HEALTH PERFORMANCE ACCELERATOR by HMA | HealthEC

Webinar Series

Session 4:

How Health Plans Can Meet Competing Performance Demands of Stakeholders

HMA - HealthEC Collaboration

Opportunity

Workgroups comprised of subject matter experts from HMA and HealthEC met over several months in 2019 to discuss ways in which **healthcare consulting and advisory services** such as those offered by HMA and **population health management (PHM) and analytics applications** such as those offered by HealthEC could be leveraged more effectively by government agencies, healthcare providers, and payers to address critical needs in select

Focus Areas

1. Health Equity

2. Communicable Disease Management

3. MCO Performance Management

4. Supports to Small/Midsize Health Plans

5. VBP Contract Supports

6. Opioids

7. HHS Service and Data Integration

Outputs

Health Performance Accelerator

Tailored consulting and advisory services that can be coupled with tailored PHM and analytics platform deployments

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Today's Speakers

Frank Persinger

VP Strategic Development- HealthEC

Glenda Stepchinski, RN, BSN

Senior Consultant- HMA

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Learning Objectives

1. Understand how to design, implement and operate performance and quality management systems
2. Learn how to develop and sustain effective care management programs
3. Identify and improve provider access and network adequacy issues
4. Understand best practices in value-based care programs and other delivery systems

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Health Plan Challenges

- Managing multiple stakeholders – state and federal regulatory agencies, enrollees, providers, and advocacy groups
- Limited IT infrastructure and management capacity
- Limited access to timely, accurate and meaningful data
- Limited analytics capabilities
- Limited ability to synthesize data to cost-effectively manage care

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Services Addressing Challenges

- Support design, implementation and operation of performance/quality management systems
- Develop and support implementation of quality improvement initiatives
- Support care management teams in process redesign and improvements
- Perform rapid-cycle interventions aimed at addressing performance and quality challenges
- Analyze provider access and network adequacy issues
- Develop and implement value-based care programs and/or other service delivery innovations or initiatives

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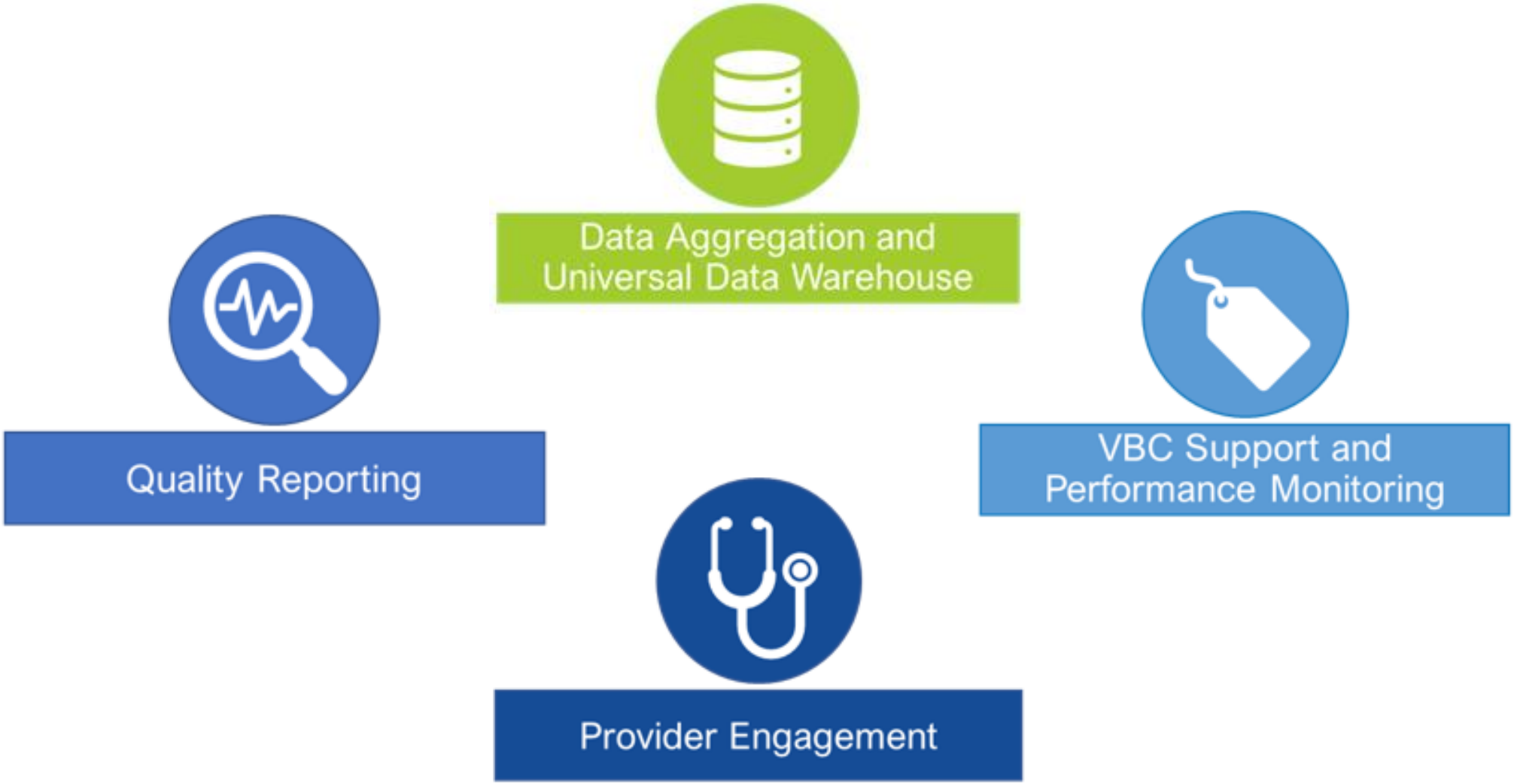
Health Performance Accelerator



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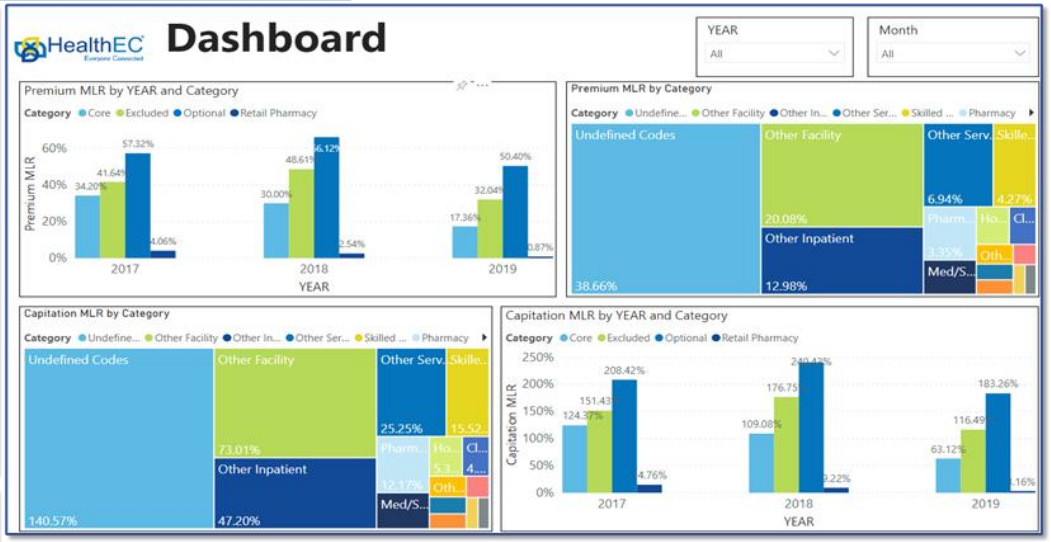
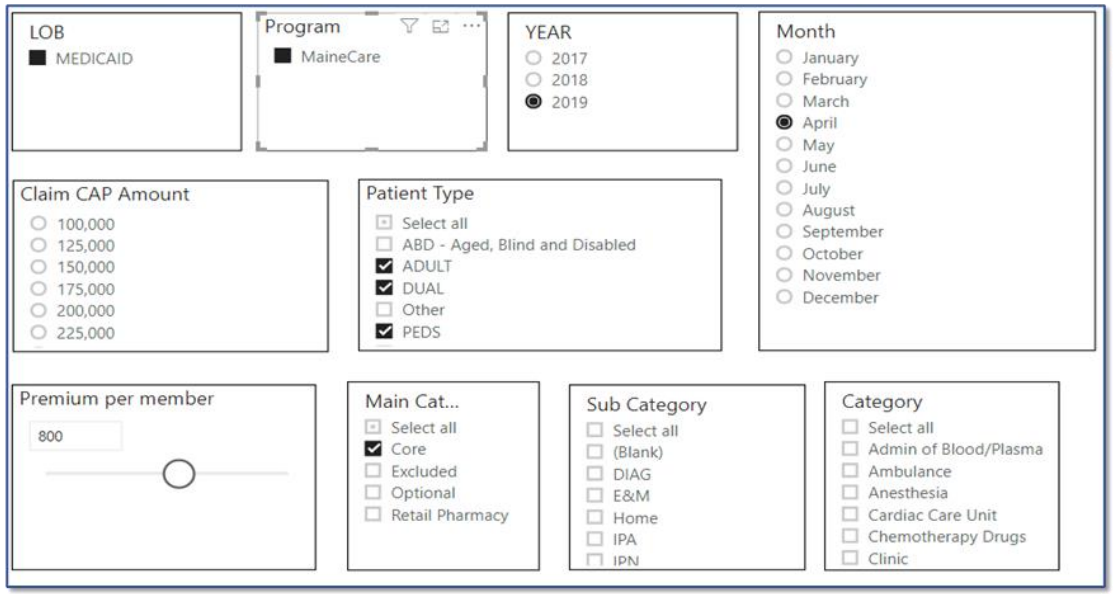
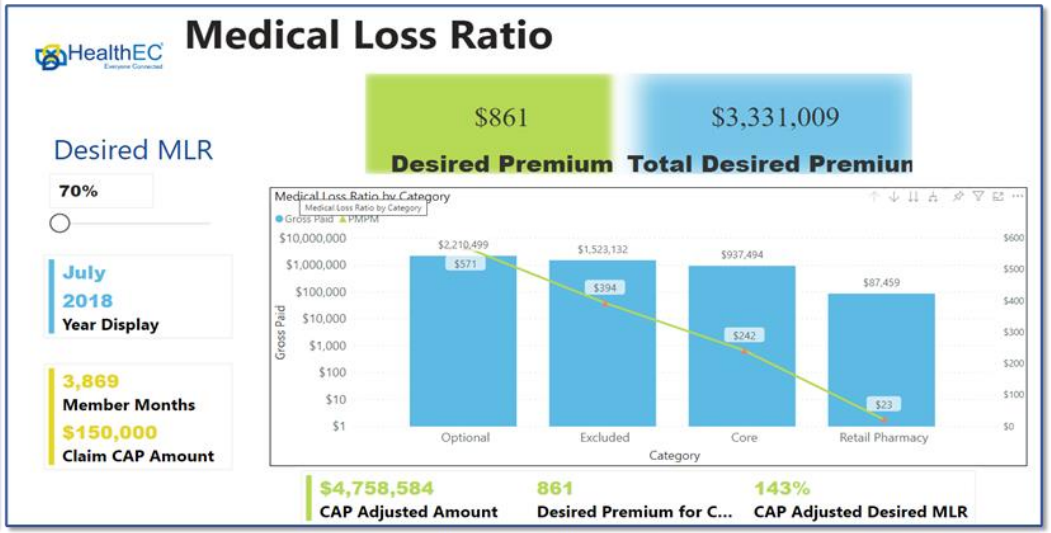
Performance and Quality Systems







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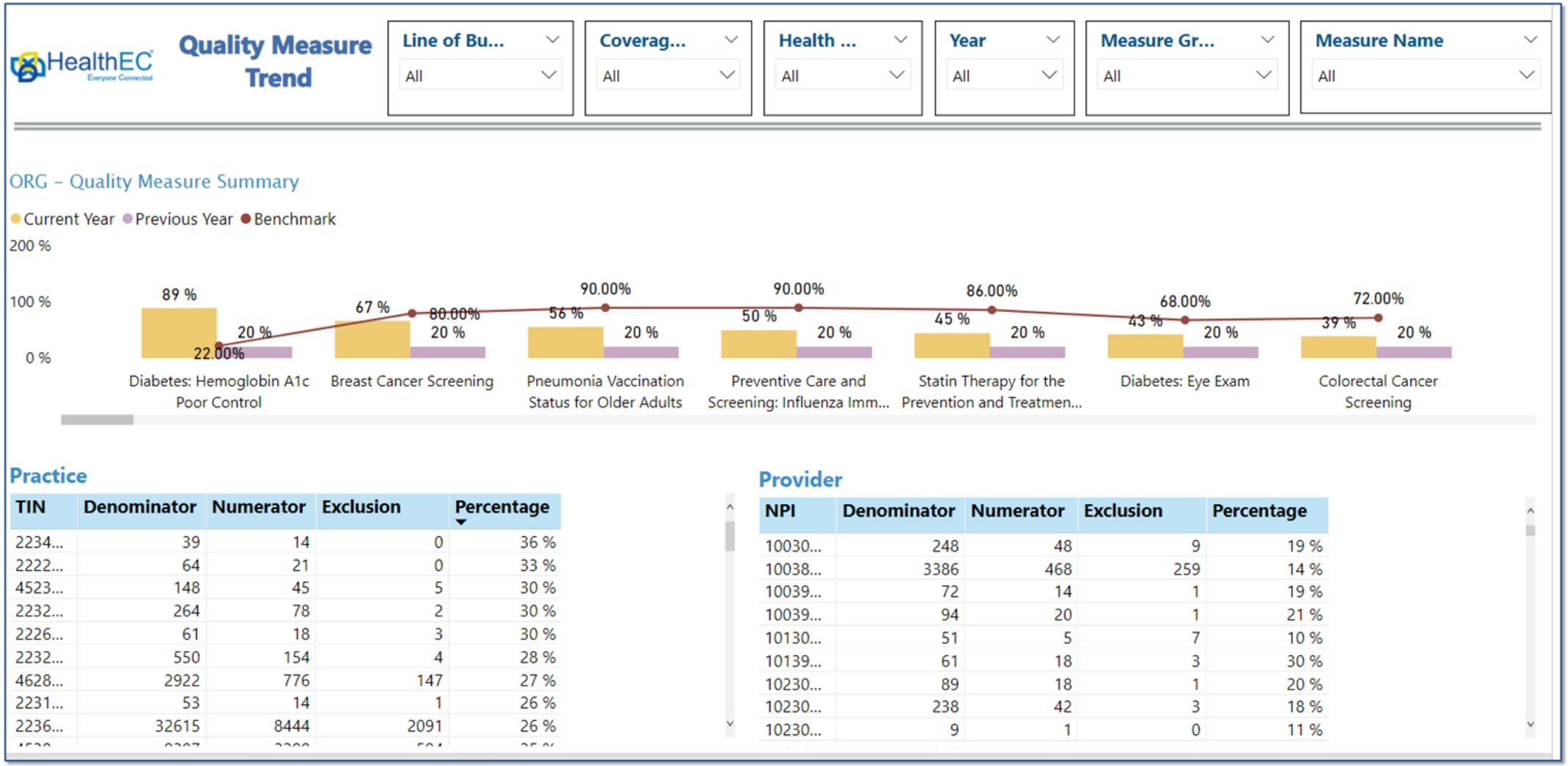
Performance and Quality Systems



TIN	Denominator	Numerator	Exclusion	Percentage
2234...	39	14	0	36 %
2222...	64	21	0	33 %
4523...	148	45	5	30 %
2232...	264	78	2	30 %
2226...	61	18	3	30 %
2232...	550	154	4	28 %
4628...	2922	776	147	27 %
2231...	53	14	1	26 %
2236...	32615	8444	2091	26 %

NPI	Denominator	Numerator	Exclusion	Percentage
10030...	248	48	9	19 %
10038...	3386	468	259	14 %
10039...	72	14	1	19 %
10039...	94	20	1	21 %
10130...	51	5	7	10 %
10139...	61	18	3	30 %
10230...	89	18	1	20 %
10230...	238	42	3	18 %
10230...	9	1	0	11 %

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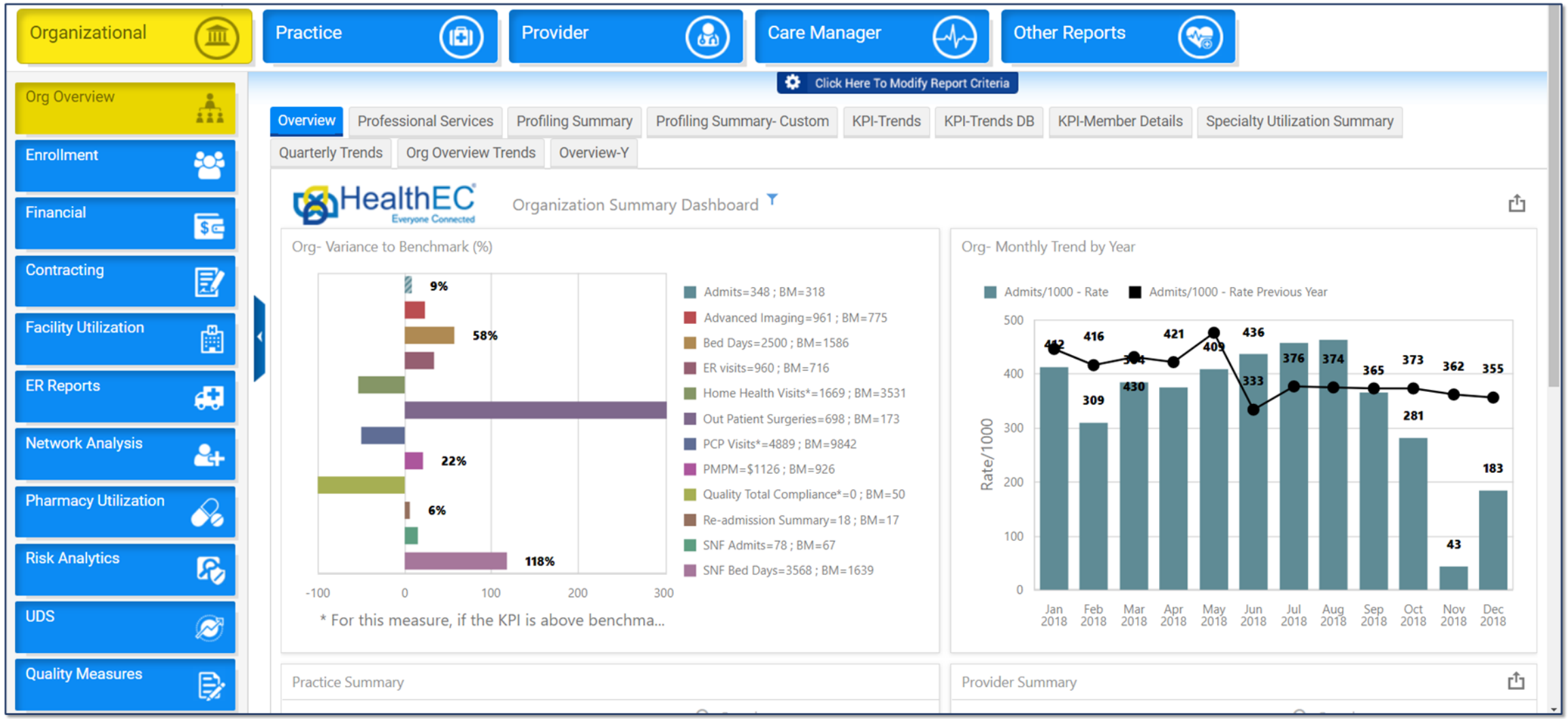
Support of Quality Initiatives



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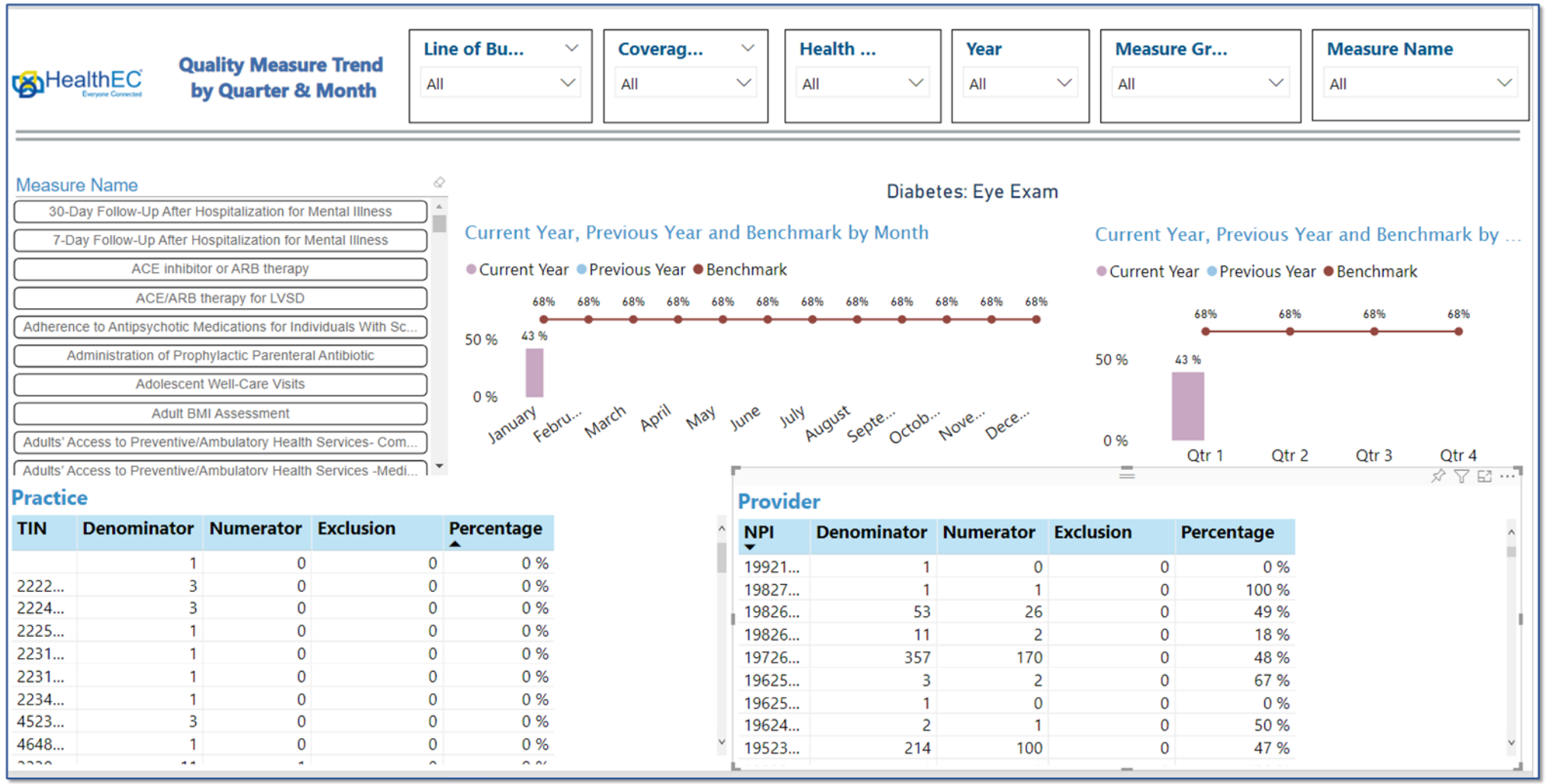
Support of Quality Initiatives



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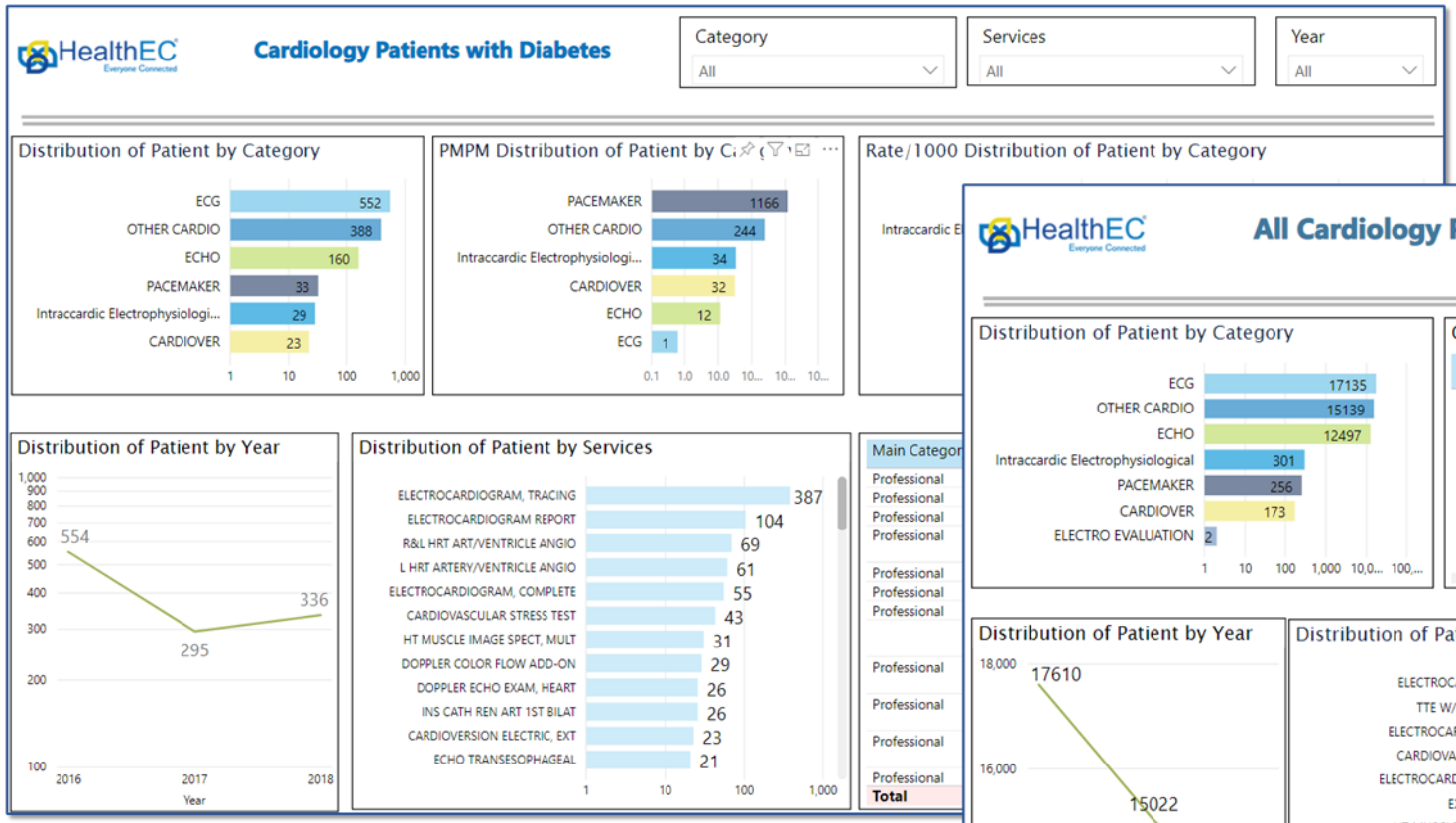
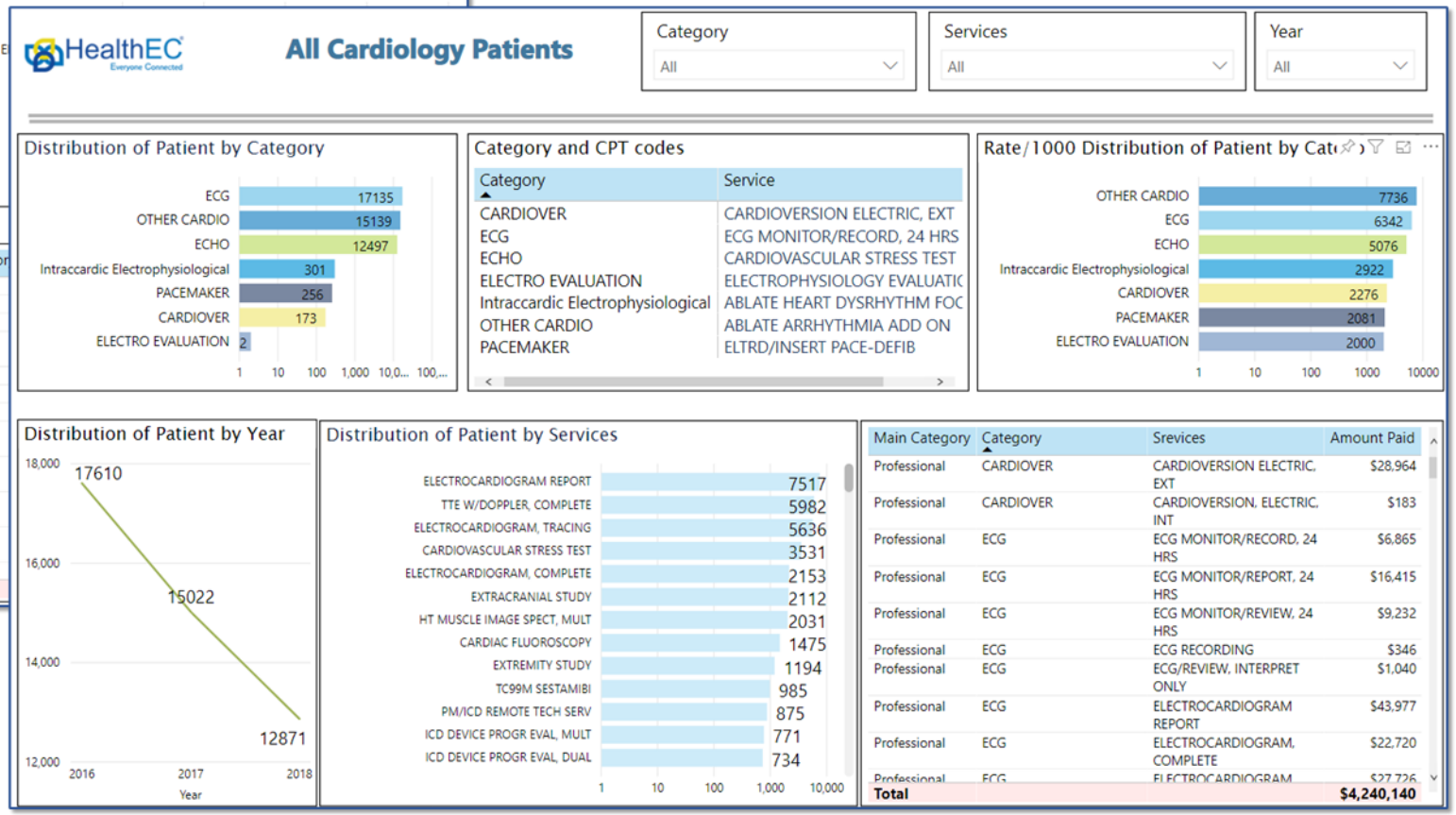
Support of Care Management Initiatives





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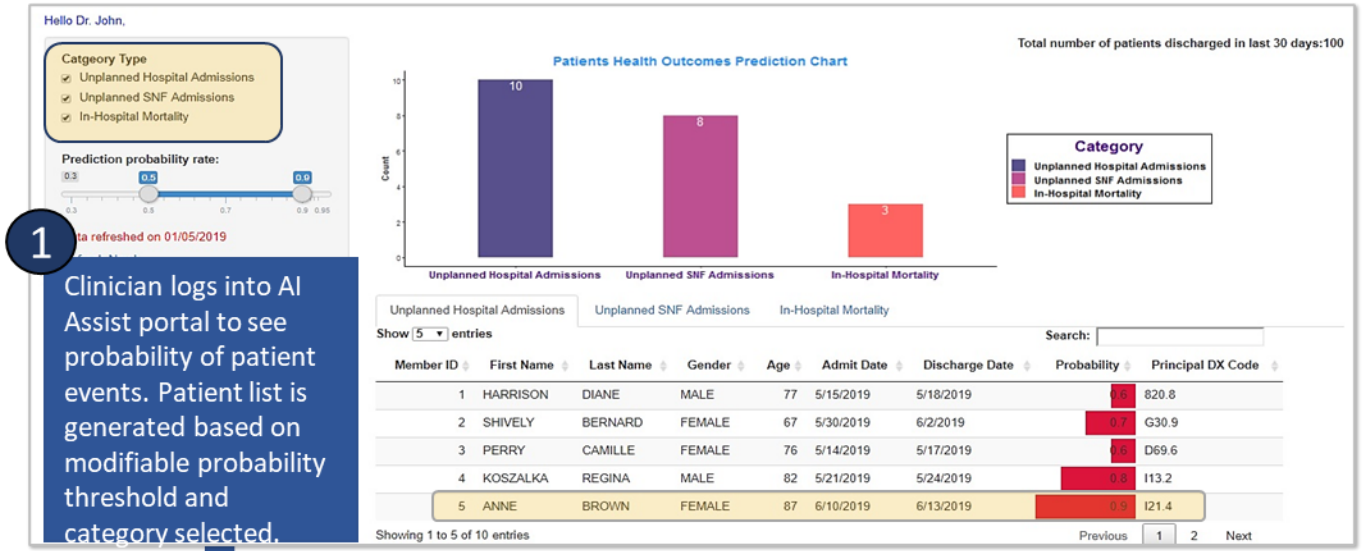
Support of Care Management Initiatives

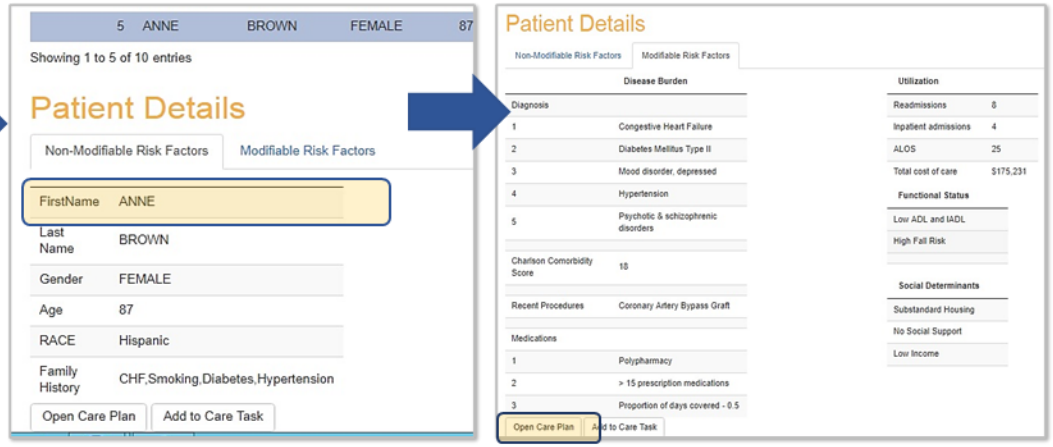
Model output in comprehensible format, including potential process to capture risk factors as care tasks for appropriate resource assignment and follow-up.



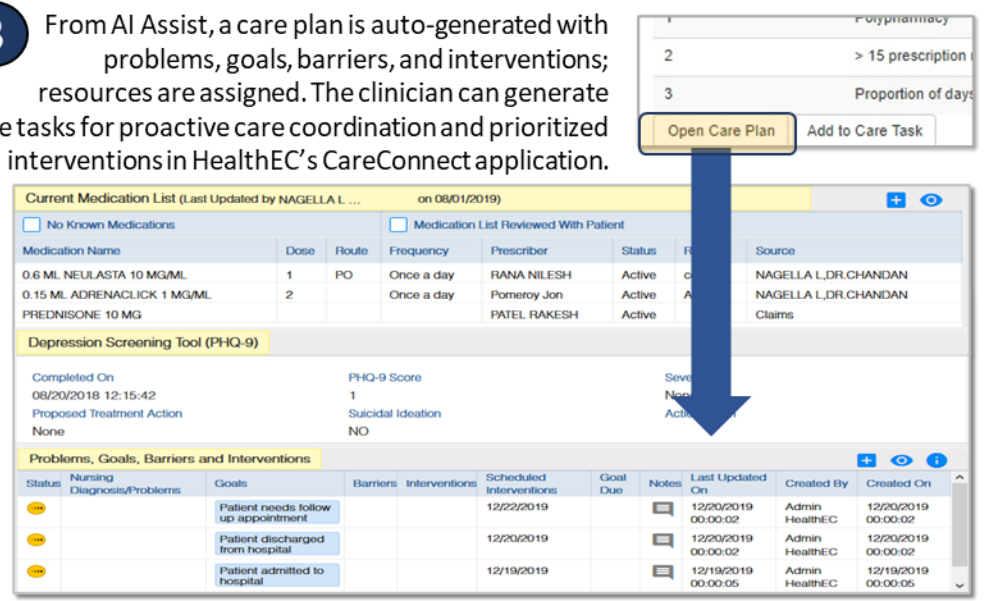
1 Clinician logs into AI Assist portal to see probability of patient events. Patient list is generated based on modifiable probability threshold and category selected.

Clinician selects patient to view details and non-modifiable/ modifiable risk factors.

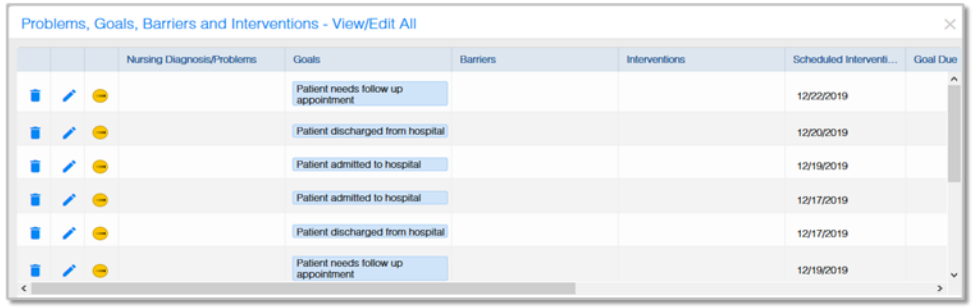
2



3 From AI Assist, a care plan is auto-generated with problems, goals, barriers, and interventions; resources are assigned. The clinician can generate care tasks for proactive care coordination and prioritized interventions in HealthEC's CareConnect application.



4 Care tasks based on risk factors can now be tracked, engaging both clinicians and patients in the care management process.



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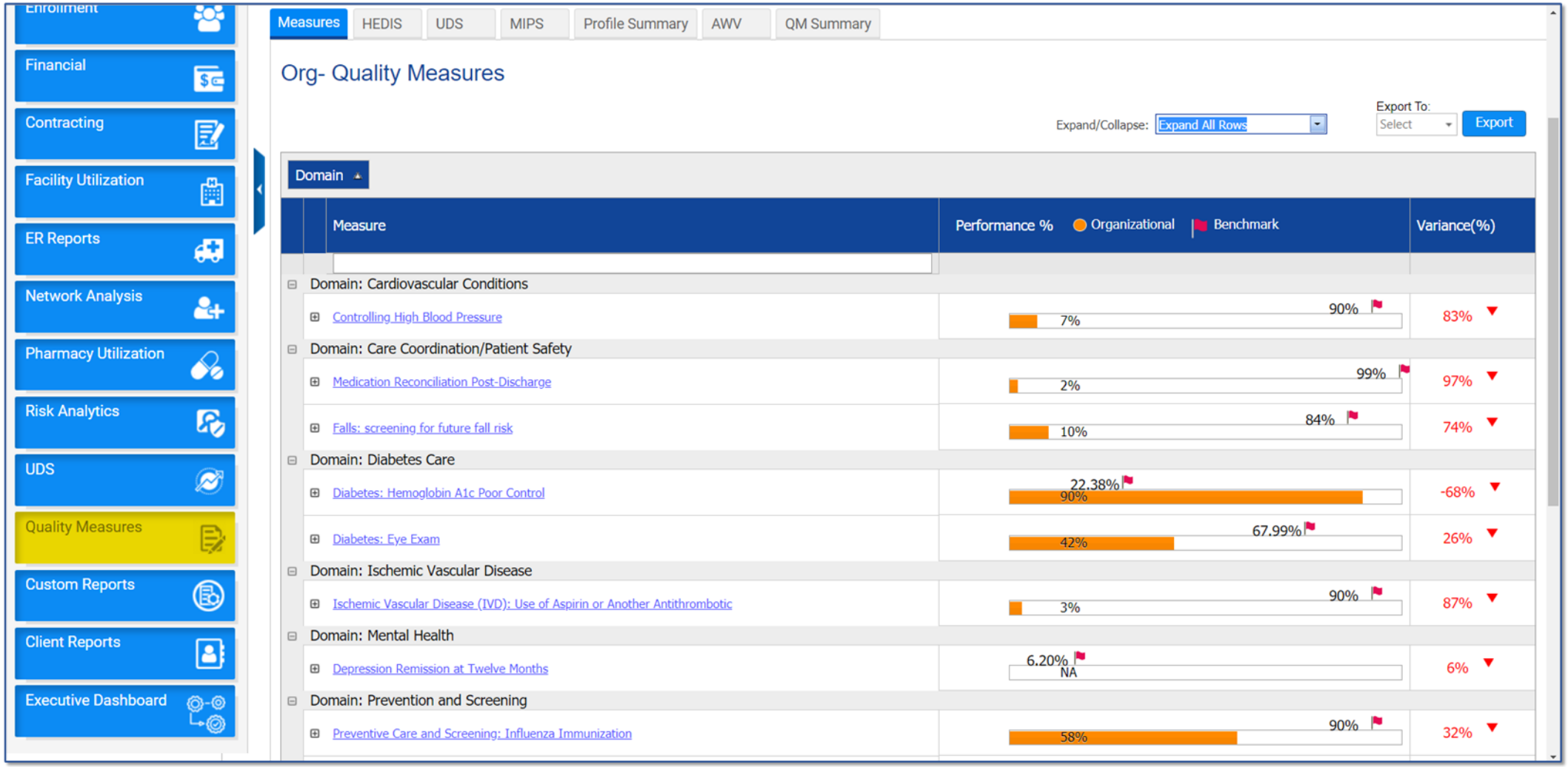
Care Management and Quality



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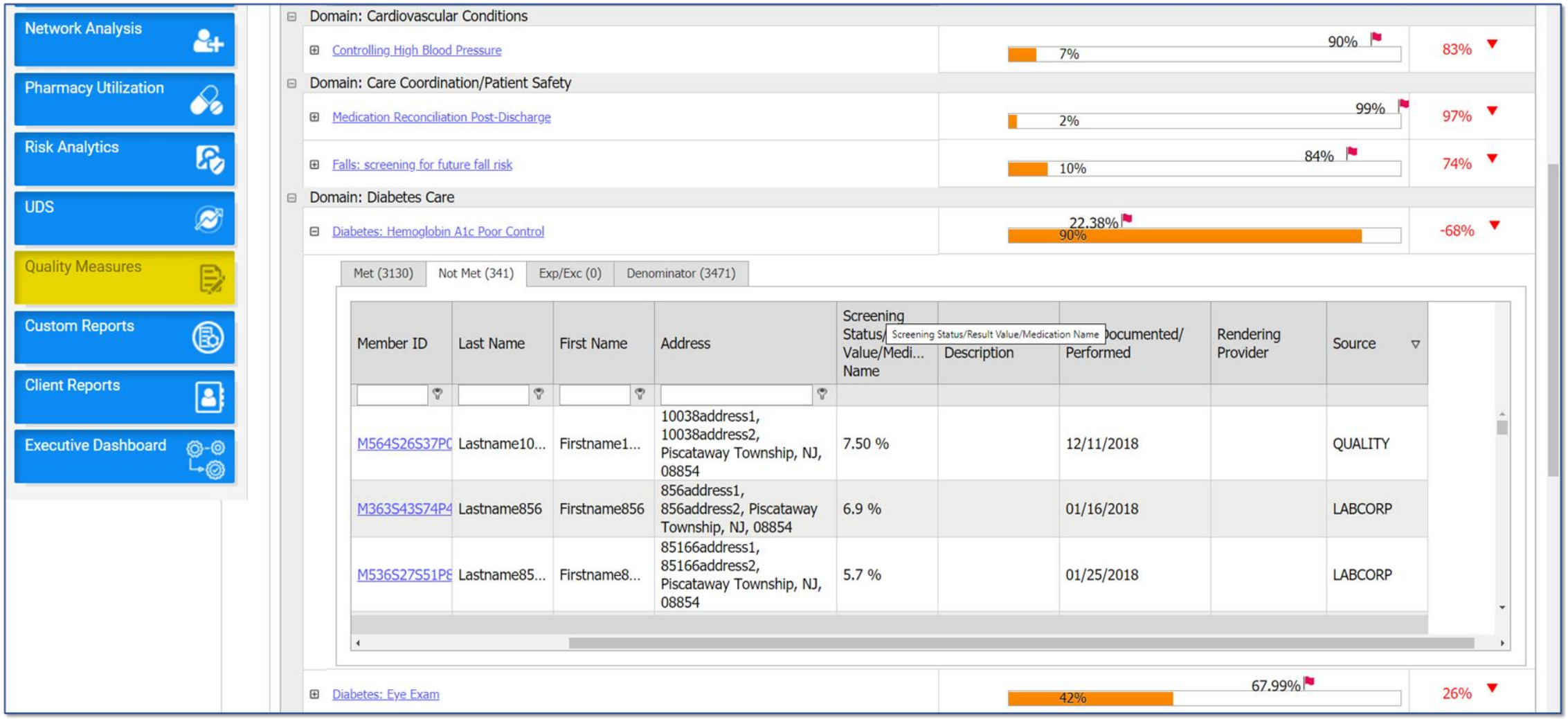
Care Management and Quality



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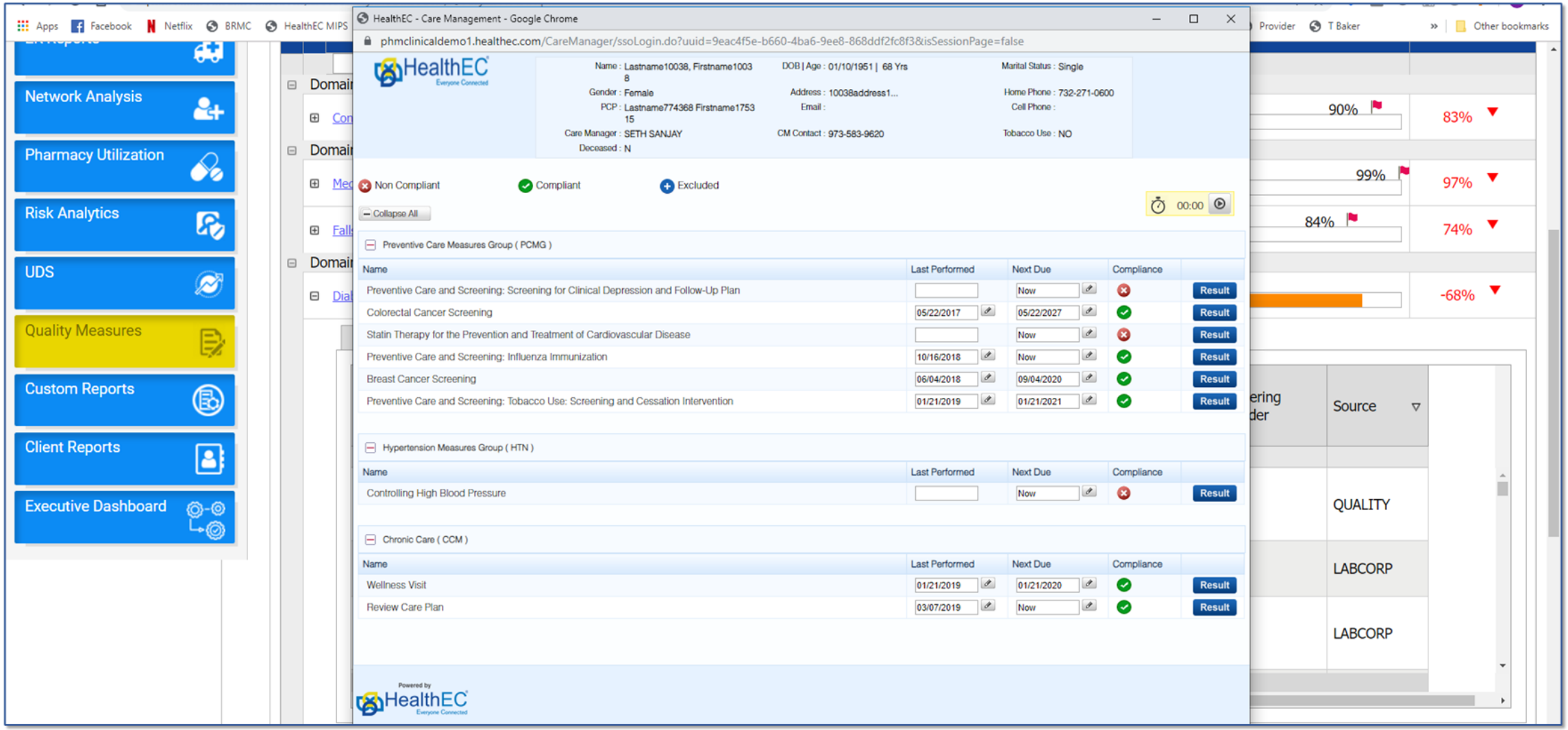
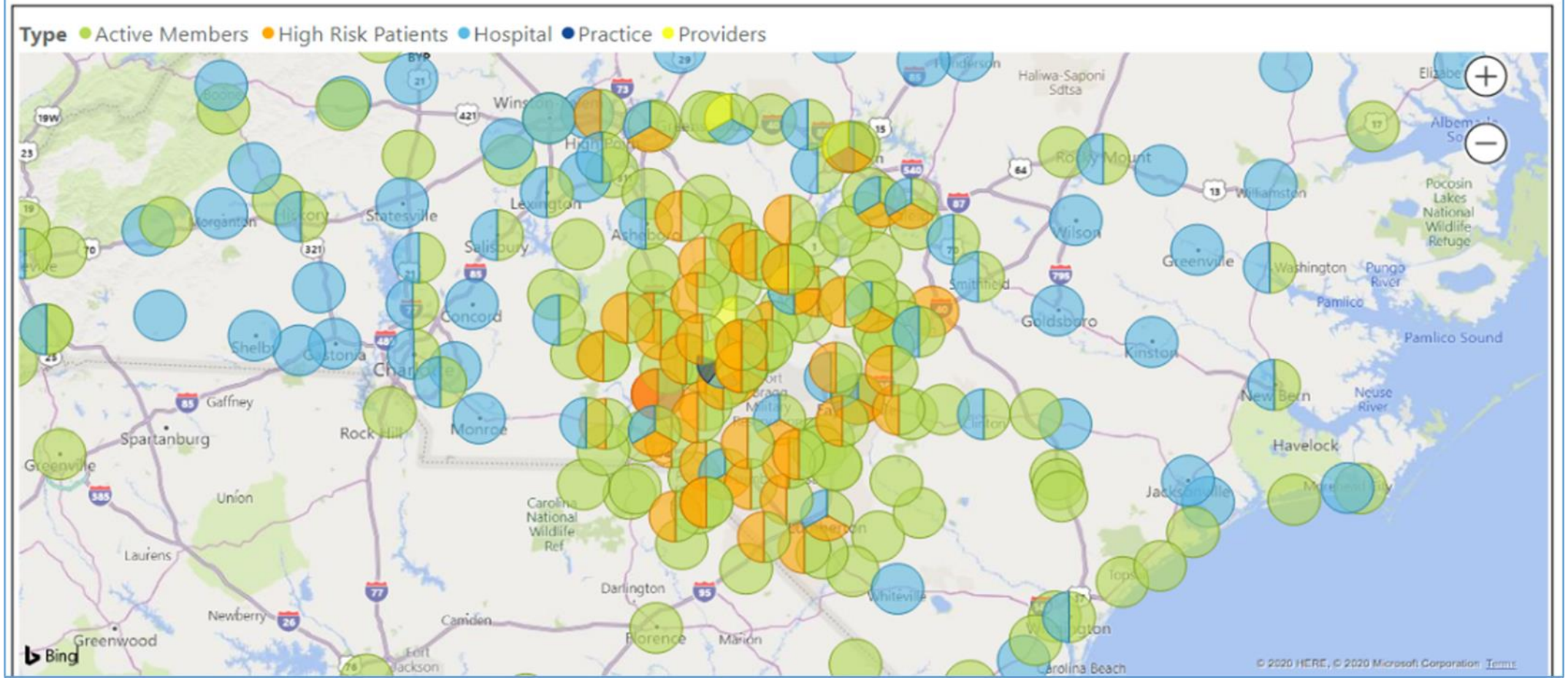
Care Management and Quality

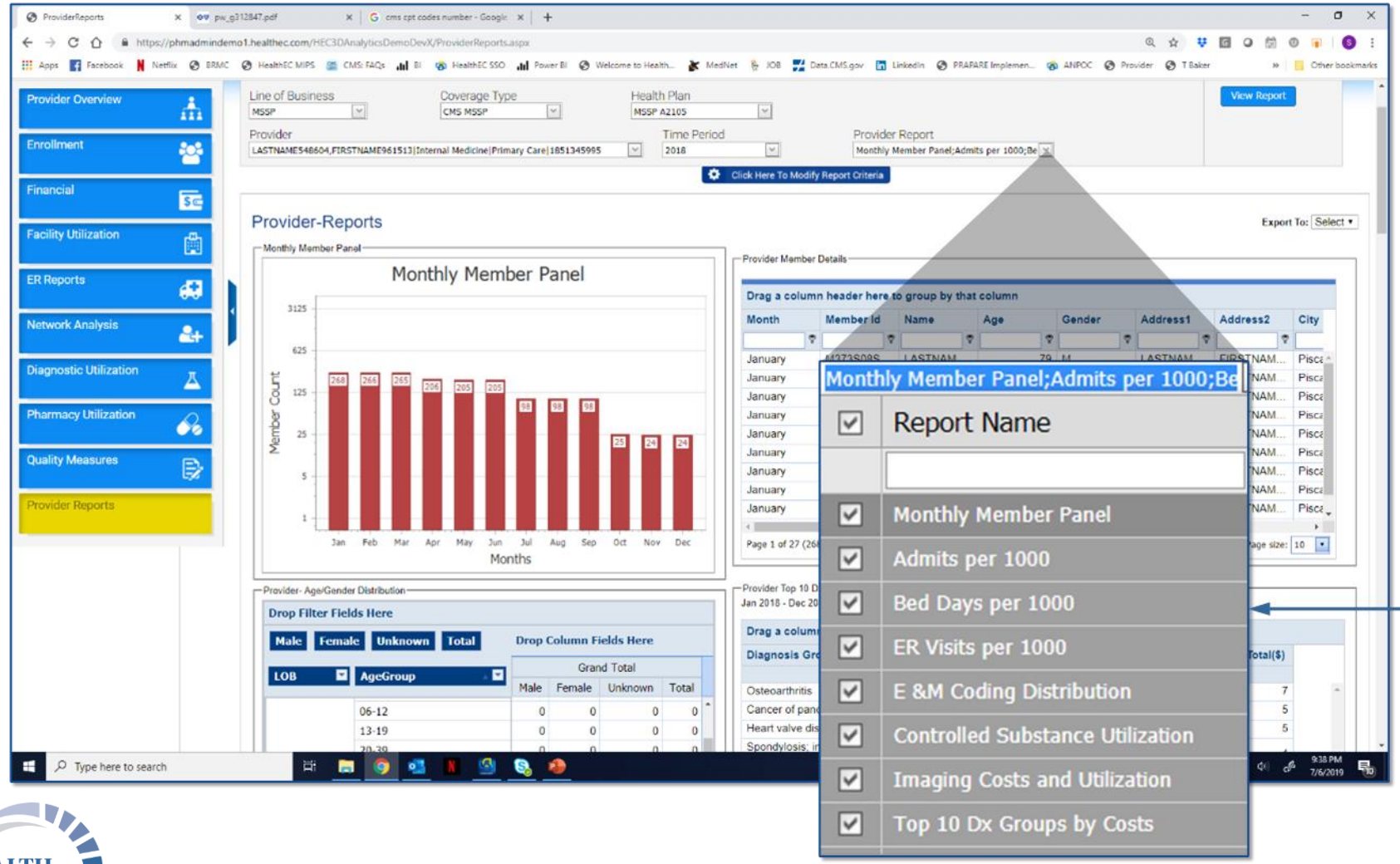


Provider Access and Network Adequacy

High Risk Patients, Practice, Providers by Zip Code



Value Based Initiatives



Provider reports can be:

- Automatically generated
- Emailed or mailed
- An interactive or static report
- Configured to update once a month only

End users can select report panels to view from a drop-down menu

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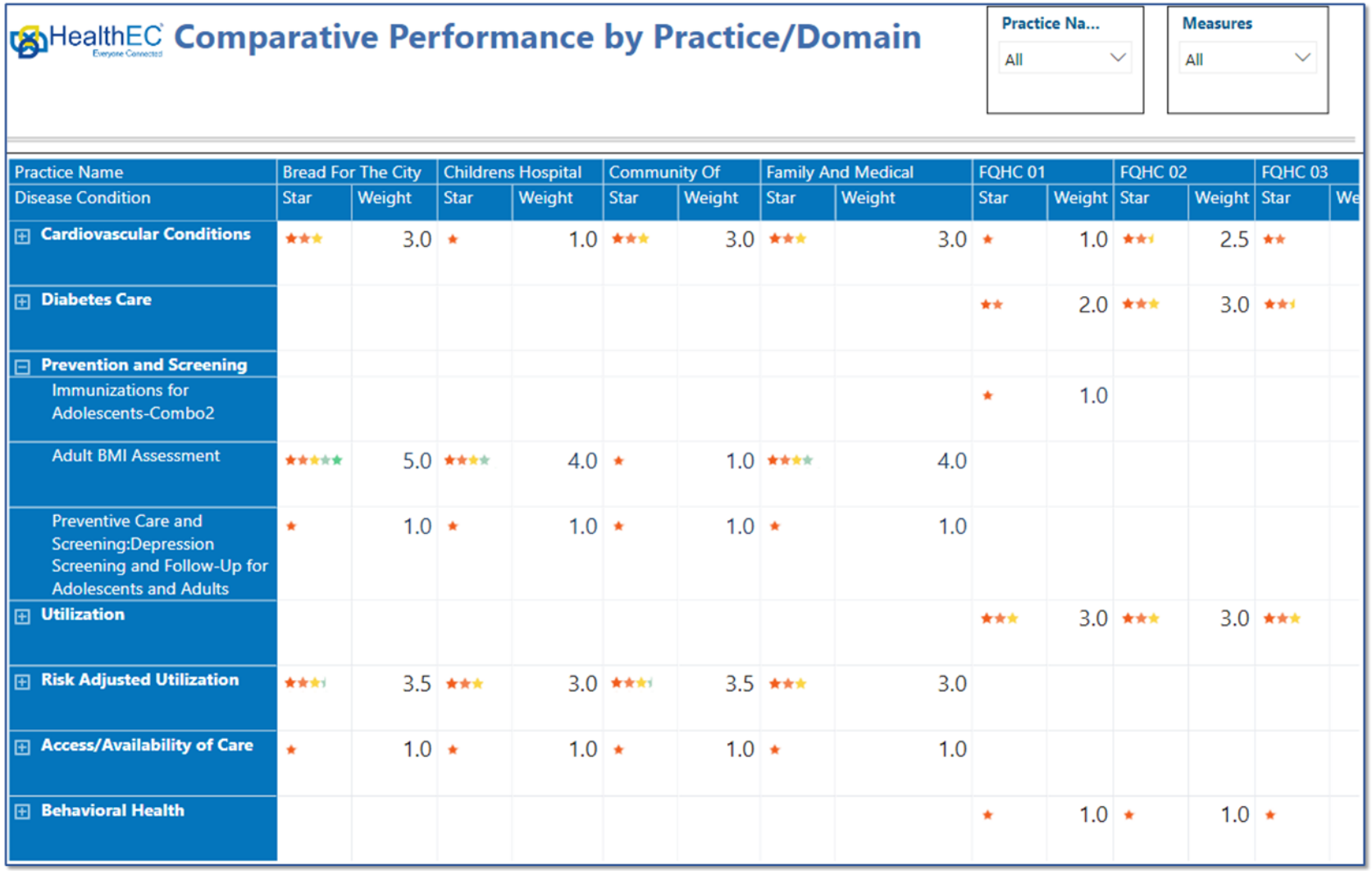
Value Based Initiatives



HealthEC Everyone Connected

Comparative Performance by Practice/Domain

Practice Na... All

Measures All

Practice Name	Bread For The City		Childrens Hospital		Community Of		Family And Medical		FQHC 01		FQHC 02		FQHC 03	
Disease Condition	Star	Weight	Star	Weight	Star	Weight	Star	Weight	Star	Weight	Star	Weight	Star	We
⊞ **Cardiovascular Conditions**	★★★	3.0	★	1.0	★★★	3.0	★★★	3.0	★	1.0	★★½	2.5	★★	
⊞ **Diabetes Care**									★★	2.0	★★★	3.0	★★½	
⊟ **Prevention and Screening**														
Immunizations for Adolescents-Combo2									★	1.0				
Adult BMI Assessment	★★★★★	5.0	★★★★	4.0	★	1.0	★★★★	4.0						
Preventive Care and Screening:Depression Screening and Follow-Up for Adolescents and Adults	★	1.0	★	1.0	★	1.0	★	1.0						
⊞ **Utilization**									★★★	3.0	★★★	3.0	★★★	
⊞ **Risk Adjusted Utilization**	★★★½	3.5	★★★	3.0	★★★½	3.5	★★★	3.0						
⊞ **Access/Availability of Care**	★	1.0	★	1.0	★	1.0	★	1.0						
⊞ **Behavioral Health**									★	1.0	★	1.0	★	

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Health Performance Accelerator

Data Aggregation and Universal Data Warehouse

- Aggregated claims, lab, and pharmacy data
- Creation of, or integration with, a data warehouse
- EMR clinical data extraction and integration
- Enabling of decision support at the plan level
- Monitoring of utilization and costs by major diagnostic categories (MDCs)
- Tracking of HCC scores at the practice and provider level

VBC Support and Performance Monitoring

- Monitoring of practice and provider performance on key contract metrics
- Inpatient/ER/network utilization by disease, practice, or provider monitoring
- Tracking of performance against capitation and monitoring of expenditures against medical loss ratio (MLR) at the practice and provider level
- HEDIS and Star ratings by practice and provider
- Capitation vs. FFS by service category and provider type

Provider Engagement

- VBC and care management tools to practices
- Real-time claims- and EMR-based gaps in care monitoring
- Expenditures against budget and previous year
- Utilization of ER- and facility-based services for nonemergent reasons tracking
- Care coordination documentation and referral management

Quality Reporting

- Over 500 industry-certified quality measures
- Benchmarked dashboards for the state by program
- HEDIS and Star measure compliance monitoring by agency and MCO
- NQCA certification for eCQM measures by summer 2020
- Extraction of hybrid/supplement measures from EMRs
- Provider engagement on accurate coding for HCC

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Questions?

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Upcoming Webinars

Value-Based Payment (VBP) Contract Supports

Tuesday 9/15

Opioids Program Supports

Thursday 9/17

Health & Human Services (HHS) Service and Data Integration

Tuesday 9/22

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