COSEHC and the QualityImpact PTN Performance Story

A Relentless Commitment to Building a Culture of Value and Accelerating Sustained Results

March 14, 2019

Our 7 Aims

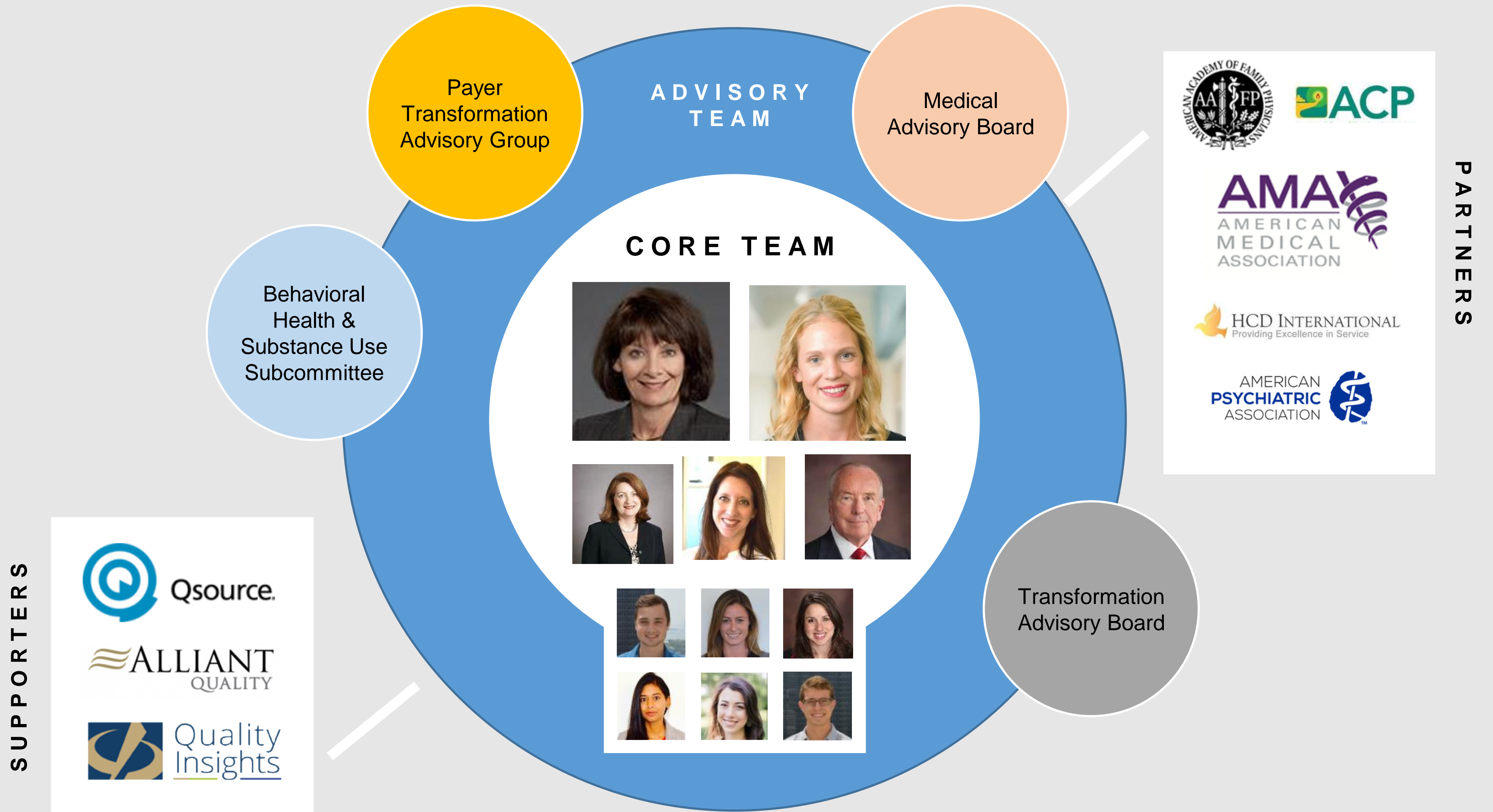
1. Support more than 140,000 clinicians in their practice transformation work
2. Improve health outcomes for millions of Medicare, Medicaid, and CHIP beneficiaries and other patients
3. Reduce unnecessary hospitalizations for 5 million patients
4. Generate $1 to $4 billion in savings to the federal government and commercial payers
5. Sustain efficient care delivery by reducing unnecessary testing and procedures
6. Transition 75% of practices completing the program to participate in Alternative Payment Models (APMs)
7. Build the evidence base on practice transformation so that effective solutions can be scaled

EVALUATING TRANSFORMATION

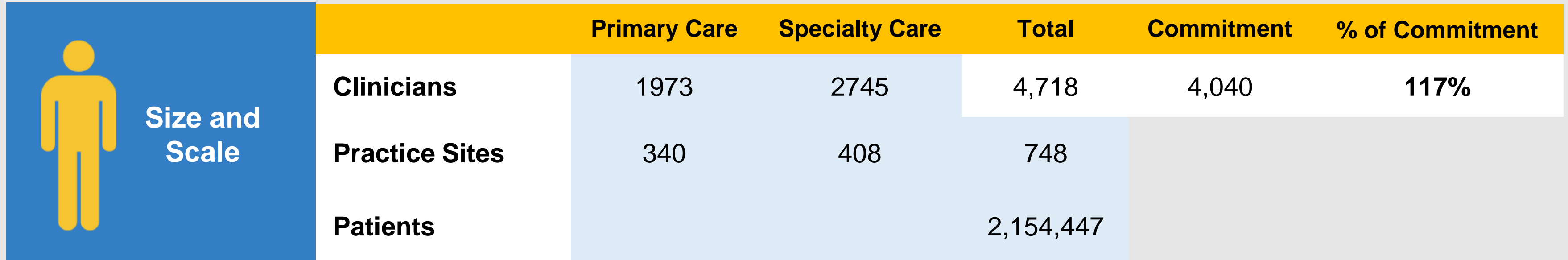
Key Imperatives that Drive Change

OUR TEAM

A Multi-disciplinary Team of Leaders, Change Agents, and Care Delivery Transformation Experts



We Support Practice Transformation Across a Diverse Network of Clinicians and Practices in 15 States



Size and Scale

	Primary Care	Specialty Care	Total	Commitment	% of Commitment
Clinicians	1973	2745	4,718	4,040	**117%**
Practice Sites	340	408	748		
Patients			2,154,447		

44

SPECIALTIES

TOP SPECIALTIES

BY CLINICIAN COUNT:

Psychiatry
Cardiology
OBGYN
Surgery

Practice Size by Number of Clinicians

- <= 5
- <= 25
- <= 100
- <= 500
- > 500

OUR RESULTS

Exceeding Performance Goals Across All Aims

Engaging Clinicians in Transformation

Enrolled

4,706

clinicians (117% of goal)

Reducing Unnecessary Utilization

Avoided

15,403

all-cause hospitalizations & ED visits

Improving Health Outcomes

Exceeded goal to improve high-impact CV measure performance by

2x

Generating Cost Savings

Exceeded goal to reduce cost by 17%, resulting in

$69,757,731

in total savings

Reducing Unnecessary Testing & Procedures

98%

Reduced unnecessary low back pain imaging in 98% of target cases

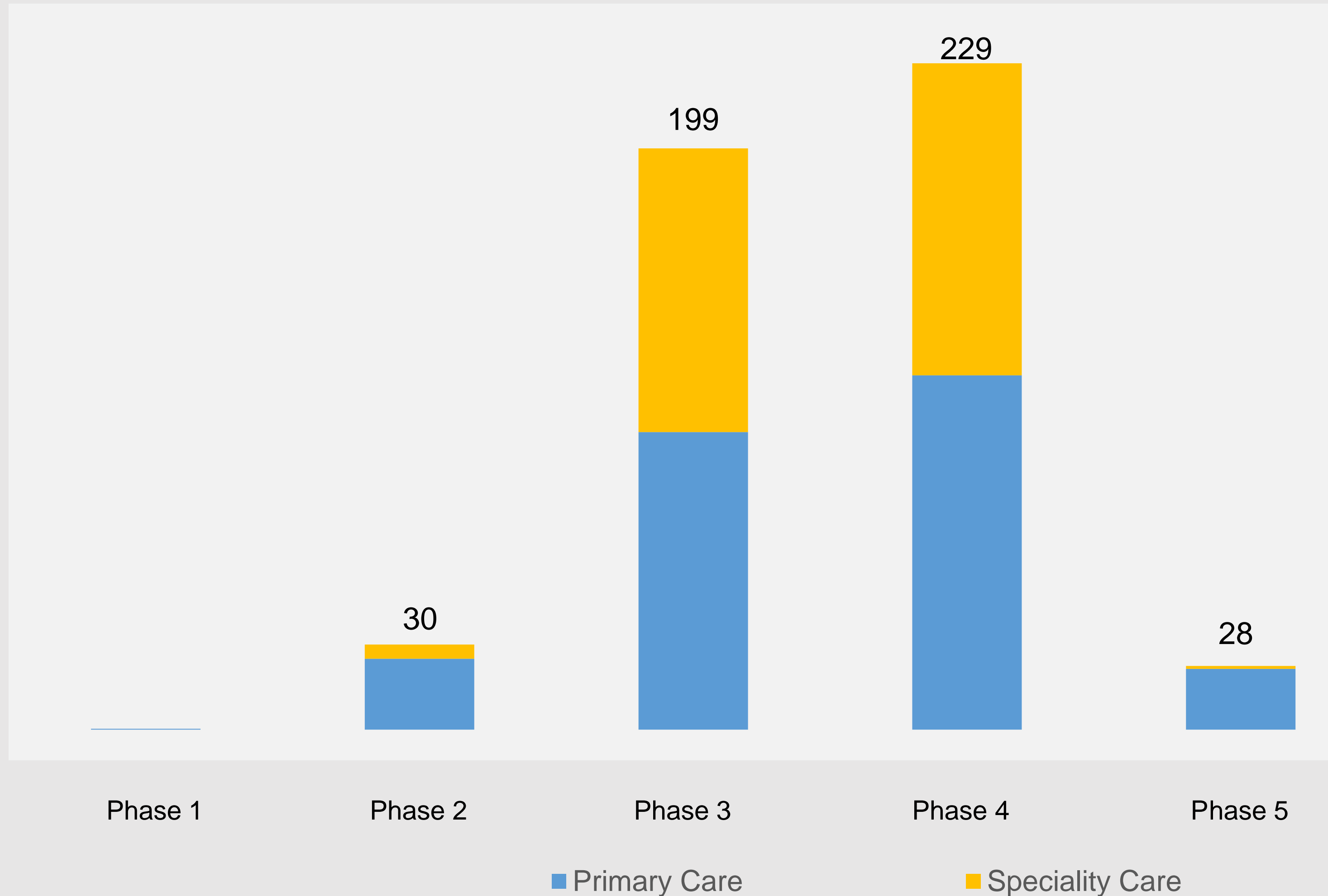
Transitioning Practices to APMs

257 practices

Graduated 30% of committed practices to Alternative Payment Models

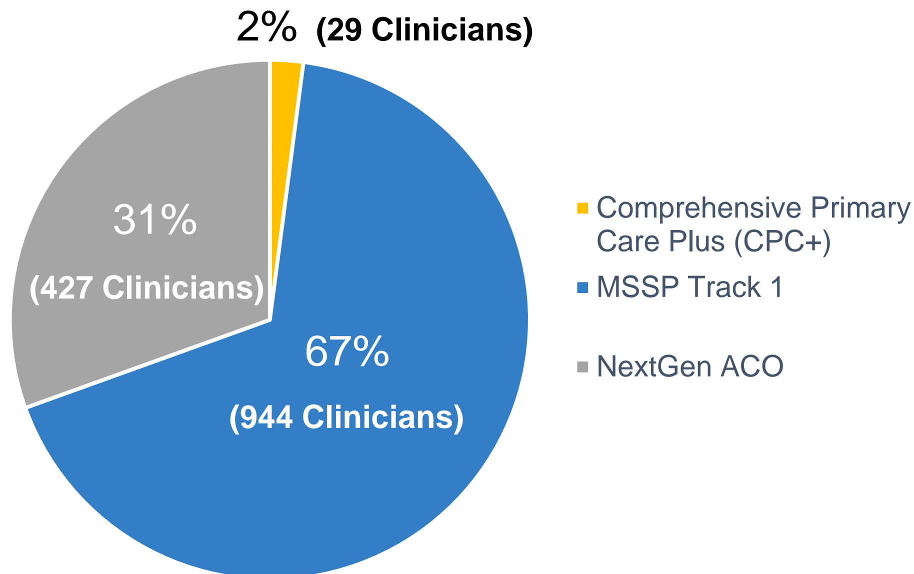
Reporting Period: QR13

Phase Progression-Quarter 13

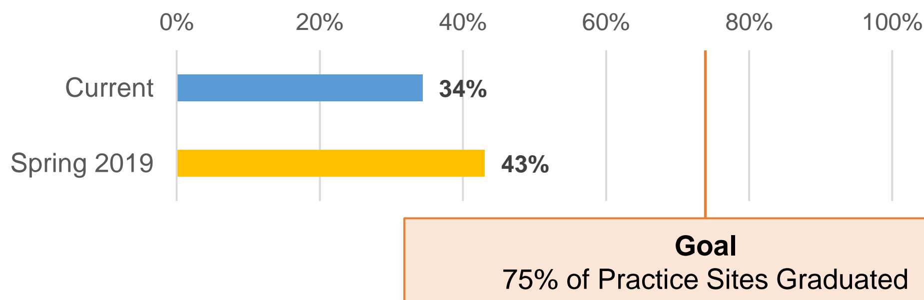


APMs-COSEHC Progress to Date

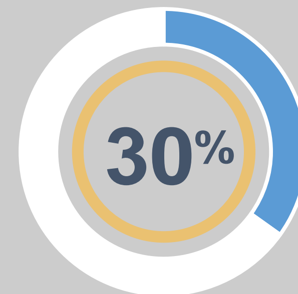
Demonstrating Success in the APM Transition



Progress to Date: 4-Year Graduation Goal



APM Transition Data as of 3/7/2019



1,400 clinicians out of 4,706 clinicians have graduated to APMs representing **257 practice sites**

1670 additional clinicians are scheduled to graduate into APMs by the end of spring 2019

Primary Drivers for Graduation

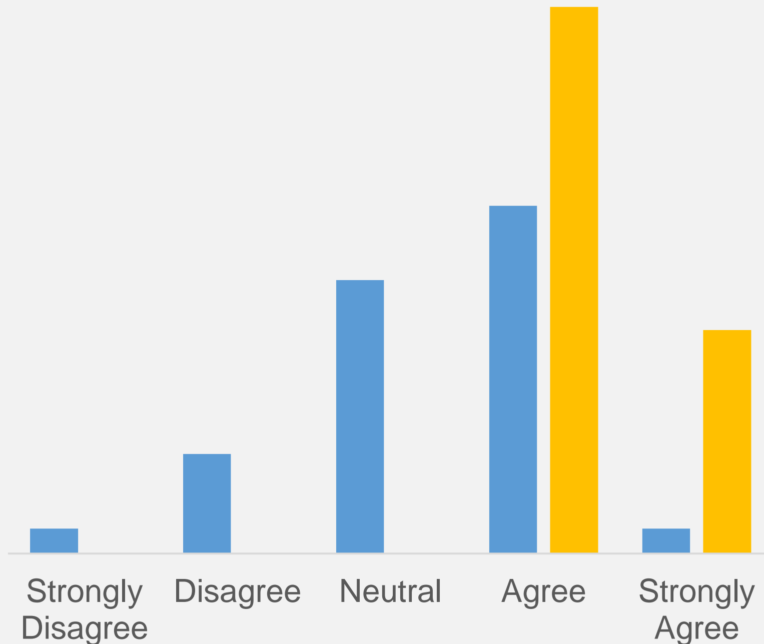
Smaller Sites:
- ACO Services (care management, population health)
- Financial Sustainability
- Patient Engagement

Larger Sites:
- Control Over Costs/Financial Alignment
- National/Payer Support
- Expanded reach

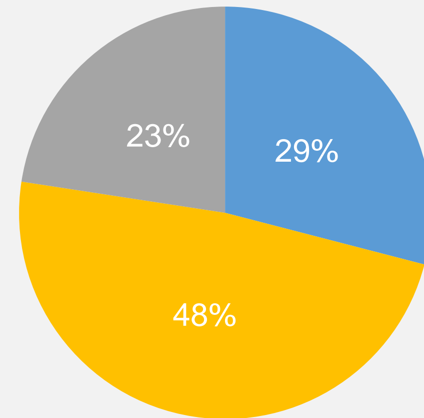
THE IMPACT OF OUR SUPPORT: 2018 MEMBER SURVEY RESULTS

High Performance & APM Readiness

“Our Practice is High Performing”

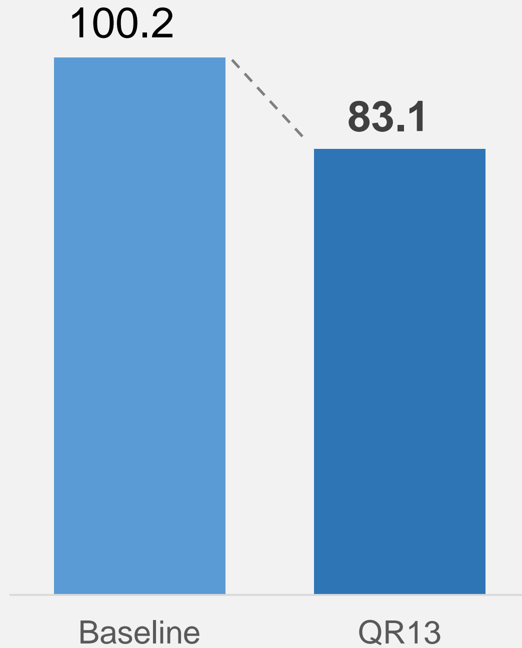


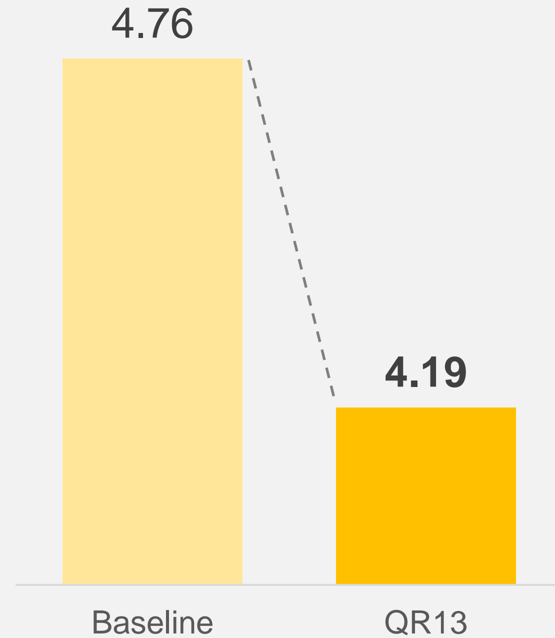
“Our Practice is Prepared for APMs Due to our Participation in QualityImpact”



UTILIZATION IMPACT

Reducing Unnecessary Hospital Use

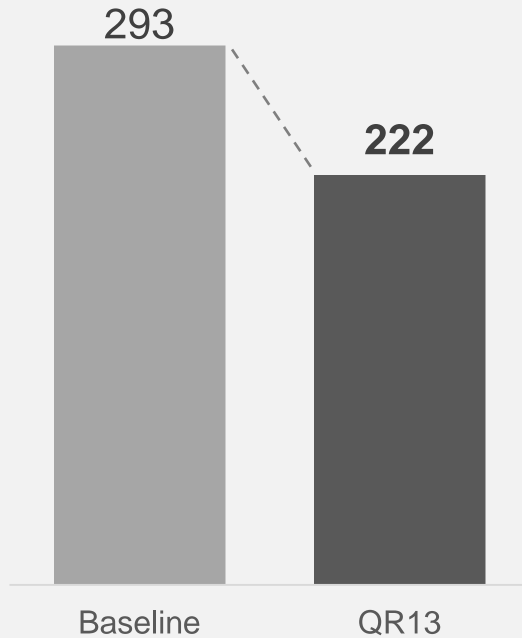




UTILIZATION IMPACT

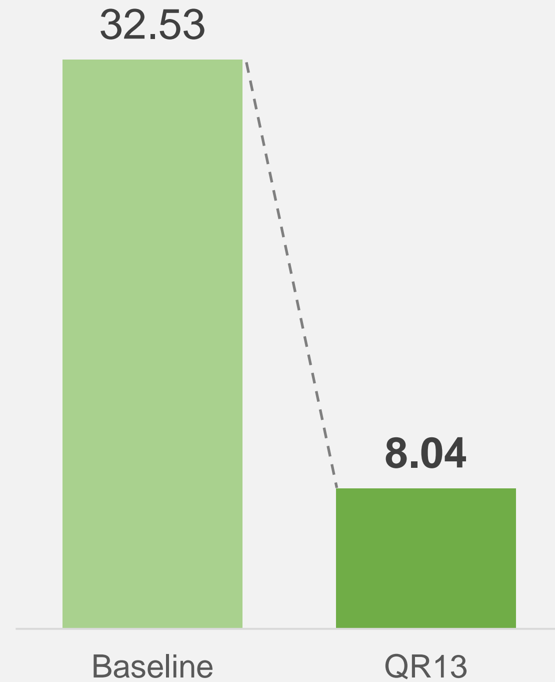
Reducing Unnecessary ED Use & Testing/Procedures

ED Visits
Performance Rate/1000



190% progress toward our 4-year commitment

Low Back Pain Imaging
Performance Rate/100



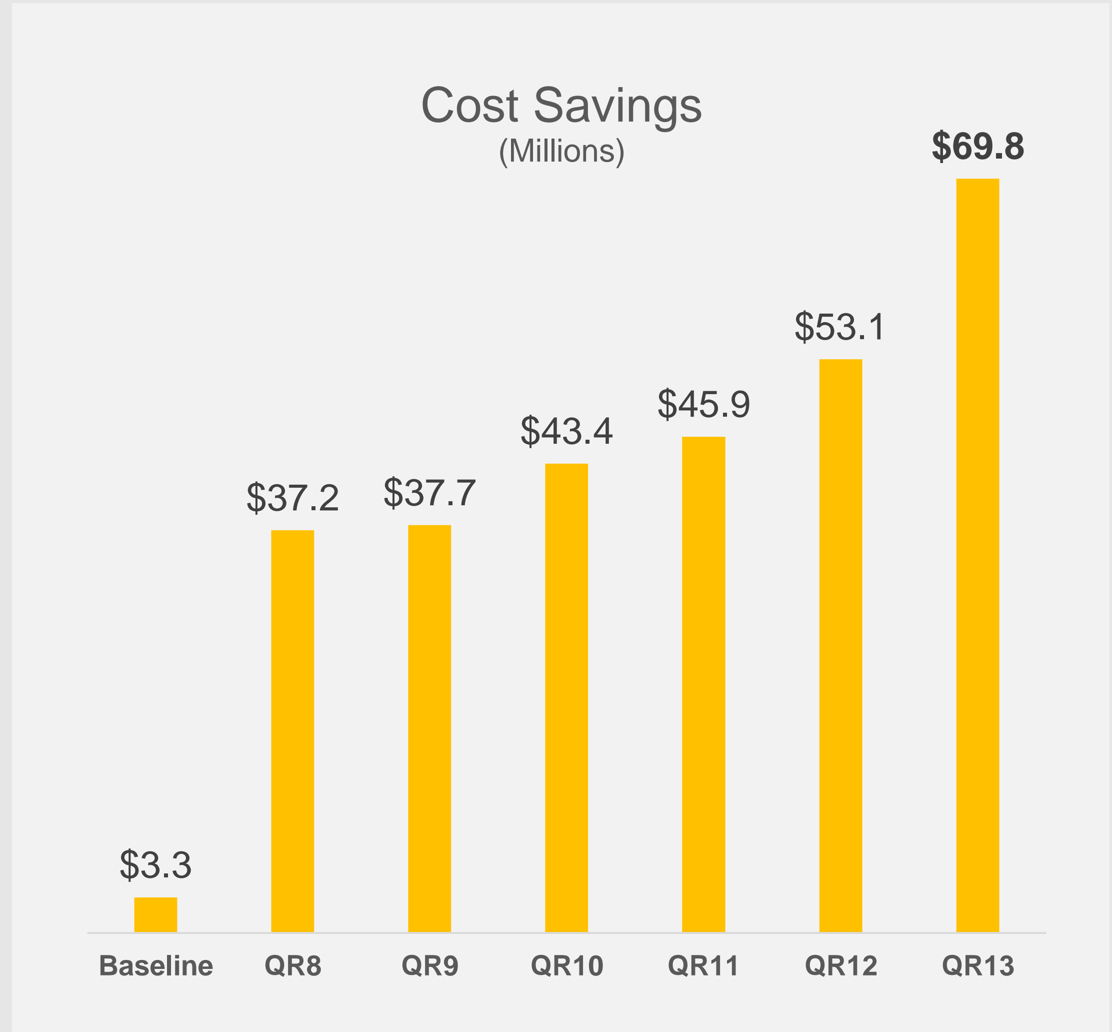
98.5% progress toward our 4-year commitment

COST IMPACT

Reducing Cost

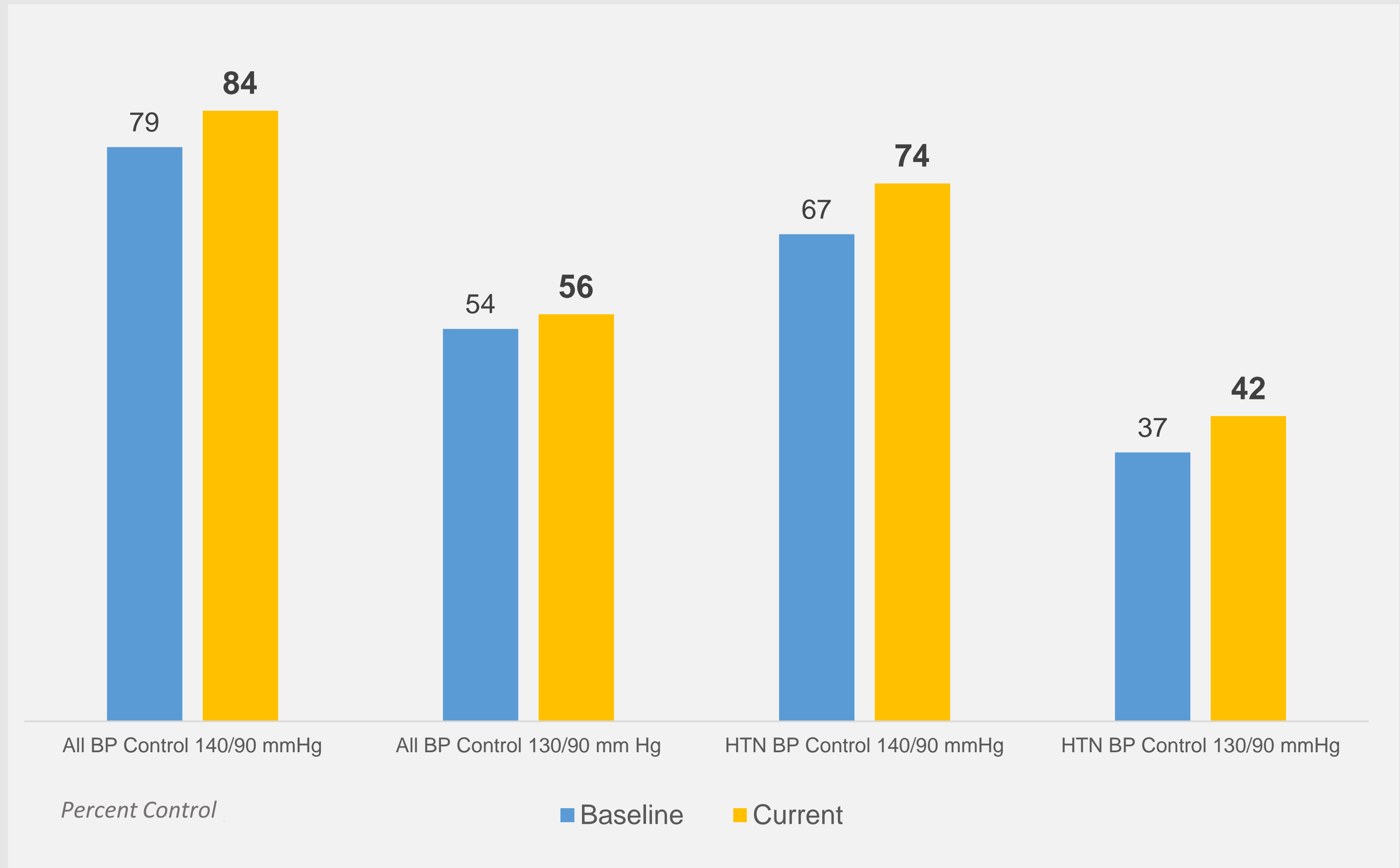
Milestone	Total Savings
4-Year Commitment	$59,589,852
QR13	$69,757,730

117% progress toward our 4-year commitment



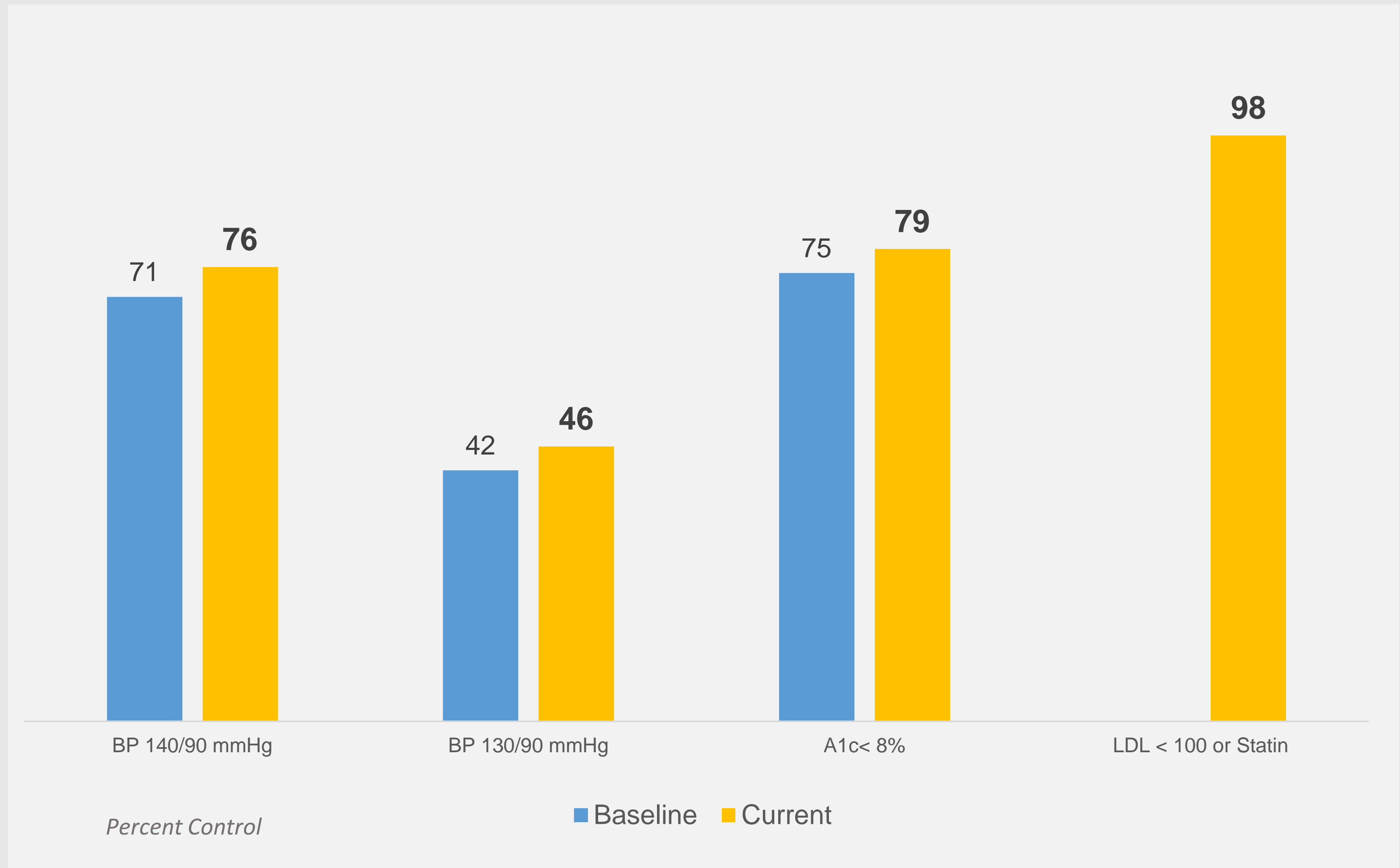
IMPACT ON QUALITY

Blood Pressure Control (PTN)



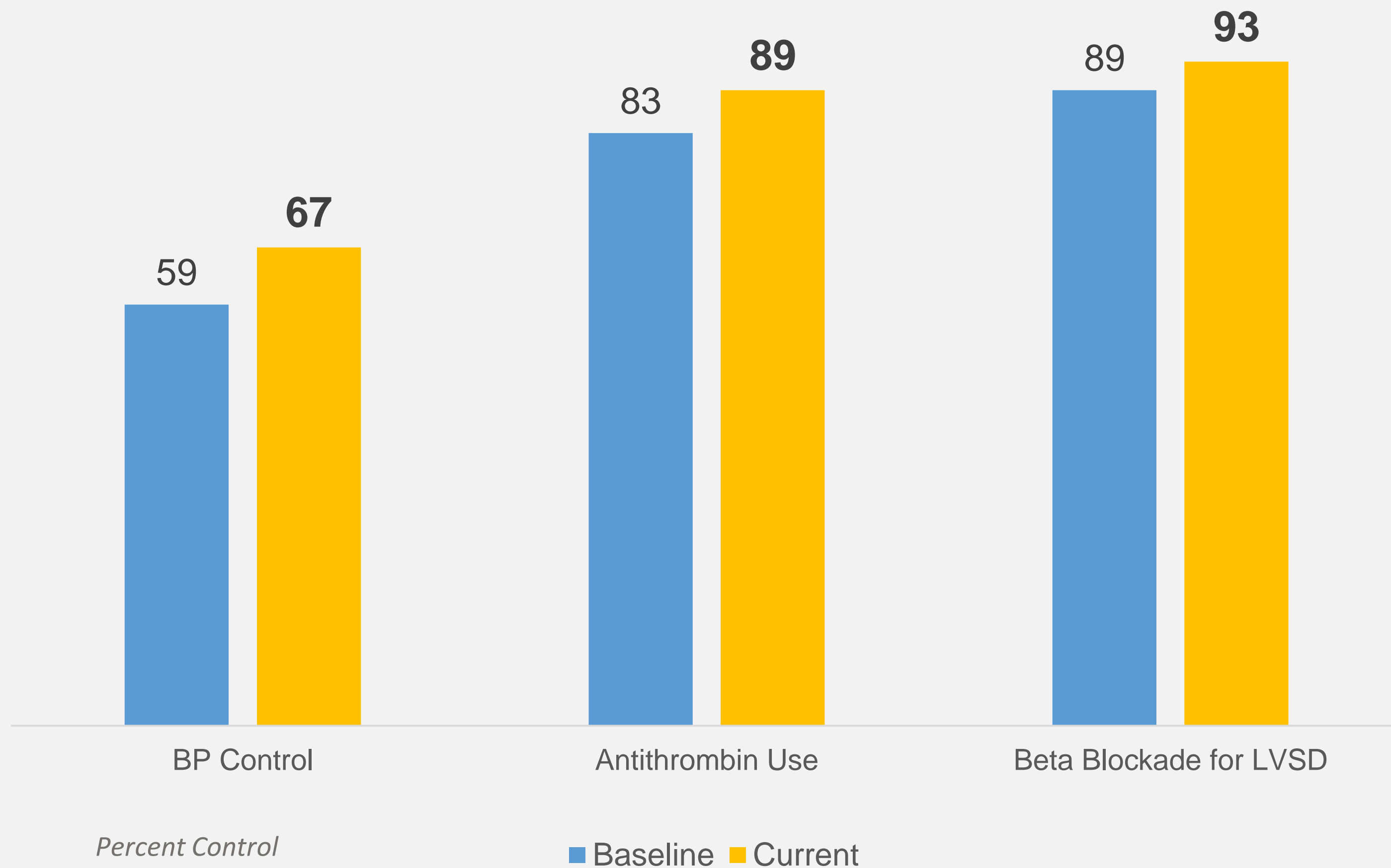
IMPACT ON QUALITY

Diabetes Management (PTN)



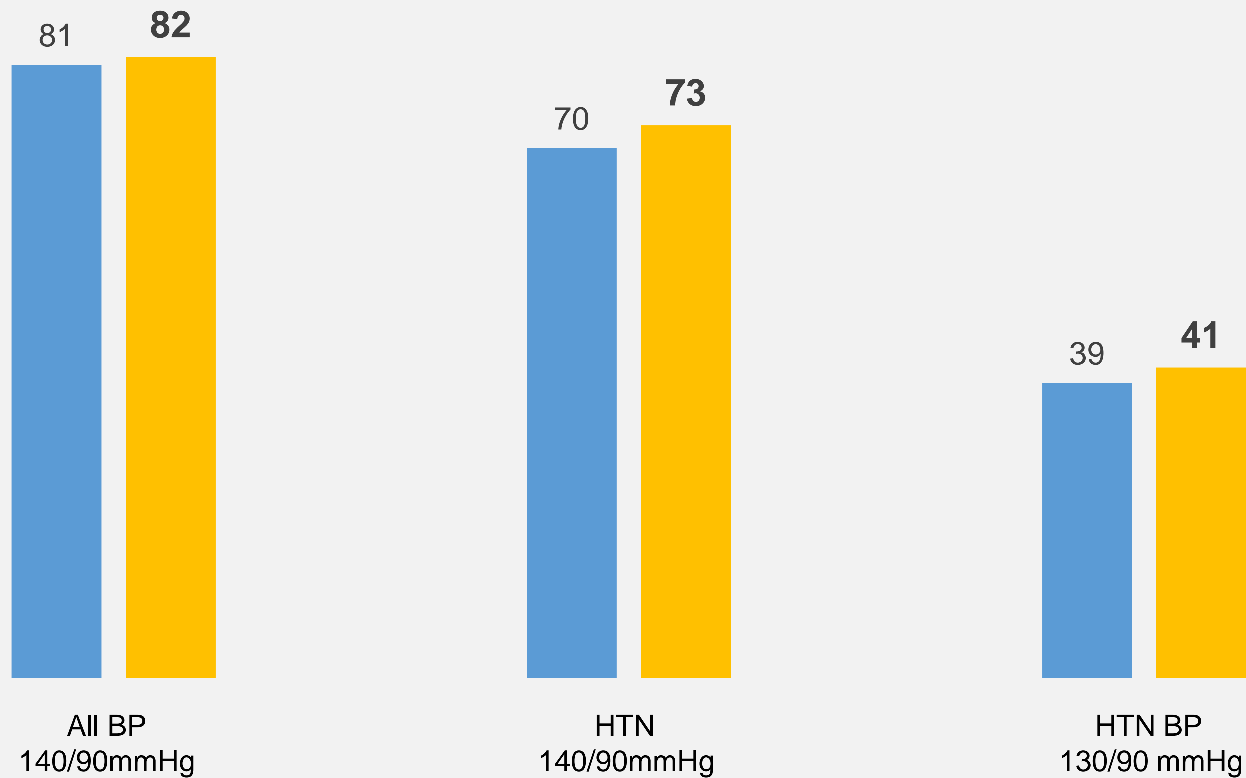
IMPACT ON QUALITY

Heart Failure Management (PTN)



IMPACT ON QUALITY

Blood Pressure Control (COSEHC Centers)



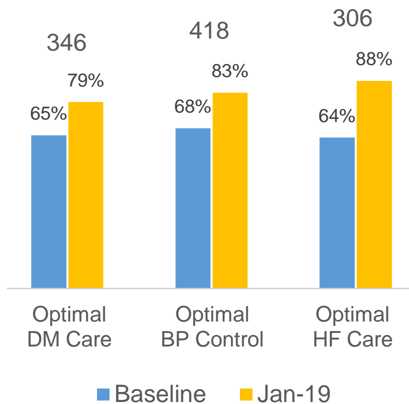
EXEMPLARY PERFORMERS

Achieving Benchmark Status Across Key Performance Areas

QUALITY

Over 400 practices have demonstrated high performance in **diabetes care, blood pressure control, and heart failure management** through improved care coordination

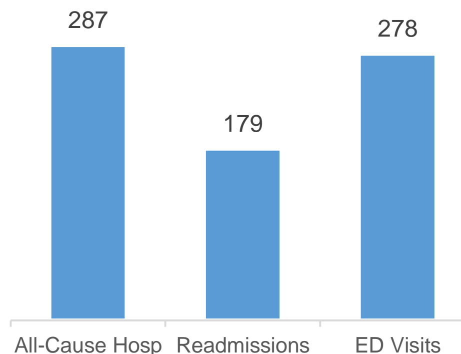
Number of High Performing Practices by Quality Measure



UTILIZATION

287 practices have demonstrated high performance in **reducing inpatient and ED utilization** through improved access and continuity

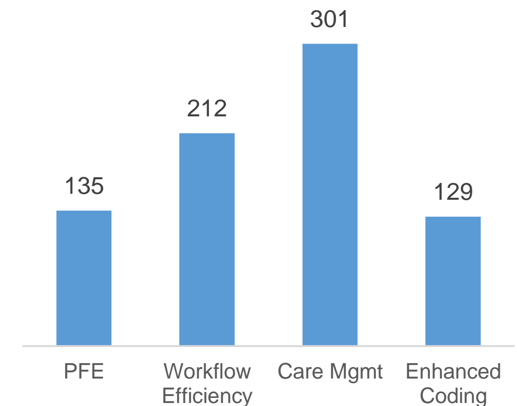
Number of High Performing Practices by Utilization Measure



TRANSFORMATION

301 practices have demonstrated high performance in transformation through implementation of **shared decision making, performance improvement initiatives, care management & coding** optimization education

Number of High Performing Practices by Design Strategy



EXEMPLARY PERFORMERS

Strategies for Achieving Results

CLINICAL MANAGEMENT

1. Data **Transparency**
2. Formalized **Quality Improvement Process**
3. **Provider Reports** and Clinician Compare
4. Rapid Cycle PDSA **Performance Improvement CME**

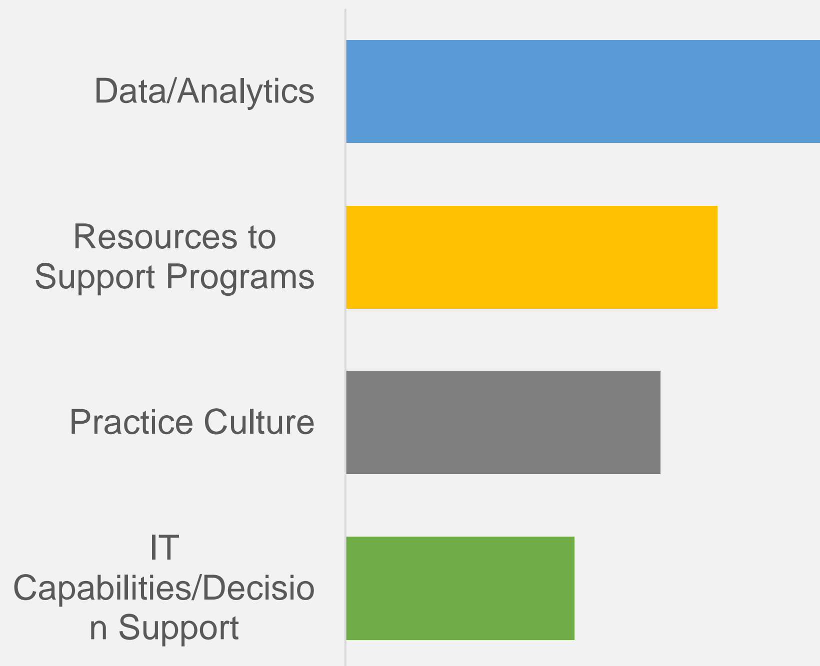
TRANSFORMATION PROGRESS

1. Workflow **design and process efficiencies**
2. Clinical and Process **Guidelines; Subject** Expert Coaching
3. **Care Management**
4. **Behavioral Health** Integration
5. **Pain Management** and Opioid Use Strategies

APM READINESS

1. Empanelment
2. Payer Value Program **Alignment**
3. Post-Acute Network **Development**
4. **AWV, TCM & CCM** Integration
5. **Billing & Coding** Optimization
6. APM **readiness** consultation

Address Key Barriers to APM Readiness



What strategies do you want to implement to enhance your practice in 2019?

"Maximize population health insight from MDInsight"

"Better coding and documentation to improve charge capture and compliance"

"More provider involvement and monthly team-led meetings"

"Continue to ease the clinical burden of quality reporting via easy-to-use templates"

Value Proposition to Payers & Employers

Our practices are showing sustained results in achieving the Quadruple Aim and are well-positioned for success under value-based payment.

Through their work with QualityImpact, our practices have transformed by:

- Shifting from a culture rooted in **volume** to **value, with commitments to** Quality, the Experience and Efficiency.
- Implementing structure, programs, and processes that systematize appropriate care by the appropriate team member focused on **population health quality.**
- Developing systems to monitor, intervene, and act **to avoid unnecessary harm in utilization** and understand how illness and severity plays a **role in population risk and how they get paid.**
- Adopting innovative strategies for patient and family engagement to ensure **the patient is truly at the center of care.**