollee's primary care quality, morbidity, complexity, and health risk information and makes preliminary recommendations, such as:
 - retrieve more detailed Medicaid claim & encounter history data for more detailed clinical examination



Outcome Cont'd

- Set priorities for scheduling comprehensive assessment and clinical evaluations
- inform DM/CM managers of potential new candidates
- informing clinicians at the point of enrollment creates the opportunity to intervene more quickly and effectively.