

WEBINAR SERIES

ROADMAP to VBC Success



Our Host



Katherine Schneider
Advisor



BA, Smith College
MPhil, Columbia
MD, Columbia
FAAFP

A few housekeeping items:

- All attendees will be muted upon joining the webinar.
- We encourage you to ask questions throughout the session. Please add your questions to the Q&A tab at the bottom right of the Zoom screen.
- The webinar (and slide presentation) will be recorded and shared with attendees tomorrow.



Our Panelists



Erica Everhart
Head of Thought Leadership



BS, MIT

JD, George Mason



Keely Macmillan
Principal, Strategic Services



BS, Yale

MPH, Harvard



Joe Mercado
Sr. Director, Product Management

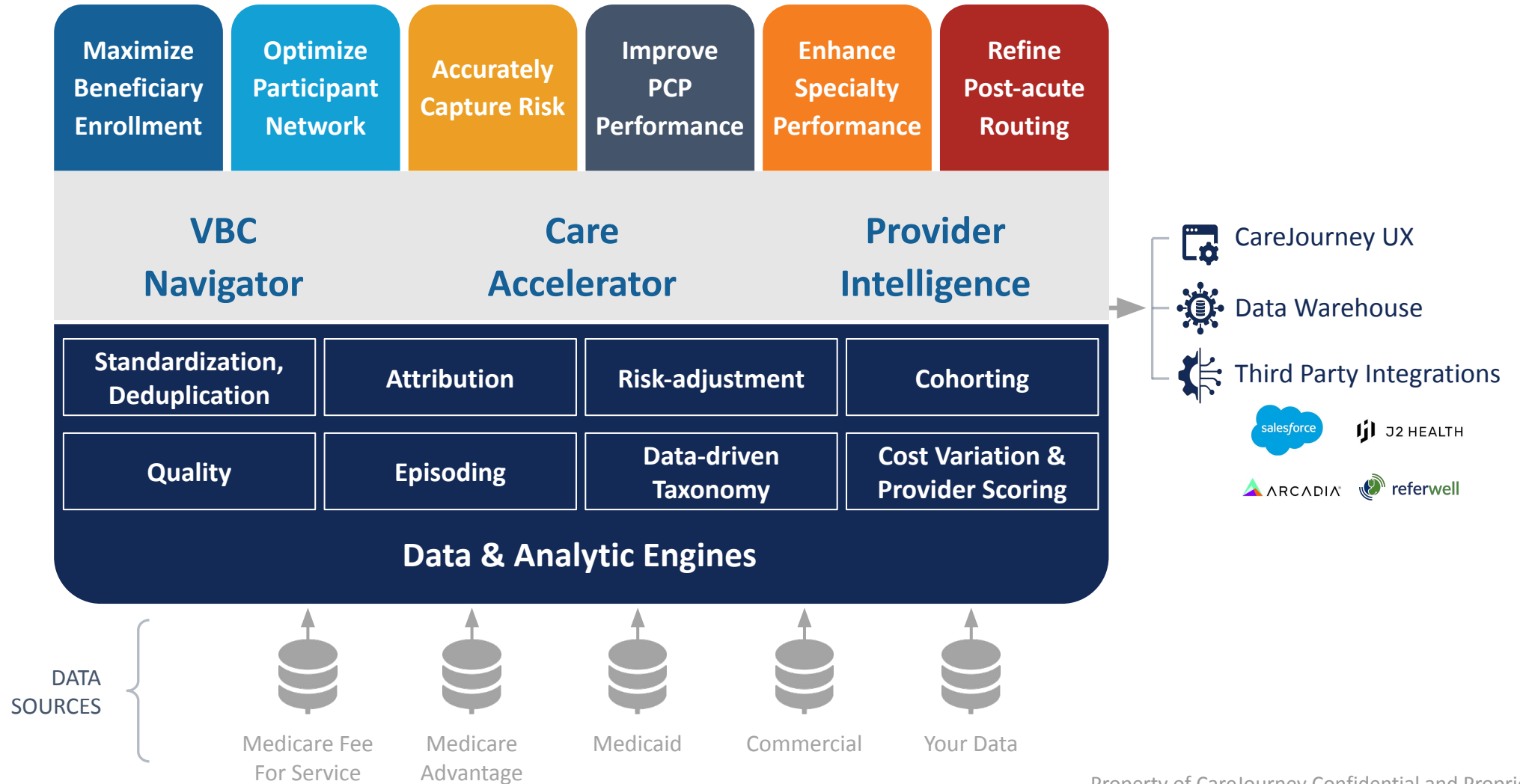


BA, UVa

MS Clinical Informatics, Johns Hopkins
MBA, UConn

Our Data & Analytics Platform

Our Data + Your Data on Our Engines Powers Use-Cases Where You Need Them



WEBINAR SERIES

ROADMAP to VBC Success



MARCH 5

APM Performance:
Welcome to 2024...
Let's Think About 2025

[Download the recording and slides](#)

APRIL 9

Specialty Care:
Those Accounting for
40% of Your Spend

JUNE 4

Care Management:
Keep the Patient
Top of Mind

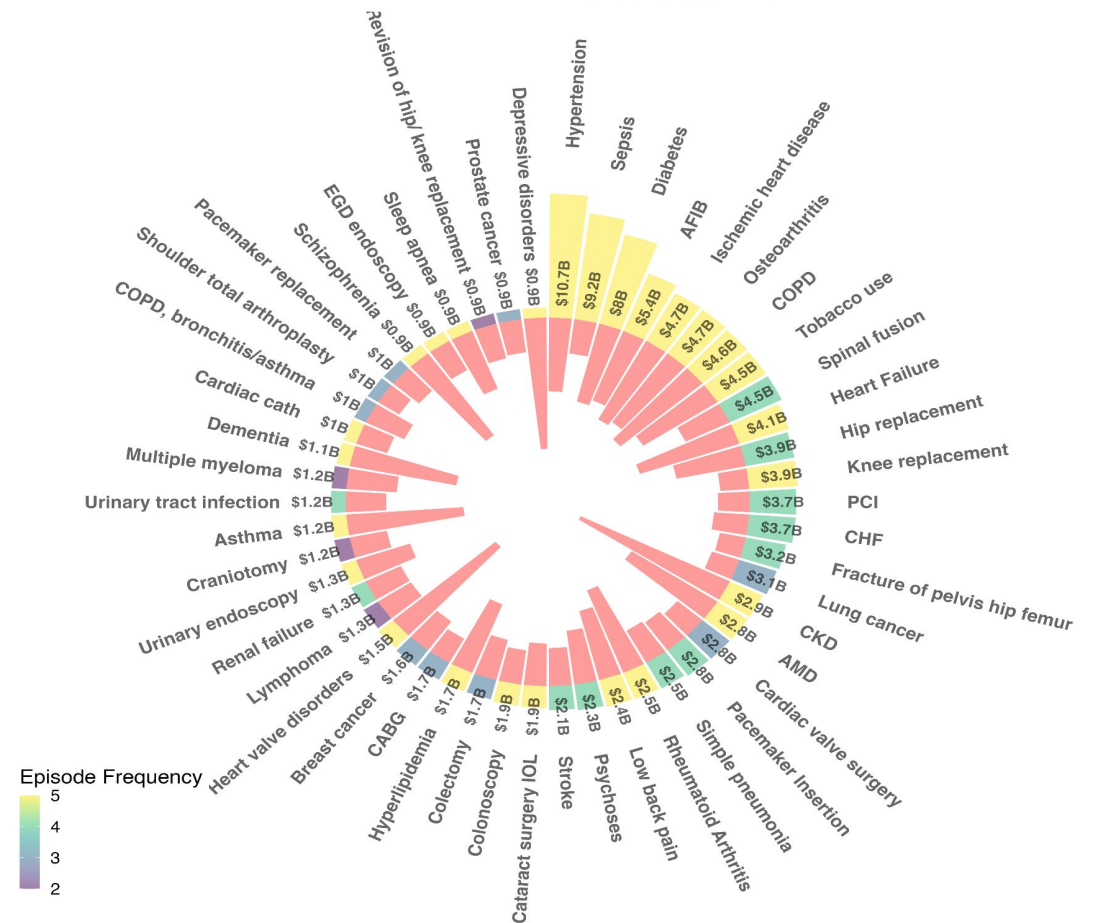
Specialists Drive Spend

No matter how you calculate it- Part B spend, total spend, episode spend

“Specialty care utilization has grown rapidly, with physician referral rates doubling between 1999 and 2009 and the mean number of specialist visits in Medicare growing 28% from 2009 to 2019.

-AJMC, “Accountable Care Organization Initiatives to Improve the Cost and Outcomes of Specialty Care,” April 2024. Available [here](#).

Top 50 Episodes by Annual Total Spend
With Annual Episode Frequency by Quintile and Relative Cost Variation



Current Operating Approaches

Low investment approaches only scrape the surface

ACO Participation Benefits as Incentive



Conditions of Participation



Attribution to Specialists





CMS Advocating for Specialty Care Focus

By releasing shadow bundle data to ACO REACH and MSSP organizations starting in February 2024.

Data intended to drive higher quality care.



Monthly episode and
claims-level files



Quarterly episode
summary reports



Annual target prices by
episode

Compare episode
performance to benchmark

Assess variation in
performance +
improvement opportunities

Engage clinician champions
within your organization

**Recommended
Use Cases**

Limited clinical areas

Primarily IP hospitalization
triggers

Lack of insight upstream

Data only within your
network

**Some
Limitations**



Maximizing Specialty Impact Depends on Data

Shedding insights at the right grain with clinically-relevant accountability.

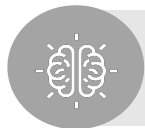
Guideposts for High Quality Specialist Data



Data Completeness



Episodes for Action

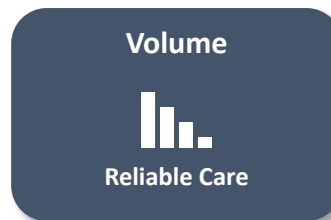


Specialty Relevant Metrics



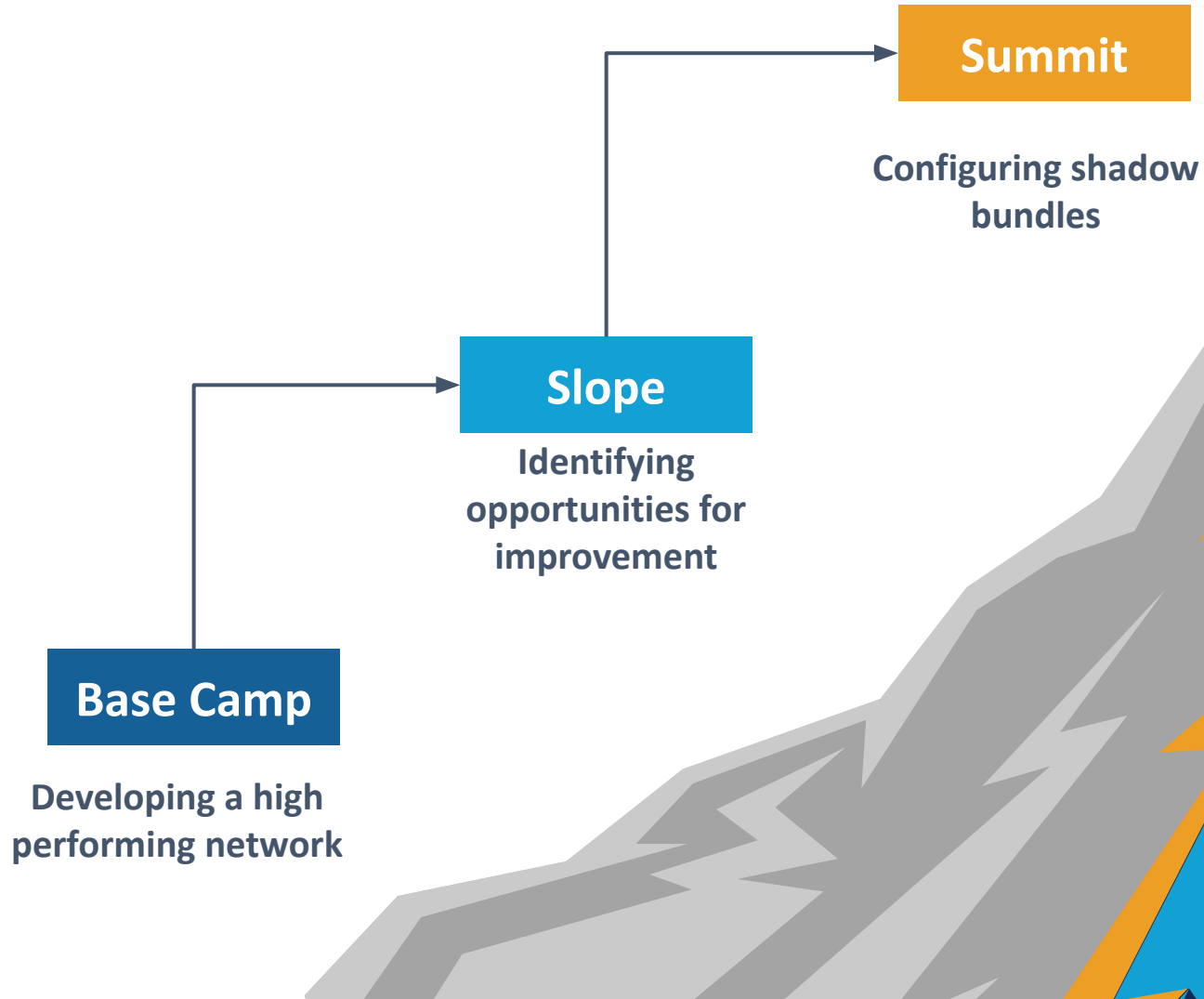
Open and Transparent Methodologies

Metrics To Hold Specialists Accountable



Climbing the Specialty Care Mountain

Any steps on the climb work towards moving the needle.





Establishing High Performing Network



Directions to Base Camp

Effectively steering patients towards high performing specialists improves overall care, but also financial performance!

To do so, organizations:

- Assess where entity is spending money and low quality performance
- Understand what portion of spend can be considered for steering to a lower cost (or higher quality) specialist
- Determine variation drivers
- Engineer an optimized specialist network and create financial incentives to drive high quality care

NPI: 1234567890

BLAIR MOHNEY

Gastroenterology

Subspecialty:

PRACTICE GROUP AFFILIATION

VA

Gastroenterology of VA

PROVIDER ADDRESSES

+4 LOCATIONS

1234 Gastroenterology Way

Episode Name	Number of Episodes	Share of Total Episodes	CBSA Average of Number of Episodes
Acid Reflux	71	5.70%	49
Chronic Inflammatory Bowel Disease (IBD)	49	3.94%	21
Acute Gastrointestinal Bleeding	26	2.09%	24
Gastroenteritis	22	1.77%	19
Irritable Bowel Syndrome (IBS)	21	1.69%	25
Chronic Indigestion Without Clear Cause	14	1.12%	22

Episodic performance views inform successful networking decisions.

Example CareJourney dive into blinded provider's performance.





Continuing to Improve Performance



Directions to Slope

Even experienced professionals have room for growth. However, these are not one size fits all and require nuanced comparisons. Ideas include:

- Utilize transparent methodology
- Hold physician office hours to review performance data
- Align incentives to performance opportunities and impact (ex. referrals)
- Offer tactical support like:
 - After hours call line
 - Block time for urgent visits in office to prevent unnecessary ER utilization
 - Highlight evidence based guidelines on testing and medication therapy
 - Hold post acute coaching

Conditions ⓘ						EPISODES QUALITY SCORE: 5/5	
Episode Name	Total Episode Count	Avg Observed Complications	Avg Expected Complications	Adjusted O/E Ratio ⓘ	Quality Score ⓘ	Opportunity ⓘ	
Enlarged Prostate	534	\$46	\$76	0.60	5/5	\$2,920	
Kidney Stone Disease	91	\$334	\$330	1.01	2/5	\$14,601	

Treatments ⓘ						EPISODES QUALITY SCORE: 4/5	
Episode Name	Total Episode Count	Avg Observed Complications	Avg Expected Complications	Adjusted O/E Ratio ⓘ	Quality Score ⓘ	Opportunity ⓘ	
Endoscopy Of The Urethra And Bladder	786	\$230	\$224	1.03	4/5	\$109,284	
Transurethral Surgery (TURP) For Enlarged Prostate	86	\$1,721	\$1,317	1.28	2/5	\$100,952	
Kidney Removal Surgery	30	\$3,525	\$4,830	0.85	4/5	\$10,485	

Top Complications ⓘ							
QUALITY SCORE 5	Complication Description	Episode Name	Complication Type Name	Setting	Episode Count	Avg Observed	Avg O/E Ratio
	Fluid And Electrolyte Disturbances	Endoscopy Of The Urethra And Bladder	Potentially Preventable Complications	Ambulatory Surgery Center	30	\$528	13.66
	Acute CHF, Pulm Edema	Kidney Removal Surgery	Potentially Preventable Complications	Inpatient	30	\$12,828	7.07
	Acute Posthemorrhagic Anemia	Transurethral Surgery (TURP) For Enlarged Prostate	Potentially Preventable Complications	Outpatient	62	\$489	7.00

Even high performers can improve.

CareJourney's observed to expected assessments are one method to prioritize impactability.

Structuring Around Specialty VBC

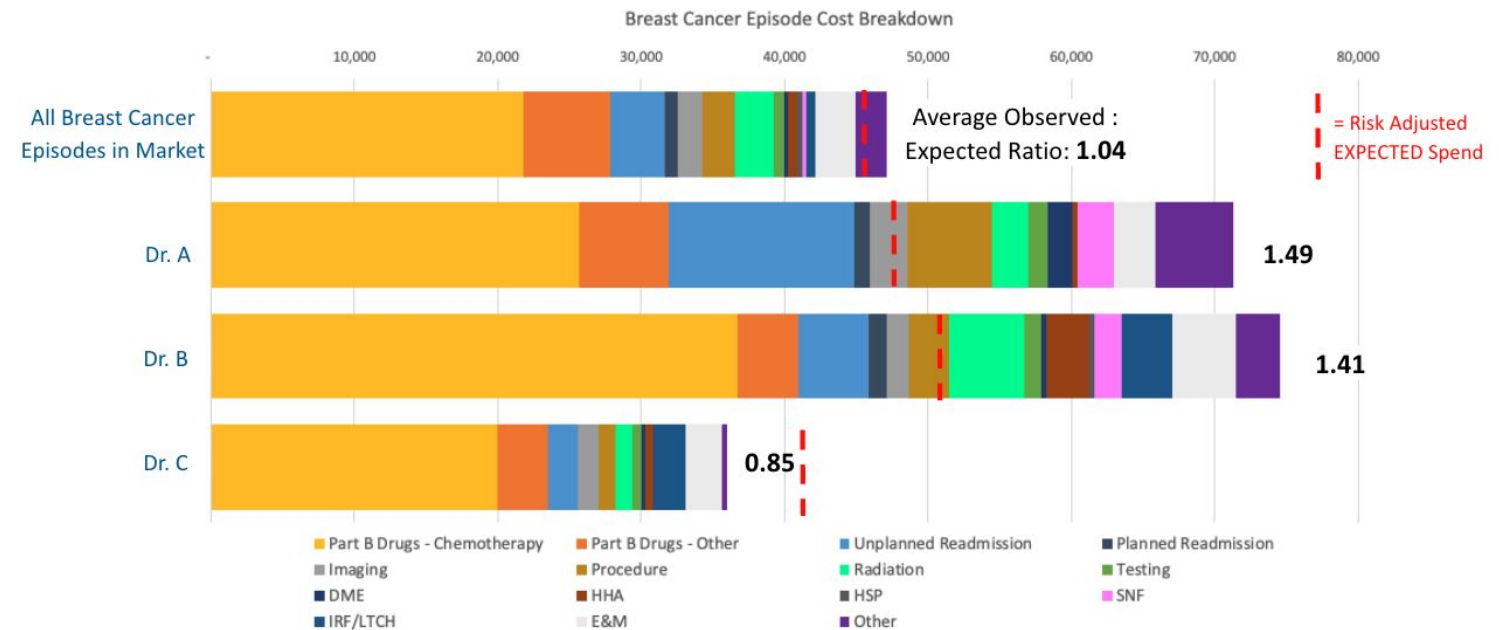


Directions to Summit

Organizations diving fully into specialty VBC, create carve outs, bundles, or co-management arrangements to best support their patients. To do so:

- Utilize data across all specialty lines (for providers both in and out of your network)
- Consider chronic and procedural episodes triggered across various care settings
- Identify specialists avoiding acute exacerbations and expensive interventions
- Utilize the fastest data (ex. BCDA) to
 - Inform an episode triggered
 - Track episode spending in real time
 - Estimate aggregate savings / losses before reconciliation for interim payments

Shadow bundles align incentives to best manage their population. Sample CareJourney episode breakdown helps model out bundle performance.





Query This Data: Earn Your Provider Data Certificate

Get familiar with the data necessary to evaluate providers and specialists.



Episodes & Utilization

Profile providers by episode spend and volume with claims groupings



Quality Measures

Evaluate providers across process, appropriateness, and outcomes



Performance Scores

Leverage provider cost and quality scores for peer-to-peer comparisons

Apply at carejourney.com/providerdata

Excellent course and session. Extremely informative and easy to follow. The learnings and data were great! The trainers were also excellent. I loved the SQL portions!

Ashley Aluise, Principal, bwell Connected Health





Curious About Your Performance?

Meet with us for **complimentary data** on your episode performance against expected amounts

Episode Name	Episode Type Name	Total Episode Count	Oe Pay Rate	P25 Opportunity Amount
Atrial fibrillation and atrial flutter	Chronic Medical	7,558	1.00	\$6,757,215.78
Coronary Artery Disease	Chronic Medical	7,938	1.05	\$6,001,671.16
Chronic high blood pressure	Chronic Medical	34,873	0.90	\$5,138,040.94
Arthritis	Chronic Medical	6,153	0.98	\$4,677,058.22
Heart failure	Chronic Medical	2,894	0.94	\$4,627,754.20
Chronic diabetes	Chronic Medical	16,490	0.90	\$4,571,390.23
Emphysema (COPD)	Chronic Medical	3,946	0.98	\$3,777,124.85

**SPECIAL
OFFER**

Type **YES** in chat

OR

complete form at
[carejourney.com/
meet](https://carejourney.com/meet)

A blinded CareJourney ACO snapshot.

WEBINAR SERIES

ROADMAP to VBC Success



JUNE 4

Care Management: Keep the Patient Top of Mind

Despite the complexities of value-based care, healthcare organizations can't lose sight of the ultimate goal: better care for patients. The best patient experience occurs when patients are proactively managed and routed to care management programs that are right for them. Listen in as CareJourney experts facilitate a conversation around:

- Identifying care management flags as quickly as possible
- Coordinating care for admission and visit follow-ups
- Coding patients with appropriate chronic conditions
- Comparing a population to risk benchmarks
- Treating loosely aligned population