



# Salient Solutions™ for **Government**

Comprehensive Performance Management  
for Health and Human Services



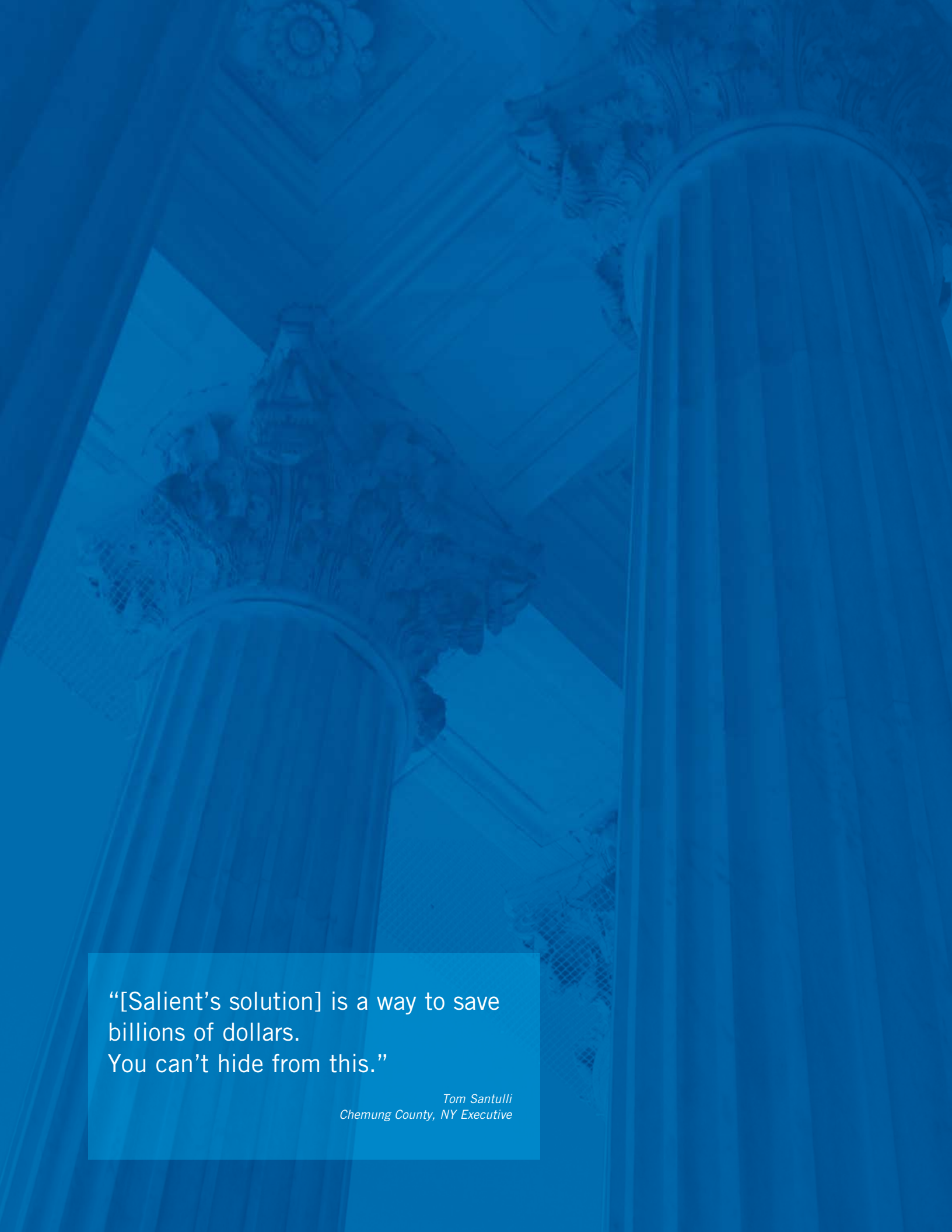


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“[Salient’s solution] is a way to save billions of dollars. You can’t hide from this.”

*Tom Santulli  
Chemung County, NY Executive*

# Introducing Salient Solutions™ for Government...

a new way to improve management effectiveness  
in health and human services programs...

Until now, there have been certain basic assumptions about the difficulty of managing large publicly funded programs: quality of delivery is hard to measure and harder still is improving on “the way things are.”

The critical facts are buried in too many places. They are too hard to retrieve, put in order, or communicate in a timely way to those who need to know.

Introducing a solution that radically changes the old assumptions about what can be done: Salient Health and Human Services (Salient/HHS).

Salient/HHS takes data from wherever they are stored, organizes them into information that quickly and clearly shows how spending relates to results, and provides immediate and easy access to users.

Now, administrators and staff can drill instantly through vast health and human services (HHS) databases down to root causes and take measured steps to improve effectiveness of every program and policy.

No longer is the cost of government inevitable. It is manageable.





## “Ask Why Five Times.”

*W.E. Deming*

# Improving department or program effectiveness takes continuous feedback

– feedback about what’s working and what’s not; feedback about dollars spent and outcomes; and feedback about recipient behaviors and modifications to those behaviors. In order to quickly understand this information, program staff must be able to query the data and ask “why” until they get down to the few details that tell the story.

Until now, digging past the first or second “why” has been impractical or impossible. The “story” lay hidden in pieces across different databases. Staffers have had to choose between time and detail—between knowing in time and not knowing enough to make informed and productive decisions. Not any more.

Salient/HHS improves the process of investigating information and facts to get the right answer. Now department users can get down to the last “why”—simply by pointing and clicking. What administrators and staff find can be used to improve services, enhance department performance, and optimize the use of program funds. This is a radical change in the use of data to effectively manage government programs.

On the following pages, you’ll see examples that represent how Salient/HHS users can find the precise information they need.

*The names of recipients, caseworkers, and providers have been disguised to comply with privacy regulations.*

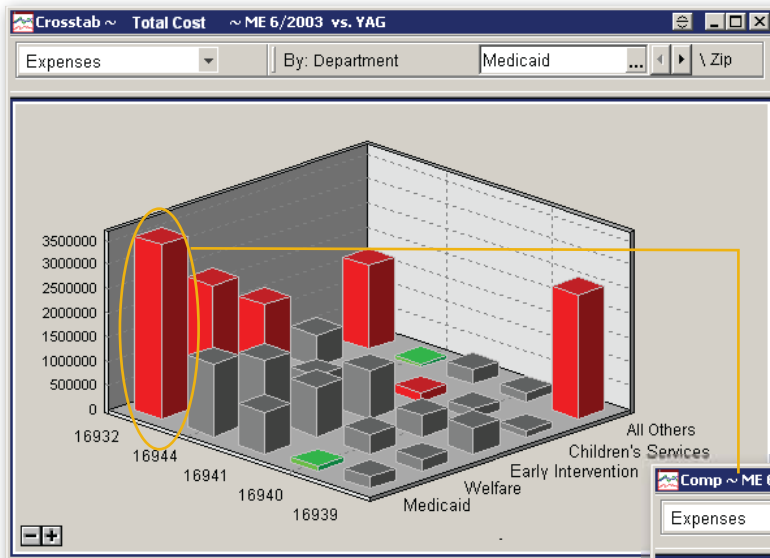


# BEHIND SALIENT/HHS: Speed, Simplicity, Precision

Three powerful principles are at work with Salient/HHS to remove the overhead of finding information: speed, simplicity, and precision. For example, here is an investigation into human services overspending.

## SPEED

Where does the money go? In less than a second, get a graphical overview of spending by program & zip code for last month.



The height of each bar shows how much the department spent. The color shows whether the amount was more (red) or less (green) than last year.

Medicaid spending was up over 10% since last year in the 16932 area.

## SIMPLICITY

Every answer is just a mouse-click away. Just click to learn more.

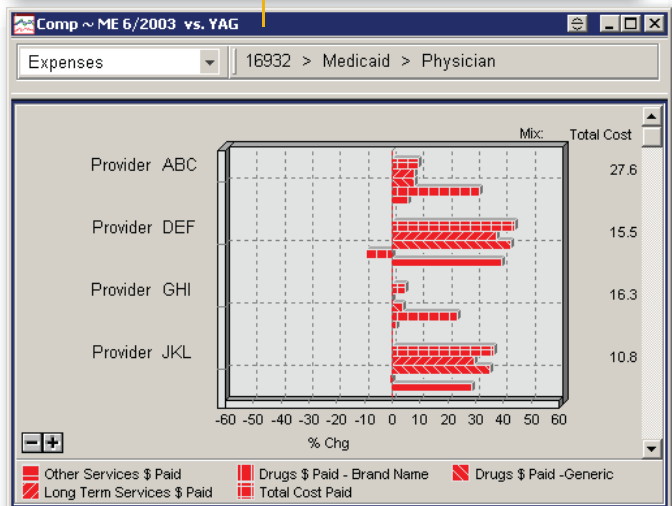
## PRECISION

Why are costs up?

The information is available at every level. Here we break down costs for Medicaid by category of service.

	Total Cost			
	This	Last	Diff	% Chg
PHYSICIAN	930,052	791,359	138,693	17.53
LONG TERM CARE FACILITY	671,615	550,957	120,657	21.90
HOSPITAL	470,449	436,512	33,937	7.77
HOME HEALTH AGENCY	220,155	207,227	12,929	6.24
DIAGNOSTIC & TREATMENT	191,894	105,308	86,586	82.22
DENTIST	202,215	188,810	13,405	7.10
NURSE	127,457	116,665	10,792	9.25
MEDICAL APPLIANCE DEALER	102,850	85,107	17,744	20.85
CHILD CARE INSTITUTION	71,589	48,882	22,707	46.45
Totals	3,607,777	3,025,251	582,527	19.26

Then, drill in on spending by provider, caseworker, or any other way.





# HOW IT WORKS

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## About UXT

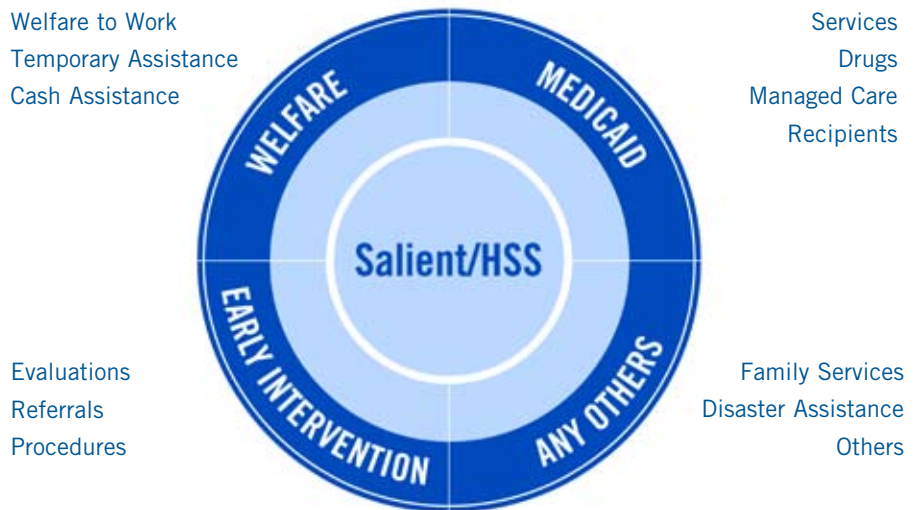
Salient/HHS is built on Salient's UXT® Investigative Data Engine, the world's fastest technology for high speed data investigation and visualization. UXT draws data from every available system and application and presents it in context within seconds. Traditional data marts and warehouses require complex report-writing skills and hours of time for analysis. UXT uses all of the same data, but eliminates both the need for SQL or report-writing skills and the time needed to get results from cumbersome sources.

## Salient/HHS Modules

Salient/HHS is composed of multiple HHS-specific modules, which meet the needs of costly, information-rich, and complex programs, including Medicaid, Welfare to Work, Early Intervention, and others.

These modules provide value as a stand-alone solution or easily snap together for a completely integrated view of the department at every level. Administrators and caseworkers have every relevant fact for improved services and cost control. The integrated Salient/HHS easily joins all of the costs of HHS programs for an overview of spending and efficiency at any level of detail. It provides a view of effectiveness for any recipient, provider, program, service—in short: every person, place, or thing that impacts the program. Results are immediate, actionable, and always available.

## Select Specific Modules or Integrate an Entire Agency



# MEDICAID MODULE

How many people are using Medicaid, how often, and how is the money being spent? Can you measure the performance of providers? Are some recipients cheating the system? Now, Salient/HHS tracks all of the facts about Medicaid so you understand exactly where every dollar is going.

## What you can do:

- Match services to costs.
- Get a complete picture of spending, for the whole system all the way down to a single recipient or provider.
- Identify and reduce system fraud or abuse that costs taxpayers millions of dollars.

## Medicaid Expense Investigation

Drill into Medicaid expenses. Investigate any question you can think of... as fast as you can think.

Salient/HHS lets you compare any two timeframes by just clicking.

What was the total cost of Medicaid at the Federal, State, or any other level?

	Total Paid			Federal Svcs & Drugs Paid			Federal Svcs & Drug Share			State Svcs & Drugs Paid		
	This	% Chg	Mix (T)	This	% Chg	Mix (T)	This	This	% Chg	Mix (T)		
PHYSICIAN	25,869,343	11.49	22.0	13,833,640	11.44	22.1	59.4	8,589,918	10.72	17.4		
LONG TERM CARE FACILITY	25,679,624	1.58	21.8	12,840,037	1.58	21.8	50.0	10,061,782	1.06	26.5		
HOSPITAL	23,396,652	6.54	19.9	11,612,943	6.79	19.7	49.6	7,252,591	5.04	19.1		
HOME HEALTH AGENCY	18,277,631	14.84	15.5	9,140,696	14.80	15.5	50.0	6,343,527	14.52	16.7		
DIAGNOSTIC AND TREATMENT CENTER	8,822,164	-12.03	7.5	4,501,101	-11.47	7.6	51.0	3,484,291	-9.97	9.2		
CAPITATION PROVIDER	7,973,305	15.32	6.8	3,983,921	15.15	6.8	60.0	2,239,000	14.80	5.9		
EMERGENCY SERVICES	2,530,795	-4.10	2.2	1,277,713	-4.19	2.2	60.5	666,021	-1.43	1.7		
BILLING SERVICE GROUP/EMEVS	1,452,547	174.49	1.2	729,549	174.44	1.2	60.2	383,100	187.73	1.0		
DENTIST	957,627	29.97	0.8	483,079	29.71	0.8	60.4	244,872	29.81	0.6		
NURSE	697,034	-10.60	0.6	367,811	-8.80	0.6	52.8	170,582	-13.82	0.4		
MEDICAL APPLIANCE DEALER	576,821	8.99	0.5	289,052	9.25	0.5	60.1	145,633	9.29	0.4		
CHILD CARE INSTITUTION	513,015	9.93	0.4	256,507	9.93	0.4	60.0	128,254	9.93	0.3		
TRANSPORTATION	309,390	15.28	0.3	154,763	15.20	0.3	60.0	81,521	16.93	0.2		
CLINICAL SOCIAL WORKER (CSW)	107,958	-4.27	0.1	54,431	-3.90	0.1	60.4	27,292	-3.97	0.1		
CLINICAL PSYCHOLOGIST	95,914	601.46	0.1	48,105	600.33	0.1	60.2	46,001	1,146.49	0.1		
LABORATORY	84,348	5.44	0.1	42,222	5.65	0.1	60.1	21,886	5.49	0.1		
PHARMACY	61,458	-14.64	0.1	40,743	-14.96	0.1	60.0	20,420	-15.81	0.1		
OPTICIAN	58,533	8.52	0.0	29,498	8.61	0.1	60.4	14,874	8.58	0.0		
<b>Totals</b>	<b>117,601,958</b>	<b>7.09</b>	<b>100.0</b>	<b>59,944,041</b>	<b>7.18</b>	<b>100.0</b>	<b>60.1</b>	<b>37,940,799</b>	<b>6.01</b>	<b>100.0</b>		

What are the largest categories of expense?

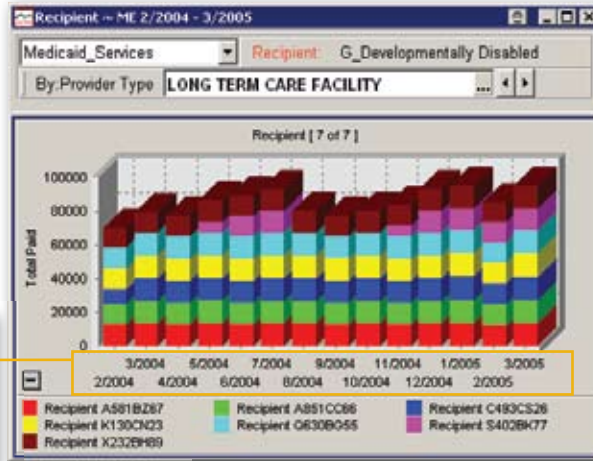
Here, over \$25M was spent on Physician services and drugs.

## Cost Comparisons

A quick graph shows the amount spent per recipient for any provider over time.

Seven recipients are receiving long-term care services from the same provider at a total cost of \$70K to \$90K per month, averaging over \$12K per patient.

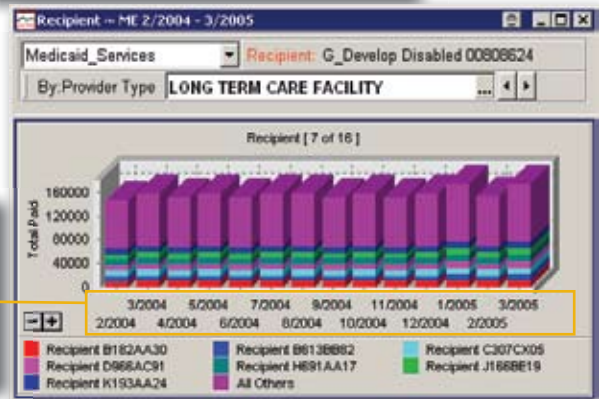
2/2004 - 3/2005	Mix	Totals	Average
Recip. A581BZ67	15.6	184,566	13,183
Recip. A651CC66	15.6	184,060	13,147
Recip. C493CS26	15.2	180,029	12,659
Recip. K130CN23	15.6	184,301	13,164
Recip. Q630BG55	15.6	184,301	13,164
Recip. S402BK77	7.6	90,252	6,447
Recip. X232BH69	14.8	175,247	12,518
Totals	100.0	1,182,757	84,483



## Compare the provider with a similar one to see differences in costs.

Here the average monthly cost per patient is about \$10K, over \$2K less than the first long-term care facility.

2/2004 - 3/2005	Mix	Totals	Average
Recip. B182AA30	6.2	135,237	9,660
Recip. B613BB82	6.0	132,861	9,491
Recip. C307CX05	6.6	144,515	10,323
Recip. D966AC91	6.0	132,388	9,456
Recip. H691AA17	6.6	144,515	10,322
Recip. J166BE19	6.2	136,738	9,767



## MEDICAID FACTS

"If there's one thing that can bankrupt the country, it's health care. It's out of control," said David Walker, Comptroller General for the United States, when speaking on the impact of health care costs on the Federal budget (Reuters/Yahoo! News, May 19, 2005).

The Center for Medicare and Medicaid Services (CMS) anticipates that Medicaid spending will continue to increase at a rate of 8% to 9% per year through 2014 (CMS, Office of the Actuary, in: Stephen Heffler et al., "U.S. Health Spending Projections for 2004-2014").

# MEDICAID MODULE

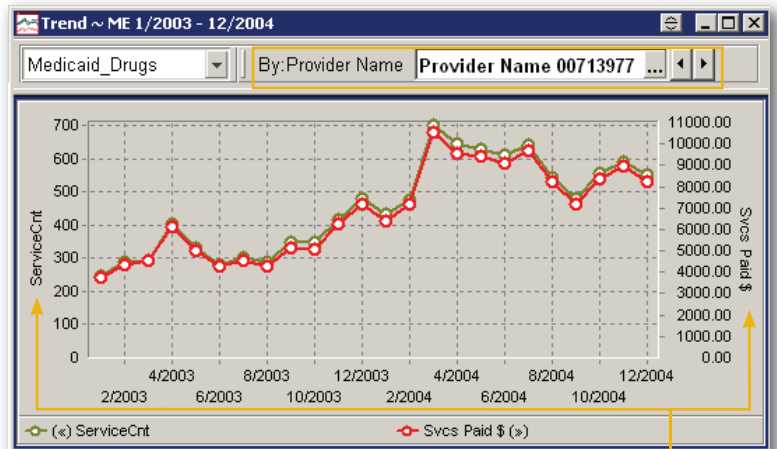
## MEDICAID FACTS

On the national level, since the early 1990s, health care fraud - i.e., the deliberate submittal of false claims to private health insurance plans and/or tax-funded public health insurance programs such as Medicare and Medicaid - has been viewed as a serious and still-growing nationwide crime phenomenon, linked directly to the nation's ever-growing annual health care outlay, which in calendar-year 2003 alone amounted to \$1.7 trillion (the Office of the Actuary, Centers for Medicare & Medicaid Services).

### Contract Service Providers

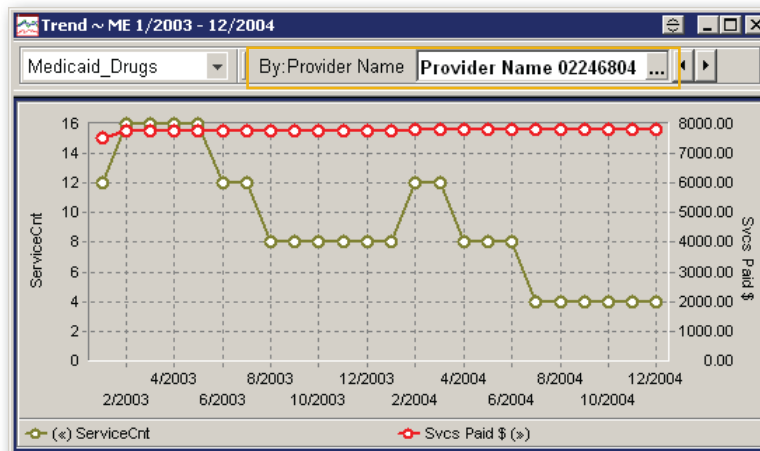
Get a correlative time-series analysis in seconds. Matching up the number of service occasions (green) to the amount spent (red) gives a view of contract productivity.

Here, cost and service frequency rise in parallel as expected.



But this provider is still receiving nearly \$8K per month despite dramatic drops in service levels.

Is it time to take another look at this contract?



Click to change any aspect of the graph... the data shown, the timeframe, etc.

## Suspected Abuse

List and sort recipients to see which are visiting multiple doctors and pharmacies to receive high quantities of a controlled drug.

Recipient ~ ME 3/2005 - 8/2005 vs. YAG

Medicaid\_Drugs By: Drug Name OXYCONTIN

Case Recipient Drug Pharmacy Provider

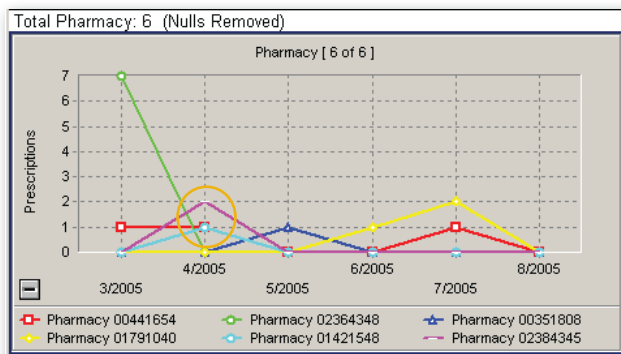
Total Recipient: 73 (Nulls Removed)

	Provider Ct Prescriber		Pharmacy Count [Medicaid_Drugs]		Total Drugs Paid			Prescriptions
	This	Last	This	Last	This	Last	Mix (T)	This
Recipient TB98CW34	3	0	6	0	1,750	0	3.0	17
Recipient R576BE84	1	1	3	1	765	83	1.3	9
Recipient M309BA79	2	1	3	1	2,541	1,387	4.4	6
Recipient F518CB09	1	1	2	2	4,422	559	7.7	6
Recipient J129DD48	2	0	2	0	546	0	0.9	5
Recipient Y936AA17	2	0	2	0	832	0	1.4	6
Recipient V565BR30	2	1	2	2	825	488	1.4	7
Recipient T493DC18	2	0	2	0	330	0	0.6	2
Recipient H918DD19	2	0	2	0	100	0	0.2	2
Recipient S998AA27	1	4	2	4	495	1,133	0.9	3
Recipient B740AR57	1	0	2	0	583	0	1.0	2
Recipient Z130BX73	1	1	1	1	165	83	0.3	1
Recipient Q174BF92	2	2	1	2	6,451	5,197	11.2	9
Totals	43	39	21	16	57,510	54,730	100.0	215

This powerful new type of data counts unique occurrences.

Here we see how many different providers prescribed OxyContin® to each recipient during a six month period as well as how many different pharmacies filled the OxyContin® prescriptions.

During the past six months, this recipient filled or refilled OxyContin® prescriptions 17 different times at six different pharmacies. The OxyContin® prescriptions came from three separate physicians. Could this be abuse?



### Drill in and trend the recipient's prescriptions over time.

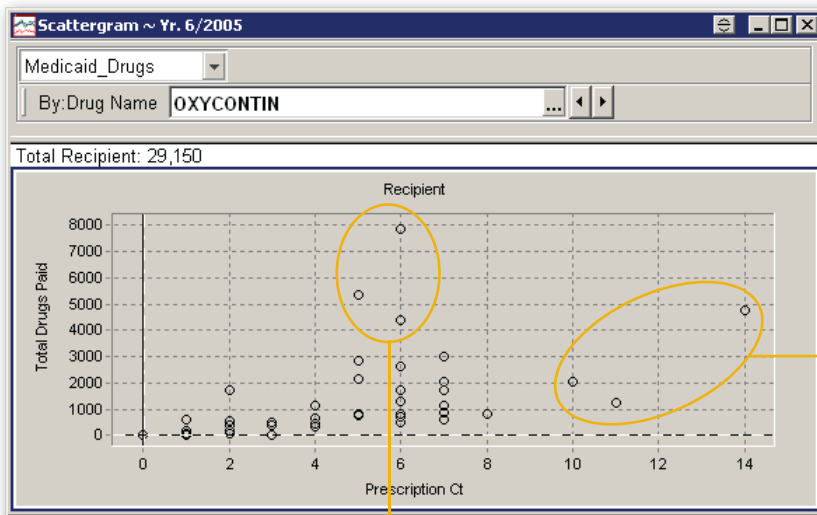
This view shows how the recipient jumped between pharmacies. In fact, the recipient received OxyContin® from three different pharmacies in April.

\* OxyContin® is a registered trademark of Purdue Pharma L.P.

# MEDICAID MODULE

## Prescription Levels

Identify outliers. It takes less than 30 seconds to choose the data, set up the chart, circle the outliers, and list them out.



This scattergram shows the usage pattern for a known abused drug, OxyContin®.

Just draw a box around the recipients you want to know more about.

\* OxyContin® is a registered trademark of Purdue Pharma L.P.

Recipients with high prescription costs. Why are the pharmacies charging more for the same drug?

Total Recipient: 3 Prescription Ct 4 to 6 Drugs Total 3,387 to 8,346

Name	RecipientAidCat	Prescription Ct	Drugs Total
Recipient Name Q141AU31	52-SSI - DISABLED (FP)	6	7,842
Recipient Name Q174BF92	26-MA - DISABLED (FP)	5	5,359
Recipient Name F518CB09	18-SAFETY NET WITHOUT DEPRIVATION	6	4,426
Totals		17	17,628

Recipients with high prescription counts. Could they be abusing the system?

Total Recipient: 3 Prescription Ct 9 to 14 Drugs Total 453 to 5,572

Name	RecipientAidCat	Prescription Ct	Drugs Total
Recipient Name T898CW34	52-SSI - DISABLED (FP)	10	2,041
Recipient Name W165CN94	52-SSI - DISABLED (FP)	11	1,259
Recipient Name X943DE84	52-SSI - DISABLED (FP)	14	4,792
Totals		35	8,093

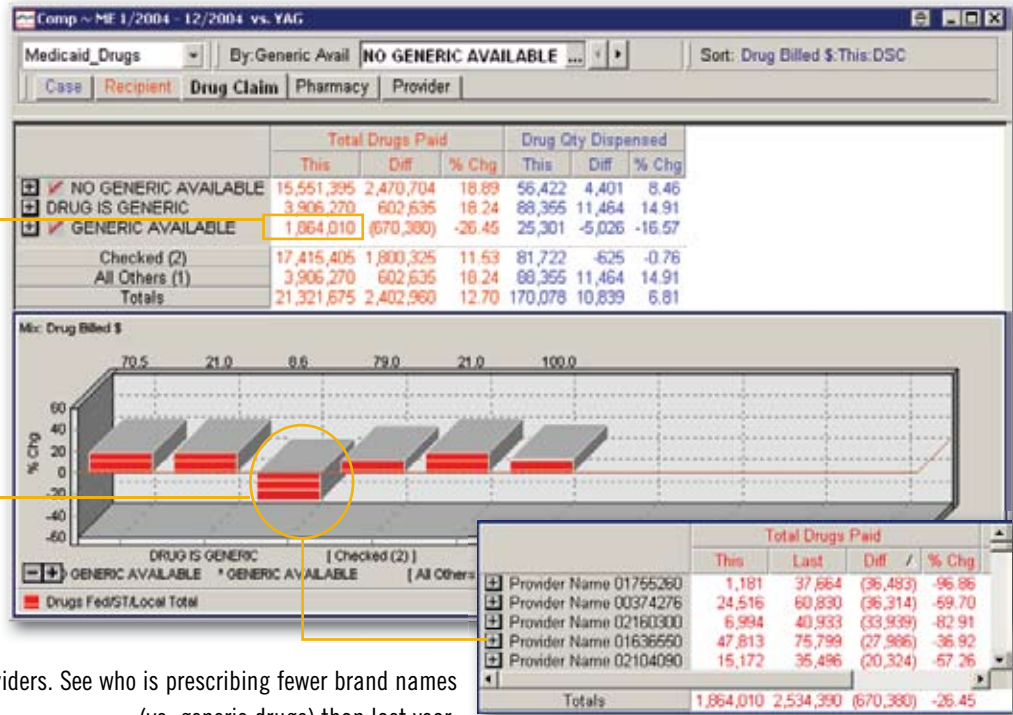
## Generic Drugs

A dashboard shows where things are out of line.

Here, over \$1.8M was spent on name brand drugs, when the generic equivalent was available.

The good news... this was down over 25% from last year.

Click to list the providers. See who is prescribing fewer brand names (vs. generic drugs) than last year.



	Total Drugs Paid				Recipient Count (Medicaid_Drugs)		Prescriptions		Total Drug \$ / Prescriptions	
	This	Diff	% Chg	Mix (T)	This	Last	This	Last	This	Last
PREVACID	541,953	(20,764)	-3.69	31.6	568	627	3,001	4,102	143	137
PROTONIX	434,621	115,963	36.39	25.3	759	623	4,138	3,268	105	98
NEXIUM	319,418	104,597	48.68	10.6	366	294	2,322	1,668	130	129
OMEPRAZOLE	160,480	12,295	8.30	9.4	229	203	1,417	1,237	113	120
ACIPHEX	121,088	13,906	12.97	7.1	125	133	797	759	152	141
PRILOSEC	32,209	(32,627)	-100.32	1.9	33	105	185	448	174	145
NIZATIDINE	26,338	(6,769)	-25.69	1.5	32	46	245	302	108	110
FAMOTIDINE	19,783	(7,396)	-37.41	1.2	123	152	656	781	30	35
SUCRALFATE	13,896	2,011	16.92	0.8	88	69	367	315	38	38
RANITIDINE HCL	12,571	(2,362)	-18.87	0.7	123	141	595	759	21	20
ZANTAC	11,085	3,895	35.16	0.6	39	40	148	137	75	53
COLAZAL	5,470	3,439	62.87	0.3	7	4	30	8	102	254
CARAFATE	4,380	943	21.53	0.3	30	20	116	81	38	42
PREVPAC	4,130	(981)	-23.75	0.2	16	19	25	22	165	232
CIMETIDINE	1,699	(661)	-38.96	0.1	26	44	148	201	11	12
PREVACID SOLUTAB	1,621	1,621	100.00	0.1	12	0	26	0	62	0
PEPCID	1,401	(718)	-51.25	0.1	6	6	22	18	64	118
MISOPROSTOL	1,147	(760)	-66.34	0.1	11	9	42	35	27	54
ANTACID	225	32	16.72	0.0	7	6	41	25	5	8
SM ANTACID/SIMETHICONE	210	(95)	-45.24	0.0	17	13	49	69	4	4
HELIDAC	205	(271)	-132.20	0.0	1	3	1	3	205	159
ZANTAC EFFERDOSE	201	201	100.00	0.0	1	0	2	0	100	0
SM ANTACID	154	(146)	-94.81	0.0	16	17	63	75	2	4
CIMETIDINE HCL	130	(169)	-129.62	0.0	2	2	6	14	22	21
SODIUM BICARBONATE	123	26	26.44	0.0	16	14	98	69	1	1
PRILOSEC OTC	97	97	100.00	0.0	5	0	8	0	12	0
CALCIUM ANTACID	41	(9)	-22.00	0.0	2	2	14	12	3	4
Checked (5)	1,577,560	225,987	16.72	92.0	N/A	N/A	12,475	11,034	126	122
All Others (99)	137,211	(41,754)	-30.42	8.0	N/A	N/A	2,935	3,514	47	51
Totals	1,714,770	184,233	12.04	100.0	2,168	2,042	15,410	14,548	111	105

## A Million Dollars Lost

Compare money spent on high cost brand names vs. the economical over-the-counter equivalent (Prilosec OTC®).

Over \$1.5M was spent on the top five branded anti-ulcer medications.

Only \$97 was spent on Prilosec OTC®!

\* Prilosec OTC® is a registered trademark of Proctor & Gamble.

# WELFARE TO WORK MODULE

How effective are the education, training, employment and post-employment activities, programs, and services you are providing to welfare and low-income households? Could your Welfare to Work program operate more efficiently? Performance ratings are provided on these and other aspects of Welfare to Work, but you need visibility into the supporting data to improve performance. Salient/HHS tracks employment referrals, enrollments, work hours, training, education, treatment, pre-sanction warnings, non-compliance, conciliations, sanctions and more. The result is a single version of the facts, updated continuously and immediately available to any authorized person.

## What you can do:

- Compare results with averages and best practices.
- Enable caseworkers and employment agencies to improve their processing efficiency and effectiveness.
- Review the effects of pre-sanction warnings, conciliations, and sanctions.
- Analyze short-term disability extensions.

## Employment Agency Performance

Compare agencies by number and type of employment activities.

The screenshot shows a software interface for 'Comp ~ ME 4/2006 vs. 3/2006'. The main window displays a list of agencies with columns for 'This', 'Last', 'Mix (T)', 'Mix (L)', 'Diff', and '% Chg'. A yellow box highlights the 'DOL JOBS' agency row. A secondary window is open below, showing a detailed list of recipients for that agency, including their names, eligibility status, and PAEmployability.

		Employment Activity Count					
		This	Last	Mix (T)	Mix (L)	Diff	% Chg
[-] FASSETT SCHOOL	-NY-ELMIRA -14901	81	83	4.1	4.2	-2	-2.81
[-] 16-Community Services		78	80	96.3	96.4	-2	-2.92
[-] 09-Educational Training		3	3	3.7	3.6	0	0.00
[-] DOL JOBS	-NY-ELMIRA -14904	49	49	2.5	2.5	0	0.00
[-] 05-Job Search		45	45	91.8	91.8	0	0.00
[-] 03-Work Experience		4	4	8.2	8.2	0	0.00
[+] LEARN TO EARN	-NY-ELMIRA -14901	44	45	2.3	2.3	-1	-1.56
[+] FA JOB SEARCH	-NY-ELMIRA -14904	16	16	0.8	0.8	0	0.00
Total Recipient: 49 (Nulls Removed)							

		Employment Activity Count				Name	EligibilityStatus	PAEmployability
		This	Last	Diff	% Chg			
	A593AA32	1	1	0	0.00	Recipient Name A593AA32	07-ACTIVE	27-Employed
	B388BA15	1	1	0	0.00	Recipient Name B388BA15	07-ACTIVE	27-Employed
	C233AA29	1	1	0	0.00	Recipient Name C233AA29	07-ACTIVE	20-Non-Exempt
	C315CQ83	1	1	0	0.00	Recipient Name C315CQ83	07-ACTIVE	70-Contesting Employability Determination
	D465AC72	1	1	0	0.00	Recipient Name D465AC72	07-ACTIVE	20-Non-Exempt
	D743CC21	1	1	0	0.00	Recipient Name D743CC21	07-ACTIVE	27-Employed
	D882DQ12	1	1	0	0.00	Recipient Name D882DQ12	07-ACTIVE	20-Non-Exempt
	E192BQ91	1	1	0	0.00	Recipient Name E192BQ91	07-ACTIVE	16-Work Limited
	Totals	49	49	0	0.00			

For example, at one of the top agencies, most recipients participate in job searches, and some receive work experience.

In a second, drill down to a list of recipients for any agency.

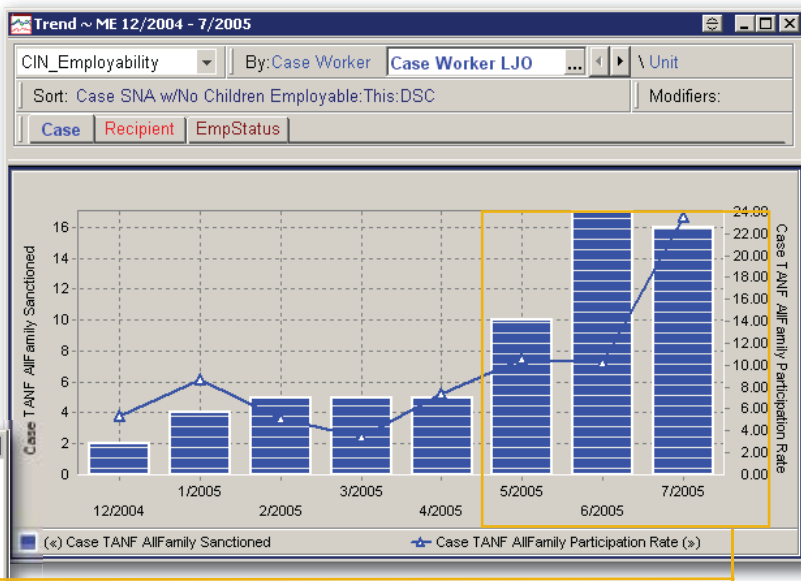


## Sanctions

Salient/HHS provides caseworkers with the ability to monitor the effects of their noncompliance letters, conciliations, and sanctions on the behavior of participants.

It looks like sanctions might have worked for this caseworker. Participation rates increased with sanctions over the last 8 months.

5/2005 - 7/2005	
	Average
Case TANF AllFamily Sanctioned	14
Case TANF AllFamily NonParticipating	37
Case TANF AllFamily Employable	52
Case TANF AllFamily Countable Participant	8
Case TANF AllFamily ChildOnly	3
Case TANF AllFamily Exempt	3
Case TANF AllFamily Participation Rate	14.6



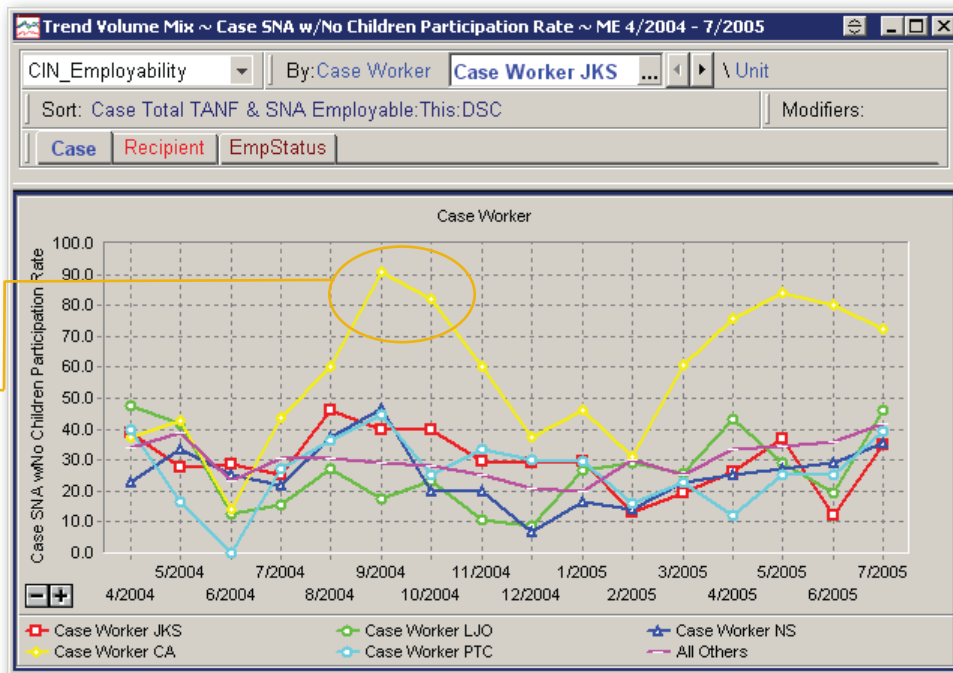
Draw a box to learn more about any period of time.

## Caseworker Participation Rates

A graph makes it easy to compare participation rates over time.

This caseworker (represented by the yellow line) has much higher participation rates for recipients of Safety Net Assistance (SNA) than other caseworkers.

Just click to switch to a different type of participation rate (for example, TANF two-parent or all family).



# WELFARE TO WORK MODULE

## Participation Performance Metrics

Measure participation across all programs, or drill down to see performance metrics for any particular caseworker or employment agency.

InfoShare quickly gives information defined by your organization. For example, see the meaning of any data field. See the photo or job history of a caseworker. The view is truly interactive and intuitive.

**Case TANF All Family Participation Rate =**  
The percent of the families eligible for TANF who are currently participating in the Welfare to Work Program. This figure does not include families who are only partially participating.

**Case TANF All Family NonParticipating =**  
The number of families who are eligible for TANF but not participating in the Welfare to Work program.

Category	This	Last	Diff	% Chg
Case TANF AllFamily NotCountable Participant	95	92	4	4.88
Case TANF AllFamily Countable Participant	132	126	6	4.76
Case TANF AllFamily Participating	218	208	10	4.81
Case TANF AllFamily ChildOnly	280	282	-2	-0.71
Case TANF AllFamily Sanctioned	66	66	0	0.00
Case TANF AllFamily Exempt	13	15	-2	-13.33
Case TANF AllFamily Employable	464	466	-2	-0.43
Case TANF AllFamily Participation Rate	28.4	27.0	1.4	5.19
Case TANF AllFamily NonParticipating	252	274	-12	-4.38
Case TANF TwoParent NotCountable Participant	20	13	7	53.85
Case TANF TwoParent Countable Participant	22	24	-2	-8.33
Case TANF TwoParent Participating	42	37	5	13.51
Case TANF TwoParent Sanctioned	11	10	1	10.00
Case TANF TwoParent Employable	54	50	4	8.00
Case TANF TwoParent Participation Rate	40.7	48.0	-7.3	-15.21
Case SNA w/No Children NotCountable Participant	25	21	4	19.05
Case SNA w/No Children Countable Participant	117	95	22	23.16
Case SNA w/No Children Participating	142	116	26	22.37
Case SNA w/No Children Employable	269	268	1	0.37
Case SNA w/No Children Participation Rate	43.6	33.0	10.6	31.82
Case SNA w/No Children NonParticipating	30	37	-7	-18.92

“The goal here is to not only have the caseworkers compare their performance to the targets, but to compare their performance to fellow workers and to compare their current performance to their historical performance. Learning from each other will reach a new level because success stories have facts to support them. Furthermore, workers know what they are expected to achieve and exactly how close they are to those goals.”

Linda Huffner  
Chemung County, NY Commissioner of Human Services

## A Holistic View of the Individual

Caseworkers and supervisors have at-a-glance access to all the information about a case or individual. With this information, the caseworker can more accurately balance benefits and determine if there might be a better plan to move the individual into an appropriate job.

Recipient -- Yr. 0/2005 vs. YAG

Recip\_Employability By: Case Worker Case Worker JKS

Sort: TANF AllFamily Employable: This.DSC / Employment Activity Hours: This.DSC

Total Recipient: 32,469

Name	Employment Activity Hours		Employment Activity Weeks		Total Drugs Paid		Total Svcs Paid	
	This	Last	This	Last	This	Last	This	Last
V297AE95 Recipient V297AE95	1,060	0	42	0	310	159	7,017	4,645
S679AC64 Recipient S679AC64	591	0	17	0	570	211	342	5,436
G708AF93 Recipient G708AF93	554	0	32	0	202	0	672	0
X277CA11 Recipient X277CA11	497	0	23	0	0	872	114	1,221
A747BF56 Recipient A747BF56	493	0	29	0	1,969	1,606	14,427	26,730
A529BP30 Recipient A529BP30	365	110	15	4	185	61	1,955	1,895
H095AN53 Recipient H095AN53	350	40	10	1	92	196	1,016	264
M239CJ33 Recipient M239CJ33	312	0	26	0	213	343	1,109	1,093
T843BF99 Recipient T843BF99	272	0	7	0	206	260	930	2,832
T342AP20 Recipient T342AP20	72	0	4	0	661	268	7,393	2,120
T706BR76 Recipient T706BR76	44	0	2	0	702	0	6,136	12,473
D399BG57 Recipient D399BG57	44	40	8	1	105	175	708	250
R982AD89 Recipient R982AD89	0	80	0	2	0	0	0	0
	0	40	0	1	0	0	0	0
	0	0	0	0	0	0	0	0

List employment statistics and Medicaid costs by recipient.

Drill down into medical costs for any recipient.

Recipient Profile

CIN: T342AP20  
 Name: Recipient T342AP20  
 RecipientID: 00000000  
 SSN: 000-00-0000  
 Birth Dt / Age: 01-16-1981 / 24  
 Street: Street Address for T342AP20  
 Phone: 607-123-4567  
 MA Case: PA4940 90  
 MA Start Dt: 03-01-2004  
 MA End Dt: 03-31-2006  
 MC Guarantee PCP Dt: -  
 US Entry Dt: -  
 NY Entry Dt: -  
 Age: 24  
 AgeGroup: 21 - 64  
 Sex: Female  
 MaritalStatus: 1-Married  
 Citizenship: C-Citizen  
 Alien: Und# 1  
 Ethnicity: Y-Ethnicity Code Positive for CIN  
 Race: 4

OK

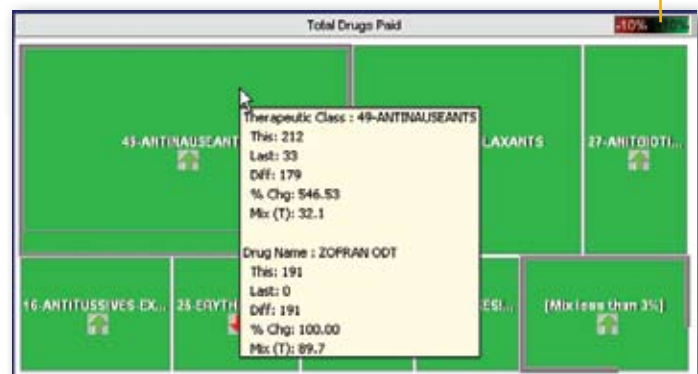
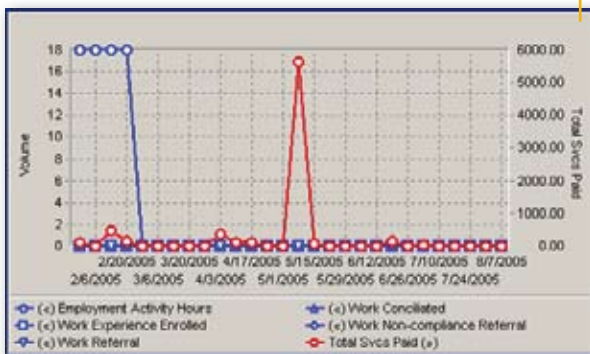
A single right-click shows the traits of any single recipient, including age, status, address, etc.

Trend the recipient's activities over time.

	Total Drugs Paid		Total Svcs Paid	
	This	Last	This	Last
HOSPITAL	0	0	5,915	24
HEMIC AND LYMPHATIC SYSTEMS	N/A	N/A	5,003	0
ANESTHESIA	N/A	N/A	766	0
HOSPITAL VISIT-FOLLOWUP	N/A	N/A	127	0
HISTOLOGY	N/A	N/A	0	24
PHYSICIAN	634	268	1,326	1,427
TRANSPORTATION	0	0	122	0
NURSE	8	0	30	0
LABORATORY	19	0	0	0
DIAGNOSTIC AND TREATMENT CENTER	0	0	0	233
DENTIST	0	0	0	366
CAPITATION PROVIDER	0	0	0	19
OPTICIAN	0	0	0	25
OPTOMETRIST	0	0	0	10
PHARMACY	0	0	0	16
<b>Totals</b>	<b>661</b>	<b>268</b>	<b>7,393</b>	<b>2,120</b>

Switch to a view of prescriptions to see what the recipient is taking.

This recipient stopped all employment activities in Feb., and had a costly medical procedure in May.



# EARLY INTERVENTION MODULE

Children’s programs such as Early Intervention and preschool special education require considerable funds and resources. To measure the costs and benefits of these programs, you need immediate access to large volumes of data. Salient/HHS tracks all of the facts (evaluations, referrals, money spent, diagnoses, procedure types, etc.) for every single child, provider, insurance company, and caseworker. Salient/HHS can integrate the information with other programs such as Medicaid and welfare. The result is the ability for caseworkers and managers to improve the efficiency of Early Intervention and other programs.

## What you can do:

- See how long children are in the program and what services they receive.
- Compare Early Intervention and preschool programs by costs, number of services provided, and results. See how many children moved from one program to another.
- Look at who is doing the core and supplemental evaluations and understand the results.

## Procedure Cost Analysis

Where is the money going? Compare total amount spent and amount per child by specialty.

The top screenshot shows a summary table for Physical Therapist specialty. The bottom screenshot shows a detailed view for the Basic OT Home procedure.

	AmtPaid					\$ per Child [Billing]		\$ per Unit		Child Count [Billing]		Units		Provider Count [Billing]	
	This	Mix (T)	Last	Diff	% Chg	This	Last	This	Last	This	Last	This	Last	This	Last
Special Instructor/Educator	114,276	20.0	72,485	41,791	57.65	3,940.55	3,020.21	79.41	73.96	29	24	1,439	980	7	7
Speech/Lang Pathologist	123,333	21.6	110,195	13,138	11.92	2,517.00	2,562.67	72.63	70.23	49	43	1,698	1,569	8	7
Physical Therapist	230,813	40.5	193,891	36,922	19.04	2,098.30	2,336.04	75.11	72.70	110	83	3,073	2,667	3	4
Occup. Therapist	5,275	0.9	0	5,275	100.00	1,055.00	0.00	71.28	0.00	5	0	74	0	2	0
Other	47,277	8.3	101,289	(54,012)	-53.32	945.54	1,534.69	91.09	75.36	50	66	519	1,344	4	4
Social Worker	476	0.1	975	(499)	-51.17	476.00	487.38	79.33	15.47	1	2	6	63	1	1
Service Coordinator	48,265	8.5	35,870	12,395	34.56	292.51	231.42	14.25	13.81	165	155	3,387	2,598	1	1
Audiologist	220	0.0													
Hospital Staff	165	0.0													
<b>Totals</b>	<b>570,100</b>	<b>100.0</b>													

	AmtPaid					\$ per Child [Billing]		\$ per Unit		Child Count [Billing]	
	This	Mix (T)	Last	Diff	% Chg	This	Last	This	Last	This	Last
Basic OT Home	58,730	25.4	51,032	7,698	15.08	1,779.70	1,546.42	70.00	68.22	33	33
Basic Speech Lang Home	67,200	29.1	46,510	20,690	44.49	1,768.42	1,603.79	70.00	68.20	38	29
Basic PT Home	79,380	34.4	76,236	3,144	4.12	1,556.47	1,815.14	70.00	68.19	51	42
Ext PT Home	1,372	0.6	0	1,372	100.00	1,372.00	0.00	98.00	0.00	1	0
Speech Lang Cntr Indiv	1,722	0.7	920	802	87.17	430.50	920.00	41.00	40.00	4	1
Core Evaluation	17,370	7.5	12,816	4,554	35.53	386.00	376.94	386.00	376.94	45	34
OT Cntr Indiv	533	0.2	281	252	89.68	266.50	281.00	41.00	40.14	2	1
Ext Speech Lang Home	196	0.1	2,405	(2,209)	-91.85	196.00	2,405.00	98.00	96.20	1	1
<b>Totals</b>	<b>230,813</b>	<b>100.0</b>	<b>193,891</b>	<b>36,922</b>	<b>19.04</b>	<b>2,098.30</b>	<b>2,336.04</b>	<b>75.11</b>	<b>72.70</b>	<b>110</b>	<b>83</b>

Just double-click to list spending for each physical therapy procedure.

## Evaluations and Services

Are agencies performing the evaluation and then servicing the same child?

Provider ~ ME 6/2004 vs. YAG

Billing: By: Procedure Core Evaluation Sort: PROVIDER.ASC Modifiers:

Procedure Provider Child BillStatus Disease Agency DenialCode Insurance

Total Provider: 2 (Nulls Removed)

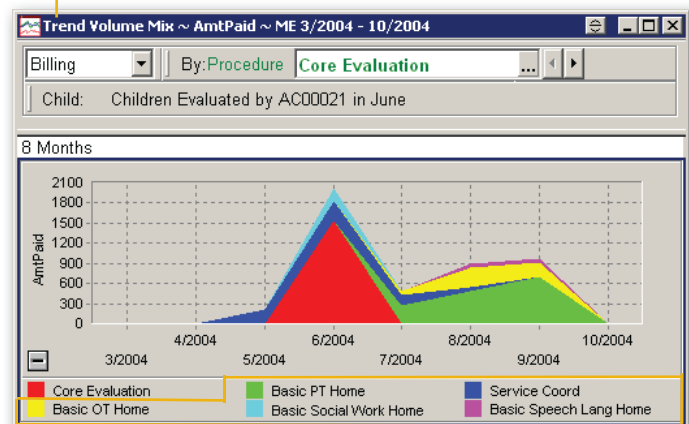
AGENCYCODE	AmtPaid						\$ per Child [Billing]		Child Count [Billing]		Provider Count [Billing]		Units		\$ per Unit	
	This	Mix (T)	Last	Mix (L)	Diff	% Chg	This	Last	This	Last	This	Last	This	Last	This	Last
AC00000	1,544	50.0	750	40.0	794	105.87	386.00	375.00	4	2	1	1	4	2	386.00	375.00
AC00021	1,544	50.0	1,125	60.0	419	37.24	386.00	375.00	4	3	1	1	4	3	386.00	375.00
Totals	3,088	100.0	1,875	100.0	1,213	64.69	386.00	375.00	8	5	2	2	8	5	386.00	375.00

During June, this provider performed core evaluations on four different children.

Drill down to learn about services provided to those children.

In the following months, the children received Basic PT Home, Basic OT Home and other services.

Who performed the follow-up services?



Provider ~ ME 6/2004 - 10/2004 vs. YAG

Billing: By: Procedure S.Not Core Evaluation Sort: PROVIDER.ASC Modifiers:

Child: Children Evaluated by AC00021 in June

Procedure Provider Child BillStatus Disease Agency DenialCode Insurance

Total Provider: 2 (Nulls Removed)

AGENCYCODE	AmtPaid						\$ per Child [Billing]		Child Count [Billing]	
	This	Mix (T)	Last	Mix (L)	Diff	% Chg	This	Last	This	Last
AC00021	2,356	82.9	0	0.0	2,356	100.00	588.98	0.00	4	0
AC00042	485	17.1	0	0.0	485	100.00	121.13	0.00	4	0
Totals	2,840	100.0	0	100.0	2,840	100.00	710.10	0.00	4	0

The same provider who performed the evaluations provided nearly all (over 80%) of the follow-up services.

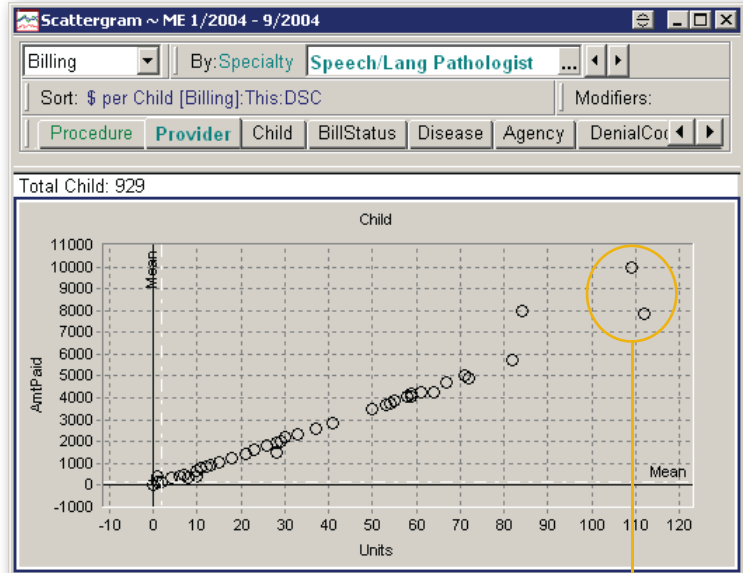
# EARLY INTERVENTION

## Spot Outliers by Specialty.

A graphic shows the amount spent and units of service for each child.

## Why do these two children have much higher costs?

Just select the points to learn more about them.



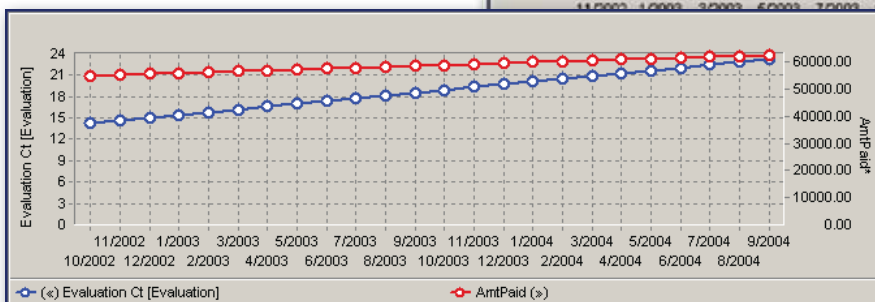
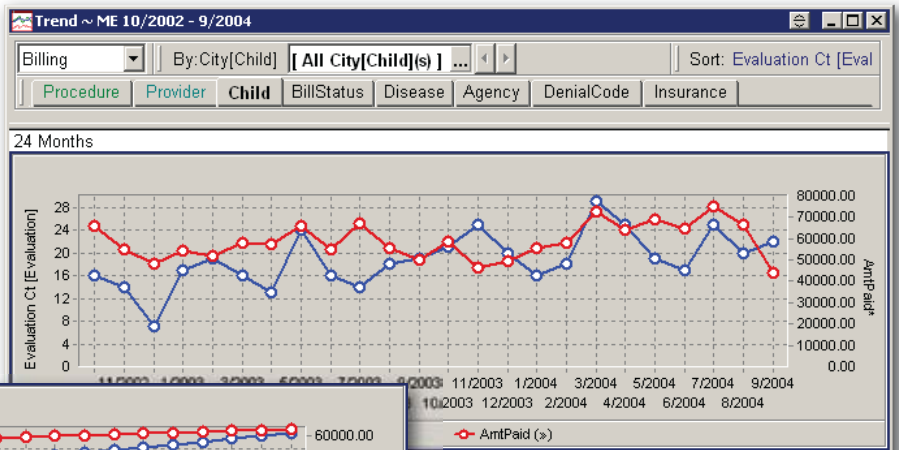
Total Child: 2 Units 104 to 120 AmtPaid 5,674 to 10,806

Child	FIRST	LAST	Rel1	Race	Sex	IHEVDATE	Units	AmtPaid
Child 00001700	FirstN01687	LastN001687	Mother	Asian	Male		109	9,954
Child 00001593	FirstN01580	LastN001580	Parents	White	Female	02-08-03	112	7,840
Totals							221	17,794

## Spending and Service Over Time.

Correlate number of evaluations (blue line) and money spent (red line) over time.

Just click to smooth the correlative time-series graph.



The number of evaluations has risen faster than money spent during the past two years.

## SALIENT/HHS QUICK FACTS:

- See a complete picture of program or agency efficiency
- Bring in data from anywhere
- Score productivity from every perspective
- Access instantly, easily, from anywhere
- Monitor performance continuously
- Update automatically

“I have never seen anywhere a software solution that provides at a worker level, the functionality, ease of use and flexibility that [Salient’s solution] does. We consider this a management tool for all levels in the agency: caseworkers can better manage their cases and themselves, supervisors can better manage their departments and the senior management can better manage the County. We believe that [this solution] will help us to meet and exceed the State and Federal guidelines for our programs.”

Linda Huffner  
Chemung County, NY Commissioner of Human Services



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