



eHEALTH INITIATIVE

Real Solutions. Better Health.

2015 ACO Survey Results Webinar

September 8, 2015

12:30 – 2:00 pm ET

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- All participants are muted
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- Today's slides will be available for download on our homepage at www.ehidc.org

About eHealth Initiative

- Since 2001, eHealth Initiative is the only national, non-partisan group that represents all the stakeholders in healthcare.
- Mission to promote use of information and technology in healthcare to improve quality, safety and efficiency.
- eHealth Initiative focuses its research, education and advocacy efforts in three areas:
 - Business and clinical motivators
 - Interoperability
 - Data access and use

This webinar was made possible through the generosity and support of Phytel & Explorys!



Agenda

12:30 – 12:35 PM Welcome and Introductions

12:35 – 12:55 PM Overview of Key Findings

12:55 – 2:00 PM Panel Discussion on Results

- Kevin Attride, Director, Clinical Health Outcomes, AMITA Health
- Bryan Bowles, Vice President, Solutions Marketing for Population Health, Premier, Inc.
- Karen Handmaker, Vice President, Population Health Strategies, Phytel, an IBM Company
- Craig Richardville, Senior Vice President & Chief Information Officer, Carolinas HealthCare System

ACO Survey Background

Third annual survey in conjunction w/eHI member Premier, Inc.



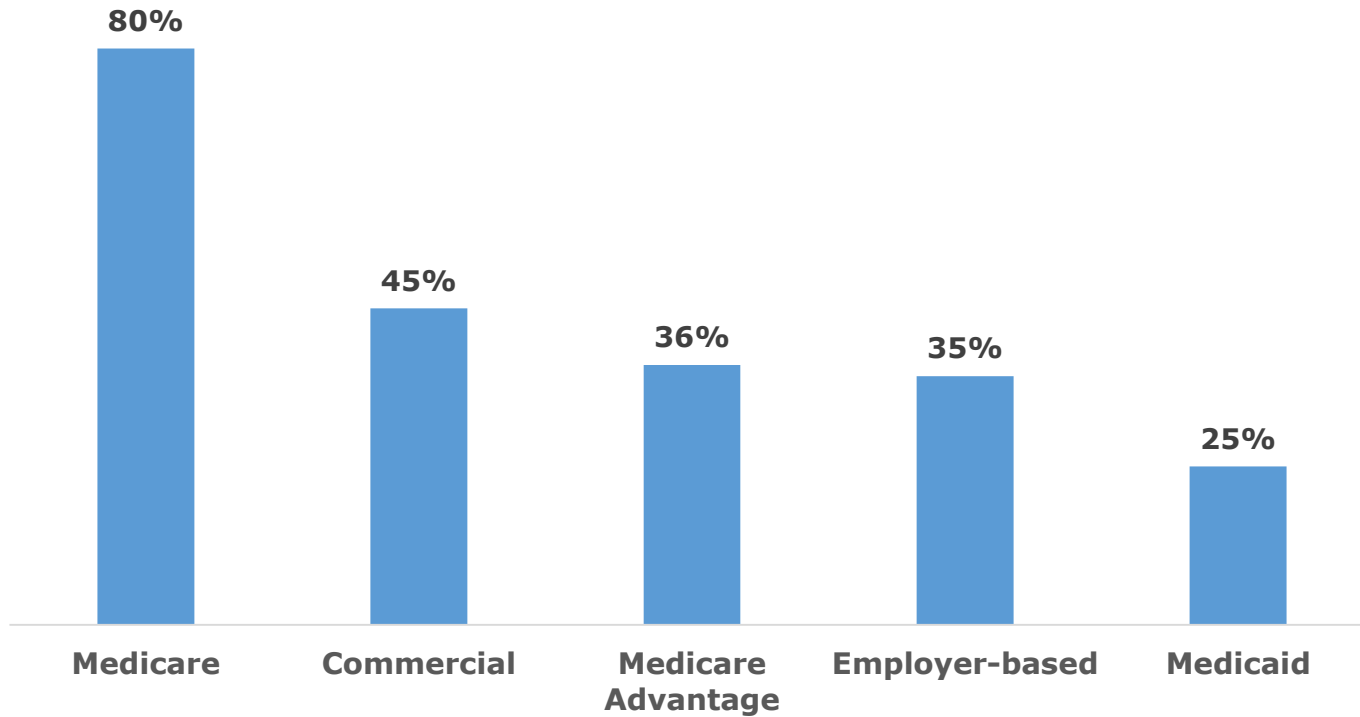
PREMIER

**TRANSFORMING
HEALTHCARE TOGETHER®**

About the Survey

- Conducted August 2015
- Areas of focus include:
 - ACO coverage
 - Health IT infrastructure and interoperability challenges
 - Data use and analytics
- 69 ACOs submitted a response to the survey

ACO Composition

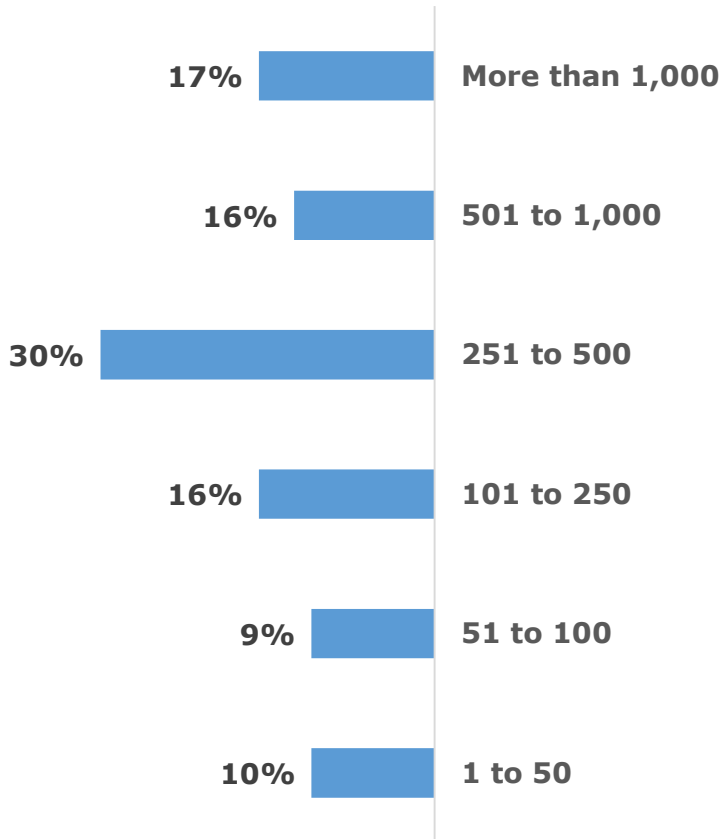


Top contracting models:

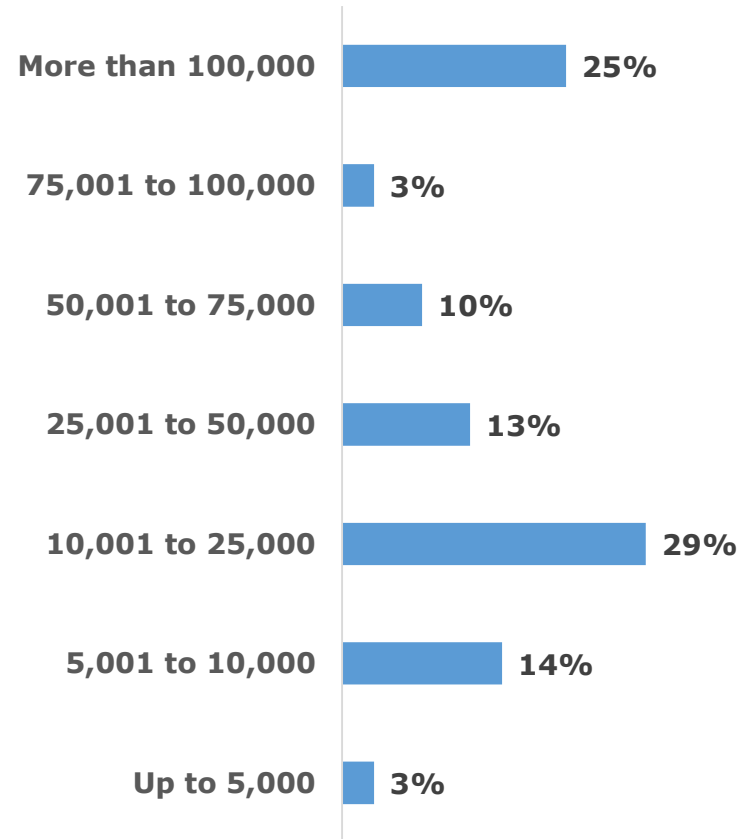
- Shared savings (80% of ACOs)
- Fee for service + bonus (35% of ACOs)

ACO Coverage

Number of Providers



Number of Patients



Health IT Infrastructure



Analytics software
– 82%



Electronic health
record
– 75%



Care management
software
– 62%

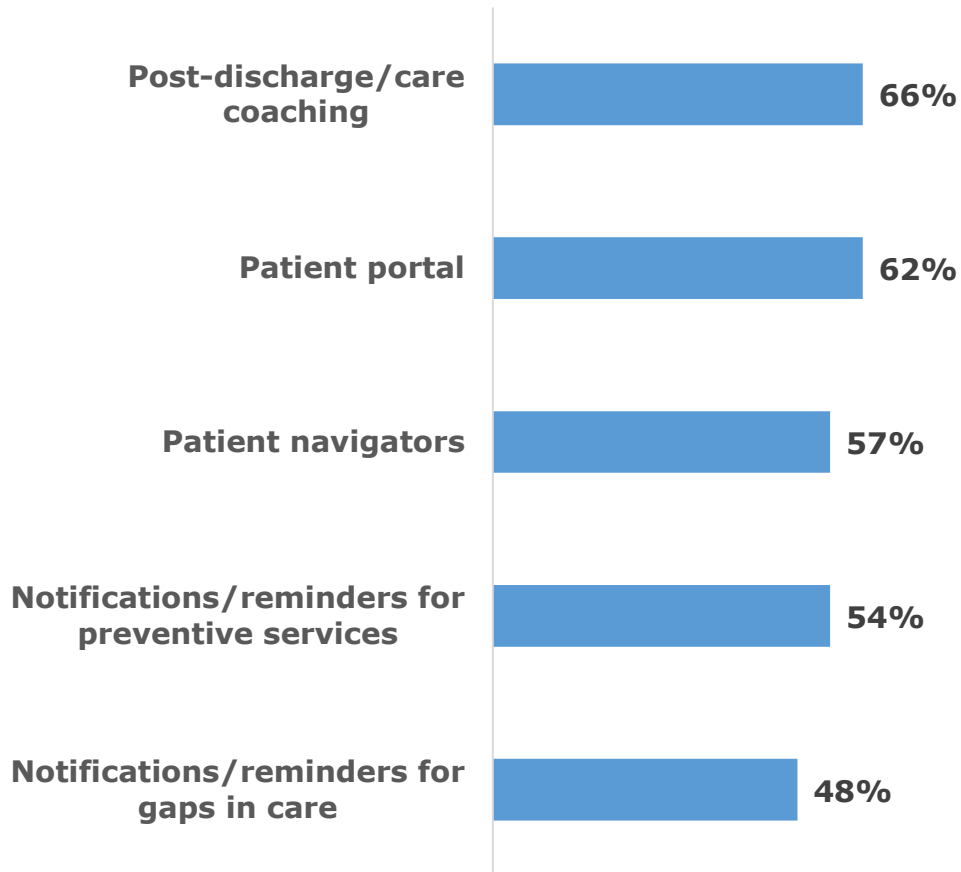


Computerized order
entry/e-prescribing
– 57%



Data warehouse
– 56%

Consumer Services

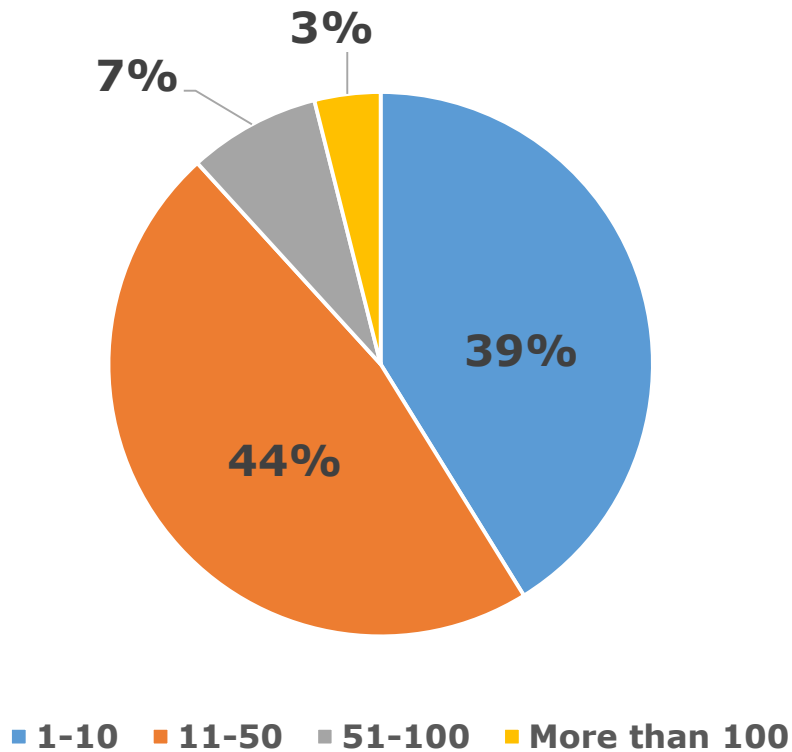


Health IT not supporting patient engagement?

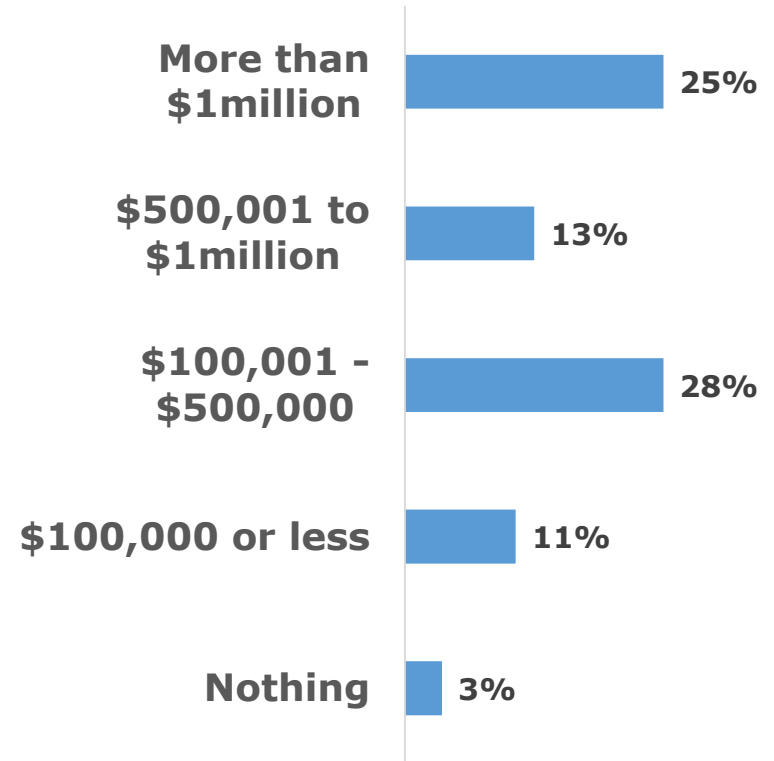
- 49% have difficulty engaging patients
- 30% have electronic forms to capture patient data
- Only 20% offer telemedicine for patients

Interoperability

Number of Integrated Health Information Systems



Cost of Developing ACO Interoperability



Integrating Data

	Easier	Harder	Not Integrated
Primary care	62%	30%	8%
Laboratories/Diagnostics	62%	18%	20%
Specialty care	18%	67%	15%
Public payers	47%	37%	15%
Private payers	30%	44%	26%
Long-term/post-acute/skilled nursing	13%	38%	48%
Behavioral health	10%	36%	53%
Palliative/hospice	24%	31%	46%
Home Health	22%	39%	39%
Pharmacy	42%	28%	30%

Data Use & Analytics

ACOs most often analyze:

- Claims data (96%)
- Clinical data (79%)
- Administrative data (52%)
- Disease registry data (39%)
- Patient-reported data (38%)

In order to:

- Identify gaps in care (84%)
- Identify outliers in cost/utilization (80%)
- Compare clinician performance (77%)
- Measure/report on quality (77%)
- Proactively identify risk (68%)

Data Use & Analytics

Results are used to support:

- Programs to address specific high-cost or high-utilization patient populations (84%)
- Care transitions management/care coordination programs (82%)
- Disease-management programs (73%)
- Post-discharge programs (68%)
- Development of evidence-based clinical/care guidelines (55%)
- Medication management programs (38%)

How are they doing?

- Cost savings – 68%
- Improving quality measures – 54%
- Reducing readmissions – 52%
- Delivering preventive healthcare – 52%
- Improving healthcare utilization – 50%
- Reducing ED visits – 48%
- Managing chronic disease – 45%

Top Challenges

- 1 Access to data outside my organization/network (78%)
- 2 Data integration (62%)
- 3 Change management (55%)
- 4 Cost of new health information technology (38%)
- 5 Obtaining provider commitment to participate (33%)

Key Takeaways

- **Data integration and care coordination are large hurdles**
- **Consumer facing tools are prevalent**
- **FFS and upside-only share savings still dominant**

Panel Discussion



Kevin Attride
Director, Clinical
Health Outcomes
AMITA Health



Bryan Bowles
Vice President,
Solutions Marketing
for Population Health
Premier, Inc.



Karen Handmaker
Vice President,
Population Health
Strategies
Phytel



Craig Richardville
Senior Vice
President & CIO
Carolinas
HealthCare System

AMITA Health ACO & CIN

100,000+ Attributed Lives

- Value-Based Care Partnerships with CMS, Blue Cross Blue Shield of IL, Cigna, Humana, AMITA Health Employees

1,500+ Participating Providers

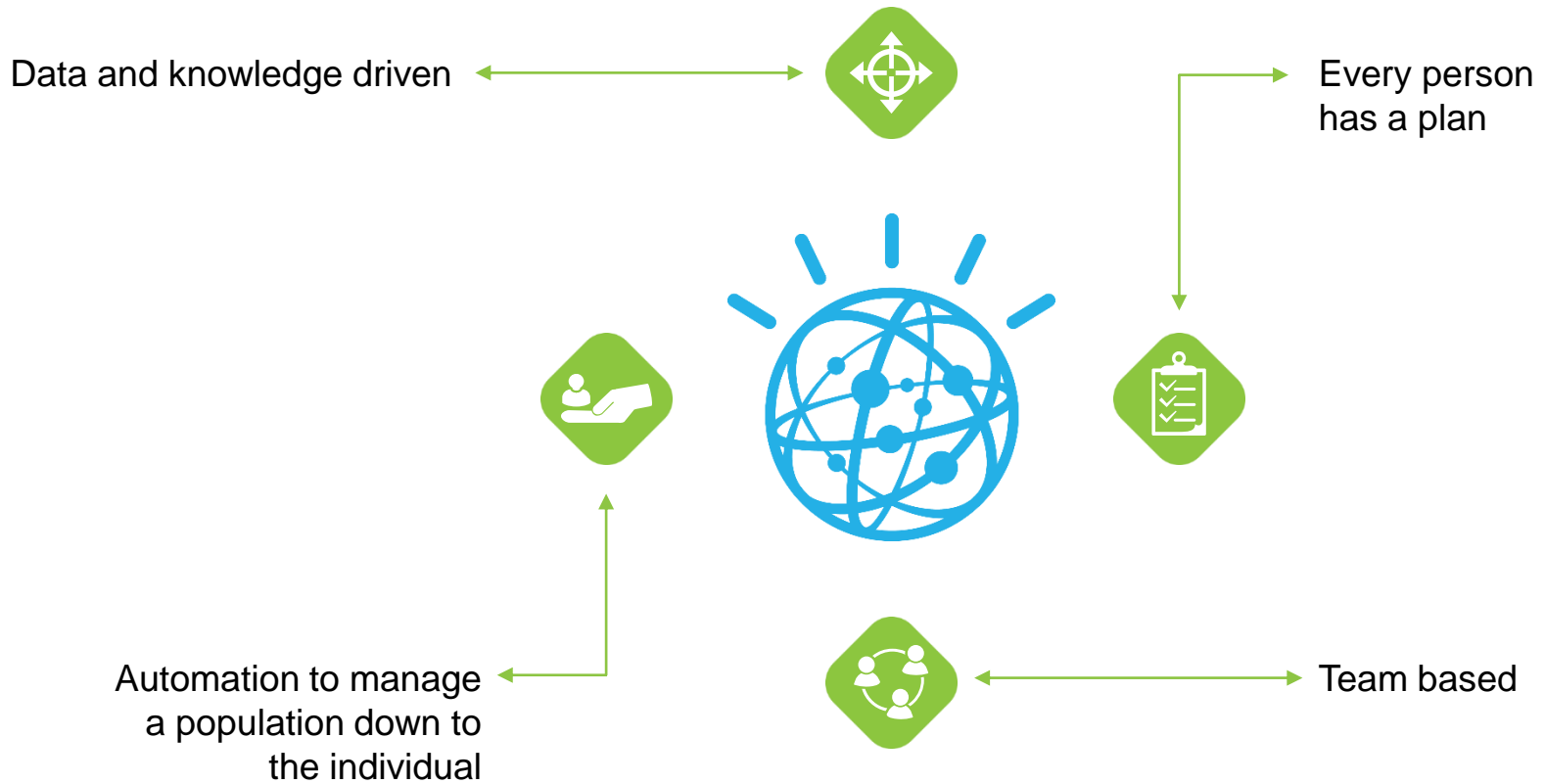
- 400+ Primary Care Physicians

Integrated Delivery Network

- 9 Hospitals
- 9 Urgent Care Locations
- 50+ PCMH Locations
- 10+ Post-Acute Care Partners

Located in Chicago's Western and Northwestern Suburbs

Helping ACOs leverage HIT for population health



Phytel Observations

- **ACOs are conquering first things first:**
 - Easy to access/easy to integrate data sources
 - “Above the waterline” high cost/high risk patients for short term savings
- **Going “below the waterline” will depend on new/easier HIT capabilities**
 - Interoperability with services outside ACO core, such as behavioral health, post-acute care and home health
 - Analytics for more precise risk identification, including patient-reported data and patient-centric registries
- **“Smarter” care teams will leverage technology for more personalized and timely intervention**
 - Referral management and care coordination
 - Tailored messaging and education, telehealth, remote monitoring
 - Care plans for every attributed individual

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