



Achieving ACO Success by Engaging Provider Group Staff

Presentation by:
Zack Caplan & Eric Rogow

Today's Presenters



Zack Caplan

Director of Provider Network & Strategy,
Stellar Health

Zack leads Stellar's partnerships with healthcare providers from national health systems to independent primary care practices. Prior to Stellar, Zack advised both providers and payors on value-based care strategies and M&A in Deloitte Consulting's Healthcare Strategy & Operations practice.



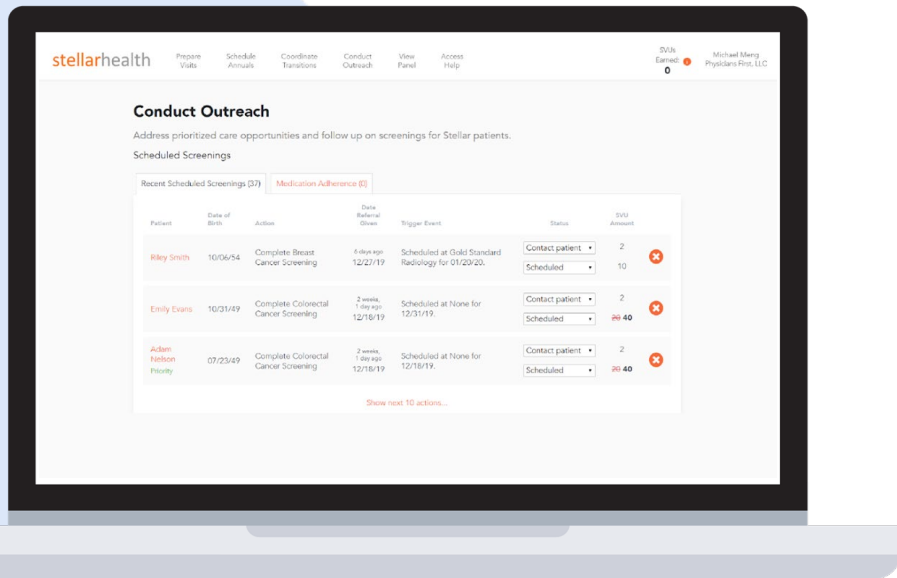
Eric Rogow

SVP of Growth & Network Development,
Vytalize Health

Eric leads Vytalize's growth and network development program. The focus is on building partnerships with ACOs, IPAs, CINs, Hospitals & PCPs to improve Value Based Care outcomes. Prior to working with Vytalize, Eric worked at Merck in Sales, Training, Strategic Planning and Marketing Research.

Introducing Stellar Health

The Stellar App is a web-based, point-of-care workflow tool designed to prompt and reward providers and practice staff for delivering high-quality care



The Stellar App delivers a **simple checklist of recommended value-based actions** for providers and staff based on each patient's historical data



Stellar partners with risk-bearing entities to set aside **extra funding to reward the completion of these actions** not found on normal fee schedules



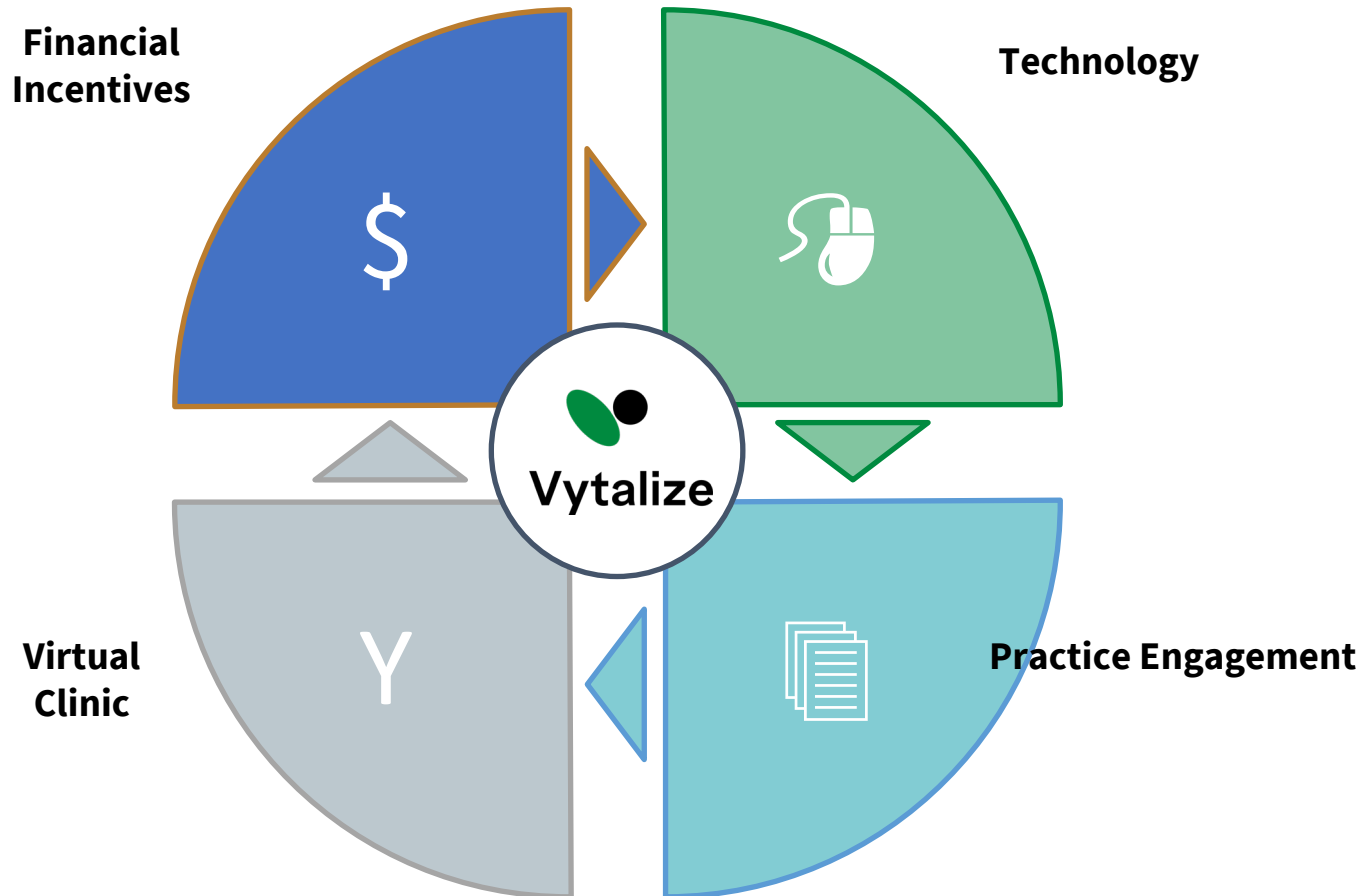
Instead of waiting 12-18 months to get paid, **bonus checks are paid monthly** to providers and staff



Providers can receive **real-time claims data across all payors through one platform** and can say goodbye to multiple portals and care gap spreadsheets!

Vyitalize Health: A New Approach to Medicare Value-Based Care

We provide physicians with technology, incentives, and a **virtual clinic** to enable better patient outcomes and risk-based contracting



Today's Discussion

POSITIONING YOUR ACO FOR SUCCESS IN VBC

Key learnings and recommendations for how ACOs can empower not only participating providers, but their practice staff and care teams, with the resources and incentive structures needed to change behavior at the point of care.

What is value-based care?

- ✔ Value-based delivery rewards providers with incentive payments for the quality of care they give to their patients
- ✔ Value-based care is important because it emphasizes keeping patients healthy, provides better care experience and lowers the overall cost of care
- ✔ Finally, it compensates providers based on outcomes rather than the quantity of care given to their patients



...but why is it so hard?!?!?

Value-based care comes with challenges for medical practices....



Uncertain on how to activate value

Difficult for providers and their staff to know what they actually need to do to consistently perform on outcomes-based metrics



Provider incentives misaligned

Shared annual incentives fail to motivate providers and their staff to spend the time needed to complete value-based activities



Workflow disruptive

Providers and their staff are tired of workflow disruption and spend too much time entering info into EMRs and tackling care gap lists

Barriers to VBC adoption and success

PROVIDER PERSPECTIVE

CHALLENGE 1

Value-based chaos (VBC terms, tiers, metrics, performance thresholds, variability in rewards, and data overload)

CHALLENGE 2

Lack a payor agnostic access point for the VBC scorecard and “to-dos” for full practice engagement/participation in VBC

CHALLENGE 3

Misalignment of incentives (including timing) for VB efforts

CHALLENGE 4

Lacking provider relevant solutions (overload with payor-centric solutions)

Value-based chaos

CMS and health plans do not make it easy for providers to do well against value-based objectives

- Many of the Quality measures vary by health plan and type of patient
 - Medicare Advantage and ACOs have <50% overlap on Quality measures, Medicaid has completely different measures
- Often scored on a percentile basis with ever-changing benchmarks
- Retrospective measurement – you never know how you stand until the year is over
- Some measures are not always easily within the provider's control (e.g. readmissions, access to specialists, etc.)

The pandemic created some new challenges for VBC...



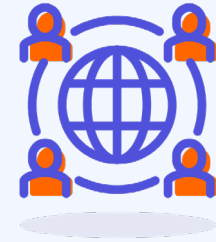
Focus shifted to COVID, away from other health/wellness issues

Patients reluctant to visit health care facilities for screenings and AWWs. Telehealth helped, but still large backlog



Practices reliant on FFS had difficulty transitioning to alt payment models

Difficult to implement new reports, understand data in midst of severe revenue loss, making business decisions even more challenging, especially for smaller practices



Critical staff shortages

Shortages of nursing and other support staff, coupled with needs for new support to implement telehealth

...and also improved some value-oriented practices!



Adoption and access to telehealth

Health plans created telehealth benefits and providers partnered with telehealth vendors to better provide care to patients



Accelerated adoption of value-based care models

Practices that had already moved to alternative payment models were much more financially stable during the pandemic



Increased attention to physician and clinical staff burnout

More efforts underway to combat burnout and better attention paid to hours worked

Lessons learned during the pandemic emphasize why VBC is a team sport

- Clinical and support staff often overwhelmed – but evidence that burnout decreases with better communication, shared incentives, psychological support (i.e. teamwork)
- Completing VBC goals requires multiple steps, best distributed among staff
- Increasing importance of telehealth and other digital health strategies requires team members with specific expertise
- Attention to social determinants of health requires increased outreach

Vytalize works with ACOs/IPAs/CINs/Groups/Practices

Take on global risk and increase Practice engagement

- Collaborating with leadership teams
 - Planning, insight and delivery with:
 - Hundreds of PCPs today
 - IPAs, ACOs, CINs & Hospitals
- Configure solutions
- Develop Group/Practice engagement plans
- Implementation and support
 - Clinical
 - Technology/Analytics
 - Administration
 - Growth
 - Risk Capital
 - Software Development



Engagement considerations with Groups/Practices

- Routine engagement with leaders
 - Acknowledgment
 - Expectations
- Process that works best to meet your needs
- Fits into existing workflow
 - Relationship with OM
- Information – what, when & how much?



4 ways to engage the entire team in value-based care

1

Recognize each workflow step required to close a value-based care gap for a patient

2

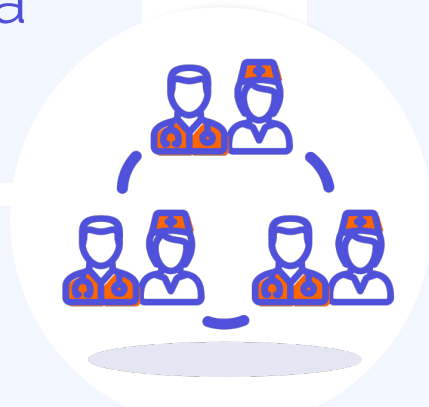
Share incentives earned from health plans with team members performing the work

3

Encourage each team member to work at the **top of their license**

4

Adopt technology and infrastructure to support value-based care workflow



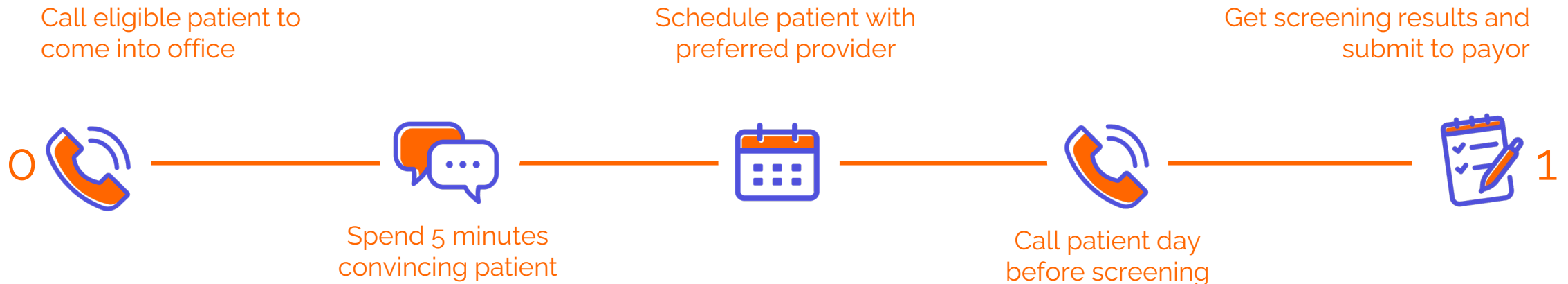
1 Recognize each workflow step

Value-based care requires many granular workflow steps in order to close a care gap for one patient, many of which are completed by the practice staff

STATUS QUO

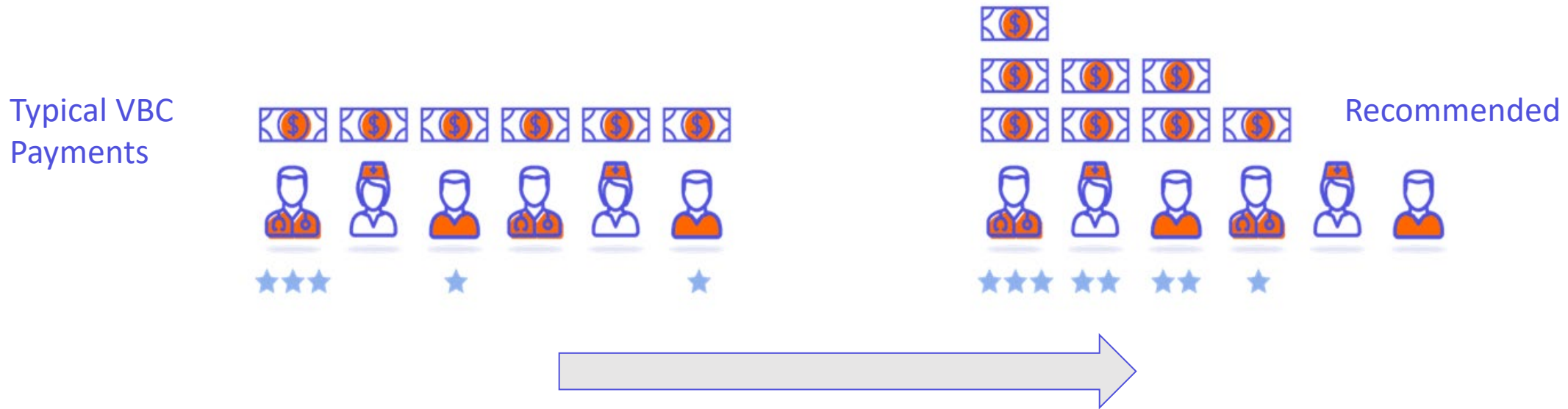


WITH ESTABLISHED VALUE-BASED CARE WORKFLOW



2 Share incentives with team members

To drive commitment to the work required to support value-based care, all team members who support care gap closure should receive a piece of the incentive earned



*Incentive program shifts from **shared** to **individual** to recognize contributions and drive higher performance*

3 Encourage each team member to work at the top of their license

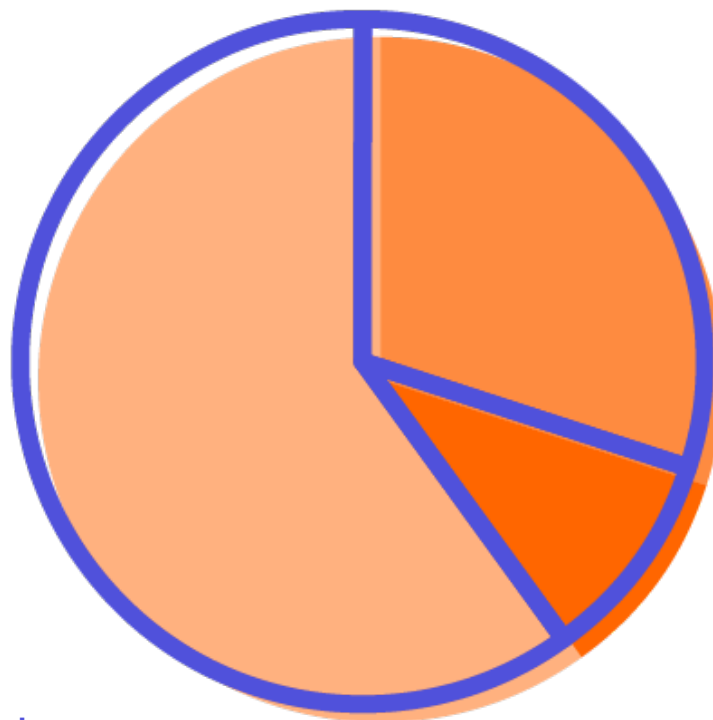
Empowering the entire care team, including the office staff who typically take care of the majority of “value-based” tasks improves performance in VBC contracts

Medical Assistant / Staff

- Queue patient forms
- Outreach to priority patients
- Enter data to close care gaps



Each member of the care team should be rewarded for completing tasks



Nurse / Care Coordinator

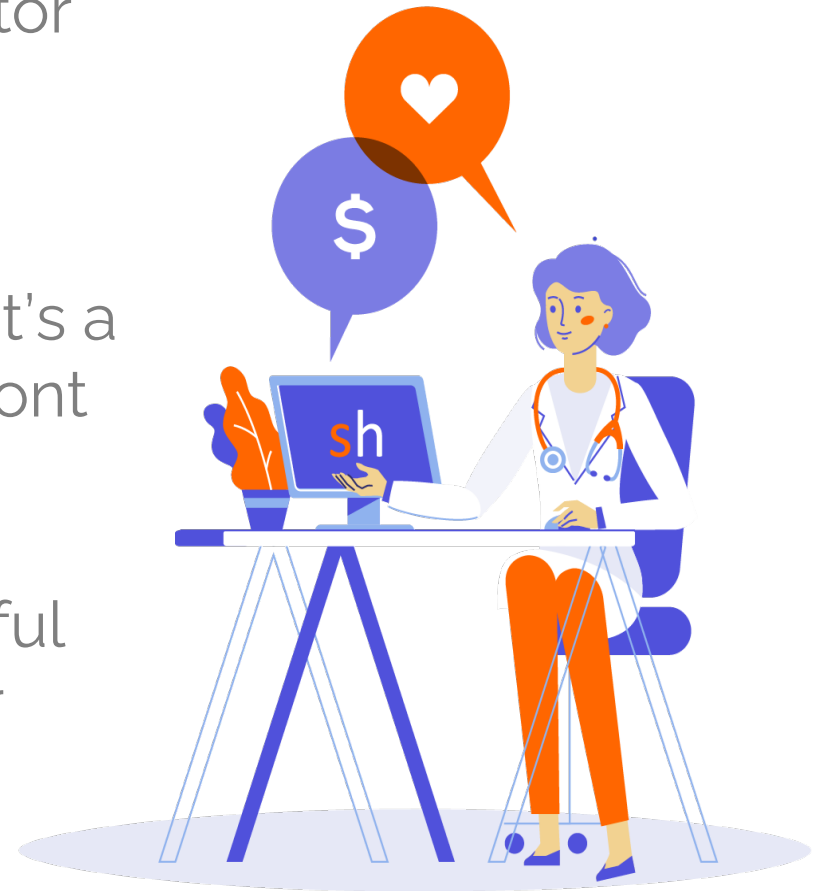
- Coordinate discharge care
- Design and update care plan with App guidance

Physician

- Review summary form before visit
- Engage patients on high-priority clinical items

4 Adopt technology and infrastructure to support value-based care workflow

- Technology can support intake of data from multiple payors to evaluate/monitor VBC performance
- Track who completed each of the VBC actions at the individual level, whether it's a physician, nurse, medical assistant or front desk staff
- Integrated platform across payors helpful in creating consistent VBC workflow for every patient, every time



Teaming checklist to meet VBC goals post-pandemic:

- ❑ **Align tasks with licensure/capabilities for better fulfillment:** Many VBC steps do not require clinical staff to complete
- ❑ **Reliance on teamwork rather than individuals develops better routines:** Redundancy helps cover shortages/absences
- ❑ **Teamwork builds medical staff satisfaction, reduces turnover**
- ❑ **Teaming increases touchpoints between patients and practice,** driving better patient engagement (important for Stars) and increasing likelihood of completing VBC steps
- ❑ **Sharing financial rewards from VBC with team members creating the value improves buyin and engagement**
- ❑ **Adopt technology to avoid manual data aggregation / analytics** by practice staff

Stellar Performance Example

Through the use of **technology and granular workflow incentives**, Stellar helped a practice improve quality and coding performance by increasing engagement of practice clinical and admin staff

- Performance on Part C measures improved by **1.1 Stars over 2019 pre-pandemic performance**
- Performance on Part D measures improved by **0.75 Stars over 2019 pre-pandemic performance**
- Improved **coding gap by 0.18**

Measure	Historical Data		Final Performance Year Data		
	2019 Cohort 1 EOY Quality	2019 Cohort 1 EOY Star Score	2020 Cohort 1 EOY Quality	2020 Cohort 1 Star Score	YOY % Improvement
Breast Cancer Screening	66%	2	67%	3	1
Colorectal Cancer Screening	54%	1	60%	2	1
Adult BMI Assessment	79%	2	93%	4	2
Controlling Blood Pressure	41%	1	58%	2	1
Diabetes Care - Eye Exam	71%	3	68%	2	-1
Diabetes Care - Kidney	96%	4	98%	5	1
Diabetes Care - HbA1C	53%	2	67%	3	1
Statins for CVD	68%	1	90%	5	4
Part C Performance Total		2		3.1	1.1

Measure Name	2019 Cohort 1 EOY Quality	2019 Cohort 1 EOY Star Score	2020 Cohort 1 EOY Quality	2020 Cohort 1 EOY Star Score	YOY % Improvement
	Medication Adherence for Diabetes	81%	3	88%	5
Medication Adherence for Blood Pressure	80%	2	84%	3	1
Medication Adherence for Statins	78%	3	82%	3	0
Statins for Diabetes	89%	5	95%	5	0
Part D Performance Total		3.25		4	

Provider Feedback:

“Stellar is our VBC partner of choice because their **enhanced technology allows us to share timely quality of care metrics with our provider network**” – Health system COO

“Value-based care puts an emphasis on the individual as the starting point for a sustainable medical lifestyle. Stellar Health provides our practices with the **right tools to succeed in value-based care, leading to better health outcomes for our patients**” – IPA president

How Vytalize helps practice engagement

- Take it to the next level: meet where they are
 - Virtual clinic
 - Data analytics
- Actions are timely, informed & tracked
 - Utilize value-based care incentives
- Specific Provider, Staff & Patient plans
 - Engage the patients
 - Support the goals of the practice
 - Improves outcomes
 - Improves patient experience



QUESTIONS?

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Stop by our ACOExhibitHall.com Virtual Booth



The virtual booth for Stellar Health is a 3D-rendered environment. At the top center, the Stellar Health logo is displayed. Below it, a banner reads: "Achieve success in value-based care with Stellar Health! Stellar partners with both providers and payors to develop tailored incentive programs that reward granular value-based care actions." On the left, a vertical panel lists contact information for Zack Caplan (518-669-3057, zack.caplan@stellar.health, www.stellar.health) and a menu of content including "Introducing Stellar Health", "Case Study: PCP catapults to top-tier", "Value-Based Care Providers Actually Like", and "Paper: How to Avoid Falling From Grace". Below this panel are social media icons for Facebook, LinkedIn, and Twitter, and a "Request Info" button. In the center, a woman in a white blazer stands behind a podium with a "COMPANY OVERVIEW" sign and the Stellar Health logo. To the right, a large screen displays a video player for a "5 MIN FLASH INTERVIEW" featuring Zack Caplan, Director of Provider Network & Strategy. The video is hosted by John P. Schmitt, MBA, PhD, EVP & Co-Founder of ACOExhibitHall.com. A "VENDOR HALL" sign is visible in the bottom right corner of the booth.

Intuitive Engaging the long tail Monthly Payments
Behavioral Economics SVUs Simple
Low cost Scalable
Gamification Technology

Thank you.

Engaging the unengaged Proactive
Innovative
Activation, Not Analytics Alternative to Aggregation
Staff Engagement
For Providers, By Providers