



Converging **Health**TM

Saving Money, Improving Lives

www.converginghealth.com

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ANALYSIS

SCANNING



Building an Integrated Deliver System (IDN) 2007 Style

Medical Edge – North Texas

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Live Well. Stay Well.

**Building an Integrated
Deliver System (IDN)
2007 Style**



**Medical
Edge**

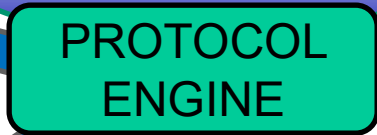
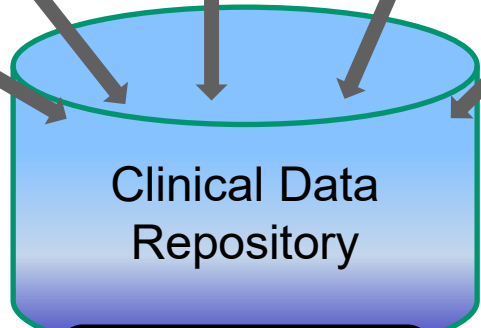


Integrated Deliver System - 2007 Style The 1st Iteration

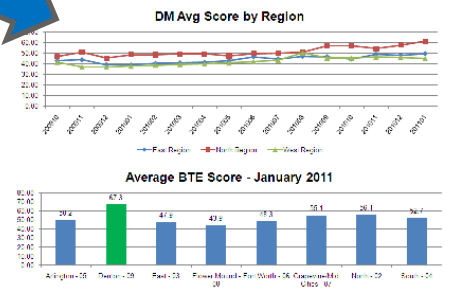
Health Sar Alliance Your Medical Home Summary

Section	Value	Section	Value
Personal Information	Name: [Name], Birth Date: [Date], Address: [Address]	Insurance	Plan: [Plan], Group: [Group]
Physician	Physician: [Name]	Medications	[List of Medications]
Diagnoses	[List of Diagnoses]	Lab Results	[List of Lab Results]
Procedures	[List of Procedures]	Immunizations	[List of Immunizations]

Patient Medical Home Summary

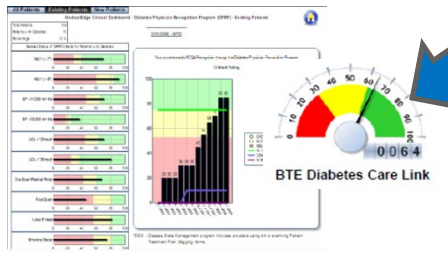


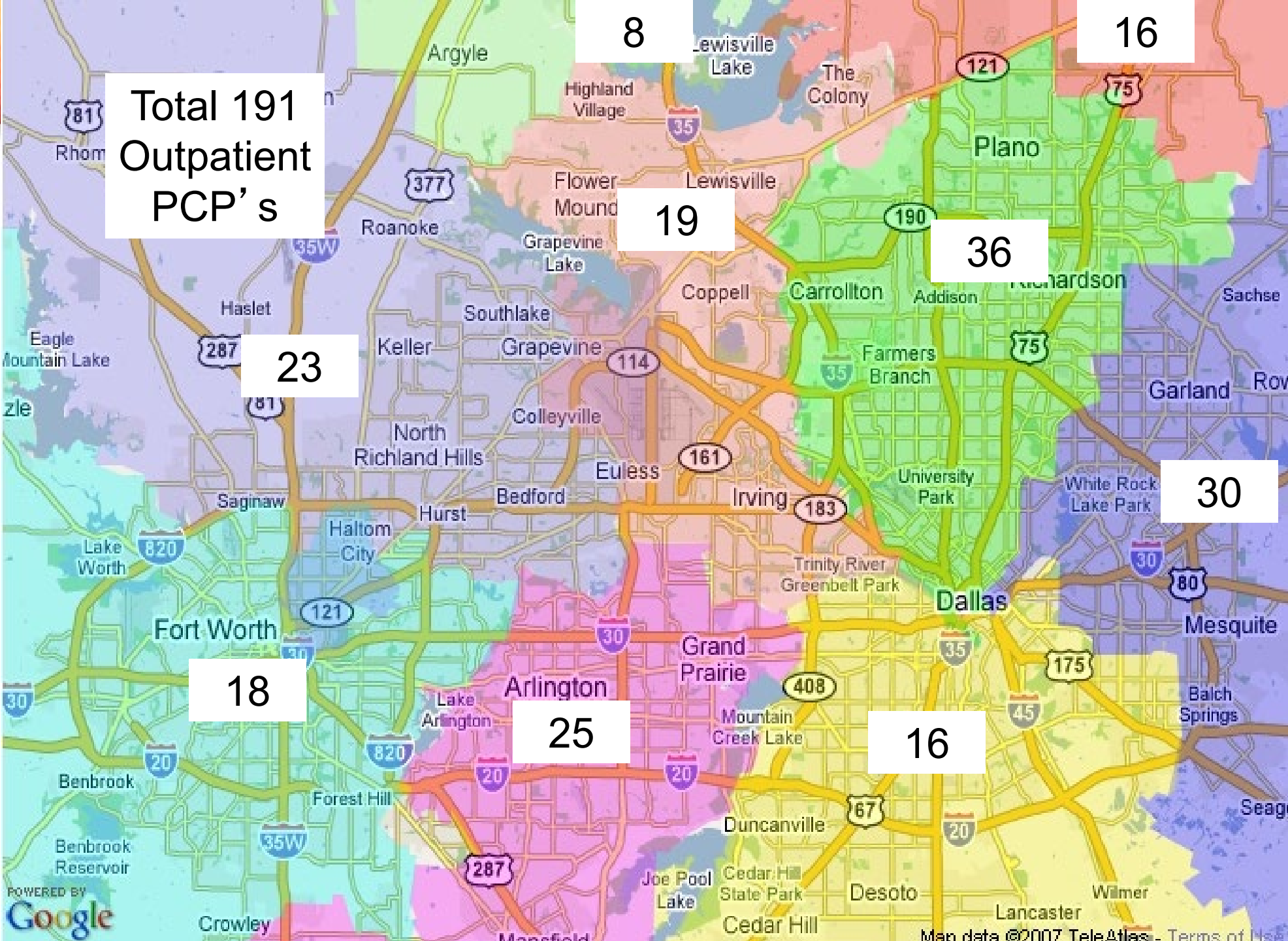
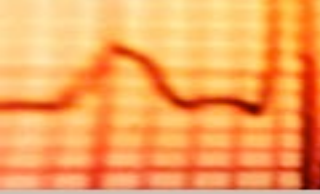
Peer Comparisons & Care Analysis



External Quality Recognitions

Practice Performance Reporting





Total 191
Outpatient
PCP's

23

18

25

19

16

36

30

Provider Clinical Dashboard

Clinical Dashboard - 1/31/2011 (MTD)



BTE Cardiac Care
Score

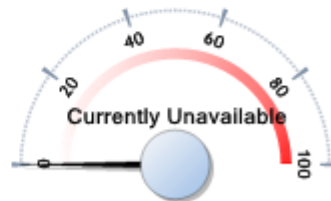


BTE Diabetes Care
Score

Recognitions	Level 1	Level 2	Level 3
BTE Cardiac Care	✓	✓	✓
BTE Diabetes Care	✓	-	-
BTE Physician Office	✓	✓	-
BTE Medical Home	-	-	-



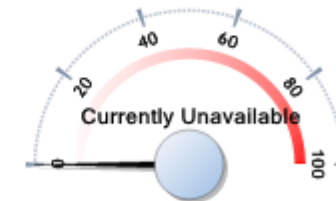
Immunizations
% Patients at Goal



USPSTF
% Patients at Goal



Patient Vitals
% Patients at Goal



Patient Satisfaction Survey
Score

1/20/2011 2:38:42 PM

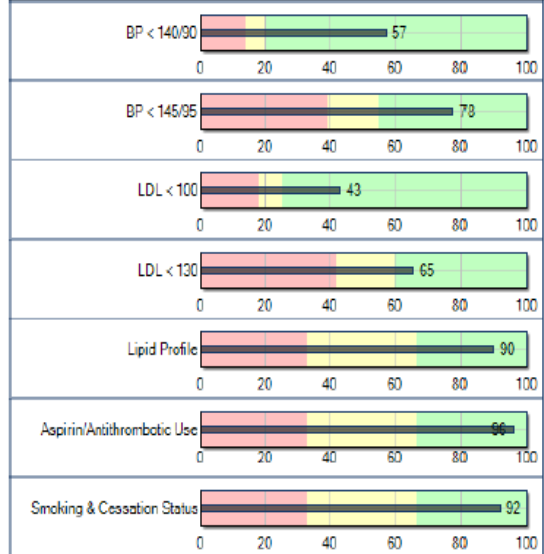
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All Patients Existing Patients New Patients

All Active Patients with cardiovascular disease (Past 12 Mos)	79*
Active Existing Patients with cardiovascular disease (Past 12 Mos)	49*
% of Patients w/ cardiovascular disease who are Existing patients	62 %

* Patient counts and graphs are based on BTE criteria of patients between 18 and 75 yrs in age

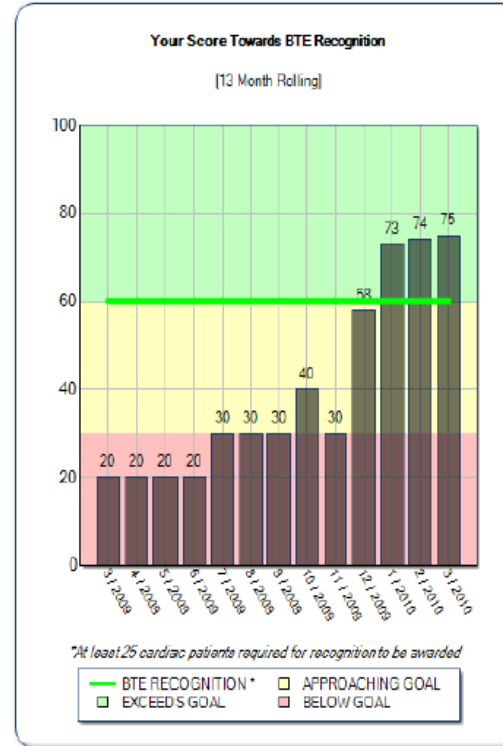
Percentage of your Patients with cardiovascular disease meeting BTE criteria (Past 12 Months)



- Patient Details
- Criteria Analysis
- Scoring Details

4/5/2010 7:01:05 PM

Bridges to Excellence (BTE) - Cardiac Care Link
Level 1 Scoring Criteria and Totals Trend
- Existing Patients
Month Ending - 3/31/2010



Printed By: lhardeman

1 of 2 100% Find | Next Select a format Export

All Patients Existing Patients **New Patients**

Clinical Dashboard - Ischemic Vascular Disease - Existing Patient Details

Abdurrahim, Shehetai - 0959

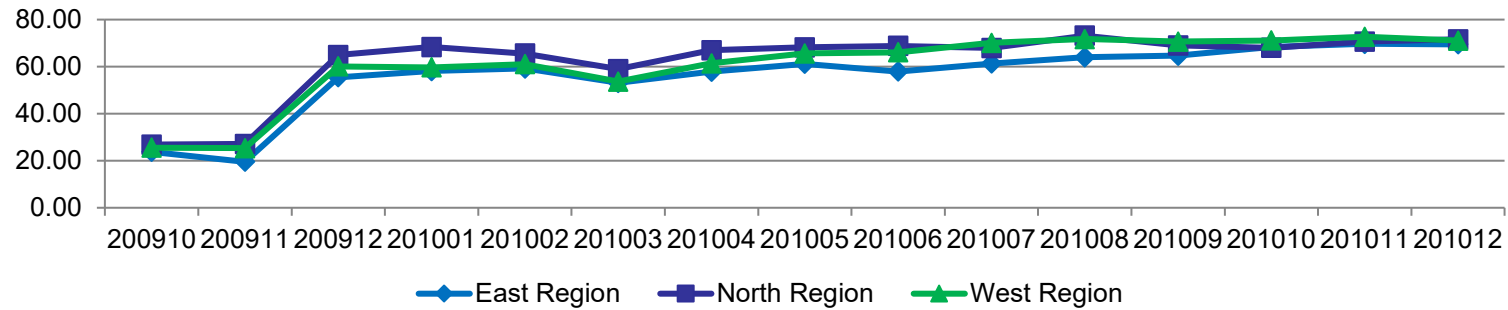
1/31/2011 - MTD

[Click to Return to Scoring Measures](#)

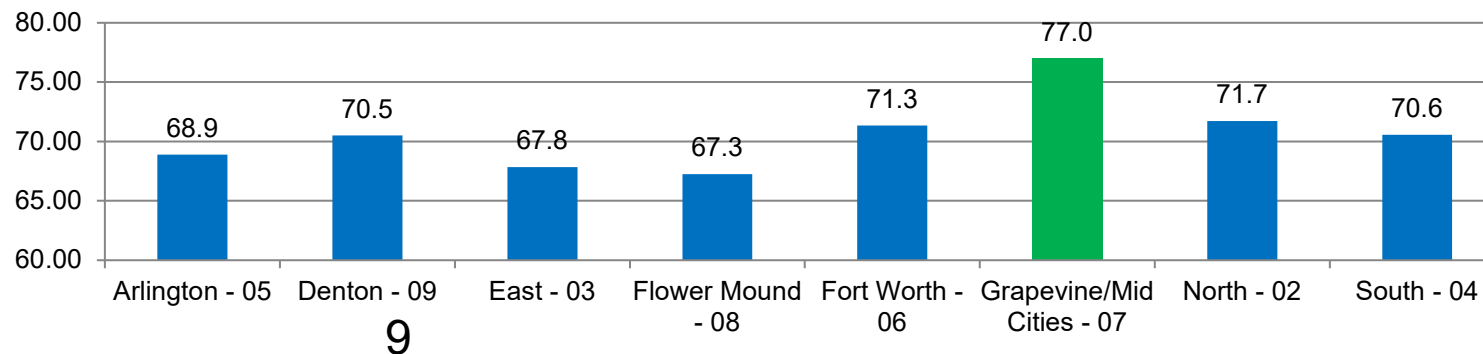
Patient	DOB	Account No.	Last Office Visit	BP	LDL	Lipid Profile	Aspirin Use or Other Antithrombotic	Smoking & Cessation Status Meets Criteria
			06/15/10	95/43 - 06/15/10	---	---	---	---
			10/21/10	127/67 - 10/21/10	---	---	---	EMR - Non Smoker/No To... - 10/21/10
			11/23/10	131/75 - 11/23/10	---	---	---	EMR - Non Smoker/No To... - 11/23/10
			04/20/10	145/70 - 04/20/10	---	---	MED - Plavix - 04/20/10	EMR - Tobacco Use Smok... - 02/17/10
			08/17/10	165/70 - 12/22/10	---	---	MED - Bayer Low Strength	EMR - Non Smoker/No To... - 12/22/10
			09/01/10	160/88 - 09/01/10	157 - 09/01/10	7600 Lipid Panel - 09/01/10	---	EMR - Non Smoker/No To... - 09/01/10
			11/17/10	150/86 - 11/17/10	136 - 11/01/10	7600 Lipid Panel - 11/01/10	---	EMR - Non Smoker/No To... - 11/17/10
			10/12/10	142/95 - 11/15/10	132 - 07/07/10	7600 Lipid Panel - 07/07/10	---	EMR - Non Smoker/No To... - 11/15/10
			11/19/10	146/71 - 11/19/10	109 - 08/06/10	7600 Lipid Panel - 08/06/10	---	EMR - Non Smoker/No To... - 11/19/10
			11/10/10	156/80 - 01/05/11	117 - 11/02/10	7600 Lipid Panel - 11/02/10	---	EMR - Non Smoker/No To... - 01/05/11
			08/26/10	139/91 - 09/29/10	140 - 08/27/10	7600 Lipid Panel - 08/27/10	---	EMR - Cessation - 09/30/10
			08/12/10	121/64 - 08/12/10	---	---	MED - Bayer Low Strength	EMR - Non Smoker/No To... - 08/12/10
			10/18/10	116/54 - 10/18/10	---	---	MED - Bayer Aspirin - 10/18/10	EMR - Non Smoker/No To... - 10/18/10
			06/17/10	123/62 - 06/17/10	---	---	MED - Plavix - 06/17/10	EMR - Cessation - 03/08/10
			09/29/10	125/58 - 09/29/10	---	---	MED - Aspirin Low Dose	EMR - Tobacco Use Form... - 09/29/10
			07/27/10	126/67 - 07/27/10	---	---	MED - Plavix - 07/27/10	EMR - Non Smoker/No To... - 07/27/10
			09/27/10	137/72 - 11/08/10	156 - 09/15/10	7600 Lipid Panel - 09/15/10	---	EMR - Cessation - 11/08/10
			11/01/10	146/84 - 12/08/10	402 - 10/27/10	7600 Lipid Panel - 10/27/10	MED - Bayer Low Strength	EMR - Cigarette Smoker... - 12/08/10
			09/14/10	151/41 - 09/14/10	156 - 09/10/10	7600 Lipid Panel - 09/10/10	MED - Aspirin-81 - 09/14/10	EMR - Non Cigarette Sm... - 09/14/10
			12/08/10	155/63 - 12/08/10	133 - 12/02/10	7600 Lipid Panel - 12/02/10	MED - Aspirin Low Dose	EMR - Tobacco Use Remo... - 12/08/10

Average Cardiac Care Scores

Avg Score Cardiac by Region



Average BTE Cardiac Score December 2010

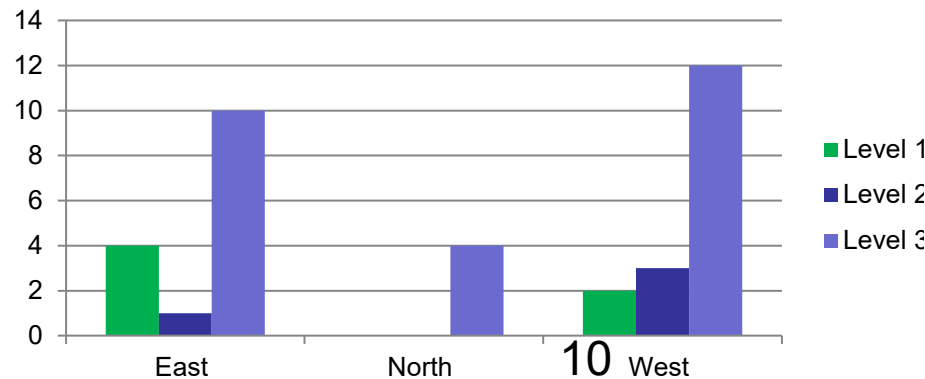


Clinical Recognitions – Diabetes and Cardiac and Cardiac

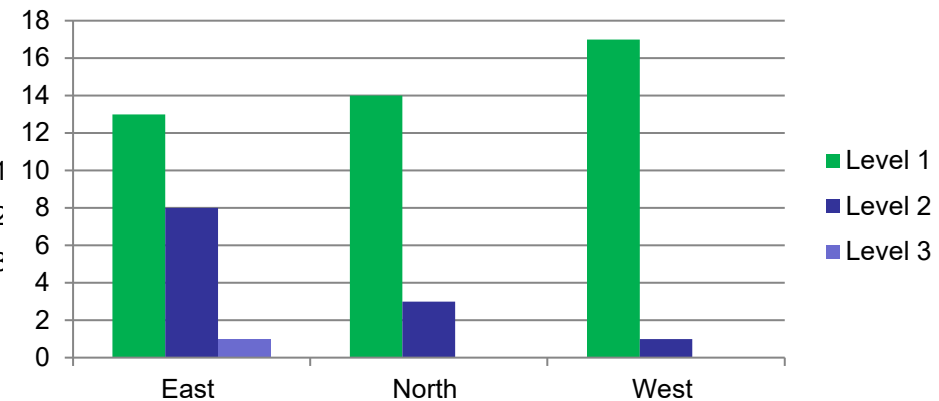
	Recognitions Cardiac			
	Level 1	Level 2	Level 3	
East	4	1	10	15
North	0	0	4	4
West	2	3	12	17
Total	6	4	26	36
	Recognitions Diabetes			
East	13	8	1	22
North	14	3	0	17
West	17	1	0	18
Total	44	12	1	57

187 on these two Recognitions

Cardiac Recognitions by Region

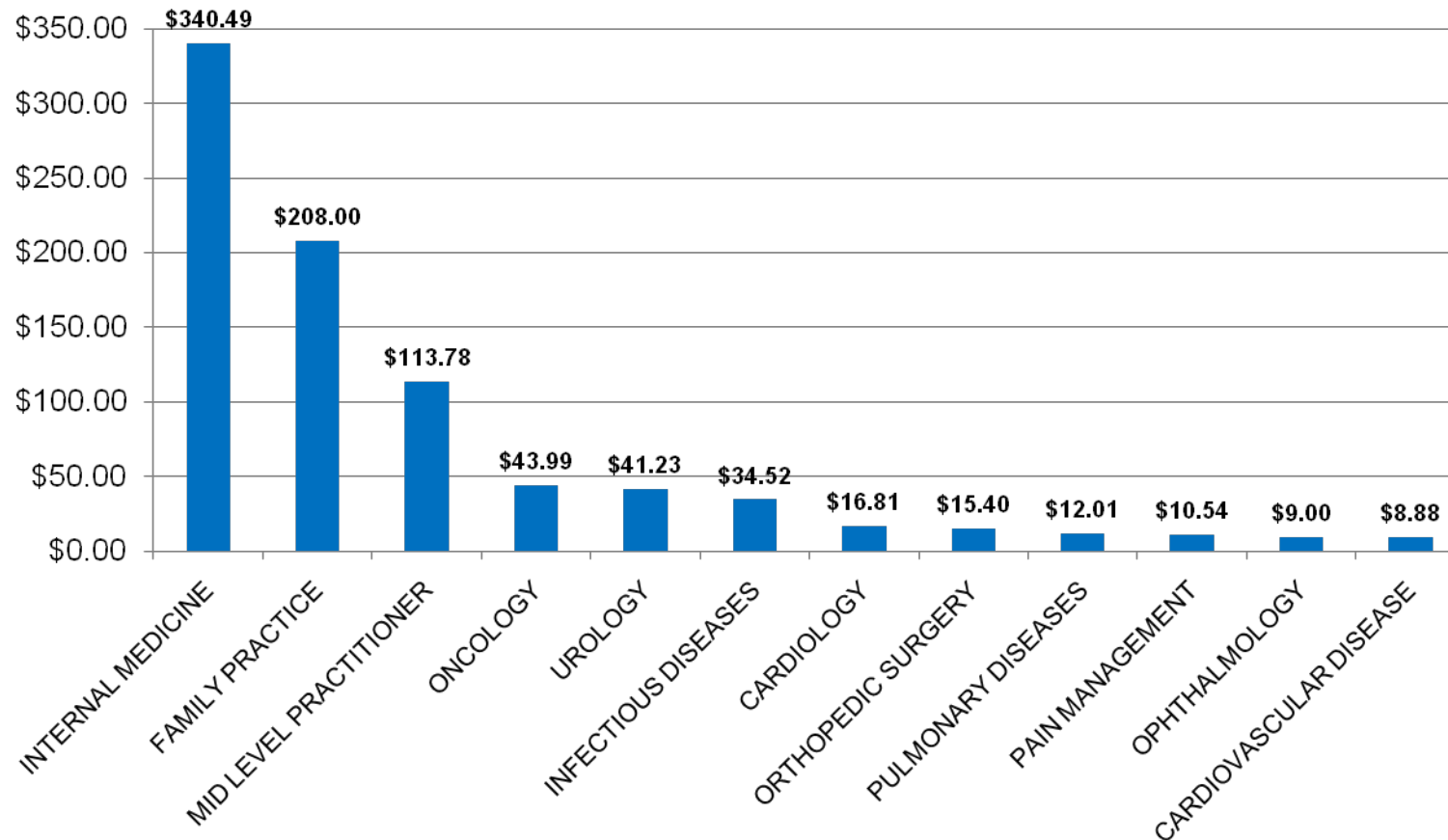


DM Recognitions by Region



PQRI Incentive Payment - 2010

Estimated Incentive Payment (in thousands)



Learnings

1. **Data leads to wisdom**
2. **Culture eats strategy for breakfast – must address!**
3. **Leadership and workflow are the key elements**
4. **Clinicians must trust their teams (takes time)**
5. **Everyone must work at the top of their license**
6. **Protocols = do not need expensive resource to achieve (stop using clinicians) = It is an insult and demoralizing to make clinician gap in care chasers**
7. **Diagnoses are an incomplete way to assess needs (HCC codes)**
8. **There must be a way to create a “whole person” perspective**

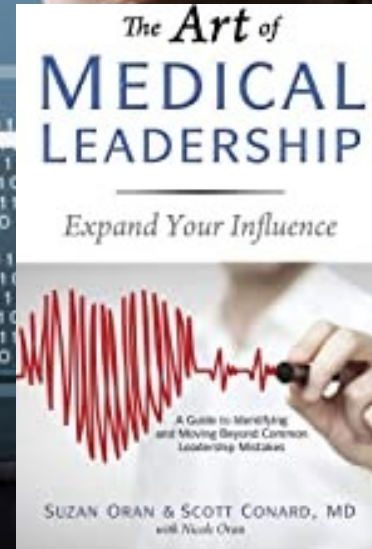
ANALYSIS

SCA
Converging Health™

Saving Money, Improving Lives

Shifting Culture

The Art of Medical Leadership



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Live Well. Stay Well.

Leadership Summary MediSys Advanced Primary Care Initiative

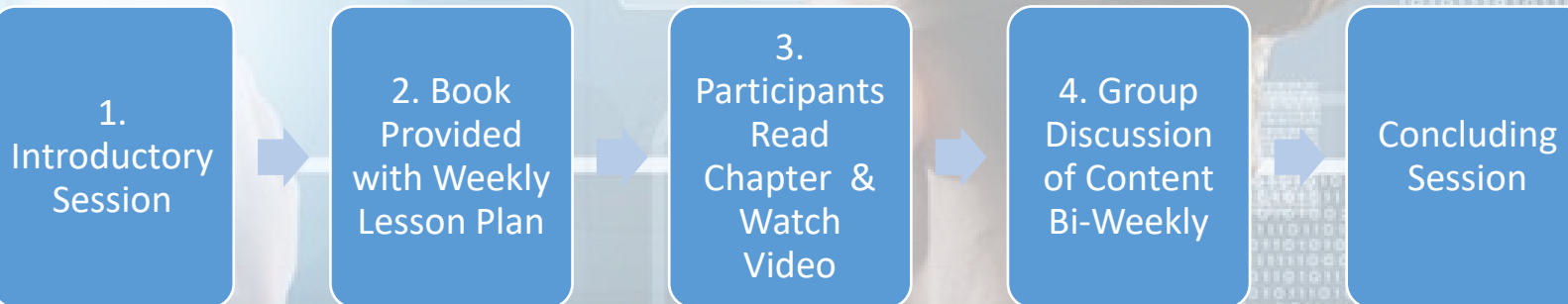
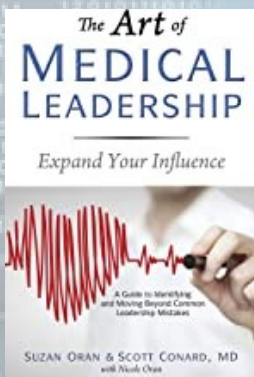
Working Smarter Not Harder – Getting Back to Clinical Excellence

Key Steps in the Process of Transforming Care

3



Mindset: Building the Empowerment Dynamic



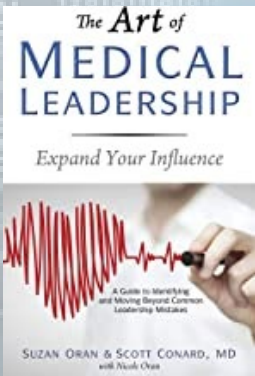
**The Art of Medical Leadership – 10 Week Leadership Course
Build Teams Focused on Performance**

Key Steps in the Process of Transforming Care

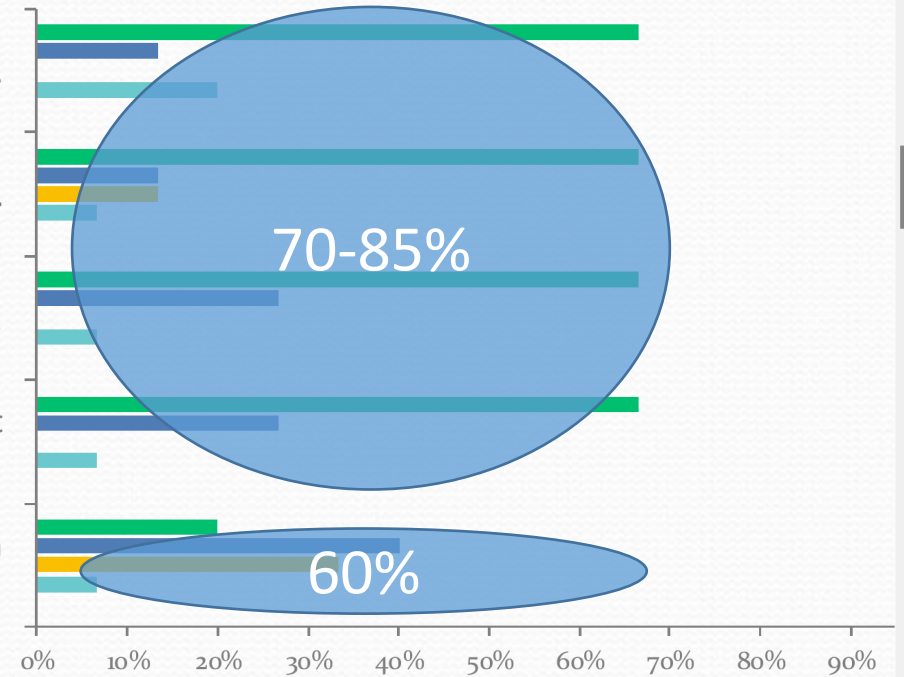
3



**Mindset: Building
the Empowerment
Dynamic**



- I think this introductory course was worth my time.
- I would like to take the full 10-week course.
- I believe this course would be valuable to my Center staff.
- I recommend that this course be made available to others at Jamaica and Flushing.
- I would be interested in becoming a course leader to teach The Art of Medical Leadership to others.



■ 1 - Strongly Agree ■ 2 - Agree ■ 3 - Neither agree or disagree ■ 4 - Disagree ■ 5 - Strongly Disagree

**The Art of Medical Leadership – 10 Week Leadership Course
Build Teams Focused on Performance**

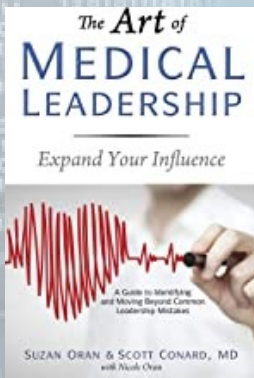
Key Steps in the Process of Transforming Care

3



Mindset: Building the Empowerment Dynamic

- Excellent. Chapter 6 really hits home. Thank you
- Really appreciated this time of reflection, learning and sharing at work. Feeling inspired.
- These 5 tools: Remind us that we have choices, make us think more about our mission and vision at work and why we chose this career, teach us how to be learner instead of knower; it helps make all of us less toxic and work more meaningful; Gives us the opportunity to have everyone be part of the team
- By implementing and applying some of what was learned to my workplace, it has created a more communicative and unity within the staff
- Excellent course; Excellent program
- Thank you for your time and energy – this is a crucial direction for the organization's betterment
- This is proof that Jamaica Hospital is committed to constant growth and improvement. Proud to be a team member here.
- Thank you so much for this highly valuable opportunity
- I would have loved to dive more deeply. I think these are valuable teachings and many in the organization would benefit from taking the course in a more engaged form.
- Wish we had solution to all the problems in the clinic



The Art of Medical Leadership – 10 Week Leadership Course
Build Teams Focused on Performance

ANALYSIS

SCA
Converging Health™

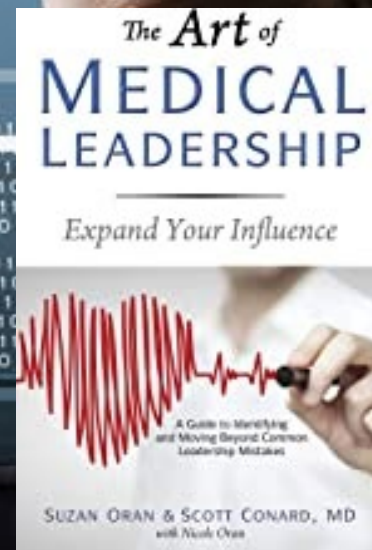
Saving Money, Improving Lives

The Whole Person Approach

The Whole Person Risk Score™™

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Live Well. Stay Well.

It is All About the Person Understanding & Engaging Them.....



Clinical Needs

Social
Emotional
Spiritual
Financial
Mindset
Resources
Benefits
Locus of Control
Motivation

With the Right Resources


Complexity

Well-Being Resources
Advocates – Guides -
Navigators
Benefits/Programs
Primary Care
Specialists
Facilities
Case Management
Care Coordination
Vendors




Clinical Needs

Social
Emotional
Spiritual
Financial
Mindset
Resources
Benefits
Locus of Control
Motivation
Resources



Creating Clarity, Focus, & Action

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- 
- **What Predicts Risk That Cannot Be Controlled?**
 - **What Can the Providers Drive?**
 - **What Must the Member Drive?**
 - **What are the Most Important Actions?**
 - **In what Order Should They Be Addressed?**

ANALYSIS

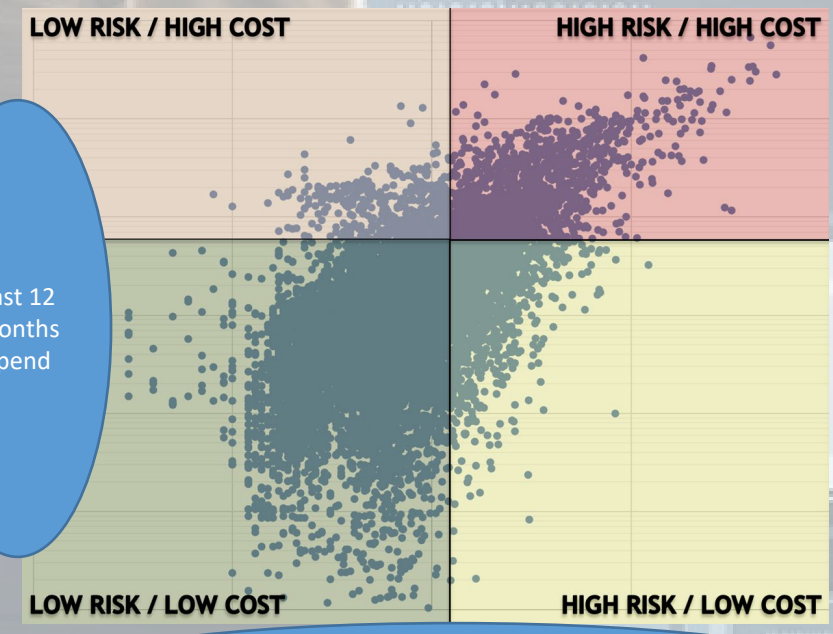
Medical Claims

Pharmacy Claims

Eligibility Data

EMR Data

Biometrics/Lab Data





Absolute Risk

- Age, Gender
- Socioeconomic, Income
- Conditions, Meds
- Complexity of Care

The Whole Person Risk Score™

How Are Healthcare Providers Serving the Patient??

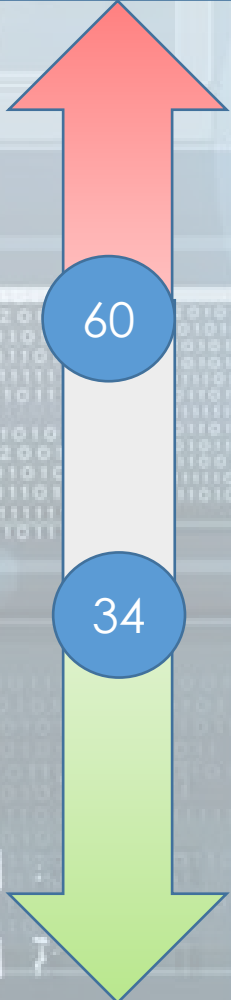
- Gaps in Wellness & Disease
Care
- Numbers to Goal
- Best Pathways in Care

How is Member Using the System (Flare Risk Score)?

- Compliance
- Mis-Steps
- Self Directed/Poor
Pathways

Understanding the Whole Person Risk Score™

Total Risk



Absolute Risk	Clinical Quality	Flares/System Utilization
<ul style="list-style-type: none"> High Risk/Multiple Conditions/Diseases (HCC) 3+ Providers & 5+ Medicines <ul style="list-style-type: none"> Complex Care Intensive Outpatient Care Needed 	<ul style="list-style-type: none"> Not Getting Needed Care Inappropriate or Absent Care Gaps in Care Prevalent 	<ul style="list-style-type: none"> Lost in the System ER/IP/Specialist Care w/o PCP Quarterback <ul style="list-style-type: none"> No Follow Up Reactive Care Medicine Noncompliance
<ul style="list-style-type: none"> More than 1 Condition Multiple Medications <ul style="list-style-type: none"> 1 – 3 Providers Constant Attention Needed Primary/Secondary/Tertiary Prevention Key 	<ul style="list-style-type: none"> Gaps in Preventive & Chronic Care Complex or Off Course Pathways 	<ul style="list-style-type: none"> Inconsistent Care Patient Unsure of Where to Go Lots of Specialist/ER/UC Visits Inconsistent Medications
<ul style="list-style-type: none"> Healthy Straightforward Conditions <ul style="list-style-type: none"> PCP is Key Primary/Secondary Prevention is Focus 	<ul style="list-style-type: none"> Getting Preventive & Chronic Care On Right Pathways of Care for Conditions (eg LBP, Migraines) 	<ul style="list-style-type: none"> Using the System Well <ul style="list-style-type: none"> PCP Directed Care Taking Medications Following Up Consistently

ANALYSIS

ANALYSIS

Last 12
Months
Spend

**Support Services for Navigation,
Coordination, & Best in Class Providers**

**Where NOT to Focus
Expensive Resources**

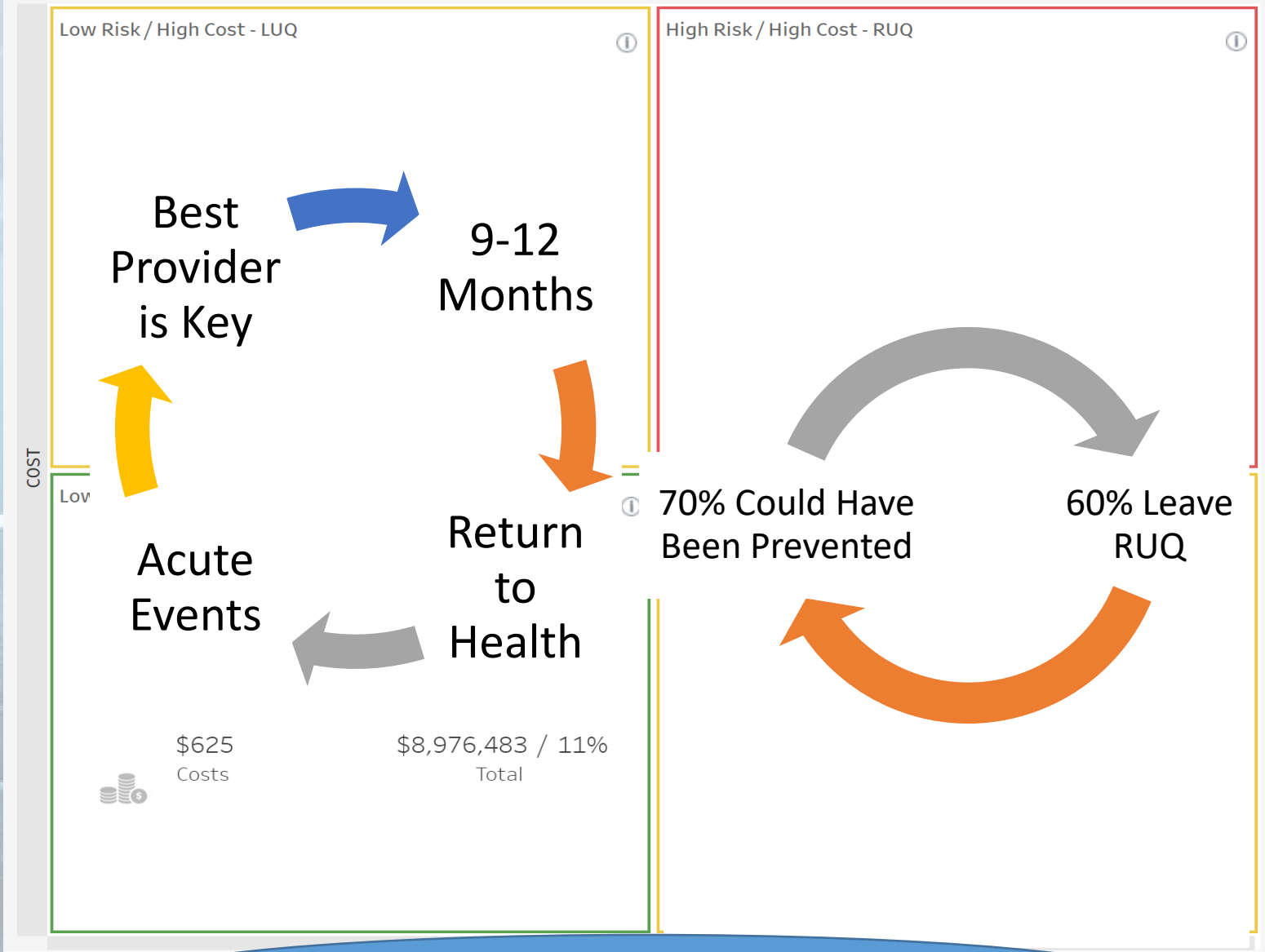
**Leverage Point
for Future Cost
Avoidance**

LOW RISK / LOW COST

HIGH RISK / LOW COST

Whole Person Risk Score™

Last 12 Months Spend



**Understand
How Risk
Changes Over
Time
& How It Is
Different By
Risk Level**

Whole Person Risk Score™

A high-angle photograph of a large, diverse crowd of people at a conference or event. The crowd is dense and fills most of the frame. In the center, there is a white text box with a black border containing the title 'Intelligent Data' and a bulleted list of four questions. Five white arrows with black outlines point from this text box to different sections of the crowd: one points left, one points right, one points down-left, one points down, and one points down-right. The background shows a large indoor space with structural beams and some stage equipment.

Intelligent Data

- Whom to engage
- What to do
- In what order?
- With what resource/vendor?



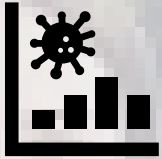
Converging Health Advanced Primary Care Transformation



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Key Workstreams in the Process of Transforming Care



1

Data Integration & Risk Stratification



2

Clinic Structure & Flow Transformation



3

Mindset: From FFS to Patient Health Risk Management



4

System Support for Clinic Transformation

5

**Pathways of
Care &
Specialist
Integration w
Clinics**



Leadership Summary MediSys Advanced Primary Care Initiative

Working Smarter Not Harder – Getting Back to Clinical Excellence

Key Steps in the Process of Transforming Care

1



Data Integration & Risk Stratification

Specialist Centric

- Must keep Patients in MediSys System
- If not PCP Attached – High Cost, Multiple Specialists, Going Elsewhere

Keep the Low-Risk Low-Cost Pts Healthy

- Annual Exam
- Acute Care
- MSK
- Obesity management
- Asthma
- Mental Health Services

Get High-Risk Low-Cost Pts w PCP

- High Value Visits w Care Plan
- Focus on Prevention of Complications
- Reduce # who migrate to RUQ (70% Possible)
- Prioritize Visits w RLQ Patients

The Advanced Primary Care Initiative

Standardized Reporting Ready to Begin. Whole Person Risk Score™ on Storyboard in EPIC, Out of MediSys Analysis & Reporting Developed

1. Get Metrics Reported Annually to All Clinics 2. Create Inspiring Competition 3. Increase Actions Focused On Reducing Risk (HVVs, proactive outreach, aggressive follow up)

PRE-VISIT WORKFLOW

Clinical Roles and Responsibilities

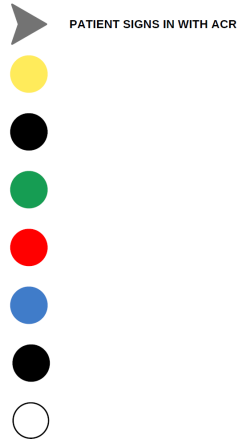
Purpose: Transforming our team-based care model by optimizing the patient experience with their PCP. Our goal is to engage our patients by creating an environment that will allow the patient and their caretakers/families to be part of the visit. The below process will be followed for all visits.

AMBULATORY CARE REGISTRAR (ACR)

PATIENT ACCESS REPRESENTATIVE (MEDICAL ASSISTANT)

Patient Appointment Flow

Purpose: As the patient moves through the Care Center, a colored dot is applied to their chart. To signal the next step in the patient's care and alert the appropriate team member. This process not only ensures a completed healthcare process while the patient is in the exam room, but higher patient satisfaction.



PATIENT WALK-IN/SAME DAY POLICY



HIGH RISK PATIENT PROTOCOL FOR SCHEDULING

FOR PATIENTS CALLING FOR 20 MIN APPOINTMENT:

Clinical Roles and Responsibilities

Purpose: Transforming our team-based care model by optimizing the patient experience with their PCP. Our goal is to engage our patients by creating an environment that will allow the patient and their caretakers/families to be part of the visit. The below process will be followed for all visits.

PATIENT NAVIGATORS

LPN/RN

IN-BASKET PROCESS

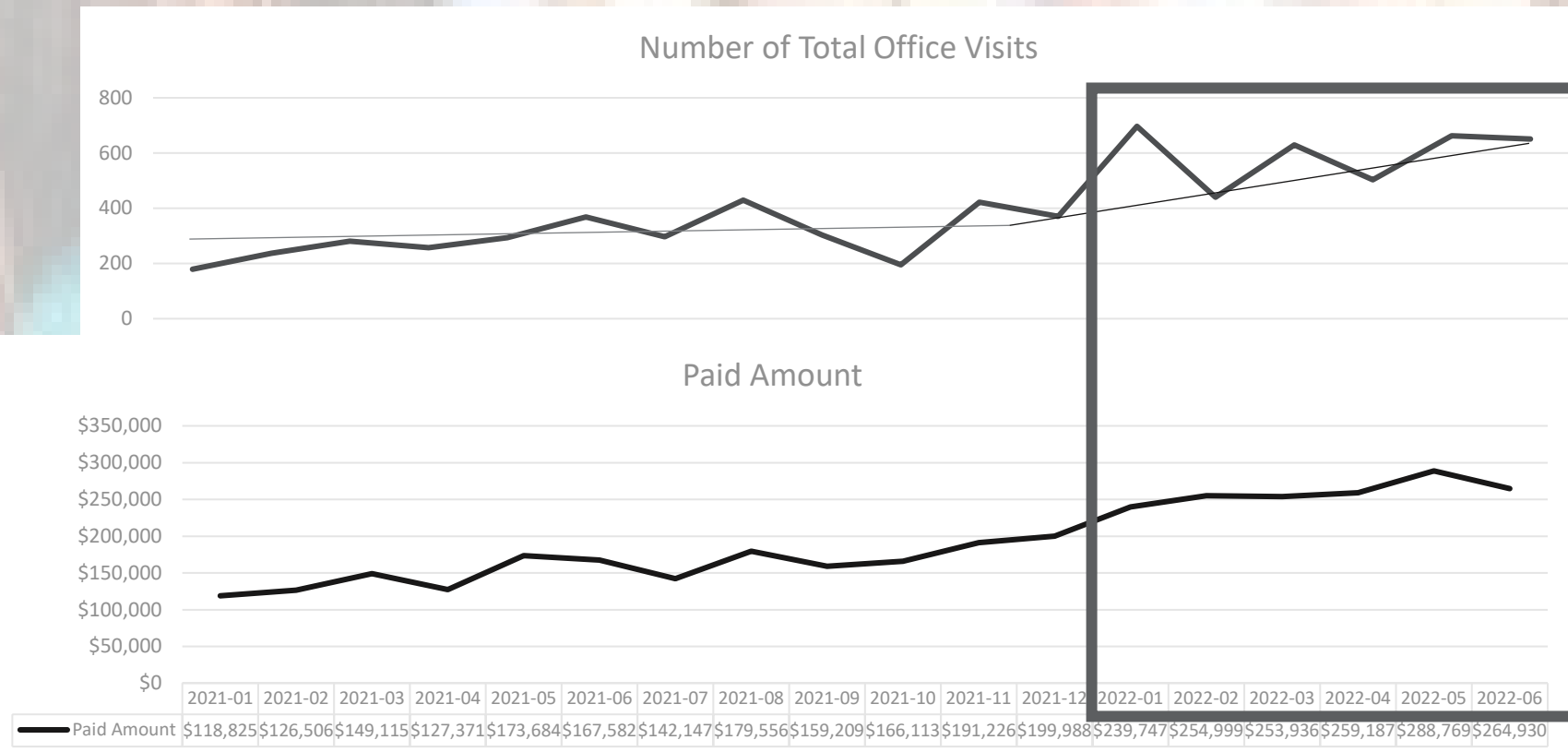


END OF VISIT WORKFLOW



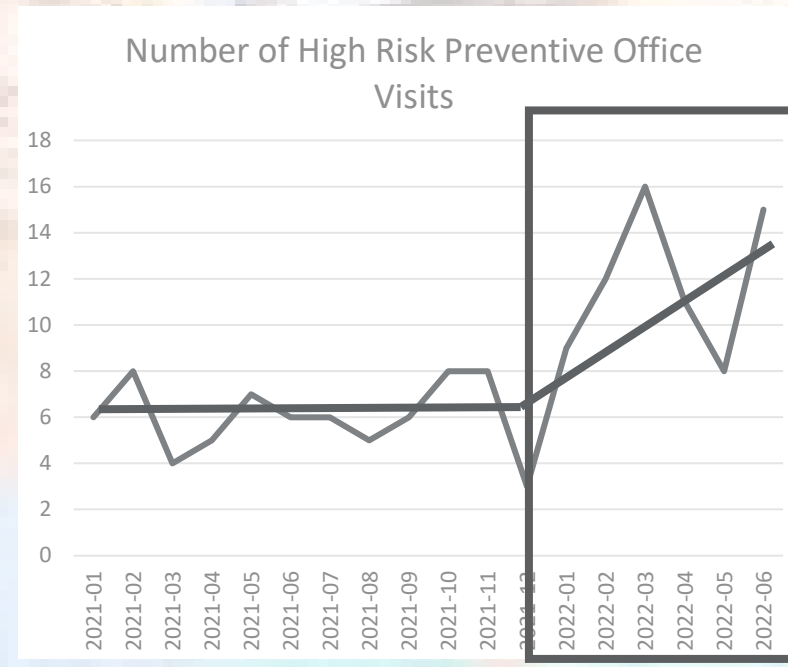
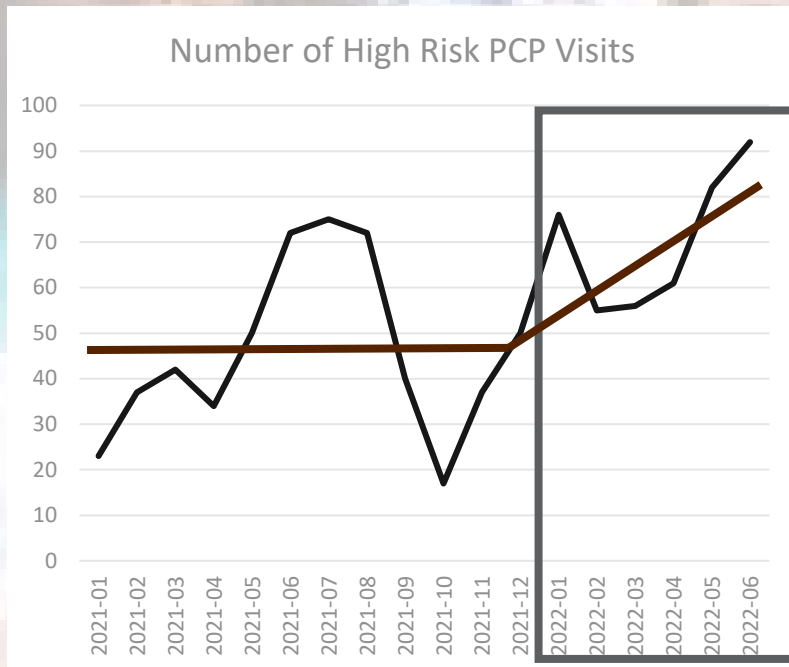
Pilot

Maintaining Volume: Increased Revenue (Work)



Pilot

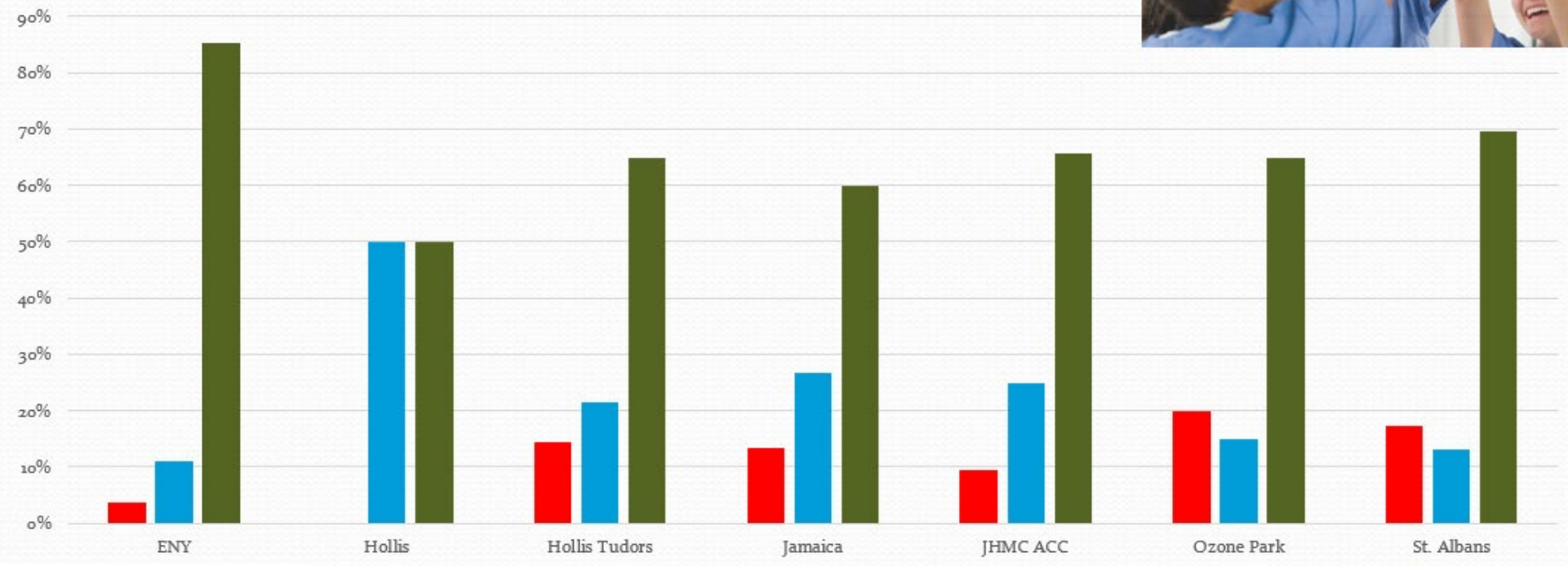
Maintaining Volume: Increased Revenue



Staff Satisfaction

How Much I Enjoy My Work

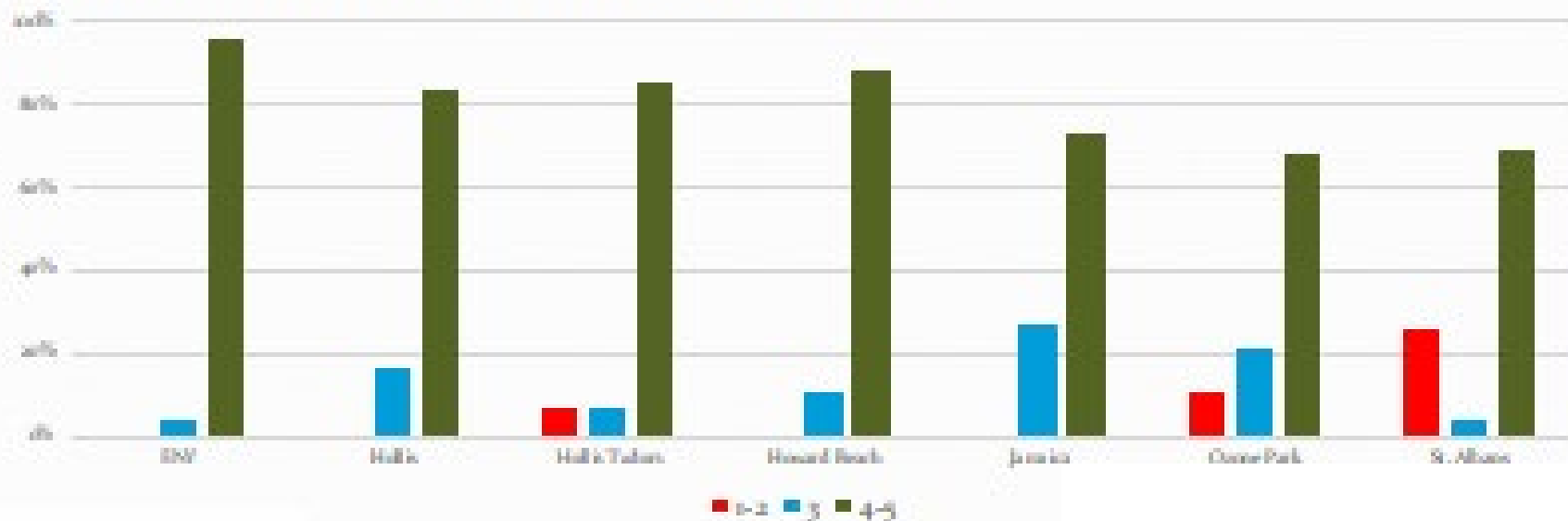
On a scale of 1 – 5, with 1 being worse, and 5 being better, how has your work changed in these areas in the last three (3) months?



Staff Satisfaction

The Clinic's Ability to Care for Patients

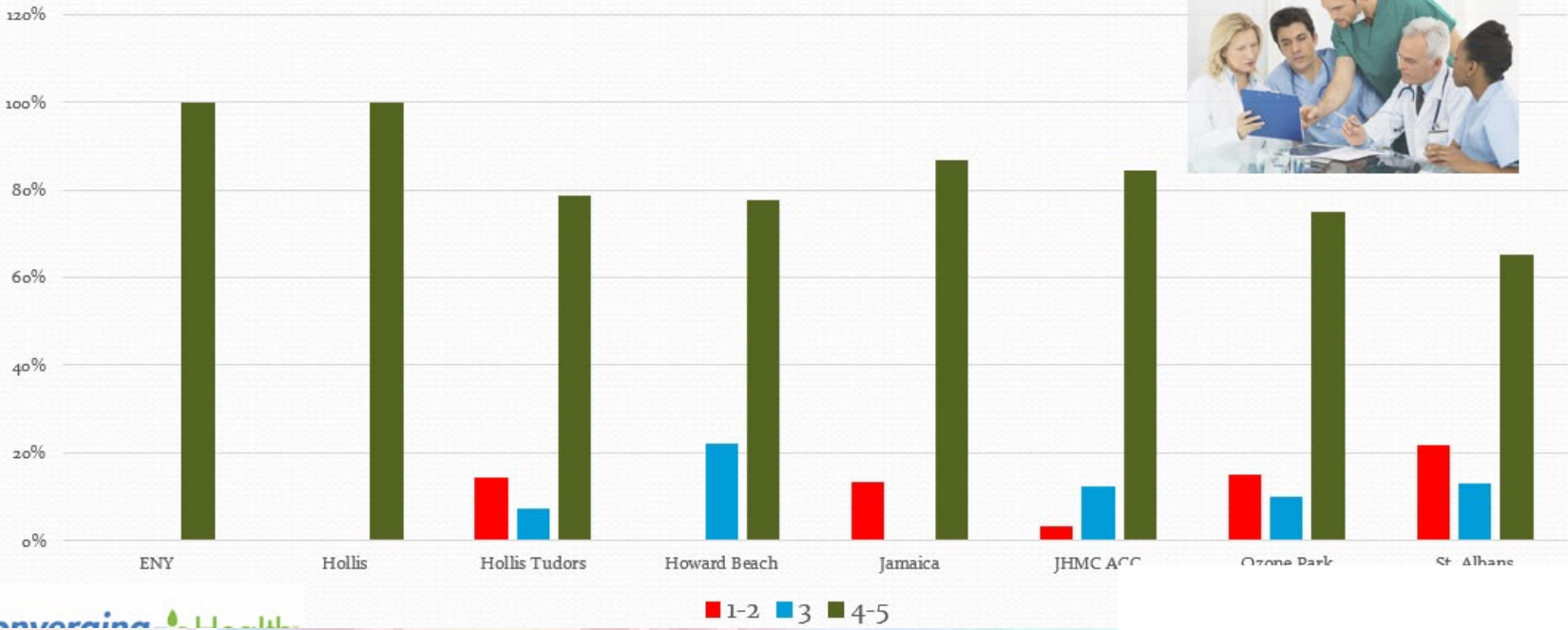
On a scale of 1 – 5, with 1 being worse, and 5 being better, how has your work changed in these areas in the last three (3) months?



Staff Satisfaction

My Sense of Working on a Team to Care for Patients

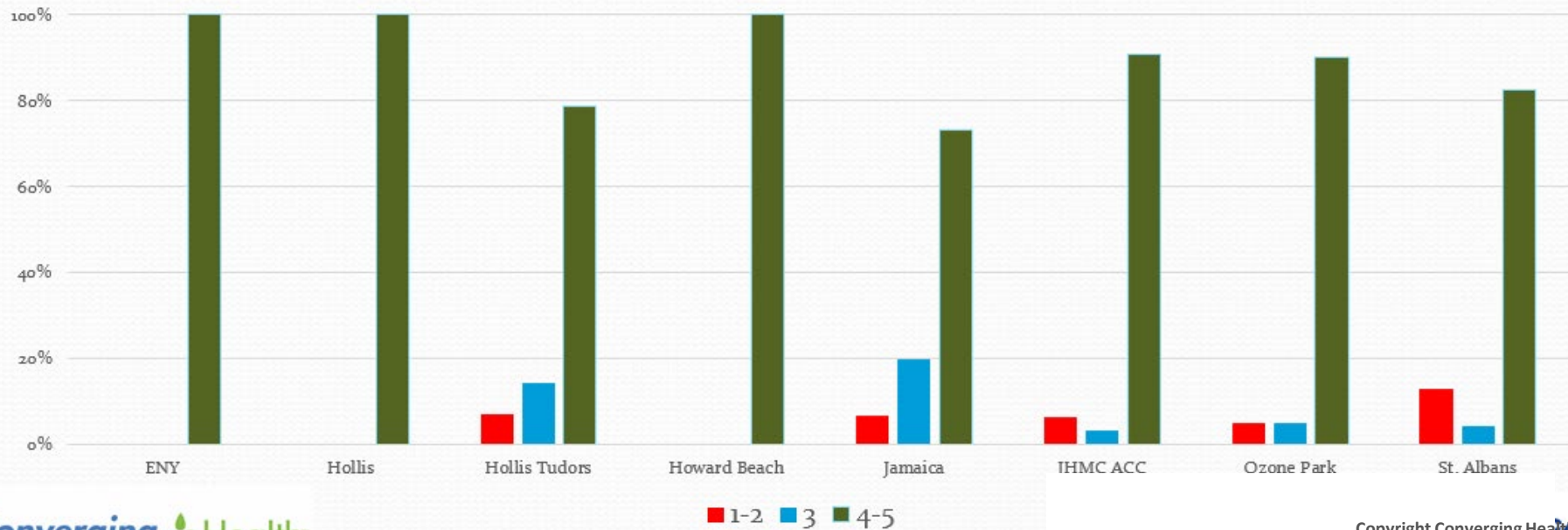
On a scale of 1 – 5, with 1 being worse, and 5 being better, how has your work changed in these areas in the last three (3) months?



Staff Satisfaction

The Feeling that I am Making a Difference in the Lives of the Patients We Serve

On a scale of 1 – 5, with 1 being worse, and 5 being better, how has your work changed in these areas in the last three (3) months?



All for one Dis

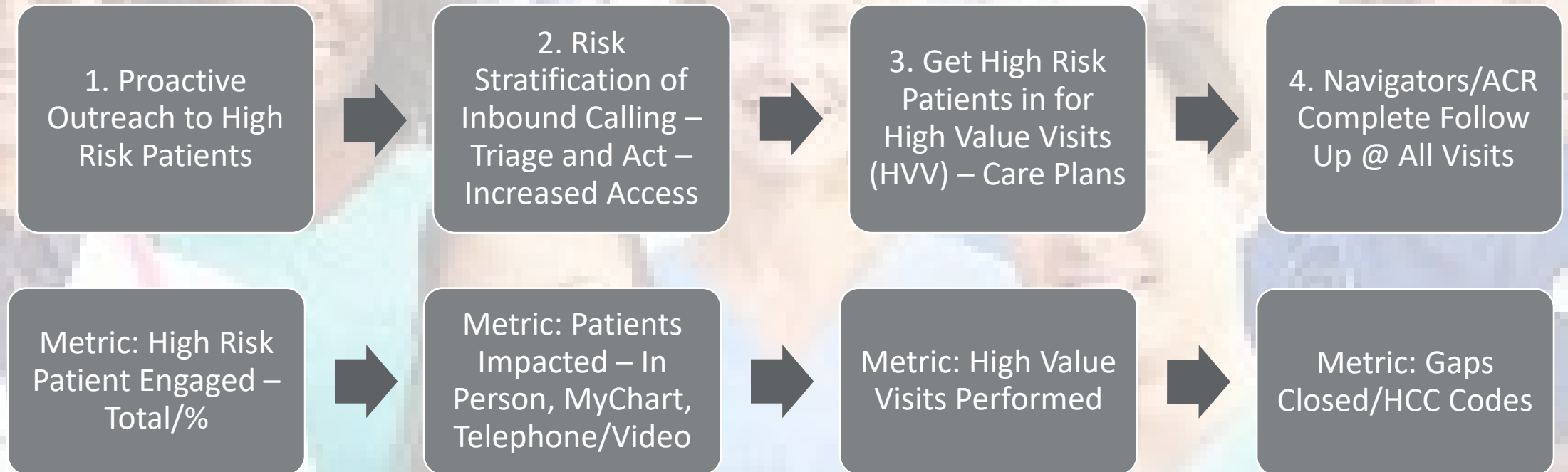
BELIEVE

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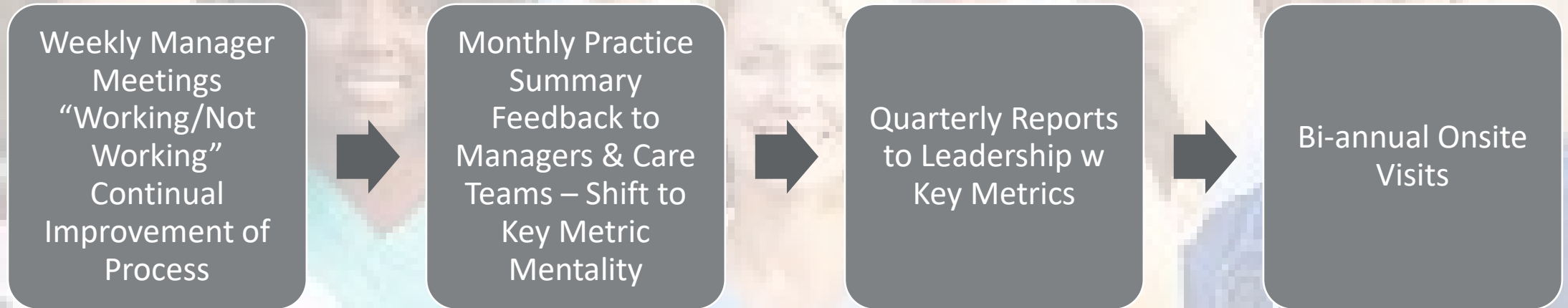
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Shift Happens

2023: Shifting from Pilots to Production: Advanced Primary Care



The Operational Pulse 2023: Advanced Primary Care



Converging Health Workflow

ANALYSIS

APPLIED CONTROLS

Reporting Date : 2023-01

Assigned PCP Name : All

Assigned I

Assigned PCP NPI : All

Assigned PCP Speciality : All

Practice Summary Report

% Of Assigned Panel Seen

	01-2023	Last 12 Months
Number of Patients Seen by Assigned PCP	3,795	19,712
Total Assigned Panel Size	36,704	36,704
% Of Assigned Panel Seen	10%	54%

% of High Risk Patients Seen

	01-2023	Last 12 Months
High Risk Patients Seen with Office or Telemedicine Visits	1,381	6,478
Total Numbers of High Risk Patients	16,459	16,459
% Of High Risk Patients Seen	8%	39%

% of High Risk Patients with High Value Visits

	01-2023	Last 12 Months
High Risk Patients Seen having High Value Visits	113	537
High Risk Patients Seen with Office or Telemedicine Visits	1,381	6,478
% Of High Risk Patients Seen with High Value Visits	8%	8%

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Gaps in Care for Patient Population

Preventive Exams

Reporting Date : 2023-01

	Member Count	Total Members	Percentage
Age 19 – 39 Years with Preventive Visit in Last 12 Months	7,136	21,717	33%
Age 40 – 64 Years with Preventive Visit in Last 12 Months	8,358	20,517	41%
Age 65+ Years with Preventive Visit in Last 12 Months	1,992	4,783	42%

Cancer Screening

Reporting Date : 2023-01

	Member Count	Total Members	Percentage
Age 50 – 75 Years with Colorectal Cancer Screening	4,343	13,314	33%
Women Aged 21 – 65 Years with Recommended Cervical Cancer Screening	4,795	20,340	24%
Women Aged 50 – 74 Years with Mammogram in Last 24 Months	5,267	8,308	63%

Immunizations

Reporting Date : 2023-01

	Member Count	Total Members	Percentage
Annual Flu Vaccination	19,869	68,541	29%
Pneumonia Vaccination	836	4,783	17%
Tetanus Vaccination	9,505	69,010	14%

Diabetes

Reporting Date : 2023-01

	Member Count	Total Members	Percentage
Annual Dilated Eye Exam	1,774	6,050	29%
Annual Foot Exam	2,806	6,050	46%
Annual HgA1c	4,741	6,050	78%

HCC Capture Rate

Total HCC Score Gap Sum	1570
Total Sum of HCC Potential Score	2,000
HCC Capture Rate	79%

Converging Health Consulting Service



Provide assessment of readiness to move to an advanced primary care model



Leadership training to support transformation



Site Visits with Team Trainings



Action Plan Development



**Data Analytics
Performance Indicators and Data
Quantitative Data
Qualitative Data**

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