



Optum Advisory Services

Helping health care leaders thrive amid change

Optum

Across health care, the rules are being rewritten

Health care leaders are in a new world defined by disruption and volatility. COVID-19 ushered in dramatic challenges to the health care delivery and payment model:

- Extreme economic pressure
- Uncertainty around future supply and staffing imperatives
- Widespread adoption of virtual care

And these developments only increased the need to meaningfully address the crisis of affordability and access to care.

How is your organization adapting?

Forging a sustainable path forward amid change requires understanding both the near- and longer-term market impacts and rethinking how to respond both strategically and operationally.

This means re-envisioning and managing relationships across the health care continuum and finding your unique role in generating value. Organizations that fail to recognize and prepare for this new reality are in danger of being left behind.



Our team of consultants will be with you at every step, with guidance and support to overcome roadblocks.

Key questions for health care leaders:

1. In what ways can we reinvigorate our business and operating models to ensure financial sustainability?
2. How can we improve employee productivity and manage our workforce in a challenging labor market?
3. How can we integrate virtual care into our delivery model?
4. What role can we play in meaningfully reducing the total cost of care?
5. How can partnerships help us gain efficiencies, innovate, grow – and mitigate risk?

How we partner with you

Navigating the change and complexity in health care is daunting. You need a deep understanding of many considerations outside your organization – and a pragmatic approach to initiating, motivating and managing change within and across it.

Our team of consultants will be with you at every step, with guidance and support to overcome roadblocks. And we can lean in where you need it most, whether:

- Providing sophisticated modeling and analytics
- Serving as an extension of your staff to tackle mission-critical priorities
- Driving sound decision-making



Define your unique strategy with expert insight and analytical rigor

We begin by assessing your organization's position in the marketplace, using the industry's largest health care data asset. Our experts will share their deep experience and take the time to learn from you about your organization and vision. Together, we'll develop your best pathways for lasting success with actuarial precision.



Accelerate your transformation with innovative partnerships

As you navigate your role in the health care ecosystem, we can help you identify and realize new opportunities to generate value across health care. We are committed to developing forward-thinking business and clinical models to deliver cutting-edge results.



Operationalize your data-driven plan with proven methods and expertise

With many years of both consulting and industry experience, our team can help bring your strategy to life. We work alongside you to implement lasting change by drawing on a unique breadth of financial, IT, operations, analytics and clinical capabilities. We use proven methods and best practices for change management and cultural transformation to hardwire success.



Optimize your workforce with innovation and health care talent in critical areas

In a challenging labor market, it's important to improve the productivity of your current workforce and also find ways to augment your staff with additional resources. We can improve existing processes and workflows to create a better work environment and reduce dependencies on manual tasks. We can also provide access to scale talent in areas like actuarial, analytics and IT.



Let's address your biggest challenges

Optum Advisory Services is committed to helping you successfully take on your most pressing challenges. We can help you grow your business, achieve financial stability, deliver value to stakeholders and reduce the total cost of care.

We bring a broad range of critical capabilities to support health care organizations, with a deep focus on providers and health plans and where and how they intersect.



Strategy and growth

- Enterprise strategy
- Transition to value-based care
- Population health
- Revenue diversification
- Strategic partnerships and collaboration
- Consumer experience and engagement
- Digital health
- Applied innovation



Analytics

- Managed analytics (sourcing analytics functions)
- Innovation analytics (AI and machine learning)
- Hospital/acute care analytics
- Analytics strategy and program assessments
- Targeted analytics:
 - Actuarial
 - Consumer
 - Social determinants of health
 - Value-based care

Health plan focused



Risk management and growth

- Trend analytics
- Actuarial services, software and analytics tools for commercial, Medicaid, Medicare, ACA and pharmaceutical
- Underwriting (UW) transformation, including process redesign, audits and UW as a service
- Government programs bid support
- Pricing and reserves

Health management and operations

- Total cost of care and quality programs (to reduce administrative and medical expense while improving quality)
- Enrollment and eligibility
- Provider network design and service
- Claims performance management
- Care management: UM/CM/DM programs
- Risk adjustment
- Quality (Stars, HEDIS*)

Health plan enterprise transformation

- Operations optimization
- Partner integration support
- Process change and roadmap development
- Change management

Health plan enterprise delivery services

- On-demand access to health care talent
- Scalable staffing
- Enabling large-scale transformation

Health plan technology service

- Technology strategy and development
- Data strategy and governance
- Digital transformation
- Implementation and configuration
- Managed services: technology application and infrastructure
- Intelligent automation
- Cloud optimization

Government programs

- Medicaid RFP support and state-based market assessments
- New plan launch including Medicare Advantage, Medicaid and ACA
- Care management programs and systems
- Government plans operations

* The Healthcare Effectiveness Data and Information Set (HEDIS®) is a registered trademark of NCQA.

Provider focused



Transformation services

- Health system and medical group governance and organizational structure
- Service line management and partnership models
- Value-based care design and implementation

Finance and operations

- Charge capture improvement
- HIM/coding optimization
- Patient access
- Patient financial experience
- Shared services centralization
- Revenue cycle optimization

Clinical technology solutions

- EHR go-live, personalization and stabilization
- EHR specialty optimization
- IT implementation planning
- IT managed services
- IT strategy development
- IT vendor selection
- Risk adjustment optimization

Clinical performance

- Inpatient care management
- Clinical variation reduction
- Ambulatory care management
- Operating room (OR) optimization and cost per case

Cost optimization

- Administrative optimization
- Supply and purchased services cost management
- Workforce productivity

Examples of our work

Our consultants collaborate to bring diverse expertise and a multilayered perspective to projects across the health care ecosystem. We partner with a wide variety of organizations – from stand-alone hospitals and multistate health systems to regional and national health plans – to address near- and long-term challenges. Here are some snapshots of our work in selected areas.



Addressing care variation with clinical care redesign

Challenge: Leadership of a five-hospital integrated delivery system wanted to grow the cardiovascular service line into a high-performing heart institute model.

Solution: Optum consultants assessed performance to identify highest priority opportunities for achieving high-reliability care and reducing variation in quality and cost. They implemented a unified program and provided in-depth support while building a culture of improvement.

Results:*

\$10.5M

in savings from more than 10 initiatives implemented across year one



Optimizing the EHR to document chronic conditions

Challenge: A multihospital health system wanted to assist providers in more accurately identifying and documenting chronic conditions.

Solution: Optum consultants helped the provider organization by implementing a holistic program around an EHR-enabled workflow to document hierarchical chronic conditions (HCCs), alongside clinician-focused training and analytics and reporting.

Results:*

\$43.7M

in expected improvement in care funding over two years from more appropriate coding



Using analytics to develop a data-driven strategic roadmap

Challenge: An academic medical center in the Northeast was already using the Optum analytics platform. They wanted to leverage it to improve performance across their portfolio of value-based contracts and to improve health outcomes of their at-risk populations.

Solution: Optum consultants evaluated the client's positioning, considering both internal capabilities and external market dynamics. Building on prior investments analytics and care management, OAS developed a future-state roadmap and tactical plan to transform the health system into a sustainable, data-driven and value-oriented health system.

Results:*

In less than two years, the health system cited **increased revenue from value-based care contracts** as a contributing factor in its return to profitability.

* These return on investment figures reflect actual historical client results but are not a promise of future results.



Resolving data gaps to improve Medicare Star Rating

Challenge: A regional health plan received a 3.5 overall Star Rating for Medicare Advantage HMO and PPO contracts for two years, yet suspected rating did not truly reflect performance.

Solution: Optum conducted initial assessment, revealing underperforming Part C HEDIS® measures and confirming existence of a data gap, but not a care gap. Further analysis pinpointed more than 40 issues in data accuracy and completeness. Consultants partnered with business and IT leaders to close all identified data gaps and implement improved, sustainable processes.

Results:*

4-Star

Rating achieved for both plans **within 15 months**



Optimizing business processes to improve health plan operating rigor

Challenge: Regional health plan (~200K Medicaid/Medicare members) needed help improving medical loss ratio (MLR) in main product lines.

Solution: Optum conducted an end-to-end operational and technology assessment to identify more than 20 opportunities across multiple business functions including enrollment, provider data management, claims, medical management and supporting technology applications. Consultants redesigned claims process and other business-related initiatives, created functional and configuration design and enhanced/developed business processes, delivered operational playbooks, and established integrated operational decision governance structure.

Results:*

\$4.9M

in expected payment recoupments

\$12M

in expected medical savings



Streamlining clinical authorizations to reduce costs and improve NPS

Challenge: A large national health plan sought to reduce internal and external clinical costs while optimizing the authorization process.

Solution: Optum consultants reviewed authorization team structure and operations to identify best practices across the care services. These included authorization requirements, site-of-service requirements and authorization processes and technologies.

Results:*

25%

increase in automated authorization decisions

50%

decrease in medical costs when site of service was used

22%

increase in NPS

* These return on investment figures reflect actual historical client results but are not a promise of future results.

Optum Advisory Services

As part of Optum, the Advisory Services team is able to draw on wide-ranging experts, resources and capabilities across:

- Health care strategy and operations
- Health care delivery
- Pharmacy care services
- Life sciences
- Population health management



How we're different

Holistic, exclusive focus on health care

We have deep relationships across the industry and are committed to making the health care system work better for everyone.

Unparalleled data assets

We are uniquely positioned to align providers, health plans and consumers using deep health care intelligence. Our combination of curated data, leading analytics and applied expertise allows us to extract value from data across the ecosystem to best serve patients and advance organizational goals.

Innovative, end-to-end solutions and partnerships

Our services range from strategy and capabilities assessments to implementation support and technology, as well as outsourced analytics and managed services. We work with you to design a customized, integrated suite of solutions. We view our partnerships as long-term collaborations and are committed to performance transparency and accountability.

Combination of real-world and consulting experience

Our team brings together consulting expertise and extensive background in positions at provider and health plan organizations and includes data scientists, finance and C-suite executives, process engineers, clinicians and the only actuary practice in the United States dedicated to the health system.

1,200+
experts

25+
clinicians

175+
actuaries

100+
experts in data
science and IT

Our recognition

9 out of 10

hospitals count on us to design and deploy solutions

4 of 5

health plans are served by our teams

129M+

lives of consumer data

90K+

providers and practices and other health care facilities are served by our teams

250M

lives of clinical and claims data

≈24,000

analytics experts, spanning clinical, financial, actuarial and technology domains



Top ranked by Modern Healthcare

Ranked #2, for the fourth year in a row, Optum Advisory Services is the second largest health care management consulting firm in the U.S.



Optum is recognized as a Leader in three categories measured by Avasant's RadarView™:

- Healthcare Provider Digital Services 2022-2023
- Healthcare Payor Digital Services 2022-2023



Everest has recognized Optum as a PEAK Matrix® Leader across multiple services areas 2021-2022

- Healthcare IT Service Provider of the Year
- Healthcare Analytics Services
- Intelligent Automation in Healthcare
- Healthcare Provider Digital Services
- Healthcare Payer Operations (BPO)
- Healthcare Payer Digital Services

Meet our experts



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Health plan focused



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