



Improving Care Delivery with Data:

Strategies for Retention, Access, and VBC

Today's Speakers



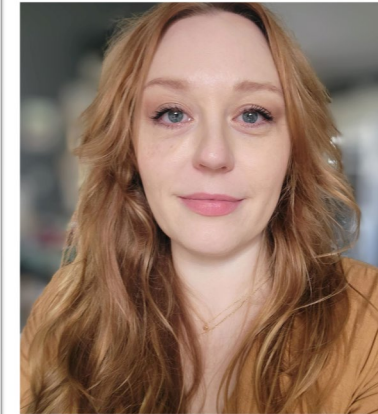
Holly Wirth

SVP of Practice
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Travis Simar

VP of Population
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Tech Director,
Ambulatory Practice
Management

Agenda

1. Access

Using data to optimize workflows and eliminate bottlenecks

2. Retention

Enhancing care delivery through network development and proactive patient coordination for service line optimization

3. Value-Based Care

The catalyst to improve outcomes, reduce costs and drive to higher value based contracting performance



Access Excellence

Leveraging Analytics to Transform Patient Access, Provider Capacity, and Schedule Optimization

Audience Poll

Within your organization what are the most critical data points you utilize to track your ambulatory access?

A

TNAA

B

Physician Productivity

C

Template Utilization

D

Referral Leakage

Access Overview

What are common ways health systems utilize data to measure access to care?



Current Access Status



Changes in Access Trends



Schedule Utilization

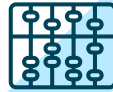


Greatest Access Challenges

What are the industry best practice analyses that drive improvements in patient access to care?



How effectively are you utilizing your schedule templates?



How do different appointment types affect scheduling?



Is the right level of service being provided by the right licensed practitioner?



How do scheduling disruptions impact access?



How can improved scheduling processes impact the flow?

What measures and methods are leading-edge health systems utilizing to manage capacity?



What is the current capacity utilization?



Where are capacity constraints?

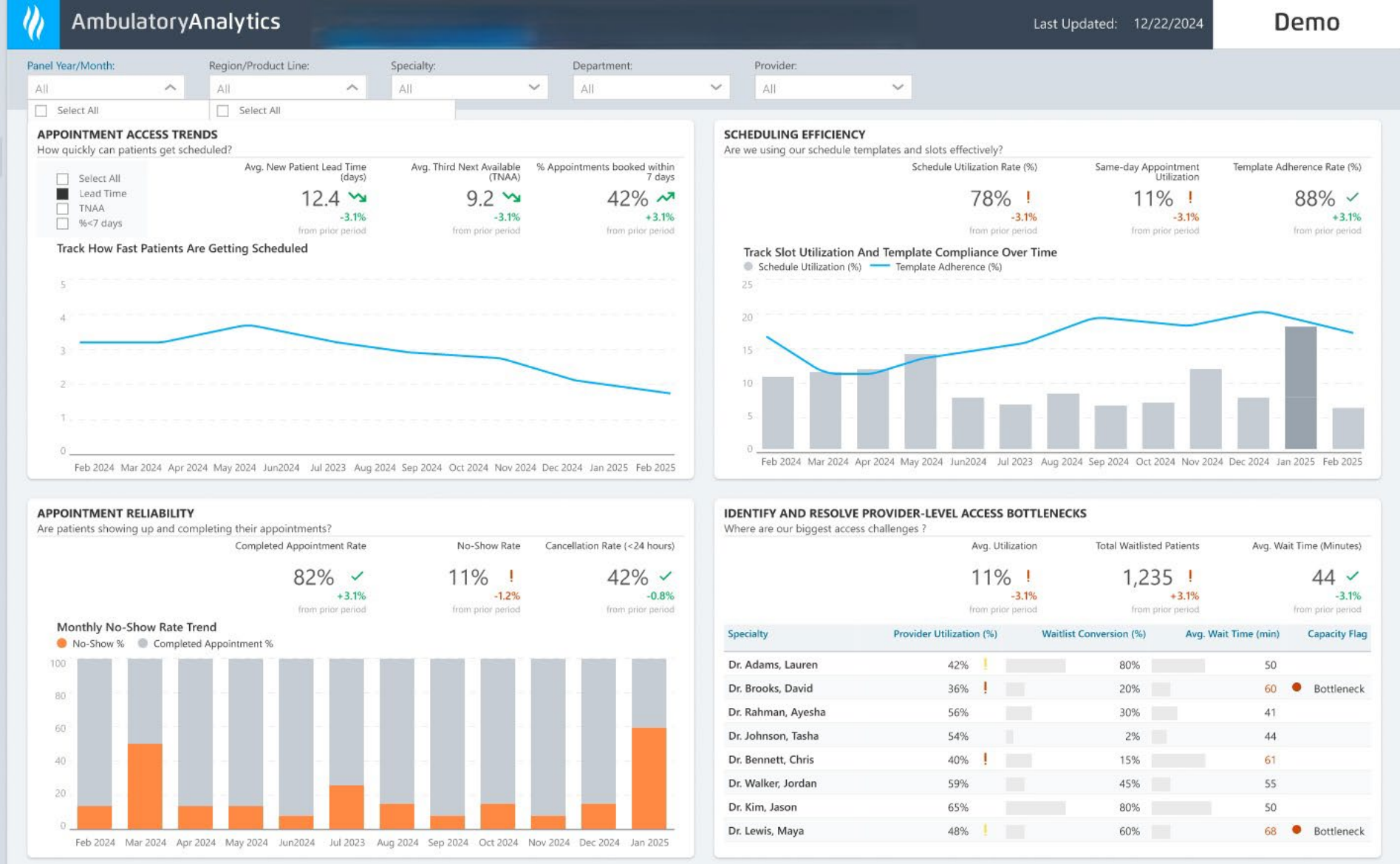


How does current demand compare to available capacity?



How can data help optimize clinic capacity?

Access Management





Retention

Enhancing care delivery through network development and proactive patient coordination for service line optimization.

Audience Poll 2

Within your organization what is the primary data measure utilized for service line growth and development, and strengthening referral networks?

A

Referrals In

B

Referrals Out

C

Provider Panel Complexity

D

Diagnostic Volumes to Specialty Referral Rates

E

Referral to Procedure Conversion Rates

F

Identification for Patient Care Gaps

What are the most important variables for measuring and managing patient panels?



Are panels growing, shrinking or are they stable?



Are panels appropriately sized for the current capacity?



What is the composition of each panel?

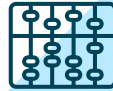


What are the priorities for the panels?

What measures would you track to understand patient utilization?



How frequently are patients accessing care?



How are patients engaging across different channels?

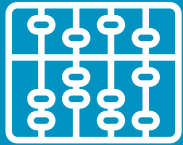


What access patterns exist?



How effective are patients transitioning sites of care?

Is there an effective way to ensure patients receive all the appropriate care they need?



How is risk distributed across the panels?



Where are there care gaps and how effectively are they being addressed?

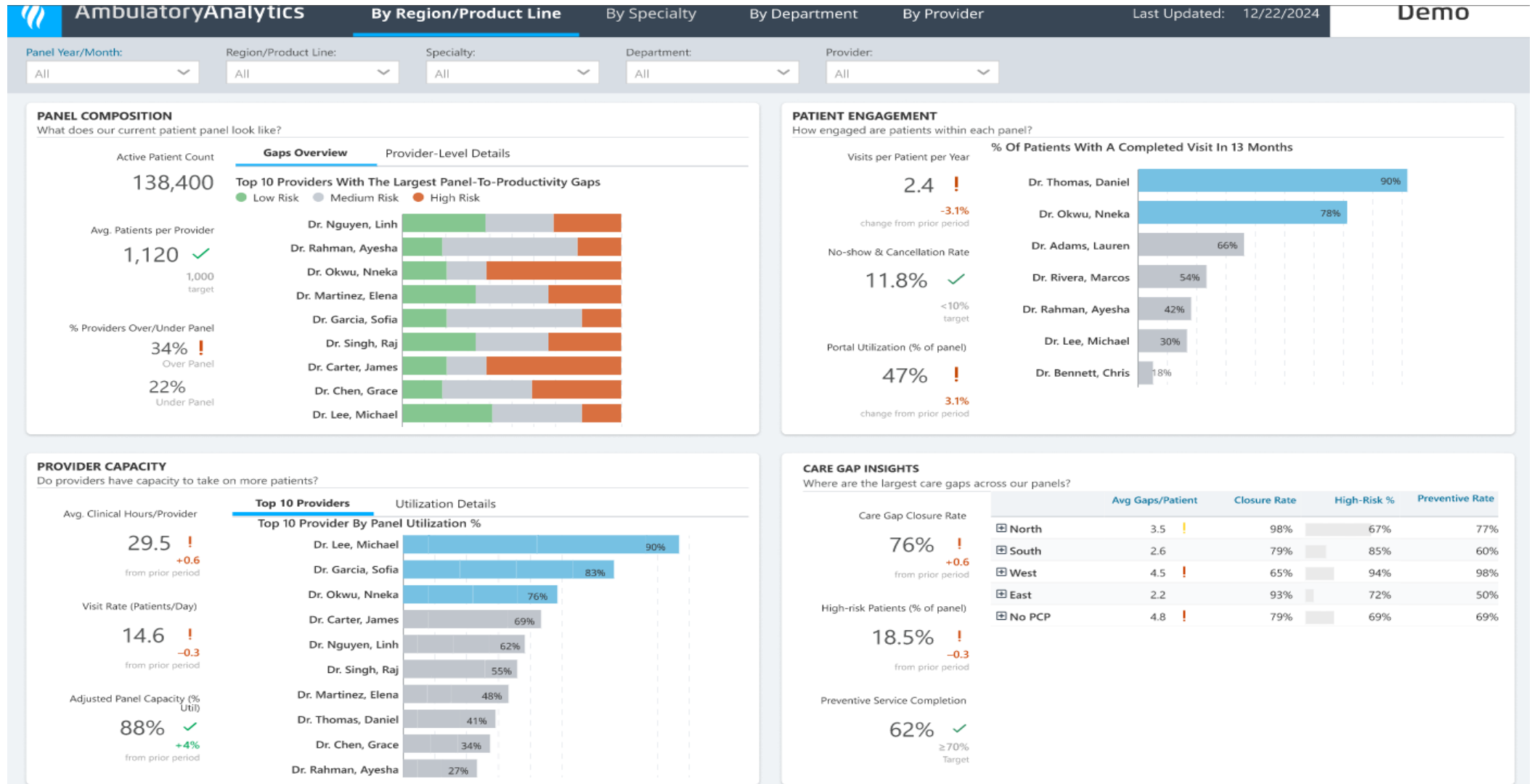


Which patient segments needed targeted interventions?



How effective are implemented population health strategies?

Panel Management



Are there industry best practice insights into referral management that you can share?



How efficient and effective is our referral process?



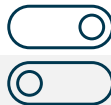
How are the referral patterns trending?



Where are our biggest referral opportunities?



Which specialties have outmigration?



What factors affect referral conversion?

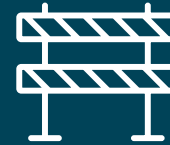


Where are our referral bottlenecks?

What are insights that can be used to capture the downstream opportunity from primary care?



Which service lines need development?



What access barriers drive network leakage?

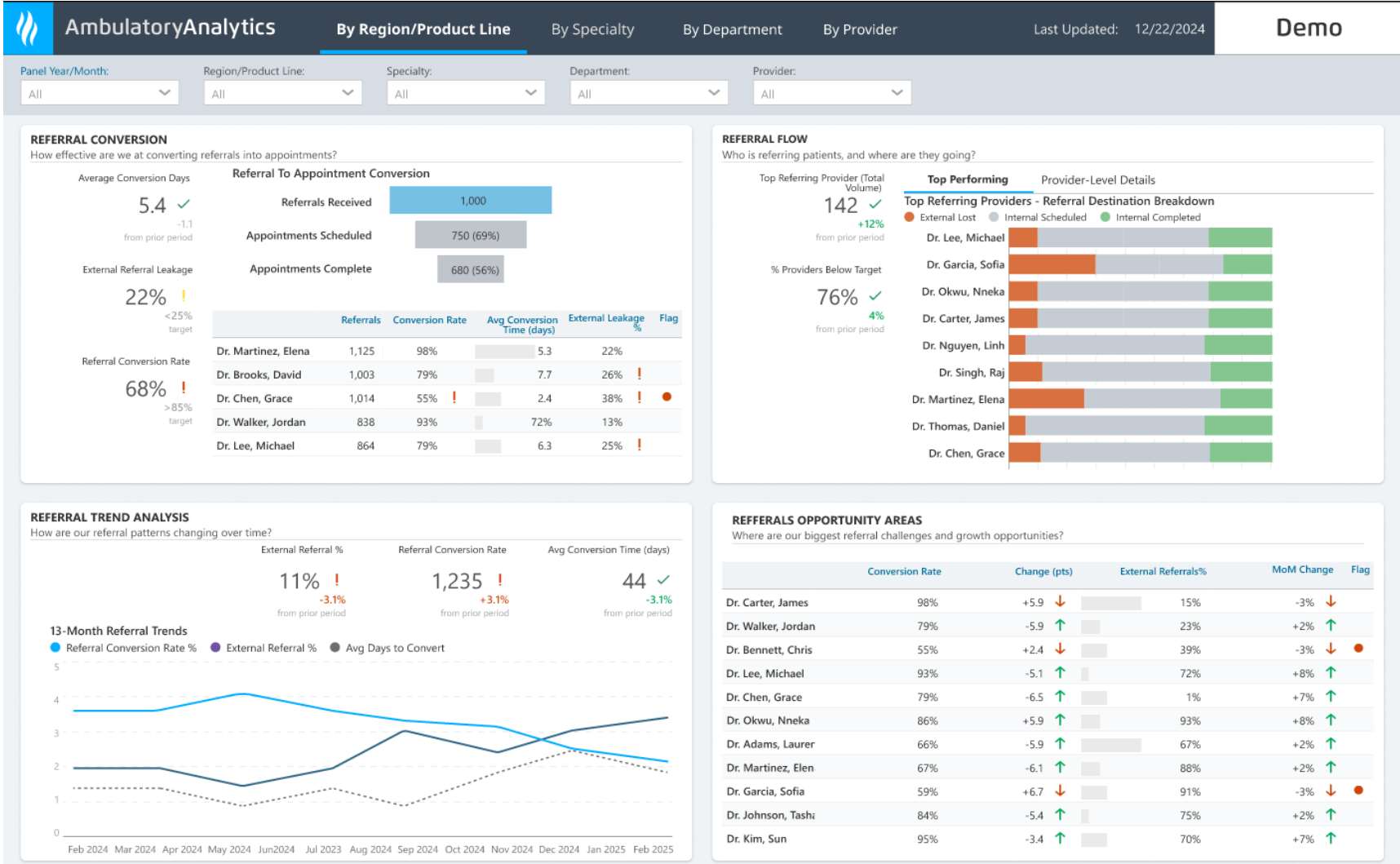


Which external relationships are most significant?



What strategic initiatives would improve network performance?

Referral Management



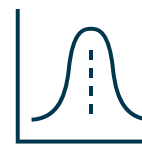
Can data help drive better patient triage for care to be provided at the appropriate license and location?



What is our conversion rate of referral to procedure?



What is our procedural volume and mix?



How efficiently are we delivering diagnostics and interventions?



How effectively are we adhering to clinical protocols?

Audience Poll 3

Within your organization, what metrics do you use to measure success in retention?

A

Referral Leakage

B

Referral Conversion

C

Clinical Outcomes

D

Patient Experience

E

Downstream Revenue



Value-Based Care

The catalyst to improve outcomes, reduce costs and drive to higher value based contracting performance.

Audience Poll 4

Where is your organization on their journey to Value Based Care?

A

Majority Fee for Service Reimbursement

B

A Handful of Procedure Specific Risk-Based Contracts

C

A Segment of Patients on Full-Risk Contracts

D

Majority of Patients are on Risk-Based Contracts

E

Formal Accountable Care Organizations

How can we optimize financial performance and quality care delivery?



Are we improving quality of care outcomes?



Are we improving cost & utilization in care delivered?

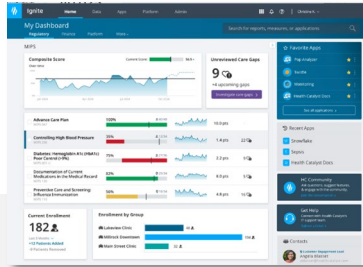


How efficiently is the network utilized?

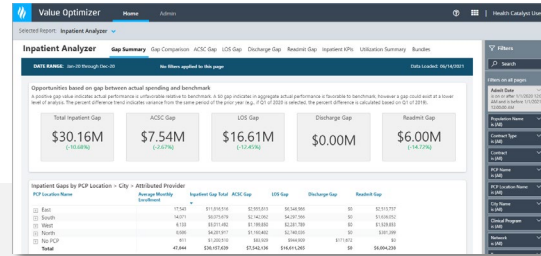


How are we performing in our VBC contracts?

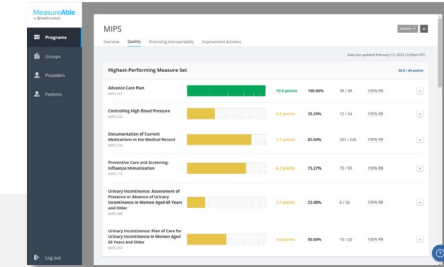
Value-Based Care Solutions



Ignite Data & Analytics
Driving Massive, Measurable Improvement



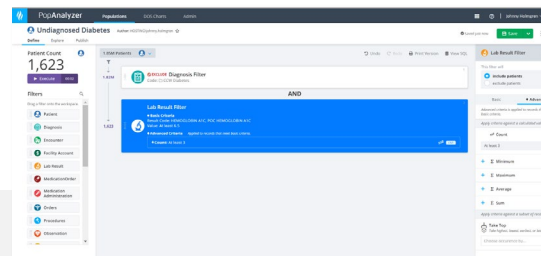
Value Optimizer
Optimizing Your Value-Based Care Strategy



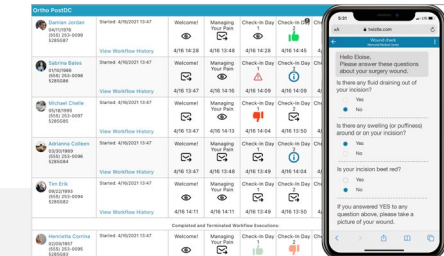
MeasureAble
Reducing Time Spent Managing Quality Data



Dashboards & Scorecards
Providing Organizational Strategic Plan Performance Management



Pop Analyzer with ACG
Quickly Defining Custom Populations



Workflow Solutions
Patient Acquisition & Retention, Capacity & Workflow Automation, and Clinical Engagement & Orchestration

Questions?

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