

Contacts:

Warren Lesnefsky
Marketing Comm. Mgr.
McKesson Health
Solutions
303-664-6361

Barbara Brett
Executive Director
CoverColorado
303-863-1960

Jason Patchen
COO
CMS Health Integrated
877-267-7577

Colorado High-Risk Health Plan Members to Benefit from Nation's First Integrated Care Program

McKesson Health Solutions and CMS Health Integrated Join Forces to Provide Ground-Breaking Initiative

BROOMFIELD, Colo. -- McKesson Health Solutions, a business unit of McKesson Corporation (McKesson) and CMS Health Integrated (CMS) today announced an agreement to provide CoverColorado with the nation's first integrated care program for high-risk health plan participants. Over 3,000 people with chronic and high-cost health conditions will now have access to an around-the-clock, integrated care program that includes both disease management and case management services resulting in better health outcomes.

McKesson's CareEnhancesm programs for asthma, diabetes, congestive heart failure, and coronary artery disease risk factor reduction will be combined with CMS's CareNetsm utilization management, case management and depression management programs to provide CoverColorado's high risk population with complete care coordination customized to each participant's specific health needs.

"This initiative represents a significant achievement for the disease management industry. This strategic partnership appears to be the nation's first, simple care enhancement option to combine disease management and case management services to better serve high-risk patients," states Warren Todd, Executive Director of the Disease Management Association of America (DMAA). "The result of this collaboration should be total health and well being for plan participants, and maximized financial value for the health plan." noted Todd.

CoverColorado's integrated care management program includes nurse advice and care facilitation services, complemented with comprehensive case management for those in need of acute or complex care services, and catastrophic care coordination.

“Integration of these services is particularly key to CoverColorado participants because many have complex, pre-existing, chronic and high cost health conditions,” said the plan’s Executive Director Barbara Brett. “They've been declined by commercial plans increasingly reluctant to insure individual policy holders. Our goal is to provide an enduring program of health insurance options that offers choice and cost effective, evidence-based strategies to manage chronic disease. By helping our participants [who pay high premiums and have high deductibles] improve their health status and control costs, we will all benefit,” noted Brett.

All programs combine high-tech tools for identifying and monitoring participants, with the high-touch of personalized nurse counseling, to yield the individualized attention needed by those with chronic illnesses. Similar programs have proven remarkably effective in reducing emergency room visits, office visits, pharmacy costs and the number and length of hospitalizations, because care is coordinated, not fragmented, and participants are taught about their illnesses, given self-management techniques to control their symptoms, and coached to achieve their care management goals.

“We believe our model of care coordination will become the norm as the population ages,” Brett added. “The health system is going to have more, not less of these challenging patients to serve, and bringing it all under one set of care coordinators is the only way of reducing the fragmentation in the medical and behavioral health delivery systems. The partnership between CMS and McKesson is the missing link. . .giving our members the knowledge, tools, and support they need to feel better, miss less work, and improve the quality of their lives.”

“This is a great example of the power that the integrated health model, created by the combination of McKesson and CMS, brings to its clients. CoverColorado is a leader in this area, we expect to see other states capitalize on the integrated approach to disease management that is now possible,” said Cheri Lattimer, Senior Vice President Care Solutions, CMS.

“It is clear that CoverColorado wants to put its participants back in the driver’s seat to achieve self-management and meet personal health and well-being expectations,” stated Jeanne Boling, Executive Director of the Case Management Society of America (CMSA).

Kathleen Genreux, a participant of CoverColorado since 1998, feels that offering patients access to this type of care will “greatly enhance their ability to take better care of themselves, while knowing their deductibles are spent as wisely and judiciously as possible.” She continues,

“It’s all about understanding your disease and taking responsibility for your choices. The more answers you can get from your health plan, the healthier you can be, and the more you can believe again in the medical system.”

Boling added, “Industry observations state that an outcomes-oriented healthcare system can yield high returns on investment -- and that CoverColorado should defend the health of its defined population by providing a consumer-oriented, integrated care management system. It is imperative that we, as case management professionals, recognize the importance of integrated care management and consumers’ priorities in measuring and maximizing the impact of delivered care on patients’ lives.”

Sandeep Wadhwa, MD, Vice President Disease Management Services of McKesson Health Solutions, noted, “McKesson is an adjunct care provider that supports health plans and payors by helping people gain the most value for their coverage, assisting physicians with the care of their patients, and increasing payors’ bottom lines by decreasing avoidable care. We aim to improve health outcomes by enabling real-time information exchange and point-of-care decision making. This initiative is truly next generation health care that will impact the lives of patients and caregivers in Colorado while creating a benchmark of care for high risk pools across the United States.”

About CoverColorado

CoverColorado is a health insurance provider established by Colorado state legislation to provide individual major-medical health insurance to Colorado residents who have been denied access to health insurance because of pre-existing medical conditions or are coming off COBRA and unable to obtain individual insurance. A non-profit organization, CoverColorado has served over 5000 Coloradoans since its inception in 1990. More information about CoverColorado is available at www.covercolorado.org.

About McKesson Corporation

McKesson Corporation is a leading provider of innovative solutions in supply, information, and care management through advanced technologies and services that deliver greater return on investment and better patient outcomes for providers, payors, employers, and manufacturers. With revenues of \$42 billion for the fiscal year ended March 31, 2001, McKesson ranks #35 in the 2001 Fortune 500.

McKesson Health Solutions LLC, a wholly owned subsidiary of McKesson, offers a comprehensive suite of medical management products and services to help providers and payors better manage the cost and quality of care. Its CareEnhanceSM solutions include InterQual[®] clinical appropriateness criteria, outsourced disease management and nurse triage services, and software tools that support organizations' clinical workflow, analysis, and reporting processes, including HEDIS[®]. For more information, visit our Web site at www.CareEnhance.com.

About CMS Health Integrated, Inc.

CMS Health Integrated, LLC, a privately held company based in Tampa, Florida, provides comprehensive and integrated, medical and behavioral health utilization, case and disease management products on one platform, as well as online and offline EAP services for health plans, governments, third party administrators, indemnity insurers, and large self-insured employers. The CMS philosophy is rooted in the belief that traditional healthcare carve-out arrangements that have dominated the industry for years have been the main cause of member and provider dissatisfaction. In addition, financial incentive barriers created by the carve-out system have fragmented medical care, leading to less than desirable clinical outcomes. The advent of new mental health parity initiatives together with these emerging trends has paved the way for new models in single source solutions for medical and behavioral health care management. This integrated approach improves outcomes and improves efficiency. CMS's state of the art technology, professional expertise and proprietary clinically integrated programs provide superior alternatives for payers. CMS has contracts with 35 companies, representing more than 4 million members. More information about CMS is available at www.cmshealthcare.com.

#####