

BETTER CARE IS ELEMENTAL.

Clinical Integration: The 1st Step to Accountable Care

Presented by:
Lori Fox Ward, RN, BSN
Vice President, Clinical Integration

Valence 
Health

January 20, 2011

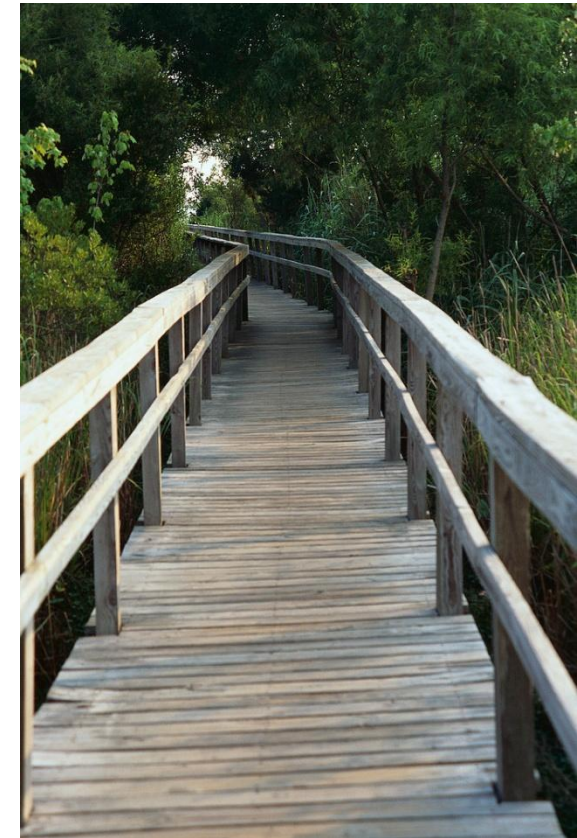
Today's Speaker



- **Lori Fox Ward, Vice President of Clinical Integration Services. Ms. Ward has been with Valence since its formation in 1996, and her primary role involves development, execution, and sales of Valence Health's clinical integration solutions. Ms. Ward is a registered nurse with clinical experience in the fields of orthopedics, neurology and geriatrics. She has over 20 years of experience in the managed care industry working with providers, health plans and employers.**

Where We'll Go Today

- **Challenges in Health Care**
- **Meeting the Challenge through Clinical Integration**
 - What is it?
 - How does it work?
 - How do you get there?
- **The Path to Accountable Care**





Challenges in Health Care Delivery

- Providers are facing less revenue and more expense
- Pressures to “Bend the Trend”
- Focus on paying for *value, not volume*
- Reduce errors, inefficiency and waste
- Facilitate evidence-based medical practice
- Support coordinated, integrated care delivery



Ways to Meet the Challenge

- High degree of coordination between physicians, hospitals and other providers
- Deliver the right care in the right place at the right time:  Quality  Cost
- Performance demonstrated through quality metrics

Clinically Integrated Entities Fit the Model

Clinical Integration

- **Organized Provider Group that:**
 - Agrees on how care should be provided
 - Measures actual performance
 - Compares actual to agreed upon performance
 - Addresses providers that do not meet standards
- **When sufficiently developed, allows independent physicians to negotiate contracts collectively**

Another definition



- “... an active and ongoing program to evaluate and modify practice patterns by the network’s physician participants and create a **high degree of interdependence and cooperation** among the physicians to control costs and ensure quality.”

*Taken from Statement of Antitrust Enforcement Policy in Health Care,
FTC & DOJ, August 1996*

Key Elements of Clinical Integration

- Understand the environment and culture
- Physicians must lead the charge

Communicate! Motivate! Participate!

- Access to data across the continuum
- Evidence-based clinical protocols and metrics
- Meaningful reports to identify areas for improvement
- Proactive management tools to support efficient, better coordinated care



Approaches to Getting Data

- **From the Payors**
- **From Practice Management Systems**
- **From Paper Medical Records – Manually Build Patient Registries**
- **Participate in Health Information Exchange**
- **Common Electronic Health Record**



Using Information to Improve Quality

- **Performance reports**

- Compliance with clinical guidelines & metrics
- Comparison to peers and benchmarks
- Identification of areas for improvement

- **Care Management tools**

- Disease registries
- Point of care tools
- Alerts & reminders
- Patient outreach and education



Overall Performance – Clinical Guidelines

Persistent: CIDemo

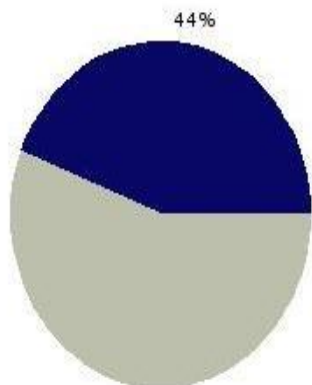
CI Snapshot

Shared: CIDemo

Guideline Compliance Results

Current Reporting Period: April 1, 2008 - March 31, 2009

% of Guidelines Meeting Compliance Goal
Current Reporting Period



Met Target? ■ Above Target ■ Below Target

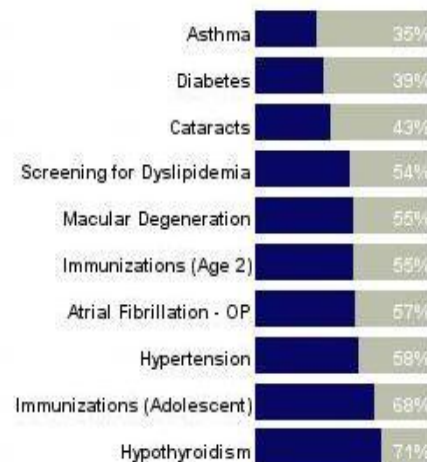
Based on individual guideline-specific targets.

Top 10 Guidelines
(as Ranked by % of Compliant Patients)



(Move mouse over bar to view details.)

Bottom 10 Guidelines
(as Ranked by % of Compliant Patients)



Figures reflect guidelines with at least 25 eligible patients.
(Move mouse over bar to view details.)

Overall Inpatient Performance

Hospital Quality Report

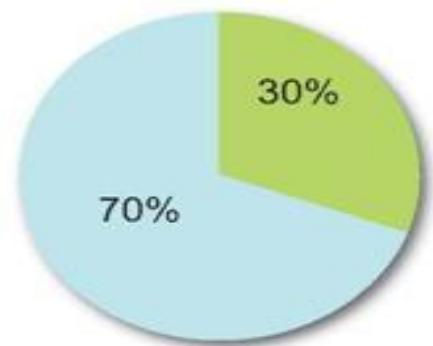
Date Report Produced: October 14th, 2009

Time Period: Jan-Dec 2008

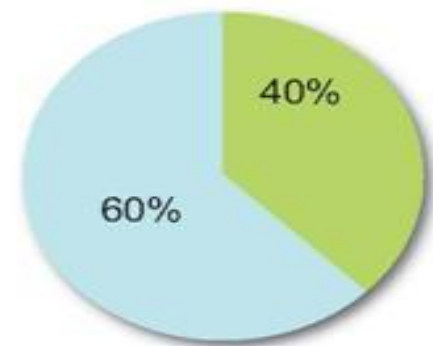
Core Measures Readmission Rates

Core Measures	Number of Patients	Number of Readmissions	30-day Readmission Rate	US National Average	Number of Readmissions with Follow-up visits	Number of Readmissions without a follow-up visit
Acute Myocardial Infarction	454	118	26%	20%	35	83
Pneumonia	1,241	360	29%	25%	144	216
Heart Failure	1,426	471	33%	18%	165	306

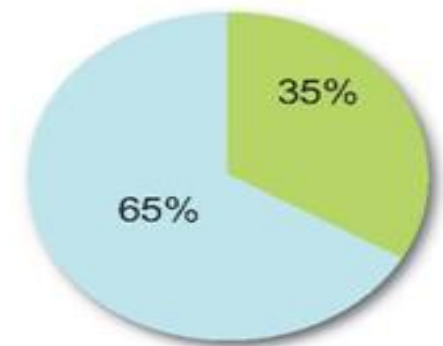
Percentage of Core Measure Readmissions with a 30-day Follow-up Visit Documented



Acute Myocardial Infarction
 ■ Readmissions with an office visit after initial discharge
 ■ Readmissions without an office visit after initial discharge



Pneumonia
 ■ Readmissions with an office visit after initial discharge
 ■ Readmissions without an office visit after initial discharge



Heart Failure
 ■ Readmissions with an office visit after initial discharge
 ■ Readmissions without an office visit after initial discharge

Compliance Summary by Physician

Provider Level Summary

Submeasures

Practice Level Summary

Providers by Eligible Member Range

Providers by Compliance Range

Guideline Report

All Quartiles

Subset

Diabetes - All Quartiles Cldemo

[Export to Excel](#)

Current Reporting Period: April 1, 2008 - March 31, 2009

Overall Compliance for Diabetes : 39%

Click on Physician to View Patient Compliance Details

Provider Name (Click Provider to View Patients)	Compliant	Eligible	% Compliant	Compliance Indicator	Previous Compliant	Previous Eligible	Previous % Compliant
ALEXANDER, TIMOTHY	44	98	45%		47	90	52%
ANDERSON, KALAHN	0	1	17%		0	1	0%
AUSTIN, BRENNNA	38	100	38%		45	92	49%
BARRY, ADDISYN	1	6	14%		1	3	39%
BASHIR, KRISTA	10	16	59%		0	0	0%
BEARD, JODI	109	191	57%		85	183	46%
BENASH, JORDAN	63	169	37%		32	81	40%
BISBACH, JAMES	172	338	51%		182	316	58%
BOELKES, KYLEIGH	12	27	44%		0	0	0%
BORAY, BAKHTAWAR	117	277	42%		92	207	44%
BROWN, LISA	32	120	26%		28	96	29%
BUNTING, RICHARD	19	62	30%		13	39	33%
BURTON, KATE	66	157	42%		60	145	41%
BUTCHER, CURTIS	20	47	42%		16	36	44%
CAMPO, BARBARA	0	1	17%		0	0	0%
COY, LANE	1	5	27%		1	7	17%
DANIELS, ALLISON	9	28	33%		0	0	0%
DAVIDSON, JAMES	19	55	35%		18	43	42%
DAWSON, JORDAN	34	82	41%		21	54	38%
DENMAN, JAMES	24	52	45%		18	38	48%
DONNDELINGER, CHRISTINA	11	19	58%		6	15	37%
DUNHAM, CHELSEA	1	3	28%		0	0	0%
EDWARDS, TERI	24	54	44%		24	41	58%
ENGELS, JEAN	12	27	43%		10	18	53%
FANNING, ASHLEY	14	49	28%		5	18	30%
FARRAR, LEWIS	14	42	34%		10	26	37%

Performance on Key Metrics by Physician

Provider Summary

Submeasure Results

Practice Summary

Provider Profile

Submeasure Results - All Providers

Provider Name	Eligible	Eye Exam	HbA1c	Influenza Immunization	Lipid Profile	Microalbumin	Office Visit
All Providers	8,139	11%	34%	35%	41%	24%	89%

Submeasure Results by Provider

Show 25 entries Search:

Provider ID	Provider Name	Eligible	Eye Exam	HbA1c	Influenza Immunization	Lipid Profile	Microalbumin	Office Visit
	All Providers	8,139	11%	34%	35%	41%	24%	89%
1003883968	GERSBACH, DENNIS	123	10%	21%	44%	32%	30%	80%
1013965987	WOOLVERTON, CYNTHIA	81	11%	43%	30%	31%	59%	96%
1013967322	HART, TAYLOR	8	13%	50%	13%	75%	50%	100%
1023011467	ZIEGLER, ARAYNA	122	0%	2%	46%	1%	2%	94%
1023067311	WILSON, MARGARET	11	0%	9%	0%	27%	0%	36%
1023127891	OATES, CINDY	10	10%	10%	20%	0%	30%	60%
1033143227	HENRY, THOMAS	34	0%	24%	44%	41%	9%	88%
1033195680	MOMOT, BRIAN	53	4%	26%	40%	19%	17%	85%
1063464741	PHILLIPS, JORDAN	36	14%	33%	19%	81%	56%	83%
1073526463	THOMPSON, THOMAS	59	10%	36%	19%	56%	19%	81%
1073562393	KELSEY, LISA	1	0%	0%	0%	0%	0%	0%
1073563821	NIEMEIER, JACOB	3	33%	0%	0%	33%	33%	33%
1083662050	LARSON, GERT	4	0%	50%	25%	75%	50%	75%
1093766420	JONES, ROBERT	5	0%	0%	20%	80%	60%	60%
1124078357	ENGELS, JEAN	27	11%	37%	26%	48%	52%	85%
1134122617	SCHNEIDERMAN, DEREK	123	0%	59%	51%	1%	4%	94%
1144271610	NICHOLS, JILL	3	0%	33%	0%	67%	0%	0%
1144336223	JEWELL-SHELL, CRAIG	39	41%	62%	0%	62%	33%	90%
1144439456	DUNHAM, CHELSEA	3	0%	100%	0%	33%	0%	33%
1154370385	ZASTROW, AMY	168	4%	57%	51%	66%	7%	91%
1154482024	KOBER, SHIRLEY	3	67%	0%	0%	0%	0%	33%
1164470670	MISFELDT, LACEY	24	38%	33%	25%	58%	29%	92%
1174522148	MAIER, BROOKS	3	67%	33%	0%	100%	67%	100%
1174526511	MOOTZ, AMY	63	0%	11%	32%	2%	0%	98%

Showing 1 to 25 of 134 entries



Individual Physician Performance Report

Sharon Fawcett, M.D.

Guideline Results *Vision*© by Valence

<< Back to Main Page

Guideline Summary

Patient Overview

Current Compliance Rates by Guideline

Click a guideline from the table below to view detail on currently eligible patients.

Guideline	Compliant	Eligible	% Compliant	Compliance Indicator	Previous Compliant	Previous Eligible	Previous % Compliant
Acute Low Back Pain	25	27	93%	<div style="width: 93%;"></div>	6	11	55%
Acute Pharyngitis	8	22	36%	<div style="width: 36%;"></div>	3	17	18%
Asthma	1	1	67%	<div style="width: 67%;"></div>	0	0	0%
Atrial Fibrillation - OP	1	5	20%	<div style="width: 20%;"></div>	0	2	0%
Diabetes	21	59	35%	<div style="width: 35%;"></div>	18	46	38%
Heart Failure - CHF	3	4	63%	<div style="width: 63%;"></div>	1	2	50%
Hypertension	87	119	73%	<div style="width: 73%;"></div>	76	96	79%
Hypothyroidism	20	26	77%	<div style="width: 77%;"></div>	13	17	76%
Immunizations (Age 6)	2	2	83%	<div style="width: 83%;"></div>	0	0	0%
Osteoarthritis Knee	1	1	100%	<div style="width: 100%;"></div>	0	0	0%
Screening for Dyslipidemia	300	381	79%	<div style="width: 79%;"></div>	240	359	67%

Showing 1 to 11 of 11 entries

Key Reporting Notes

- Current Reporting Period: January 1, 2009 - December 31, 2009
- Previous Reporting Period: January 1, 2008 - December 31, 2008

Performance Comparison to Peers

IPA Compliance Comparisons

The table below compares the current compliance rate for your patients by guideline to the current IPA average.

Guideline	Results Group	Current Compliance	Indicator
Acute Low Back Pain	Your Patients	93%	<div style="width: 93%;"></div>
Acute Low Back Pain (All Providers)	All IPA Providers*	86%	<div style="width: 86%;"></div>
Acute Pharyngitis	Your Patients	36%	<div style="width: 36%;"></div>
Acute Pharyngitis (All Providers)	All IPA Providers*	83%	<div style="width: 83%;"></div>
Asthma	Your Patients	67%	<div style="width: 67%;"></div>
Asthma (All Providers)	All IPA Providers*	35%	<div style="width: 35%;"></div>
Atrial Fibrillation - OP	Your Patients	20%	<div style="width: 20%;"></div>
Atrial Fibrillation - OP (All Providers)	All IPA Providers*	57%	<div style="width: 57%;"></div>
Diabetes	Your Patients	35%	<div style="width: 35%;"></div>
Diabetes (All Providers)	All IPA Providers*	39%	<div style="width: 39%;"></div>
Heart Failure - CHF	Your Patients	63%	<div style="width: 63%;"></div>
Heart Failure - CHF (All Providers)	All IPA Providers*	79%	<div style="width: 79%;"></div>
Hypertension	Your Patients	73%	<div style="width: 73%;"></div>
Hypertension (All Providers)	All IPA Providers*	58%	<div style="width: 58%;"></div>
Hypothyroidism	Your Patients	77%	<div style="width: 77%;"></div>
Hypothyroidism (All Providers)	All IPA Providers*	71%	<div style="width: 71%;"></div>
Immunizations (Age 6)	Your Patients	83%	<div style="width: 83%;"></div>
Immunizations (Age 6) (All Providers)	All IPA Providers*	96%	<div style="width: 96%;"></div>
Osteoarthritis Knee	Your Patients	100%	<div style="width: 100%;"></div>
Osteoarthritis Knee (All Providers)	All IPA Providers*	76%	<div style="width: 76%;"></div>
Screening for Dyslipidemia	Your Patients	79%	<div style="width: 79%;"></div>
Screening for Dyslipidemia (All Providers)	All IPA Providers*	54%	<div style="width: 54%;"></div>

Showing 1 to 22 of 22 entries

*Reflects providers with same data submission method only.

Diabetes Registry with quality metrics – “ACTION LIST”

Guideline: Diabetes

[\(Click here to review guideline specifications\)](#)

Responsible Provider - FAWCETT, SHARON

Current Reporting Period: April 1, 2008 - March 31, 2009

[Return to Prior Report](#)

[Export to Excel](#)

Cells shaded in yellow signify that the date stated made the patient compliant for that specific sub-measure. Dates in cells that are not shaded identify the most recent sub-measure qualifying event that fell outside of the compliance date window.

Patient Name	% Overall Compliant	Visit	HbA1c	Lipid	Micro	Eye	Flu	Comment
STEARNS, NOLAN	17%	07/08/08	12/02/06	12/02/06				Patient Compliant
TENHUNDFELD, NICHOLAS	17%	07/24/08	10/28/06		10/28/06		11/29/06	Patient Compliant
RUEGSEGGER, BRAD	17%	10/23/07	06/16/07		06/16/07		10/23/07	No Comment
SCHUSTER, TYLER	17%	07/23/08	06/17/08		08/17/07			No Comment
MOORE, JODIE	67%	06/18/08	06/18/08		06/18/08		12/06/07	No Comment
TYSON, LAUREN	33%	12/24/07	12/26/07		12/26/07			No Comment
ZASTROW, PAULINE	67%	07/28/08	08/25/08		03/13/08		11/13/07	No Comment
DEMPSEY, ALLAN	17%	04/10/08	01/31/06	07/09/06				No Comment
TEMPLIN, JAMES	50%	08/06/08	07/26/08		02/23/08			No Comment
MILLARD, SHARON	17%	07/01/08	11/26/06	11/28/06	08/02/06			No Comment
WALTERS, MEGEN	50%	09/23/08	10/11/07	07/08/05	09/24/08		11/26/07	No Comment
KRONCKE, STACY	50%	07/22/08	01/26/08	01/26/08	01/26/08		12/04/06	No Comment
BRUSE, CHRISTOPHER	50%	09/25/08	09/24/08		09/24/08			No Comment
DENU, MACAYLA	67%	07/17/08	03/22/08		03/22/08		11/02/07	No Comment
FLOOD, CHOON	17%	05/12/08	01/18/08		08/13/07			No Comment
DETTOR, KENT	50%	09/09/08	06/16/08		08/29/07		10/06/07	No Comment
BRITTAN, LUKAS	17%	07/22/08	11/19/05					No Comment
BREUNIG, DOLORES	0%	04/24/08	08/02/06		03/22/06		11/08/06	No Comment
WOGER, SHERRY	33%	09/25/08	07/18/08		11/19/05			No Comment
COLVIN, ALDEN	50%	07/08/08	06/27/08		06/27/08			No Comment
WENDT, JAMES	33%	01/16/08	09/20/07	07/12/06	09/20/07	01/24/08	09/20/07	No Comment
CAGLE, JOSEPH	50%	09/25/08	09/25/08		03/01/08			No Comment
PIENKOS, MICHAEL	17%	08/11/08	07/03/07	06/03/06	07/03/07		11/08/06	No Comment
MORTIMER, WENDY	50%	07/14/08	09/18/08		09/18/08			No Comment
MCKNIGHT, RALPH	33%	07/09/08	07/12/08		07/12/08			No Comment
RYAN, JERILYN	17%	07/14/08	09/18/07		04/13/07			No Comment
FASSEL, BRIAN	33%	05/14/08	05/16/08	02/10/05	05/18/06		11/08/06	No Comment
HAGOPIAN, GERALYN	67%	09/18/08	07/02/08	01/23/05	07/02/08	03/10/08	11/05/07	No Comment

Individual Physician Performance Report

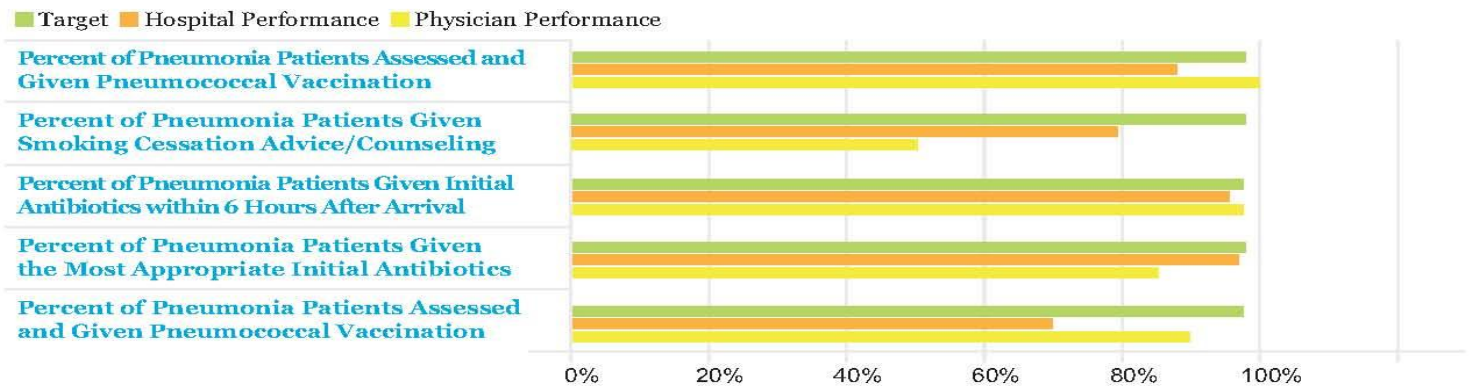
Hospital Quality Report
 Physician: John Smith -
 Internal Medicine
 Time Period: Jan-Mar 2009 (Q1)

Date Report Produced: October 14th, 2009

Core Measures
Pneumonia

Performance Measure	Total Cases	Percent Complete	Hospital Performance	Target	Hospital Rank	Specialty Rank	Indicator
Percent of Pneumonia Patients Assessed and Given Pneumococcal Vaccination	14	89%	71%	95%	13/25	2/10	+
Percent of Pneumonia Patients Given Smoking Cessation Advice/Counseling	14	50%	79%	95%	16/25	6/10	-
Percent of Pneumonia Patients Given Initial Antibiotics within 6 Hours After Arrival	14	96%	94%	95%	2/25	2/10	+
Percent of Pneumonia Patients Given the Most Appropriate Initial Antibiotics	14	86%	94%	95%	9/25	5/10	+
Percent of Pneumonia Patients Assessed and Given Influenza Vaccination	14	100%	89%	95%	1/25	1/10	+

Core Measures
Pneumonia



Patient Profiler – Point of Care Tool

PATIENT SUMMARY

First Name	CHRISTOPHER
Last Name	MIDDLETON
Patient ID	353208699
Date of Birth	12/05/1928
Phone	(312) 452-1778
Address	11641 LEOPARD ST - APT 5B
	Chicago, IL 60628

MOST RECENT ENCOUNTER

Last Visit Date	01/15/2009
Provider	Dr. William Jones - 1234567890
Specialty	Internal Medicine
Primary Dx	487: Influenza

[View All Services](#)
[View Labs](#)
[View Rx](#)

[View Diagnostic Testing](#)

GUIDELINE STATUS

Condition/ Guideline	Status
Diabetes	
Hypertension	
Screening for Dyslipidemia	

Compliant
Non-Compliant

[View Claims Detail](#)
[Print Report](#)

HOSPITAL ADMISSIONS

(Reflects Claims Through February 2009)

Admit Date	Discharge Date	Primary Dx	Description	Facility
08/25/2006	09/03/2006	564.1	IRRITABLE BOWEL SYNDROME	Hospital C
08/01/2006	08/05/2006	846.0	LUMBOSACRAL (JOINT) (LIGAMENT)	Hospital C
07/23/2006	07/27/2006	959.01	OTHER AND UNSPECIFIED INJURY T	Hospital C
04/10/2006	04/13/2006	560.9	UNSPECIFIED INTESTINAL OBSTRUC	Hospital C
04/04/2006	04/08/2006	820.21	FRACTURE OF INTERTROCHANTERIC	Hospital C

EMERGENCY DEPARTMENT UTILIZATION

(Reflects Claims Through February 2009)

Visit Date	Primary Dx	Description	Facility
05/17/2008	496	CHRONIC AIRWAY OBSTRUCTION NOT	Facility C
01/17/2006	276.51	DEHYDRATION	Facility C
01/13/2006	599.0	URINARY TRACT INFECTION SITE N	Facility C
12/23/2005	535.50	UNSPECIFIED GASTRITIS AND GAST	Facility C

MOST FREQUENT DIAGNOSES

Primary Dx	Description
250	DIABETES MELLITUS
496	CHRONIC AIRWAY OBSTRUCTION NOT
530	DISEASES OF ESOPHAGUS
599	OTHER DISORDERS OF URETHRA AND

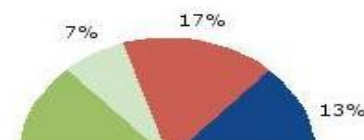
PERCENT OF SERVICES

By Provider Type



PERCENT OF SERVICES

By Distinct Specialty



What Else Needs to be Considered?

- **Program costs; how will they be supported**
- **Resources (personnel) to support program**
- **Strategy and communication plan to enlist physician participation**
- **Plan to approach payors and employers**
- **Financial incentives or P4P Program**

Are you ready?

- **Educate your Board**
 - Consider a strategic planning retreat
- **Readiness Assessment**
 - Evaluate competitive environment, current capabilities, “appetite” for change, physician leadership, hospital partner support, payor willingness
 - IT infrastructure or technology solution partner
 - Estimate program costs, revenues, and savings to project ROI
 - Comprehensive implementation and program plan
- **Continue messenger model method**
- **Get experienced legal support**



What's on the horizon?



Becoming an Accountable Care Organization

- **An integrated group of physicians and other providers organized together to assume responsibility for quality and efficiency of health care they deliver to a defined population**
- **ACO Functions**
 - Organization of clinical activities
 - Local accountability
 - Measurement, tracking, reporting of longitudinal outcomes and costs

Steps to Accountable Care

Integration

- Create an *Integrated* organization
- Culture and capabilities to organize for and deliver coordinated care

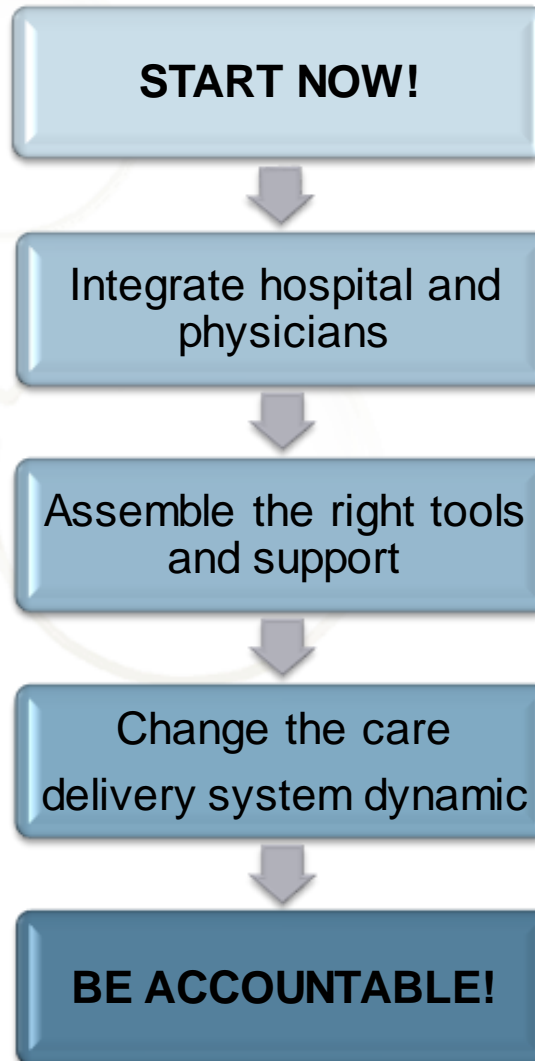
Delivery System Improvement

- Implement programs to support efficient, effective care delivery
- Leadership and governance to value and deliver results

Accountability

- Expertise and financial/management processes
- Monitor results; manage risk & reward

In Summary





QUESTIONS??

THANK YOU !



Clinical Integration

Integration of providers across delivery settings to enable comprehensive patient care through intelligence.



Management Services

Full suite of medical, financial, analytic, and call center services for the effective utilization of health care dollars.



Focused Consulting

Highly experienced healthcare executives provide customized guidance and implementation to ensure sustainable success.



ACO Expertise

Strategy, implementation and operations expertise for the fastest, most effective path to accountable care.

***To learn more about Valence Health's capabilities,
contact Lori Fox Ward at 312-277-6304 or Lfox@valencehealth.com***