

Pyx Health expands Banner University Health Plans' 24/7 care team to decrease medical spend among high-utilizing members

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The challenge

Banner University Health Plans (BUHP) covers over 200,000 Medicaid, Dual Eligible Medicare, and Long-Term Care lives in Arizona. In 2018 Arizona integrated behavioral health care into their traditional Medicaid program. This prompted BUHP to search for new approaches to address the whole-person needs of our members with a focus on key drivers of avoidable utilization—behavioral health conditions and social barriers to care. Analysis of our utilization patterns and medical expense clearly demonstrated the independent impacts of

both general mental health conditions, such as anxiety and depression, and serious mental illness on increased medical expenditures, including general hospital admissions and emergency department use. Furthermore, two characteristics of our high utilizers were consistent with published reports: they accounted for a disproportionately high percentage of our medical spend, a trend that was even more extreme for members with behavioral health co-morbid conditions; and they were a dynamic population with intense but short-term needs.¹

BUHP has a long experience of successfully managing the care of Medicaid members. Our experienced nurse case managers have reported three key barriers to successfully addressing the needs of our members. First, engagement rates are low, in part because when contacted about their specific condition, such as uncontrolled diabetes, members often report higher priority more basic needs, such as transportation, food security or family stressors. Second, traditional methods of outreach, such as letters and telephone, do not provide 24/7 capability to engage members when they are available and motivated for change. Third, nursing expertise is best used in a targeted manner to support non-nurse support staff in order for programs to be cost-effective and achieve long term sustainable results.

Characteristics of successful care coordination programs gleaned from the literature and consistent with our experience are: a strong transitional care component; targeting of moderate to severe patients; ability to address diverse conditions, including mental health issues and multiple co-morbid

chronic conditions; and ability to on-board members quickly and engage them over months to meet needs of the dynamically changing group of high utilizing members.^{2,3,4} Anecdotally, our care team had identified loneliness and/or social isolation as common issues present among members with high avoidable utilization patterns.

At a glance

The Banner Health Network consists of both health plan and accountable care covered lives enrolled with Medicaid, Medicare and commercial plans. Banner University Health Plans cover over 200,000 Medicaid lives and partnered with Pyx Health to engage members and coordinate their care during care transitions. The Pyx Health program, which consists of technology connected to support staff, generated a **net cost savings of \$847 per member per month (P<0.001)** for six months following initiation by successfully engaging high risk members, addressing their underlying needs and connecting them to community resources. The Pyx Health program uniquely addresses loneliness and social isolation to positively impact avoidable hospital and emergency department utilization among members with a wide range of clinical conditions, including multiple chronic conditions, to efficiently and cost-effectively improve service utilization patterns.