

# Optimizing Care Management Efforts by Assessing Population Needs

# As seen in the KLAS Healthcare AI 2022 Report

Organization



**Contact** Charles Joseph Sonday, DNP, ACNP-BC, Medical Director of Informatics

### Primary Use Case

Using analytics platform to assess population needs and assist in the patient identification process

## Summary

St. Luke's University Health Network was exploring using AI to help reduce length of stay, but when the COVID-19 pandemic hit, they recognized the need to first focus on getting real-time data and analytics into place. Once those efforts were successful, the organization reexamined what problems they wanted to focus as they built out models and machine learning. One of their first initiatives was to use KenSci's technology to create an NCQA dashboard that would help them better identify high-risk patients—such as those with diabetes or hypertension—who could benefit from care management. The ability to filter populations with tens of thousands of patients allows them to be much more targeted in their care management efforts.

## Top Learnings and Steps to Success

### • Make sure you have relevant, real-time data:

St. Luke's University Health Network took a step back from their initial AI plans to make sure they had the right analytics in place so the models would work as intended. Stepping back also enabled them to identify what problems they really wanted to focus on for the future.

### • Plan for multiple iterations:

The organization's first AI project was to use KenSci's technology to build an NCQA dashboard for HEDIS metrics to help them identify high-risk patients with conditions such as diabetes or hypertension. They note that getting to the point where they could start using the data took several iterations. Now that the dashboard is up and running, the organization is looking at other areas in which they could build similar dashboards to help them manage large populations of patients that meet certain criteria, such as pharmacy utilization.

• Operationalize the data:

Though the dashboard is not embedded in the EMR and is therefore outside the end user's normal workflow, it has become the workflow, and the team uses it on a daily basis. The staff who triage the dashboard check it every day for new patients that meet the care management criteria and assign them a care manager. The teams were excited to get the dashboard and jumped right into using it.

# **Top Outcomes Achieved**

• Improved identification of high-risk patients:

The dashboard shows individual patients' real-time risk scores as well as real-time data points that would be pertinent to care management interactions. It basically does the triage for the care managers, enabling them to work with more patients. The organization notes that they would never be able to triage this many patients on their own.