

Flexible.
Engaged.
Experienced.



Introducing care management solutions that improve coordination and decision-making for more efficient healthcare delivery.

Flexible, Interoperating Solutions Increase Workflow

Succeeding today demands sophisticated solutions that integrate seamlessly, evolve with changes in the industry and pinpoint areas for cost and quality improvement. McKesson's Care Management suite of solutions does just that.

Our utilization, disease and case management workflow solution combined with disease and case management services and authorization capabilities creates a unified platform that closes gaps in care by enhancing care team coordination and streamlining authorization and medical review processes. Strengthen your care management platform further with tools and services

that enhance the member and provider experience through engagement, nurse advice and business intelligence. These gained efficiencies result in improved health outcomes and reduced administration and medical costs.

Our platform solutions and add-on services work seamlessly together, as well as with your existing products. So whether you choose to keep your care management program in-house, partner with McKesson entirely or prefer a combination of the two, our solutions adapt to meet your needs. Our model allows you to use only the features you need now and easily add later to meet your evolving needs.

An Experienced Partner Staying Ahead of Change

As the world's largest health care services company in business for nearly **200 years**, McKesson has the experience and business intelligence to tackle every care management challenge. McKesson solutions are present in **96% of the Top 25** U.S. health plans and used by **92% of Blues plans**, which means our solutions contribute to **better health** for many Americans.

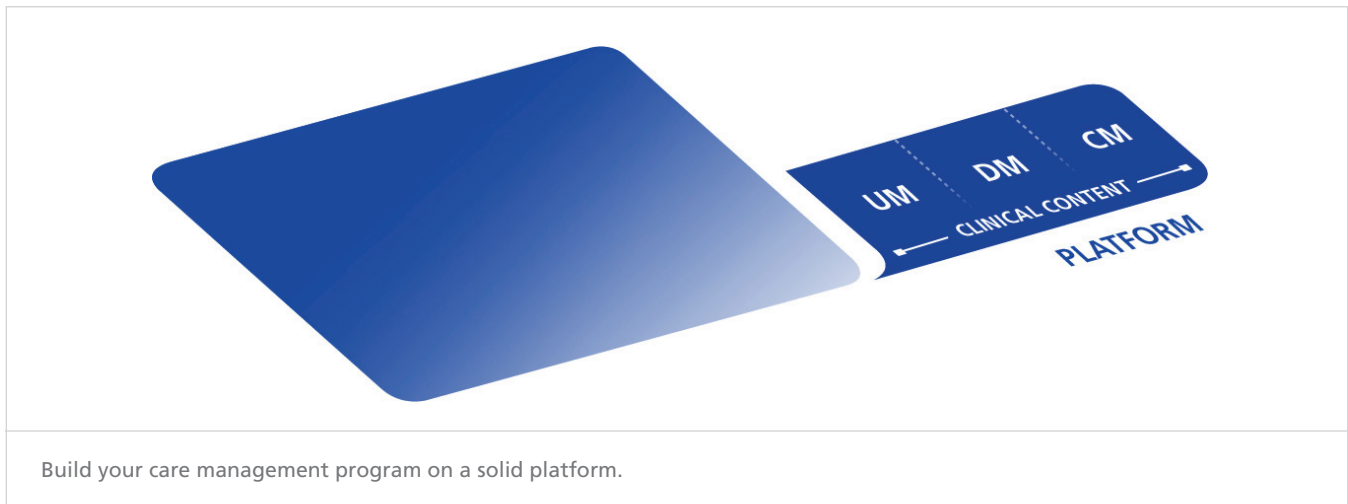


Our care management solutions are accredited by the industry's top accreditation bodies – URAC and NCQA. In fact, our workflow solution was the first in the industry to achieve a URAC accreditation. And, in the late 1990s, URAC accreditation standards were modeled after McKesson's Nurse Advice Line, which demonstrates that McKesson solutions have a history of setting industry standards for quality in care management.

Our care management programs have a solid reputation of delivering good outcomes and we back up our claims with third-party validated results that demonstrate the credibility of ROI, savings and other metrics. To learn more about these outcomes or to estimate your potential savings using McKesson solutions, contact your sales representative.

To learn more about McKesson Care Management solutions or any McKesson Health Solutions products and services, email us at MHS@McKesson.com, call 800.782.1334 or contact your Sales Representative.

McKesson's tightly-knit platform includes:



Platform: Available as installed or hosted, our workflow solution is comprehensive, highly scalable, automated software that integrates utilization, disease and case management into a seamless process that streamlines communications among care managers and pinpoints gaps in care. This tool includes a comprehensive set of evidence-based clinical guidelines that help payer and provider organizations share a common language when determining the most appropriate care, driving optimal financial and medical outcomes.

- ▼ **Utilization Management:** Our workflow tool supports utilization management to allow pre-certifications, concurrent, and retrospective reviews, allowing payers to evaluate the use of health care services ensuring that members receive the right care, at the right time. Using InterQual criteria with CCMS adds evidenced based medical reviews to the process.
- ▼ **Disease Management:** Our chronic care management platform helps your members better communicate with providers and learn new, effective ways to manage their chronic illnesses through a combination of nurse-directed activities and technology-driven tools. It offers personalized interventions that help manage the total person, seamless co-morbidity management and counseling from registered nurses, and regular communication with a member's physicians. Offered through the platform or separately as services, our chronic care management offerings are designed to help payers meet NCQA and HEDIS® requirements.
- ▼ **Case Management:** Our case management platform improves overall coordination of a member's treatment plan to ensure optimal care. Managers coordinate multiple treatment plans to reduce fragmented care; refer members to appropriate local and community services, including behavioral health programs and home health agencies; and identify and manage "critical pathways" of key care plan events to achieve the desired outcome in a timely manner. Our case management offerings are also available as services.

Authorization: This solution is a point-of-care authorization and coverage determination tool that improves decision-making and streamlines the payer-provider coverage communication, authorization process and medical reviews. It goes beyond basic authorization to address the substantial cost and effort of manual medical appropriateness review. Add this capability to your platform whenever you choose to optimize your care management suite and reduce costs with automated, real-time, point-of-care decision-making.

Engagement Contributes to Program Success

McKesson programs are successful because we effectively engage members and providers. First, we take a holistic approach to assessing an individual's unique health needs, identifying the right intervention and directing that individual to appropriate resources. Once individuals are enrolled, we use award-winning communication techniques to educate members about their chronic conditions and ensure they do their part to manage their health. In addition to member mailings in multiple languages, we offer an online member portal that includes interactive wellness tools, online nurse advice, personal health records, and health statements.

For providers, we identify top- and under-performing providers and recommend approaches for engagement. Our program consists of four key elements:

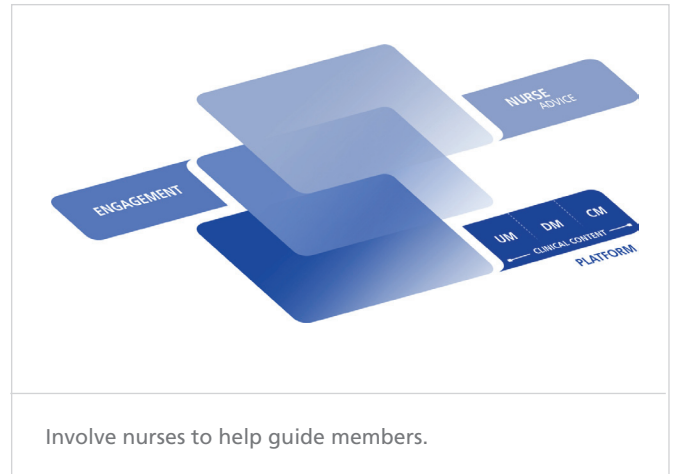
1. **Web-based provider portal:** With the ability to be integrated with existing portals, the McKesson provider portal provides point of care access to program guidelines, consumer health content and member level information.
2. **Provider treatment plan coordination and support:** Care managers visit providers' offices to orient the practices to the program, train the staff on how to utilize the provider portal and the provider reports, share programmatic updates and consult with the provider around best practices for moving the business forward.
3. **Provider alert notification:** We notify a provider by telephone and/or a fax with critical information regarding the member's health.
4. **Provider-oriented educational and promotional materials:** These materials communicate consistent messages across the entire provider network, as well as specific information for providers regarding their members and our care coordination activities.



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Nurse Advice Supports Appropriate Care

McKesson's 24/7 nurse advice line is a tool to triage and enroll members into care management programs. It serves as a single source to assess inbound callers, navigate members to immediate care for acute episodes and initiate referrals to case and care management programs for members with chronic conditions. The URAC and NCQA accredited nurse advice line adds value by directing members to the proper level of care resulting in appropriate emergency room utilization. For example, on average, 85% of our callers with a pre-intent of going to the emergency room are redirected to a less urgent, more appropriate level of care.



Business Intelligence Improves Program Performance



At McKesson, we believe in complete transparency. So we give you full access to your information in real time. Our business intelligence solution allows you to drill down on outcomes and monitor:

- ▶ Members or populations at high-risk for costly diseases within a product or region
- ▶ Which members experience gaps in care and the providers responsible for managing their care
- ▶ Where you are over-spending in pharmacy cost, how to correct it and savings generated by your intervention

This data allows you to optimize your provider networks for health reform-driven initiatives, such as limited or tiered network planning and management, ACO or PCMH support, quality improvement and episodic care measurement.

Working with you, we evaluate the data and, based on business insights, make changes to improve program results.

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McKesson Health Solutions website:
<http://www.mckesson.com>