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FREE Network Performance Report

Sample Integrated Heath Delivery System

Understanding network performance is complex and nuanced. CareJourney is able to utilize national claims dataset to evaluate the performance of this organization's network when it comes to market share, leakage, cost efficiency, and outcomes efficiency.

Market Assessment

CareJourney has a 100% view of the Medicare claims data, that enables us to evaluate the market share of any given geographic region. For the purposes of this analysis, we looked at the San Jose-Sunnyvale-Santa Clara CBSA where this sample organization has the highest market penetration.

Practice Group Name	% of Total Num Attributed Patients along Table (Down)		
SUTTER BAY MEDICAL FOUNDATION	57.12%		
STANFORD HEALTH CARE	9.81%		
SILICON VALLEY MEDICAL DEVELOPMENT LLC	2.51%		
COUNTY OF SANTA CLARA	2.31%		
YOUR MEDICAL GROUP INC	0.65%		
HAMILTON AVENUE MEDICAL GROUP INC	0.58%		
CSI MEDICAL GROUP	0.54%		
WANG, DANIEL	0.49%		
BLOSSOM RIDGE MEDICAL GROUP INC	0.49%		
PAUL PERCIVAL, MD INC	0.45%		
BERMAN SKIN INSTITUTE	0.43%		

Specialty Orthopedic Surgery			
Rendering P	ractice Group	% of Total Spend	
SUTTER BAN FOUNDATIO		40.99%	
STANFORD	IEALTH CARE	28.71%	
ORTHONOR	CAL, INC	14.00%	
SANAZ HARI	RI, MD, A MAL CORPORATI.	2.47%	
HAZEL HAW HOSPITAL	KINS MEMORIAL	1.62%	
KLIMAN, JES	FREY	1.21%	
ANDERSON,	JEFFREY	1.09%	
GORANSON, KENNETH		1.08%	
HARWOOD,	MAURY	0.97%	
SOUTH BAY ORTHOPEDIC &		0.000	

Takeaways

This organization has strong market penetration in the San Jose CBSA, claiming over 57% of the attributed Fee-For-Service patients. They also perform over 40% of orthopedic services in the CBSA. 😂 CareJourney

Leakage Performance

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CareJourney utilizes shared patient algorithms to identify where (what practice groups or facilities) a population of patients are accumulating medical utilization. In this case, we evaluate attributed patients. The numbers in the below chart are total paid dollars.

	FORT SUTTER SURGERY CENTER, A CALIFORNIA LIMITED PARTNERSHIP: 2,255,134 -
OON: parts: 289,999,296	STOCKTON HEMATOLOGY ONCOLOGY MEDICAL GROUP INC: 4,054,150 =
	RETINAL DIADNOSTIC CENTER A MEDICAL CORPORATION: 2,747,997 -
	UCSF MEDICAL GROUP BUSINESS SERVICES: 4,475,968 -
	BAY AREA SURGICAL SPECIALISTS INC A MEDICAL CORPORATION: 3,606,571-
	EPIC CARE: 4,072,143 -
	STANFORD HEALTH CARE: 9,206,034
	CEP.AMERICA - CALIFORNIA: 2,961,159 -
	REGENTS OF THE UNIV OF CA: 2,553,813
	SANTA CRUZ RADIATION ONCOLOGY MEDICAL GROUP, INCORPORATED: 2,578,493
	NORTHERN CALIFORNIA RETINA VITREOUS ASSOCIATES MEDICAL GROUP: 3:849.874 -
	DIGNITY HEALTH MEDICAL FOUNDATION: 3,149,930 -
	VITREO-RETINAL MEDICAL GROUP, INC.: 8,729,922
Sutter Health: 587,023,977 NN: parts: 297,024,081	SUTTER BAY MEDICAL FOUNDATION: 187,759,259
	SUTTER VALLEY MEDICAL FOUNDATION: 103,917,510

Takeaways

The shared patient evaluation reveals ~50% out of network spend Part B from Medicare Fee-For-Service patients attributed to the organization. The largest contributing group is Stanford Health Care, followed closely by Vitreo-Retinal Medical Group.

Cost Efficiency

By transforming longitudinal claims data into episodes, and attributing those episodes to the responsible physician, CareJourney is able to surface cost efficiency performance on many clinically-relevant episodes.

Specialty	Episode Type 🗧	Num Episodes	CBSA Adj. O/E	Observed
All Specialties	Total	138,025	1.43	-1 \$18.5К
	PCP - Simple CC	23,536	1.34	🌗 \$4.7К
	PCP - Major Complex CC	18,259	1.48	— 🛑 \$20.9К
	PCP - Minor Complex CC	17,996	1.43	() \$7.4К
	PCP - Healthy	9,831	1.37	🌗 \$2.3К
	PCP - Under 65/Disabled/ESRD	5,582	1.63	— ө \$32.8К
	PCP - Frail/Elderly	5,451	1.43	
	CC - Rheumatoid Arthritis/Osteoarthritis	3,477	1.15	🌗 \$9.3К

Takeaways

The "CBSA Adj. O/E" column shows the average observed cost divided by expected cost for a given episode. All of these top volume episodes having an O/E greater than 1 means that performance is greater than expected. An area to further dive into the data would be the performance on "Frail/Elderly" patients, as these are highest need/highest cost patients. Sector CareJourney

Outcomes Efficiency

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CareJourney aggregates claims-based quality measures at both the physician- and practice group-level. Marketlevel scores are calculated to create benchmarks. Below we evaluate performance on a handful of metrics.

Specialty	Measure Desc	Rate	Performance	Percentile
Internal Medicine	% of admits during episodes that had a readmit	0.15	11%	0.36
	% of admits during episodes that were unplanned	0.07	1%	0.11
	% of eligible episodes that had a breast cancer screening	0.77	100%	0.99
	% of eligible episodes that had a colorectal cancer screening	0.62	100%	0.99
	% of episodes in which a patient received appropriate low back i	0.78	100%	0.95
	% of episodes where member died	0.04	99%	0.81
	Percent of ED visits during episodes that were avoidable	0.23	100%	0.99

Takeaways

The "Percentile" column shows where this organization falls amongst peers. We see that they are in the 90th or greater percentile in four metrics, including Percent of ED visits that were avoidable. However, they could improve on readmissions and unplanned admissions.

About CareJourney

CareJourney is a leading provider of clinically-relevant analytics for value-based networks. Headquartered in Arlington, VA, CareJourney currently supports leading payer, provider, and life sciences organizations across the U.S. in achieving their goals by wringing new, high value insights out of expansive population claims data. Through its CareJourney Platform, CareJourney provides members with interactive dashboards of clinically-relevant insights around network design and management, care model management, patient risk segmentation, spend and utilization trends, network integrity, low-value care, and provider, practice and facility (acute and post-acute) performance.



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