



# Jiva for CalAIM Initiatives

Using Jiva, California Payers Can

- ✓ Improve Whole-Person Care
- ✓ Reduce the Complexity of Processes
- ✓ Lower Cost
- ✓ And Improve Outcomes for Medi-Cal Members



ZeOmega is #1 Best In KLAS for Payer Care Management Solutions for 2022, 2023, 2024, and 2025

## Payer organizations in California are facing a new and complicated mandate: CalAIM 1115 Demonstration & 1915(b) Waiver.

California's Department of Health Care Services (DHCS) describes CalAIM as, "...a multi-year initiative to improve the quality of life and health outcomes of California's population by implementing broad delivery system, program and payment reform across the Medi-Cal program. The major components of CalAIM build upon the successful outcomes of various pilots (including but not limited to the Whole Person Care Pilots (WPC), Health Homes Program (HHP), and the Coordinated Care Initiative) from the previous federal waivers and will result in a better quality of life for Medi-Cal members as well as long-term cost savings/avoidance."

DHCS further describes the three primary goals of CalAIM as following:

- ① Identify and address member risk through a whole-person approach utilizing social determinants of health.
- ② Generate a consistent, seamless system that reduces complexity and increases flexibility.
- ③ Improve quality outcomes, reduce health disparities and inequities, and drive delivery system transformation and innovation through value-based initiatives, system modernization and payment reform.

For payers who are new to this space—and those who are experienced—there are many questions surrounding CalAIM. But out of all the queries, the following three are most vital to successfully navigating the new mandate:

- ① How does our payer organization support the initiatives and objectives set forth by CalAIM?
- ② Does our organization's current platform support what CalAIM is asking us to do?
- ③ Is our current platform nimble enough to quickly adapt to pilot projects, waiver changes, in lieu of services and reporting?

## Jiva Directly Supports Essential CalAIM Needs

To help your organization answer those key questions, ZeOmega presents Jiva—our industry-leading population health management (PHM) platform. Jiva helps payers meet CalAIM challenges by encompassing the core of what CalAIM is striving to accomplish. The comprehensive platform modifies quickly and easily to meet any specialized needs differing California counties may have, enabling maximum flexibility of use.

### Jiva's AI-driven analytics rapidly identify member's needs to:

- ✓ Drive better quality outcomes.
- ✓ Streamline operational workflows.
- ✓ Decrease manual processes.
- ✓ Reduce redundancy.
- ✓ Improve cost control.
- ✓ Provide clients with a seamless, automated, workflow experience.

### Jiva supports all lines of business:

- ✓ Commercial
- ✓ Medicare Advantage
- ✓ Medi-Cal/Medicaid
- ✓ Dual Eligibles
- ✓ (M)LTSS
- ✓ ILOS
- ✓ Dental



## Jiva Directly Supports Essential CalAIM Needs

Jiva is designed to bring integrated, whole-person health management to life, managing all PHM needs within a single application. The robust platform simplifies complex workflow, all while meeting regulatory and reporting requirements and keeping the goals of CalAIM core to the workflow.

### Enhanced Care Management (ECM)

#### Comprehensive Assessment and Care Management Planning

To help payers streamline multiple annual assessments and/or track changes in members' conditions, Jiva's rule-driven automation decreases redundancy in asking the same questions that live in multiple assessments, improving time spent with the member, member satisfaction, and overall quality outcomes. Jiva's rules-driven assessments meet or exceed assessments put forth by accrediting agencies. Care plans are automatically generated based on assessment answers, allowing easily personalized care plans.

#### Coordination of Care

Jiva is designed to provide a full, actionable, 360-degree view of the member. From our platform, clients can share and receive information among all participants involved in the member's care to achieve safer, more effective, person-centric care.

#### Health Promotion

Jiva's health promotion includes physical, mind/body, mental, social, family and community-health data. The platform is designed to provide payers with a proactive care approach via reminders, alerts, identification of care gaps, and the ability to manage social-care needs. Health-promotion reminders can be pushed to providers, caregivers, and care teams via a portal, text messages, email, snail mail, or member engagement applications.

#### Transition of Care

Effectively managing transitions of care is critical to the safety and well-being of members. Jiva is the answer to enhanced safety, whether the transition of care is occurring internal (aging out) or moving an adolescent from a pediatric to adult model of healthcare, or externally, when the member is moving from one level of care to another. Jiva supports all types of care transitions. Each transition requires a unique set of required timelines while also calling for clear communication between entities and safe/secure data-sharing—all while keeping the member abreast of his/her care plan. Jiva is designed to meet this critical and complex process, ensuring a safe and high-quality transition.

#### Member and Family Support

Member and family support is essential when caring for any population, especially the vulnerable. When the caregiver or family support system breaks, increased hospitalizations or placement into long-term care facilities are just a couple of possible end results. Jiva enables family support by assisting In lieu of Services (ILOS), alerting payers of potential caregiver burnout (via a caregiver questionnaire) and allowing payers to immediately put interventions in place. Jiva offers member portals—a safe and central location where family members (with permission) can provide input to their loved one's care plan. Jiva also supports face-to-face meetings for the plan's care-management team—either virtually or in person—to further encourage a member's healing.

## Community Coordination of Referrals to Social-Support Services

Jiva supports community and social-care coordination by allowing payers to send and receive community referrals within the platform while also tracking all referrals to completion. In addition, and by integrating with our Social Determinants of Health (SDOH) solution, Jiva intuitively identifies and scores members at risk, setting up alerts and reminders that help coordinate care efforts. The highly intelligent rules engine drives workflows to support payers managing such complex, multi-stakeholder road maps of care.

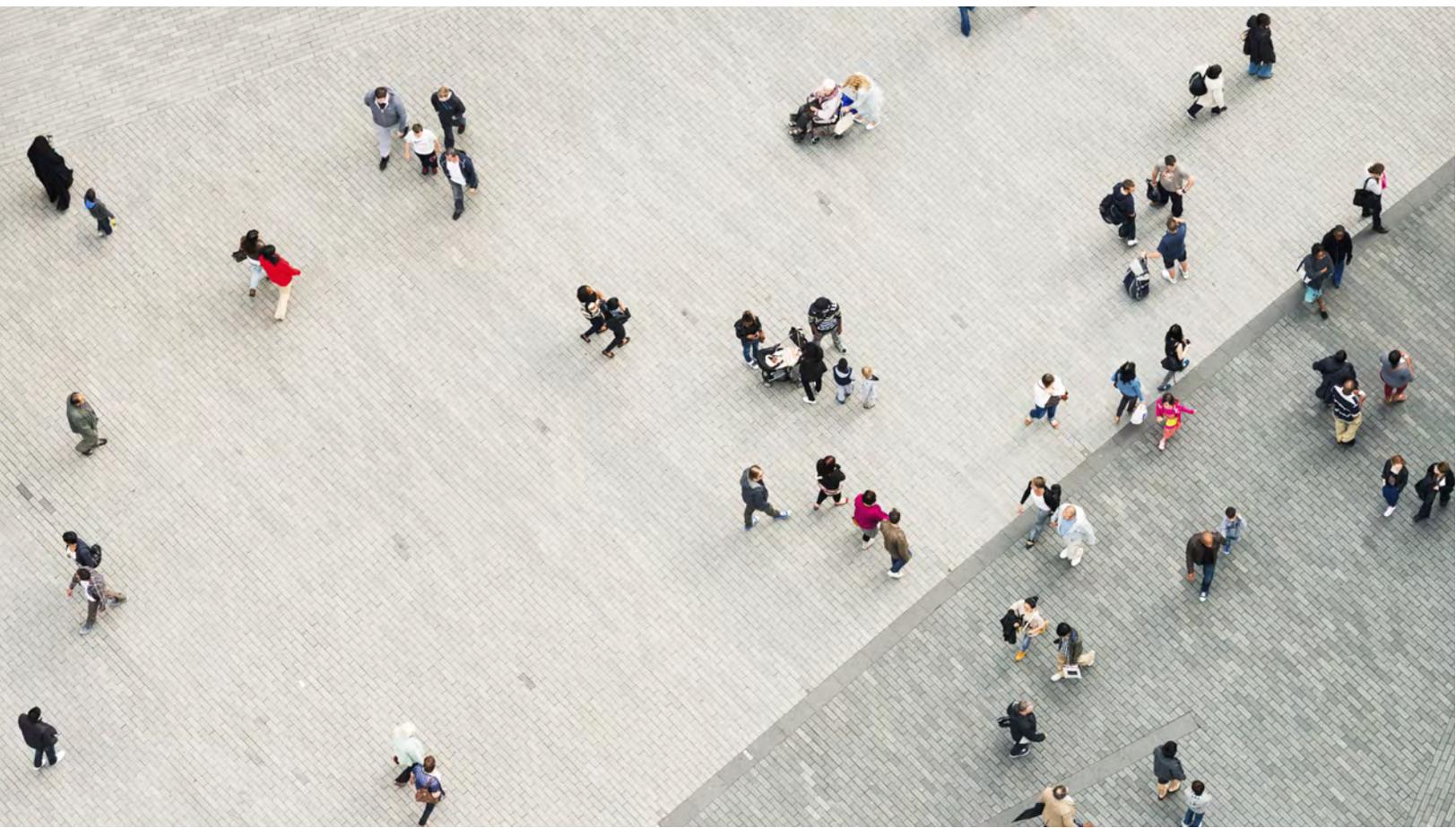
## Interoperability and Care Coordination

Jiva care coordination begins with interoperability. Its data model automatically accepts, stores, and processes member and demographic information, then applies ZeOmega's proven analytics to generate retrospective and predictive care recommendations. Jiva also applies SDOH information based on census tracts to deliver granular adjustments

for personalized care regimens.

## Member Risk Management and Whole-Person Care

Health Promotion Jiva identifies patients needing attention by reviewing member pools to find at-risk individuals then pushing activities and assignments automatically to care managers. This AI-based functionality works with opioid abuse and other challenging situations that depend heavily on detailed analyses of social determinants of health. Jiva's prescriptive recommendations also pull member-based risk scores from other analytics sources as part of the Jiva member record. These composite scores help direct care management assignments and support broader risk management algorithms that apply data holistically from Jiva claims and clinical sources.



## Cost Control

Jiva's core functionality directly supports administrative savings by automating manual processes, reducing human error, and enhancing communication between all parties involved.

### Timely Information

Jiva delivers accurate, well-timed information directly to users, so they do not have to hunt across multiple platforms and paper documents to find what is needed.

### Rules-Based Care Assignments

The powerful platform applies rules-based, automated work assignments (round-robin), so payers can intuitively operate and personalize the workflow without needing extensive IT expertise. Even the least technologically savvy users can easily make changes to Jiva when needed.

### Correspondence Creation

Jiva creates consistent correspondence through pre-populated letter templates.

### Powerful Provider Portal

Payers can generate provider self-service via the Jiva Provider portal, including automated approval for common pre-authorization requests.

### Integration with Interqual Connect™ and MCG Cite AutoAuth

Jiva integrates with Interqual Connect and MCG Cite AutoAuth to automate clinical review of authorizations within a single platform.

### FHIR Technology

Using intelligent FHIR® technology, Jiva embeds all processes related to prior authorization requests within the requesting physician's EMR.

### Capabilities to Significantly Enhance Efficiency

Jiva reduces, and can even eliminate, manual fax-based authorization requests

### Major Impact on Medical Spend

- Reductions in hospital readmissions through care transition programs which automatically prompt and track post-discharge appointments and medication adherence.
- Rapid recognition and closure of care gaps.
- Turnkey chronic disease programs that identify and stratify Medi-Cal populations for frequencies of intensity and automated, strategic outreach.
- Complex case management that applies clinically validated content and care plans to help members navigate complex healthcare issues and improve outcomes.

## Jiva Improves Medi-Cal Outcomes

Overall, Jiva helps facilitate positive outcomes by freeing care management staff from tasks better handled by an intelligent, AI-based solution. Jiva's proven workflows and evidence-based content support each user's job function and needs. The platform's rules engine identifies areas of concern through assessment questions, analytics, and data associations that trigger activities and work assignments. This process enables clinicians to focus on patients, working closer and longer with them to create personalized goals and interventions. System-generated follow-up activities connect members with care team experts to ensure adherence, encouragement, and support.

Jiva's interoperability supports streamlined integration with social care networks such as Aunt Bertha and CBRO's, giving care managers an intuitive, automated means to connect healthcare consumers with needed services. Similar linkages with healthcare content providers such as Healthwise® make it simple for members to educate themselves so that working with their care team builds better outcomes.

Contact [sales@zeomega.com](mailto:sales@zeomega.com) today to learn how Jiva can help your organization improve whole-person care, reduce process complexity, lower costs, and improve overall outcomes for your Medi-Cal members.

[www.zeomega.com](http://www.zeomega.com)

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