

Using Data To Drive Performance

Actionable Outcomes & Rapid Change

Driving Value With Analytics



Patient-Centered Medical Home

- Measure/Improve on NCQA Measures
- Practice tools for patient outreach and care planning
- Analytics that drive PCMH workflow



Population Management

- Clinical Quality Measures (CQMs): MU, AQC, PQRS, HEDIS, UDS, Medicare Shared Savings, etc.
- Benchmarking/Cross-market analysis
- Targeted initiatives by Population Segmentation



Claims / Clinical Integration

- Integrated clinical and claims data enable better patient care
- Manage TME across segments, using real-time clinical data
- MAs and Admins take EHR burden off provider, enable higher patient volume



Value-Based Care

- Integrate claims & risk to **predict total medical expense**
- Analyze patient navigation across delivery spectrum
- Study Cost/Quality to prove high-value care

PCMH Transformation

Quality Improvement

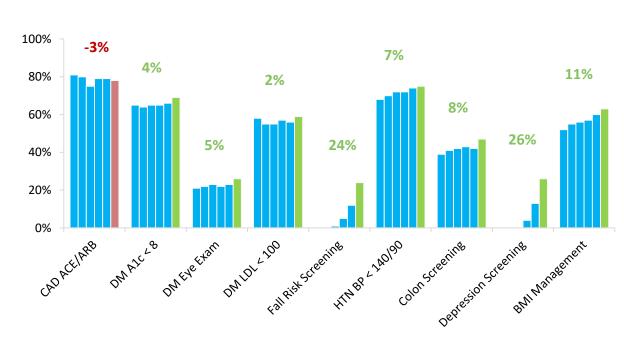
TME Reduction

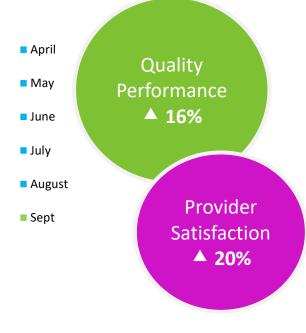
ACO Performance

When It Works: Quality Improvement

Independent Physician Association improves quality across

500 Physicians using a data-driven approach:







Context

- Inpatient and Multi-Specialty Health System
- 520 Physicians
- CMS Pioneer ACO



Approach & Results

- Standard configuration of 45 different EHRs
- Workflow improvements
- Weekly reports
- Improved 9 measures by 16%

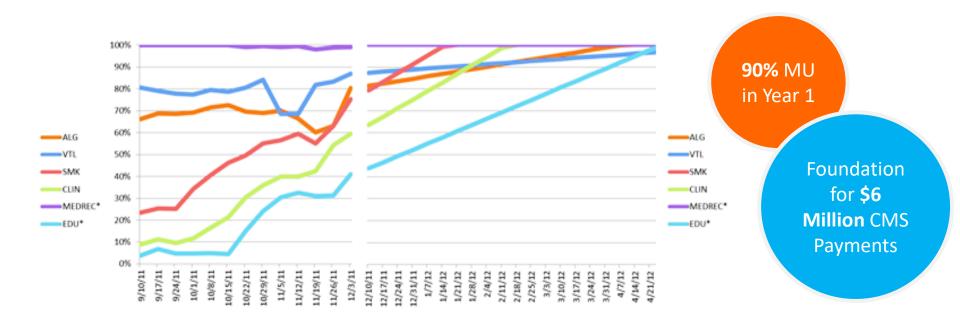


Value

- Set to maximize ACO reimbursement
- Provider satisfaction up 20%

When It Works: MU Achievement

Use data to rapidly drive Meaningful Use achievement across large provider network to achieve incentive payments





- 305 Providers
- 80 EHR Instances
- 6-Month Program



Approach & Results

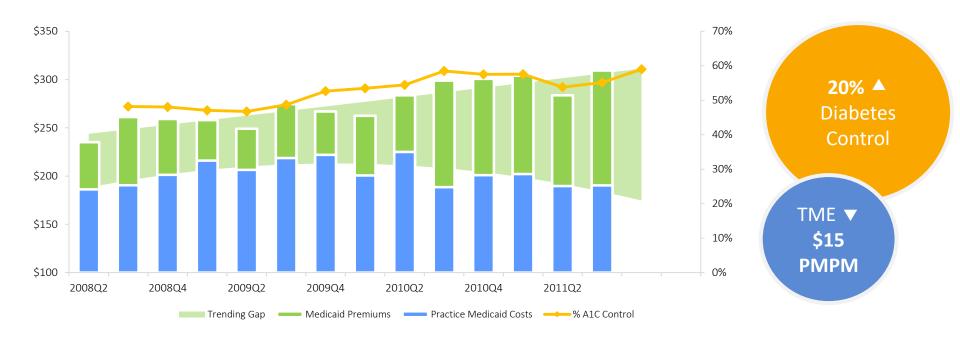
- 60 EHRs to CDW
- Weekly reports
- Non-compliant patient lists
- 90% Achievement Year 1



Foundation for \$6 Million
 Reimbursements

When It Works: Quality and TME

Aligning care teams around real-time analytics leads to improved quality outcomes and curbed TME.





- Health Center & Managed
 Medicaid Plan
- Targeted TME Reduction
- 5,500 Medicaid Patients



Approach & Results

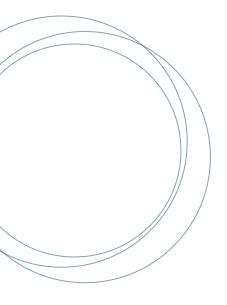
- Align care teams & data
- Targeted patient outreach
- TME Reduction by \$15 PMPM
- Improved patient outcomes



Value

- \$1 Million annual savings
- \$5M back to MMCO reserves
- Position of power in qualitybased payment negotiations





Best Practices HCCN Program

Leveraging data at scale

Opportunities

As a nationwide presence for community health, CHBP is uniquely positioned to create a program to seize the following key opportunities:

1 Compete At Scale

Improve access to large-scale and long-term funding currently out of reach for individual CHBP Members by leveraging national scale

2 Rapid Transformation

Leverage CHBP to increase the speed and effectiveness of implementing shared learning and best practices at CHBP Members

3 Local Market Positioning

CHBP Members can leverage shared data to improve local positioning during the coming wave of care delivery and payment reform

Goals

CHBP has partnered with Arcadia Solutions in identifying the program's critical goals for each

opportunity:

Establish a Data Sharing Infrastructure

Develop technologies and capabilities that can leverage data at scale to help identify and secure additional long-term funding sources

Compete At Scale



Create formal structures to support continuous improvement through ongoing, rapid dissemination of successful, evidence-based best practices

Rapid Transformation

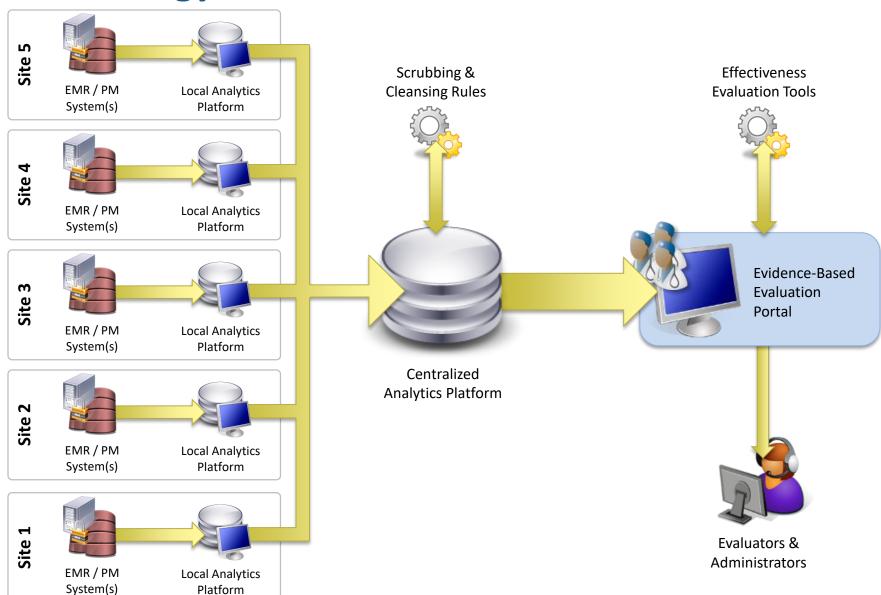
Leverage Successes

Deliver insights into care quality, safety, and efficiency that can be leveraged to improve position of centers in the market

Local Market Positioning



Technology Infrastructure



Program Timeline and Milestones

The scope for this program will be delivered in three concurrent work-streams. These work-streams will run overlapping each other during the course of the program.

