



Introducing the **Virtual Case Manager**

The **Compliance Risk** & Capacity Crisis

The current model is stretched beyond its limits, creating unsustainable workloads, administrative bottlenecks, and significant compliance risks.

1:40

Unsustainable CM to Member Ratio

Impossible for providing proactive, complex care, especially with new Dual Integration workloads.

<30%

HRA Completion Rate

Failing assessments directly impact quality scores, risk stratification, and state compliance.

~60%

Unable to Contact (UTC) Rate

Massive wasted effort and expense in specialized call centers with little to no return.

The Virtual Case Manager

A dedicated, AI-powered assistant for every member, deployed under your brand to provide proactive, personalized, and unlimited support, 24/7.

Augmentation, Not Replacement

Our core philosophy is to **give time back to Case Managers**, empowering them to focus on what humans do best: complex care and clinical intervention.



What VCM Automates

Initial HRA outreach, appointment reminders, deadline notifications, and basic, repetitive member questions.



What Human CMs Focus On

Complex care transitions, crisis intervention, and high-acuity clinical decisions.

Pilot Impact: Giving Back a Full Day Per Week

In our pilot program, automating HRA outreach and documentation gives each Case Manager a full day back every week to focus on complex

member care.

The 5X Effect

1:40 → 1:200

Management Ratio to Oversight Ratio

Maximize Your Current Team's Impact

Instead of hiring more staff, increase the efficiency of your current team by automating routine administrative tasks, freeing them to focus on complex care.

Estimated Annual Cost Avoidance

\$5M

(Due to increased Case Manager efficiency)

The Full VCM Experience

Member View (SMS)

Hola Maria. Soy su gestor de casos virtual. Noté que sus horas de trabajo reportadas en julio fueron 70, lo que la pone en riesgo de no cumplir con el requisito de 80 horas/mes de Medicaid.

Translation: Hello Maria. This is your virtual case manager. I noticed your reported work hours for July were 70, which puts you at risk of not meeting the Medicaid 80-hour/month requirement.

9:30 AM

Hola. Sí, estoy preocupada. Me cortaron las horas en la tienda este mes.

Translation: Hello. Yes, I am worried. My hours were cut at the store this month.

9:32 AM

Entiendo. La buena noticia es que las nuevas reglas de Medicaid le permiten promediar las horas durante 6 meses. Si un mes es bajo, puede compensarlo. También podemos agregar otras actividades para asegurar que mantenga su cobertura.

Translation: I understand. The good news is the new Medicaid rules let you average hours over 6 months. If one month is low, you can make it up. We can also add other activities to ensure you keep your coverage.

9:33 AM

No apps or portals needed. Multilingual support via SMS, email, and natural voice calls.

CM Dashboard View

HRA Completion Status (400 Members)



Instant prioritization, full audit trails, and seamless human takeover.

Core Capabilities



Proactive Outreach

Automated reminders initiate timely conversations



Multilingual Support

Natural communication in any language



Seamless Escalation

At-risk cases flagged for human intervention



Full Audit Trail

Complete documentation for compliance

A Clear Strategy for Measurable Impact

From solving today's most pressing challenges to future-proofing against tomorrow's regulatory risks, VCM delivers results.

Immediate Impact: Automating HRA Completion

VCM conducts the HRA via voice or text, solving the completion challenge within 90 days.

- ✓ Drastically cut the time CMs spend per HRA.
- ✓ Immediate increase in completion rates.
- ✓ Significant reduction in UTC rates.

Future-Proofing: OBBBA Work Requirements

VCM is a critical compliance tool to mitigate membership losses from new administrative hurdles.

- ✓ Proactive deadline reminders and document assistance.
- ✓ Explain complex rules in simple, accessible language.
- ✓ Reduce avoidable coverage lapses and improve retention.

Strategic Population Segmentation

Each member receives their own dedicated VCM instance with full access to their personal health history and context, enabling truly personalized interactions tailored to their specific needs.

Group 1: TANF and CHIP

Focus on work requirements, education, and potential transition to the Marketplace.

Group 2: Age Blind Disabled (ABD) & Duals

Focus on HRA completion, dual integration, LTSS needs, and transition to Medicare Advantage.

Projected Impact & KPIs

CM Effective Capacity (Members per CM)



HRA Completion Rate



CM Time on Outreach/Admin



A Partnership for Innovation

We are your partners, combining frontier AI with deep operational knowledge in both Managed Care and case management to solve

your most pressing challenges.

Ed Hendel

Co-founder

9 years in healthcare data science, including Banner UHP (AHCCCS), United Healthcare (Star Ratings/CAHPS modelling), and Evolent (Associate Director of Data Science). Deep expertise in MCO operations and AI application.

Jay Fowler

Co-founder

Finance and economics background with extensive operational expertise. Managed tens of millions of dollars worth of case management grants. Proven track record in building and scaling efficient systems.

The Pilot Proposal

A defined, low-risk pilot to validate VCM's impact and provide a proof of concept for your Medicaid operations.

Population: 5k - 15k lives

Duration: 90 to 180 Days

Focus: Automating HRA completion

Next Step: Finalize pilot scope and success metrics



Let's Connect

Contact Ed and Jay to discuss the pilot program.

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