



Lucent Health

DATA DRIVEN + HUMAN FOCUSED



Agenda —

- OUR MISSION
- RIGHT NOW
- ABOUT LUCENT HEALTH
- WHY LUCENT HEALTH
- COST CONTAINMENT
- PRODUCTS AND SERVICES
- DATA ANALYTICS

A person with a yellow backpack stands on a rocky shore, looking up at a massive, jagged glacier wall. The scene is set in a cold, mountainous region with a blue-tinted sky and water. The person is positioned on the left side of the frame, looking towards the right where the glacier dominates the background.

Our Mission

See Health Benefits in a New Light

Lucent Health sets the standard in human-focused and data-driven health plan administration.

IN EVERYTHING WE DO, WE BELIEVE IN:



Saving people money



Helping people navigate their
healthcare experience and
understand their benefits



A Better Health Benefits Partner

- Best-in-the-industry claims management with a compassionate, human focused, data-driven care management solution.
- Care management that helps health plan participants make smarter, cost-saving healthcare decisions.
- The use of continuous data analytics to drive the right care, at the right cost, at the right time.

A photograph of three business professionals walking through a modern office hallway with large glass windows. On the left, a man with a beard and a teal blazer walks towards the camera, holding a laptop. In the center, a woman with blonde hair and a dark blazer walks alongside him. On the right, a woman with dark curly hair and a dark blazer walks away from the camera. The scene is brightly lit, and the office interior is visible through the glass walls.

Right Now

MOST EMPLOYERS ARE WORRIED



EMPLOYERS FACE

8% - 10%

Projected increases in health
benefits costs...on top of rising
inflation and labor costs



EMPLOYERS NEED

Greater savings than just
relying on PPO discounts

Super user experience



THE SOLUTION

A self-funded plan with
the right administrator

**Employees need help navigating
uncertainty. And that applies to
the healthiest of your members.**



Lucent Health Was Built for Right Now.

Lucent Health is one of the largest independent administrators in the country.

- Helping employers save money – Clients costs are 43.5% below National Average
- Maximized cost savings with customized cost containment programs
- Experienced team providing superior care management solution
- Dedicated service team to give highest level of service
- Lucent Client retention rate of 94%

On Average, Lucent Health Clients Save

\$2.4 Million

ANNUAL HEALTH
BENEFITS

\$2,796

PER EMPLOYEE
PER YEAR

33%

OVER THEIR PREVIOUS
BENEFIT PLAN

Source: Internal Analysis of 20 Lucent Health Clients with VBP Plans



About Lucent Health



2014

Lucent Health
Founded

Acquires
North American
Administrators

2015

Acquires Capitol
Administrators

2017

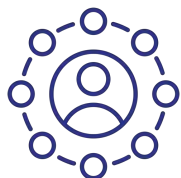
Acquires Cypress
Benefit Administrators

2019

Acquires Narus Health

2020

Completed the Integration
and Rebranding



435
EMPLOYEES



800+
CLIENTS



250,000
MEMBERS



2 Billion
ANNUAL CLAIMS
PROCESSING



9
OFFICES NATIONWIDE
Appleton, WI | Dallas, TX | Denver, CO
Los Angeles, CA | Memphis, TN | Nashville, TN
Omaha, NE | Portland, OR | Sacramento, CA

1

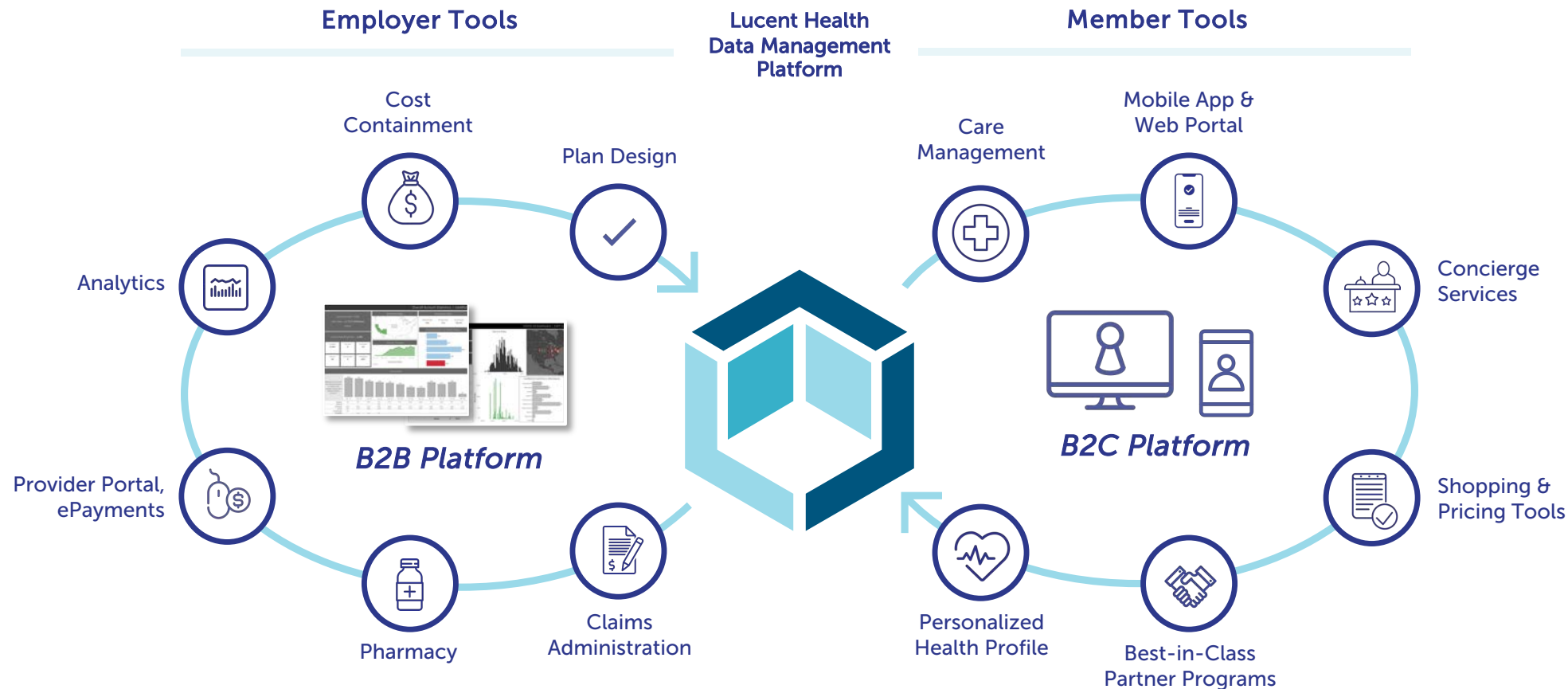
- 1** Data Warehouse
- 1** Phone System
- 1** Financial System
- 1** Data Analytics Platform

Human Focused

We have highly trained team members to help your employees with questions about their medical claims, or to walk with them through a health crisis.

Intelligent human insights gathered from daily member data ensure faster delivery of compassionate care to members and their families.





Comprehensive and Synergistic Solutions Assembled Under One Roof Generate Meaningful Savings

- ✓ Innovative Health Plan Solutions
- ✓ Data Science
- ✓ Care + Advocacy



Data Driven

Data helps Lucent Health custom engineer a health plan unique to your company and employees.

Timely data is also at the heart of the robust reporting, predictive analytics and proactive care management that drive down health benefit spending—while enabling superior outcomes and enhancing the member experience.

A man in a white lab coat and glasses is smiling while talking on a mobile phone. He is sitting at a desk with a laptop, and his hands are on the keyboard. The background is a blurred office setting. A blue gradient overlay covers the right side of the image.

Why Lucent Health



- Lucent Health takes a consultative approach to partnering with brokers.
- Lucent Health equips brokers with access to customized solutions based on real-world data insights so you can bring your clients the best option.
- Lucent Health arms brokers with access to presentations, eBooks and other marketing materials to make your job easier.



We believe in giving members the tools, resources and assistance, plus the compassionate service and care to the individual — to navigate the complex healthcare system.

Lucent Health is your healthcare advocate, helping navigate the healthcare journey for you and your family.

It comes down to our ability to access and use **nightly data feeds**.

Intelligent human insights gathered from daily **member data** ensure faster delivery of compassionate care to members and their families.



Lucent Health Integrated Solutions Under One Roof

The powerful combination of
compassionate people and
innovative platforms and
processes to better serve you.



COST CONTROLS



PLAN ADMINISTRATION



PATIENT CARE PROGRAMS



Products & Services



Products & Services —

- LUCENT HEALTH TRADITIONAL PLANS
- LUCENT HEALTH LEVEL FUNDED PLANS
- LUCENT HEALTH VBP PLANS
- LUCENT HEALTH HYBRID PLANS
- LUCENT HEALTH CARE MANAGEMENT
- OTHER COST CONTAINMENT



Smarter Plans, Custom Built

Employers don't need one-size-fits-all solutions when it comes to health plan design. Lucent Health uses data to help design the best solution for employers and can create flexible custom options for health plans that also come with a suite of care management services.

Lucent Health: Traditional Plans



- Average savings of 25% to 30% over fully insured plans
- No startup costs + no additional fees post termination
- Concierge care, complex care management
- Specialty drug carve-out
- Transplant carve-out
- Telehealth option
- Transparent reporting
- Secure stop-loss Contracts
- Employer keeps 100% of excess benefit dollars after contract period plus rebates



Lucent helps employers work with national PPO plans and have access to virtually every regional and local network. We customize a network to meet the specific needs of your employee base.



Lucent Health: Level Funded Plans



- Average savings of 25% to 30% over fully insured plans
- No startup costs + no additional fees post termination
- Concierge care, complex care management
- Specialty drug carve-out
- Transplant carve-out
- Telehealth option
- Transparent reporting
- Secure stop-loss Contracts
- Employer keeps 100% of excess benefit dollars after contract period plus rebates

The Breakdown

Fully insured compared to Lucent Health’s Level Funded Plan

FULLY INSURED



SELF FUNDED





Consistency & Flexibility



No Start-Up Costs + No Additional Fees post termination

Huge savings, superior member care and awesome reporting



The Employer is self-funded and covered by ERISA allowing for more flexibility in plan design



Build cash flow consistency and transparency into plan



Lucent Health’s Level Funded Solution

Allows an employer to have better control over their benefit program and keep any plan savings



Concierge Care

Team to coordinate various healthcare needs with your doctors, caregivers and pharmacists



Complex Care Management

Compassionate, experienced team providing 24/7/365 clinical support for enrolled members



Specialty Drug Carve Out – Deep Rx Discounts

A fully integrated PBM and client keeps the rebates



Telehealth Option

- Virtual care through Teladoc via phone or video chat
- Greater access to physician care, more savings



Transparent Reporting

Client well-informed on plan performance



Secure Stop-Loss Contracts

A rated or better carriers with run-out protection



Return of Funds

Employer keeps 100% of excess benefit dollars after the contract period plus all Rx rebates

Lucent Health: RBP Plans



Lucent Health's RBP Dual Option saves the employer money while giving the individual employee the flexibility to choose the best option for their healthcare needs.

Option 1 is available with or without a physician /ancillary-only network. (The network logo on a PNA-affiliated card can facilitate acceptance of the plan at the provider's office.)

Option 2 is a traditional preferred provider organization (PPO) selected by the employer from an available regional network (Aetna, Anthem, Cigna and others). Both options feature Integrated Care Management and the support of dedicated account executives. Pricing is established before services are rendered. Acceptance exceeds 98%. And employees get the high-touch service of Narus Concierge Support.

The fourth generation of Reference Based Pricing (RBP) Plans have worked out the negatives of RBP while continuing to provide employers pricing that is 75-80% below network plan pricing.



VBP plans have worked out the negatives of RBP by:



**PATIENT
EDUCATION**



**CUTTING EDGE
CARE MANAGEMENT**



**DIRECT CONTRACTING
WITH PROVIDERS**



**BALANCE BILLING
ASSISTANCE**



**LEGAL
REPRESENTATION**

NEW MARKET (2011):

Disrupt

Version 1.0

Reference Based Pricing

Pros: 120% above Medicare

Cons: Surprise Charges for Employers, Balance Billing for Employers affects credit rating, Adversarial relationship with Providers

MATURING MARKET (2013 ISH):

Negotiate & Partner

Version 2.0

Reference Based Pricing

Pros: 140%-200% above Medicare, more transparent fee structure, less adversarial relationship with providers

Cons: Ancillary procedure costs; employees still deal with balance billing, no member education,

MATURE MARKET (LATE TEENS):

Partnership & Full Network Agreement

Version 3.0

Direct Contracting

Pros: Cost controlled at 40% Medicare (or other as negotiated) with ancillary procedures priced at other fixed %. Physicians typically paid at 120%.

Cons: Poor member education, no good balance billing solution

NEW MARKET (TODAY - FUTURE):

Front End Provider Acceptance; Advocacy Tools

Version 4.0

**Direct Contracting Balance
Billing Assist Legal Representation**

Pros:

- 140% Medicare (or other as negotiated) with ancillary procedures priced at other fixed %.
- Direct Contracting
- Balance Billing Assist
- Legal Representation
- Exceptional Care Management
- Clear Member Education
- Integrated Concierge Care
- Dual Option

Lucent Health VBP plans are the **fourth generation of RBP plans**, maintaining the savings achieved by RBP, **without the negatives** to employers and employees.

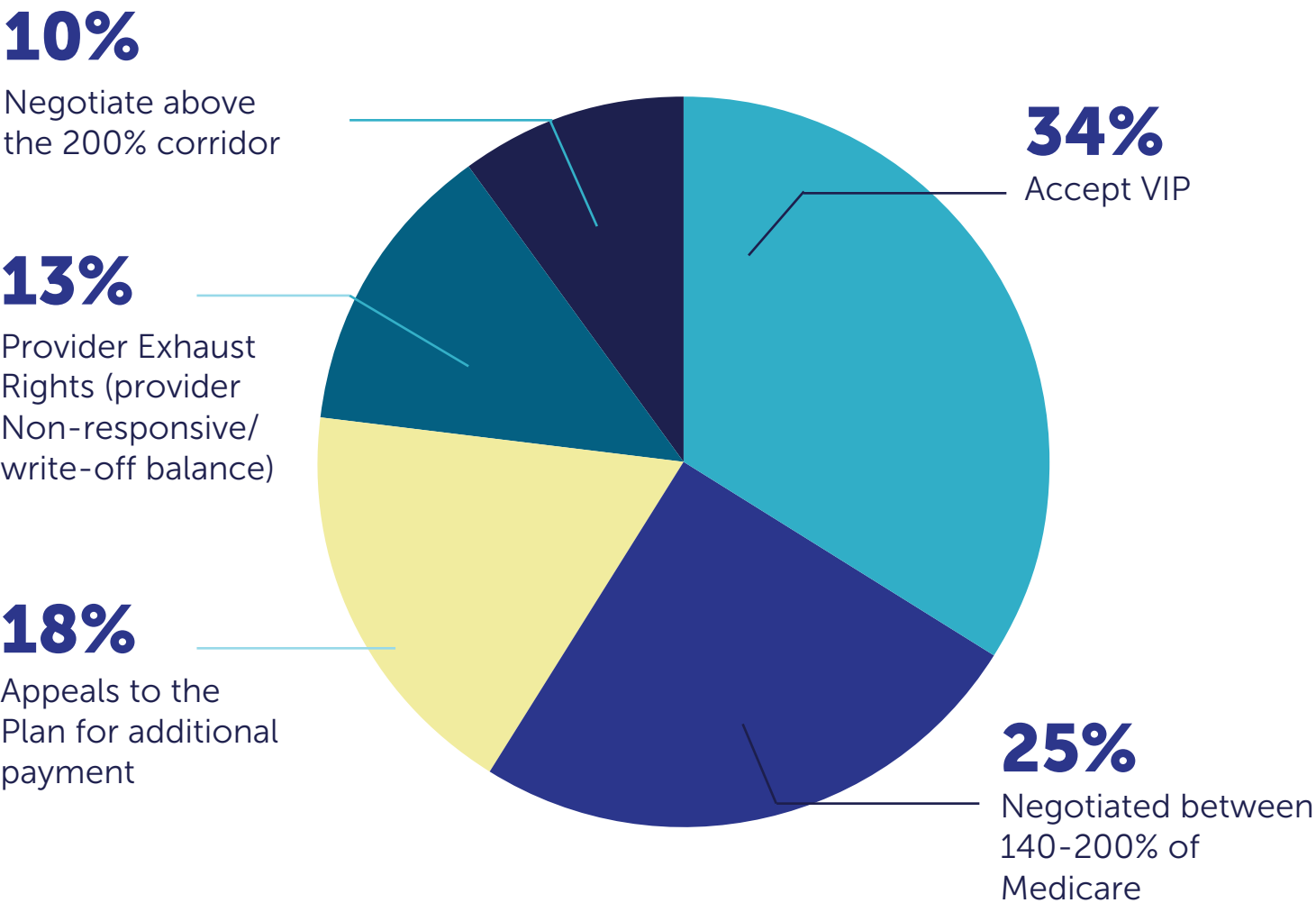
76.6% AVERAGE FACILITY DISCOUNT VS. 51.4% FOR PPO

98% NO BALANCE BILLING

\$3,000 AVERAGE SAVINGS PER EMPLOYEE PER YEAR

95% CLIENT RETENTION RATE

Balance Billing – Resolving the Other 2%



Estimated VBP savings and trend analysis –
case study 1,500 employees

\$22.8 M ESTIMATED SAVINGS 2021 - 2024

	2018 (Base Case)	2019	2020	2021	2022	2023	2024
Current Plan	\$ 11,433,462	\$ 12,016,569	\$ 12,629,414	\$ 13,273,514	\$ 13,950,463	\$ 14,661,936	\$ 15,409,695
VBP Plan	\$ 7,955,514	\$ 8,098,713	\$ 8,244,490	\$ 8,392,891	\$ 8,543,963	\$ 8,697,754	\$ 8,854,314
Estimated ACT Savings	\$ 3,477,948	\$ 3,917,855	\$ 4,384,923	\$ 4,880,623	\$ 5,406,500	\$ 5,964,182	\$ 6,555,381
Estimated EE OOP Savings	\$ 788,948	\$ 1,064,140	\$ 1,357,596	\$ 1,670,324	\$ 2,003,384	\$ 2,357,891	\$ 2,735,021

Lucent Health: Hybrid Plans

Customized Plans with PPO and VBP Elements

WHERE PPO IS UTILIZED

These services include day-to-day office visits and services that are performed in a Physician office and billed out on a HCFA.

WHERE VBP IS UTILIZED

Inpatient – When a member visits a hospital or medical facility for care that does not include being admitted or for a stay of less than 24 hours. This covers more common procedures that have a short recovery period.

Outpatient – When a member visits a hospital or medical facility for care that does not include being admitted or for a stay of less than 24 hours. This covers more common procedures that have a short recovery period.

Lucent helps employers work with national PPO plans and has access to virtually every regional and local network. We customize a network to meet the specific needs of your employee base.



Lucent Health: MEC Plans



- Designed for employers required by the ACA to offer health insurance coverage
- Employer can avoid the employer mandate penalties and offer an affordable health plan option
- 4 MEC plan options
- 24/7 telemedicine access
- Magellan Health Rx Management
- 48-hour claim processing
- Preventative & wellness updates
- Utilization tracking and reporting

Lucent Health: Tribal Lands Plans



- Rich history of providing Medicare-like rate (MLR) services, tribal healthcare claims processing and managed care services
- Coordination with tribal sovereignty
- Best-fit solutions for tribal communities, delivering long-term cost reduction while improving quality of life for Native Americans
- Coordinate with Indian Health Service (IHS) and 638 facilities to maximize the availability of MLR for eligible tribal members
- Obtain IHS authorization, notify the provider and coordinate payment to provider at substantial additional MLR savings
- 340b pharmacy discounts

Lucent Health: Care Management

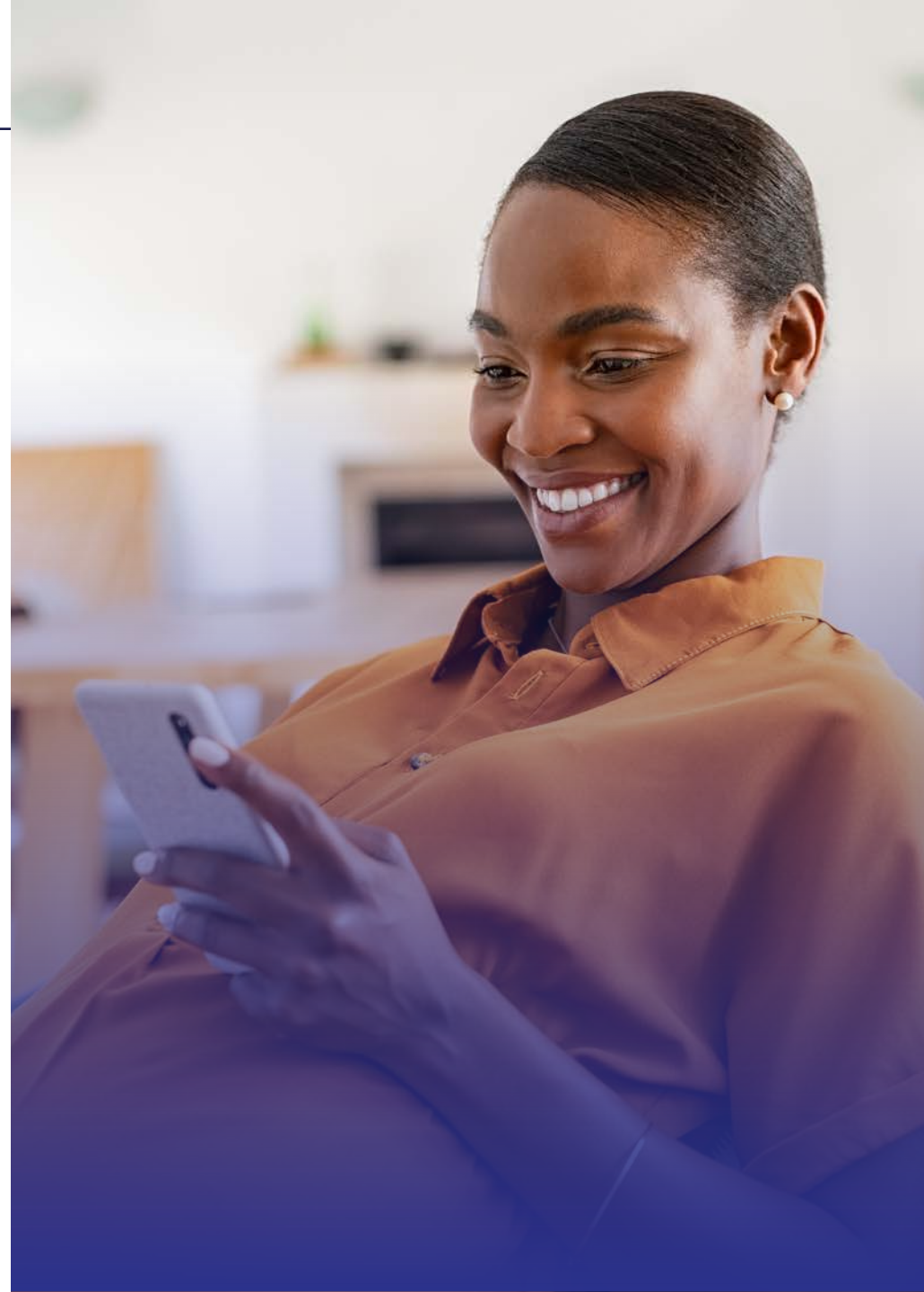


The Narus Health Difference

What distinguishes the right TPA from the rest of the pack is exceptional care management.

While most TPAs outsource care management to another vendor, Narus Health, brought to you by Lucent Health, connects members to a network of support.

The harnessing of daily data personalizes care. Highly trained and compassionate people hold the member's hand when they face a difficult diagnosis or need help understanding their benefits.



Lucent Health’s wholly owned Care Management Solution – powered by Narus Health – **serves your most vulnerable members** and those with complex care needs.



Formed to serve patients and families at time of greatest need



An experienced care team



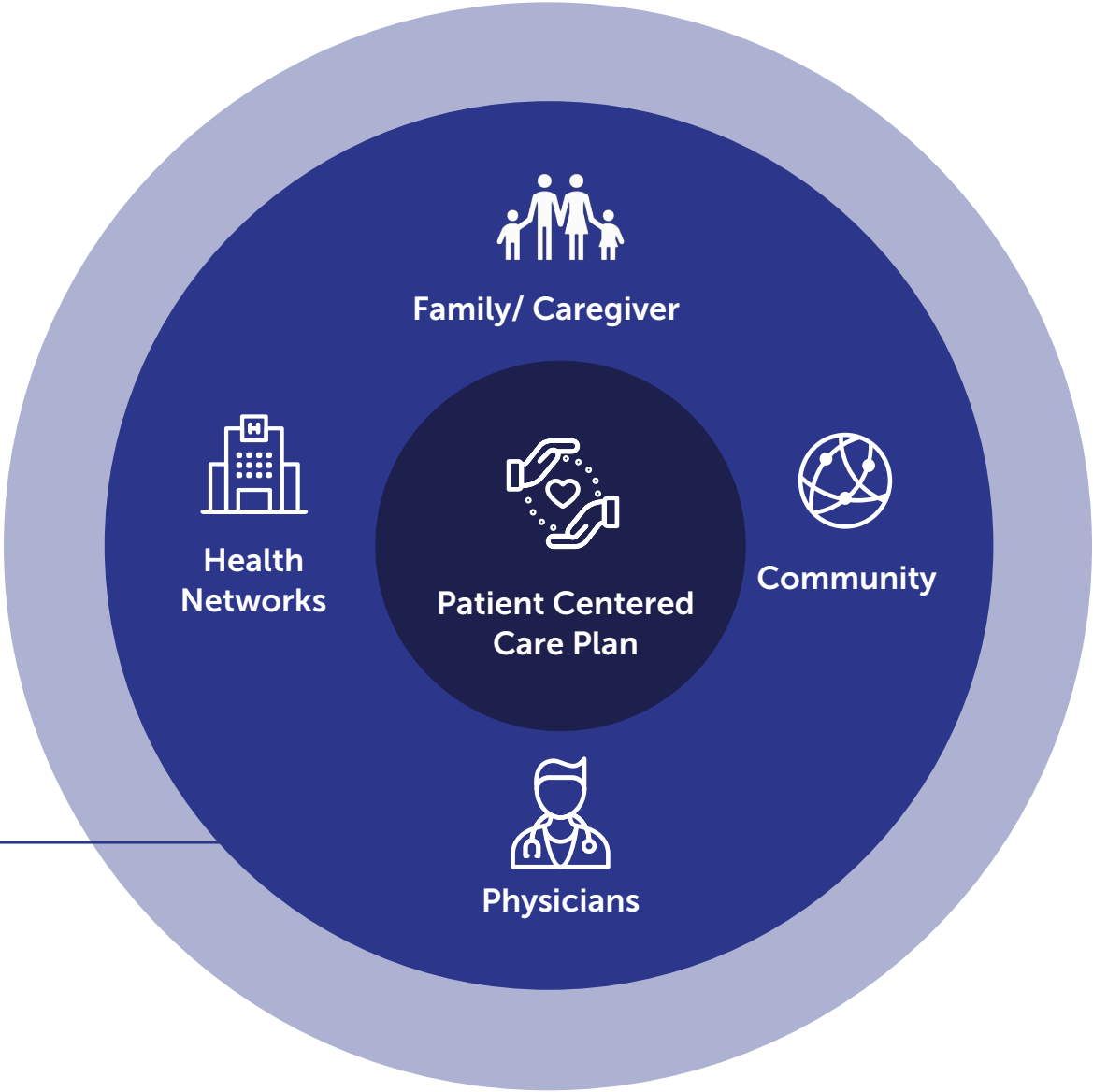
Uses daily data feeds to best allocate care resources



A team, platform and process to help serve members in the medium they prefer by telephone or secure texting via app

Our patient centered approach brings care back to healthcare, connecting care givers, gathering important information, in one location and navigating patients through complex episodes.

**NARUS
HEALTH TEAM**



Care management – Powered by Narus Health – offers clients **5 primary services**, each providing a unique solution and engaging certain groups in a client's population.

Lucent Rx For members requiring a specialty therapy for a complex or rare chronic condition, this solution will help determine the most effective means of procuring it at little to no out-of-pocket cost.

PRECERTIFICATION / UR / UM

- Serves as a check / balance for proper treatment protocol
- Helps identify high-risk individuals prior to formal diagnosis
- Can give an indication of upcoming expense

CONCIERGE CARE SUPPORT

- Allows a single point of contact for all member healthcare issues
- Engages high-risk members and triage to more appropriate care
- Improves the overall member experience when changing plan coverage

Care management – Powered by Narus Health – offers clients **5 primary services**, each providing a unique solution and engaging certain groups in a client's population.

Lucent Rx For members requiring a specialty therapy for a complex or rare chronic condition, this solution will help determine the most effective means of procuring it at little to no out-of-pocket cost.

TRADITIONAL LARGE CASE MANAGEMENT

- Similar in scope to more familiar LCM solutions
- Works closely with stop-loss providers
- Improves member compliance and education
- Assures good clinical practice standards

NARUS COMPLEX CARE SUPPORT

- Proprietary risk stratification analysis
- Engagement based on medical complexity
- 24/7 Narus access to improve utilization

Powered by an **experienced team of real people** who help surround members with what they need to navigate clinical and benefits needs.

TEAM

- Physicians
- Nurse Practitioners
- Registered Nurses
- Care Coordinators
- Social Workers
- Chaplains

SERVICE

- 24/7 for Active Members
- Symptom Management
- Patient & Family Support
- Appointment Coordination
- Medication Monitoring
- Community Resources
- Benefit Guidance
- Financial Navigation
- Utilization Review
- Case Management

Lucent Health Care Management **provides tools for members** to initiate help for their needs, and it also **enables our team** to reach out when data suggests it might help.

INITIATED BY MEMBER

Member engagement begins when they encounter a problem accessing the health system or a problem as a result of accessing the health system:

- General Customer Service
- Pre-Certification
- UM

INITIATED BY NARUS HEALTH TEAM

Member engagement begins when something about their healthcare experience triggers our system to outreach for a greater depth of service.

Tools for Employers

- Engaging At-Risk Members
- Proactive Cost-Containment
- Proprietary pre-ID algorithm



Lucent Rx

As of 2021, specialty drug costs for self-insured employers average \$70 per employee per month. These high costs are typically driven by only 1% of all prescriptions fills, yet can represent up to 50% of total pharmacy spend. Unfortunately, this trend is expected to continue as more specialized drug therapies are approved for use.

For self-insured employers, this trend requires a custom solution to deal specifically with the cost of specialty drugs. These drugs are associated with complex medical conditions and require an integrated approach to properly address plan spend while always putting the member first.

That’s why the Lucent Rx Specialty Pharmacy Program was built.

Our Specialty Drug Solution

The Lucent Rx Specialty Pharmacy Program helps your plan members access the specialty drugs they need while significantly reducing cost to the plan and the member. Lucent Health’s data-driven approach proactively targets the highest cost drugs on your health plan. Once a drug has been identified and determined to be medically appropriate, Lucent’s concierge team will engage the member to determine the most effective and efficient means of procuring the drug needed.

The Lucent Rx team will hold the member’s hand throughout this process and determine the best course of action for each individual- such as utilizing manufacturer coupons or enrolling in patient assistance programs.



70%

Savings for You

Lucent Rx

The Lucent Rx approach can drastically reduce your plan spend on these specialty drugs by up to 70%.

These savings are critical to securing the best possible reinsurance rates for your plan and allowing you to offer competitive benefits to your employees.

- ✓ Member-Focused Approach
- ✓ In-House Integration



Core

The Lucent-Narus health umbrella is the definition of truly integrated care. When someone is going through a difficult healthcare journey, everyone involved in their care—patient, caregiver, doctor and others—should be connected and informed to coordinate the best possible outcome and experience.

Our **Continuous Observation, Reporting, and Enrollment (CORE) Service** drives the technology and analytics engine that allows for smarter, more timely and meaningful member engagement. Daily analysis of all claims activity assigns risk scores based on a proprietary algorithm, and clinical staff conduct a hands-on screening of at-risk members to determine outreach and enrollment. This engine turns data into proactive outreach for members, resulting in truly integrated care.

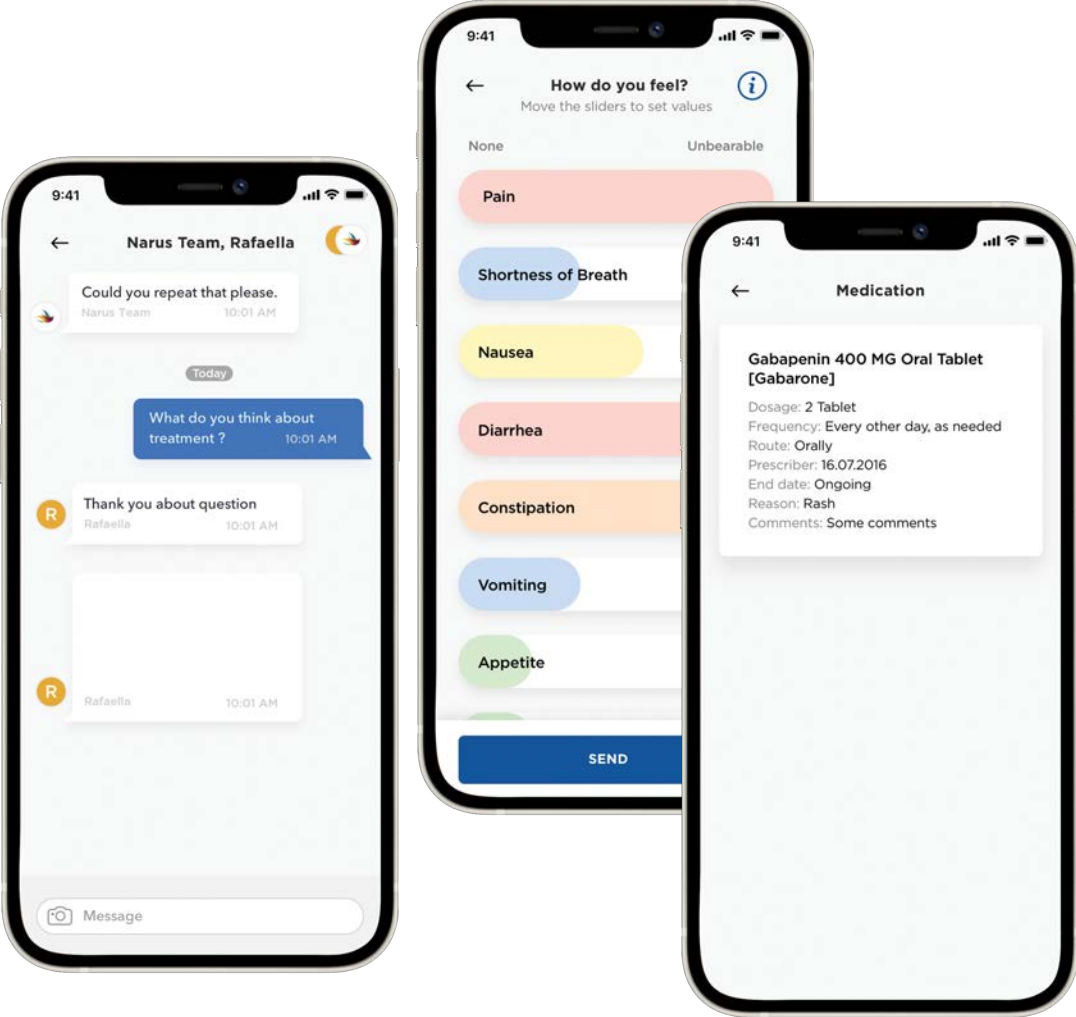


Disease Management

Our disease management services give members a dedicated support team with experience in specific diseases and conditions, helping them more easily understand diagnoses and access care. These services include:

- **DIABETES CARE**
- **BEHAVIORAL CARE**
- **TRANSPLANT CARE**
- **MATERNITY CARE**
- **ONCOLOGY CARE**

Tools for Members



Concierge Care

- Coordinate care needs with doctors, caregivers and pharmacists
- Navigate complexities of healthcare
- Resolve matters effectively and efficiently
- Lessen burden on HR staff





Our Concierge Care program helps member navigate the complexities of healthcare – **all through one number.**

Your Health Concierge

 **Narus Health** Call 888-585-3309

Employees and members should contact Narus Health with inquiries regarding eligibility, plan benefits, claims, or any healthcare related question.



7 AM to 7 PM

Get answers to your plan member needs from someone with our Care Support Team.

Lucent Health: Cost Containment Programs

Other Best-on-Breed Cost Containment Options



PROVIDER TRANSPARENCY
PROGRAMS



TELEMEDICINE



SPECIALTY RX
PROGRAMS



DIRECT
PRIMARY CARE



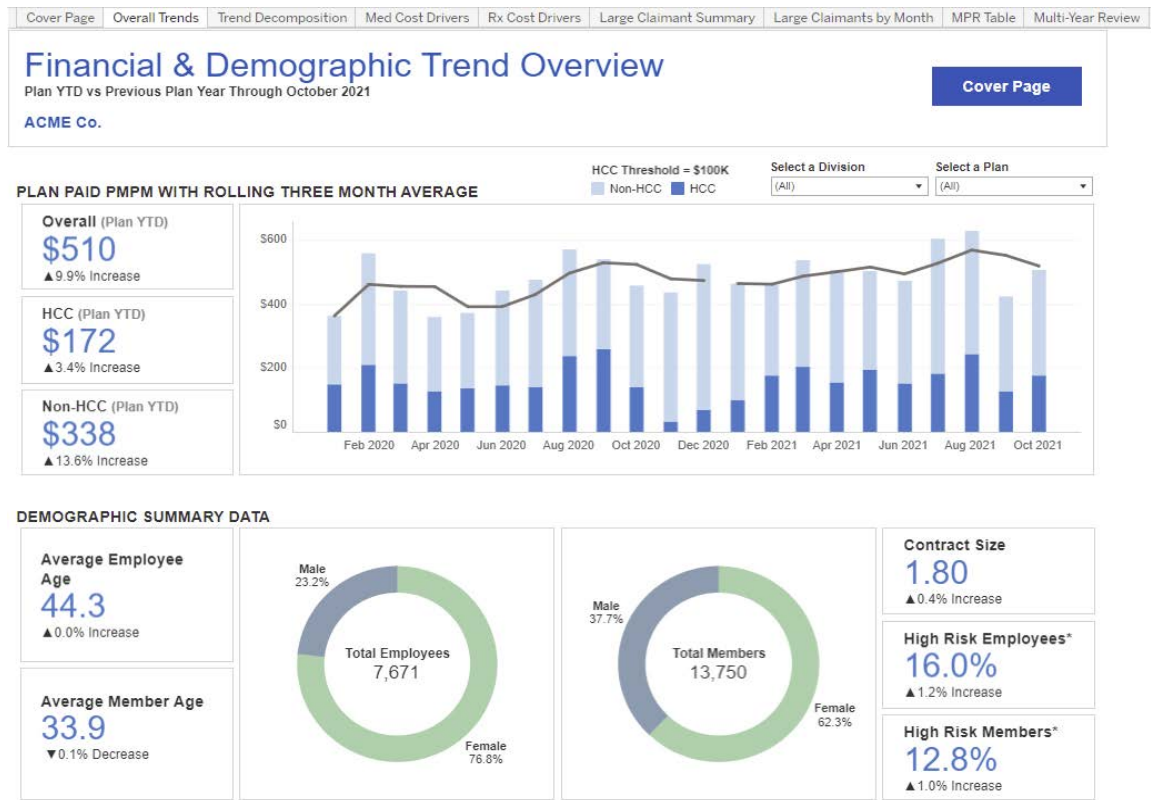
MEDICAL TOURISM/
BUNDLED PRICING



SPECIALIZED CONDITION
MANAGEMENT PROGRAMS

Lucent Health: Data Analytics

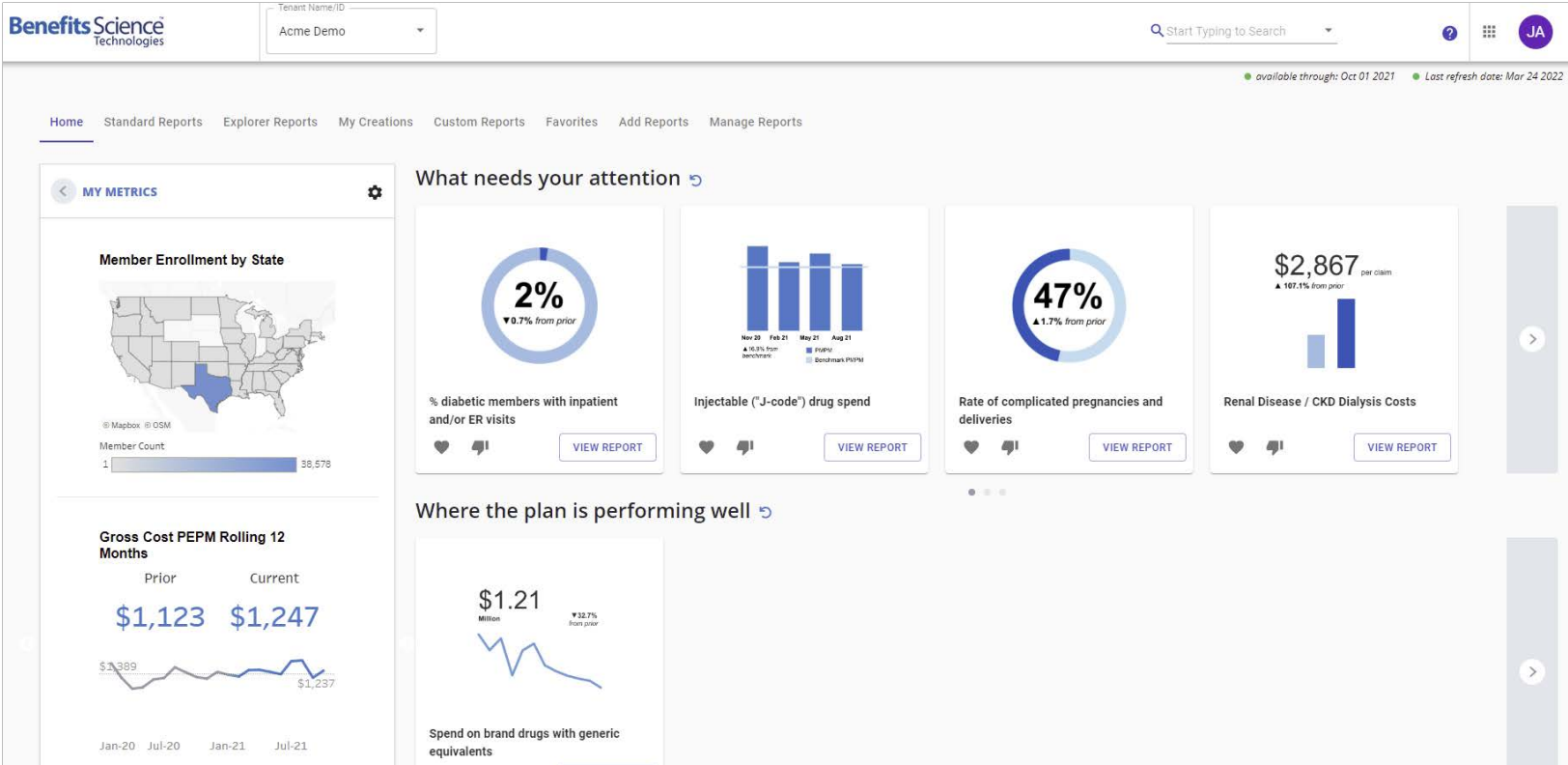
BST PLATFORM – FINANCIAL ANALYSIS



BST PLATFORM – NAVIGATION

- Home – Smart Card Carousel
- My Metrics – quick high-level performance indicators
- Standard Reports – All existing, pre-configured dashboards + new enhanced reporting packages
- Explorer Reports – dynamic, interactive dashboards allowing user to quickly dissect data
- My Creations – save your custom-built ad-hoc reports
- Favorites – mark your favorite reports for quick access

BST INSIGHTS PLATFORM OVERVIEW



INDIVIDUAL DETAILS

- View all Claimants over a specified threshold
- Care Plan Status
- Top Diagnosis
- Total Spend/Savings
- Identify Large Claimants that do not currently have a care plan

LARGE CLAIMANT EXPLORER

Large Claimants

		2021	Year of Paiddate	All	Care Plan Flag	Claimant Threshold	All	Claim Type			
						From 50,000					
Person ID	Care Plan Flag	Care Type	Rel.	Plan Name	Status	Top Diagnosis or Therapeutic Code	Plan Allowed Amount	Total Paid Amount	Savings		
58134275	Care Plan	*	C	ACME HEALTH PLAN	ACTIVE	Leukemia - acute lymphoblastic leukemia (ALL)	\$569,832	\$442,696	\$127,136		
73785773	Care Plan	*	S	ACME HEALTH PLAN	ACTIVE	Nonrheumatic and unspecified valve disorders	\$1,255,625	\$360,279	\$895,347		
58137460	Care Plan	LCM	E	ACME HEALTH PLAN	ACTIVE	Gastrointestinal cancers - colorectal	\$532,067	\$323,346	\$208,721		
58133401	Care Plan	LCM	C	ACME HEALTH PLAN	ACTIVE	Feeding and eating disorders	\$334,605	\$266,443	\$68,163		
58156998	Care Plan	LCM	E	ACME HEALTH PLAN	TERMED	Myocarditis and cardiomyopathy	\$257,073	\$249,207	\$7,867		
58128295	Care Plan	LCM	E	ACME HEALTH PLAN	ACTIVE	Encounter for antineoplastic therapies	\$934,962	\$244,013	\$690,950		
75201868	Care Plan	*	E	ACME HEALTH PLAN	ACTIVE	Encounter for antineoplastic therapies	\$152,082	\$147,300	\$4,782		
58130872	Care Plan	*	C	ACME HEALTH PLAN	ACTIVE	Neurodevelopmental disorders	\$138,569	\$134,463	\$4,106		
58133939	No Care Plan	Null	E	ACME HEALTH PLAN	ACTIVE	Septicemia	\$168,100	\$122,961	\$45,140		
58134735	Care Plan	LCM	E	ACME HEALTH PLAN	ACTIVE	Nerve and nerve root disorders	\$153,739	\$119,315	\$34,423		
74374940	Care Plan	CCM	C	ACME HEALTH PLAN	ACTIVE	Short gestation; low birth weight; and fetal growth...	\$443,675	\$110,581	\$333,094		
58125247	Care Plan	CCM	S	ACME HEALTH PLAN	ACTIVE	Gangrene	\$132,387	\$101,259	\$31,128		
58127877	Care Plan	LCM	E	ACME HEALTH PLAN	ACTIVE	PSYCHOTHERAPEUTIC AND NEUROLOGICALS	\$95,323	\$95,364	(\$41)		
58127628	No Care Plan	Null	E	ACME HEALTH PLAN	ACTIVE	PSYCHOTHERAPEUTIC AND NEUROLOGICALS	\$94,753	\$91,970	\$2,783		
58148090	No Care Plan	Null	C	ACME HEALTH PLAN	ACTIVE	Fracture of head and neck, initial encounter	\$88,824	\$88,536	\$288		
58132373	Care Plan	LCM	E	ACME HEALTH PLAN	TERMED	Respiratory cancers	\$201,026	\$88,312	\$112,714		
58131887	Care Plan	LCM	E	ACME HEALTH PLAN	ACTIVE	Mental and substance use disorders in remission	\$90,309	\$88,246	\$2,063		
58156250	Care Plan	*	E	ACME HEALTH PLAN	ACTIVE	Breast cancer - all other types	\$218,955	\$86,881	\$132,074		
58157946	Care Plan	LCM	E	ACME HEALTH PLAN	ACTIVE	PSYCHOTHERAPEUTIC AND NEUROLOGICALS	\$86,575	\$86,365	\$209		
58128957	Care Plan	LCM	E	ACME HEALTH PLAN	ACTIVE	Pericarditis and pericardial disease	\$148,613	\$83,518	\$65,095		
58129221	No Care Plan	Null	E	ACME HEALTH PLAN	ACTIVE	Breast cancer - ductal carcinoma in situ (DCIS)	\$236,536	\$82,100	\$154,436		
58129160	No Care Plan	Null	E	ACME HEALTH PLAN	ACTIVE	Coronary atherosclerosis and other heart disease	\$74,216	\$69,995	\$4,222		
58129408	No Care Plan	Null	S	ACME HEALTH PLAN	ACTIVE	Gastrointestinal cancers - liver	\$175,170	\$69,842	\$105,328		
58125123	Care Plan	*	E	ACME HEALTH PLAN	ACTIVE	Rheumatoid arthritis and related disease	\$66,637	\$66,943	(\$306)		
58129945	No Care Plan	Null	E	ACME HEALTH PLAN	ACTIVE	DERMATOLOGICALS	\$67,947	\$66,542	\$1,406		
58133012	Care Plan	LCM	E	ACME HEALTH PLAN	ACTIVE	GASTROINTESTINAL AGENTS - MISC.	\$66,480	\$65,874	\$607		
74053637	No Care Plan	Null	C	ACME HEALTH PLAN	TERMED	Liveborn	\$67,739	\$64,053	\$3,686		
58149818	No Care Plan	Null	E	ACME HEALTH PLAN	ACTIVE	Asthma	\$61,390	\$61,425	(\$35)		
58132581	Care Plan	CCM	C	ACME HEALTH PLAN	TERMED	Genitourinary signs and symptoms	\$98,757	\$60,825	\$37,932		
58137156	Care Plan	LCM	E	ACME HEALTH PLAN	TERMED	Regional enteritis and ulcerative colitis	\$196,511	\$60,022	\$136,489		
74094434	Care Plan	*	E	ACME HEALTH PLAN	ACTIVE	Encounter for antineoplastic therapies	\$96,395	\$59,783	\$36,611		
58155418	No Care Plan	Null	E	ACME HEALTH PLAN	ACTIVE	Coronary atherosclerosis and other heart disease	\$114,621	\$58,148	\$56,473		
58158998	No Care Plan	Null	E	ACME HEALTH PLAN	ACTIVE	ANTICONVULSANTS	\$76,791	\$57,098	\$19,693		
58133768	Care Plan	CCM	S	ACME HEALTH PLAN	ACTIVE	Breast cancer - all other types	\$166,091	\$56,416	\$109,676		
75170968	Care Plan	CCM	E	ACME HEALTH PLAN	ACTIVE	Chronic kidney disease	\$304,488	\$55,818	\$248,669		
74094434	Care Plan	LCM	C	ACME HEALTH PLAN	ACTIVE	DERMATOLOGICALS	\$67,512	\$67,512	\$0		

* Indicates an instance where an individual has data from both LCM and CCM and is receiving support from both sources

TRACKING ENCOUNTERS
BY MONTH

- # of Patients contacted or coordinated with
- # of encounters
- # of encounters by encounter type

WHAT IS NARUS DOING?

Encounters Over Time

		January 2021	February 2021	March 2021	April 2021	May 2021	June 2021	July 2021	August 2021	September 2021	October 2021	November 2021	December 2021	Grand Total
CCM	Distinct count of Memberid	233	231	213	233	183	223	220	237	221	250	265	272	1,245
	Distinct count of Encounter Id	698	648	606	620	559	583	638	698	564	643	794	691	7,742
	Avg. Encounter Hours	0.36	0.37	0.39	0.38	0.37	0.37	0.36	0.36	0.40	0.41	0.41	0.38	0.38
LCM	Distinct count of Memberid	4	8	11	15	14	13	13	15	19	21	26	26	55
	Distinct count of Encounter Id	54	66	119	161	162	119	86	174	243	231	296	228	1,939
	Avg. Encounter Hours	0.31	0.30	0.31	0.30	0.27	0.25	0.26	0.25	0.23	0.28	0.25	0.28	0.27

CCM Encounters				LCM Encounters		
Encounter Type	Outcomes	Number of Encounters	Number of Members	Encounter Type	Number of Encounters	Number of Members
Administrative	Null	1,314	510	Billing	10	7
	care-coordination	1	1	Contact Member/Rep..	411	50
	other	3	3	Contact PPO	2	1
	requests-callback	1	1	Contact Provider	368	45
	will-call-us-back	3	3	Contact TPA	164	38
Care Management S..	Null	365	65	Educational Material	2	2
Telephonic	caller-referred	22	19	Internal case work	112	45
	care-coordination	284	147	LCM referral	10	8
	enrolled	40	40	LCM Report	151	51
	hard-decline	1	1	Physician Advisor	36	6
	hung-up	15	14	Research	329	54
	left-voicemail	888	289	Review	350	54
	no-answer	81	50	Grand Total	1,939	55
	non-working-number	11	7			
	other	2,010	585			
	requests-callback	332	197			
	requests-no-further-calls	1	1			
	requests-to-stop-service	4	4			
	routine-follow-up	317	58			
	soft-decline	89	82			
	will-call-us-back	1,959	811			
	wrong-number	1	1			
Grand Total		7,742	1,245			

Thank you.

Questions? Please contact us

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