



Trella  
HEALTH



May 12<sup>th</sup>, 2022

# 5 Key Components for Organizational Growth within Value Based Care

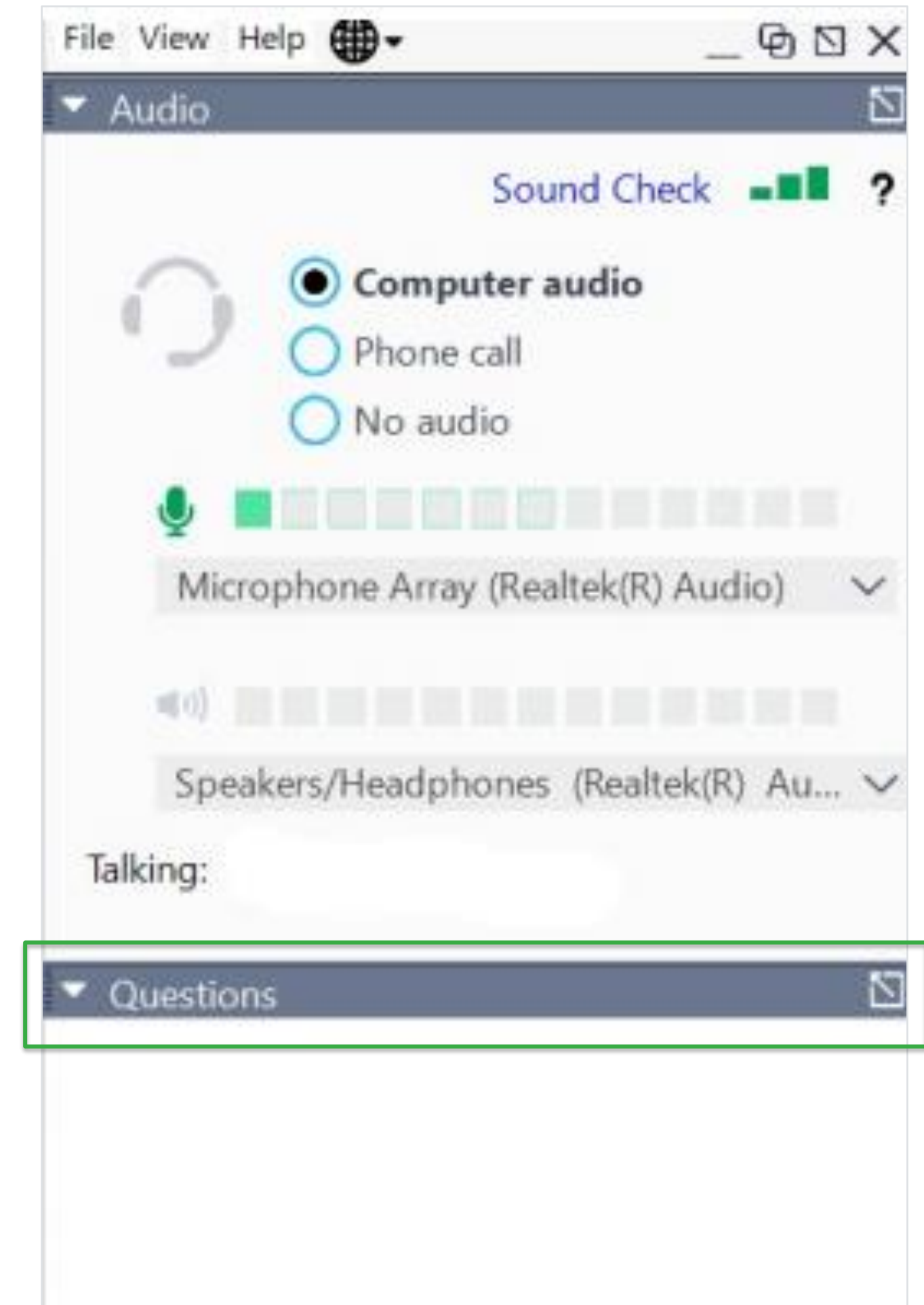


Educational Webinar Series

SMARTER GROWTH.  
HEALTHIER OUTCOMES.

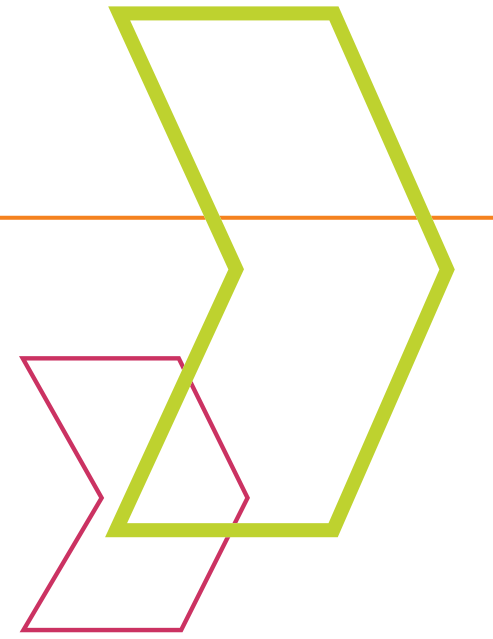
# Housekeeping

- Attendees are in listen-only mode
- Use the “Questions” module at the bottom of your control panel to submit a question
- We will walk through discussion items and then open it up to audience submitted questions
- We are recording the session for those unable to attend today



# Meet our Speakers

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Josh Price

Solution Engineer,  
Trella Health



Arun Narayanan

Sr Solution Engineer,  
Trella Health



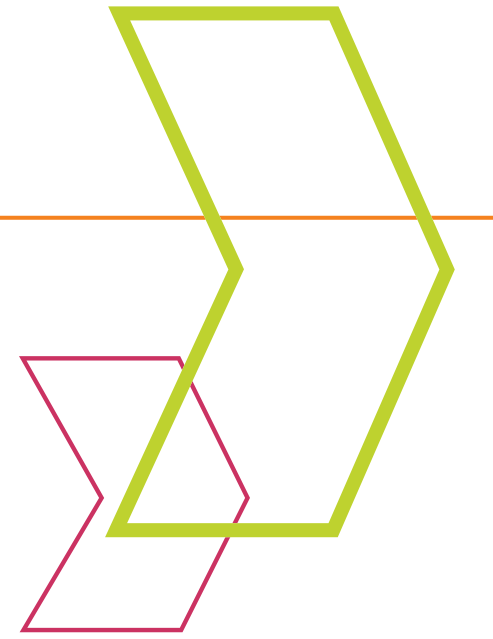
Jeremy Powell

Chief Executive Officer,  
Acclivity



# Agenda

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**About Trella Health  
& Acclivity**



**The ROMEO Method  
& Use Case Examples**



**Questions  
& Answers**



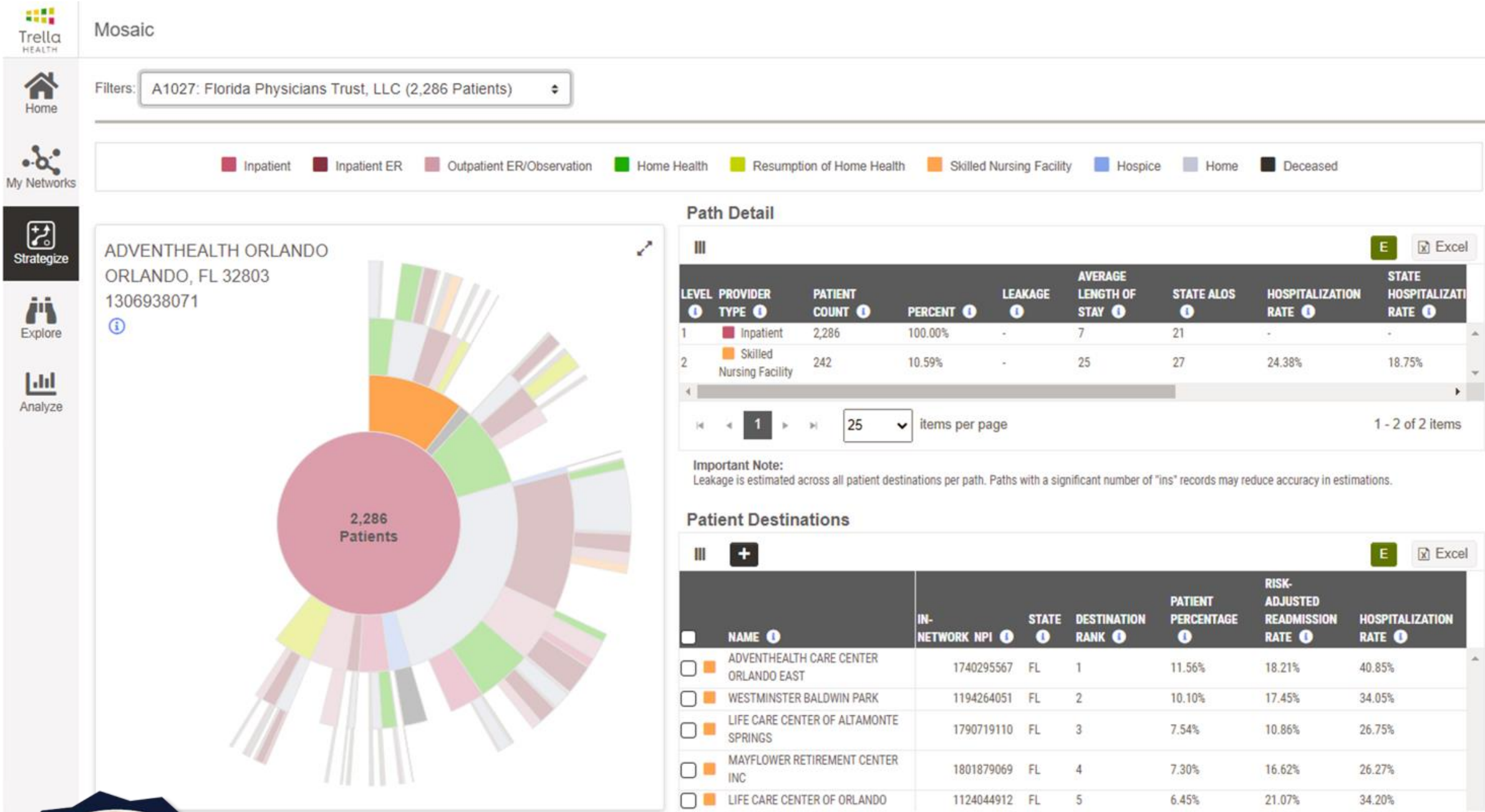
# With **Mosaic**, *thrive* in value-based care

## THE DATA:

- **Most recent 100% of CMS market data available** through our Virtual Research Data Center (VRDC) innovator license
- **Sourced directly** from the CMS Chronic Conditions Data Warehouse (CCW)
- **Certified Qualified Entity** (QE) through CMS in all 50 states

## THE PLATFORM:

- **SaaS analytics platform** focused on MSSP, DCE, and MA growth
- **No Integrations or PHI** – Trella provides the data
- **Robust enough for analysts** yet designed for for business development
- **Strong adoption** and usage

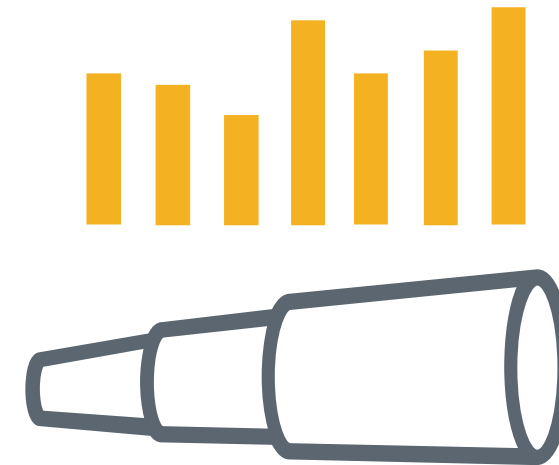


# How Trella Health Partners with Value-Based Care Entities



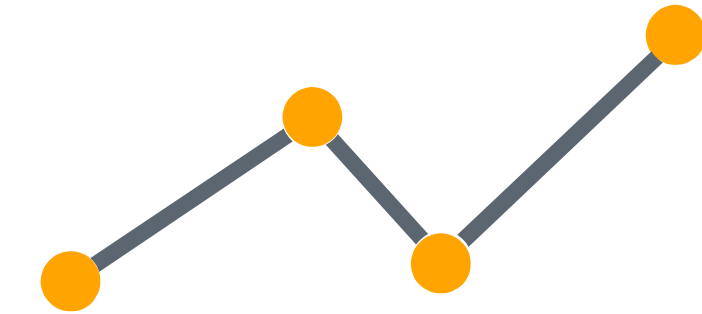
## EVALUATE

- Market data to maximize business development time
- Existing network partner performance



## IDENTIFY

- Participating and preferred physicians to add to your list
- Competitive intelligence and weakness capitalization



## IMPROVE

- Referral patterns toward high-quality, cost-effective providers
- Providers with low hurdles to substantive metric improvements

# Acclivity Health Solutions : Creating Connections



## Upcoming Branches

- Longitudinal Analytics
- Convenor Analytics
- Best Practice Workflow
- Workforce Workflow



# Introducing the ROMEO Method

1	2	3	4

RESEARCH



ORGANIZE



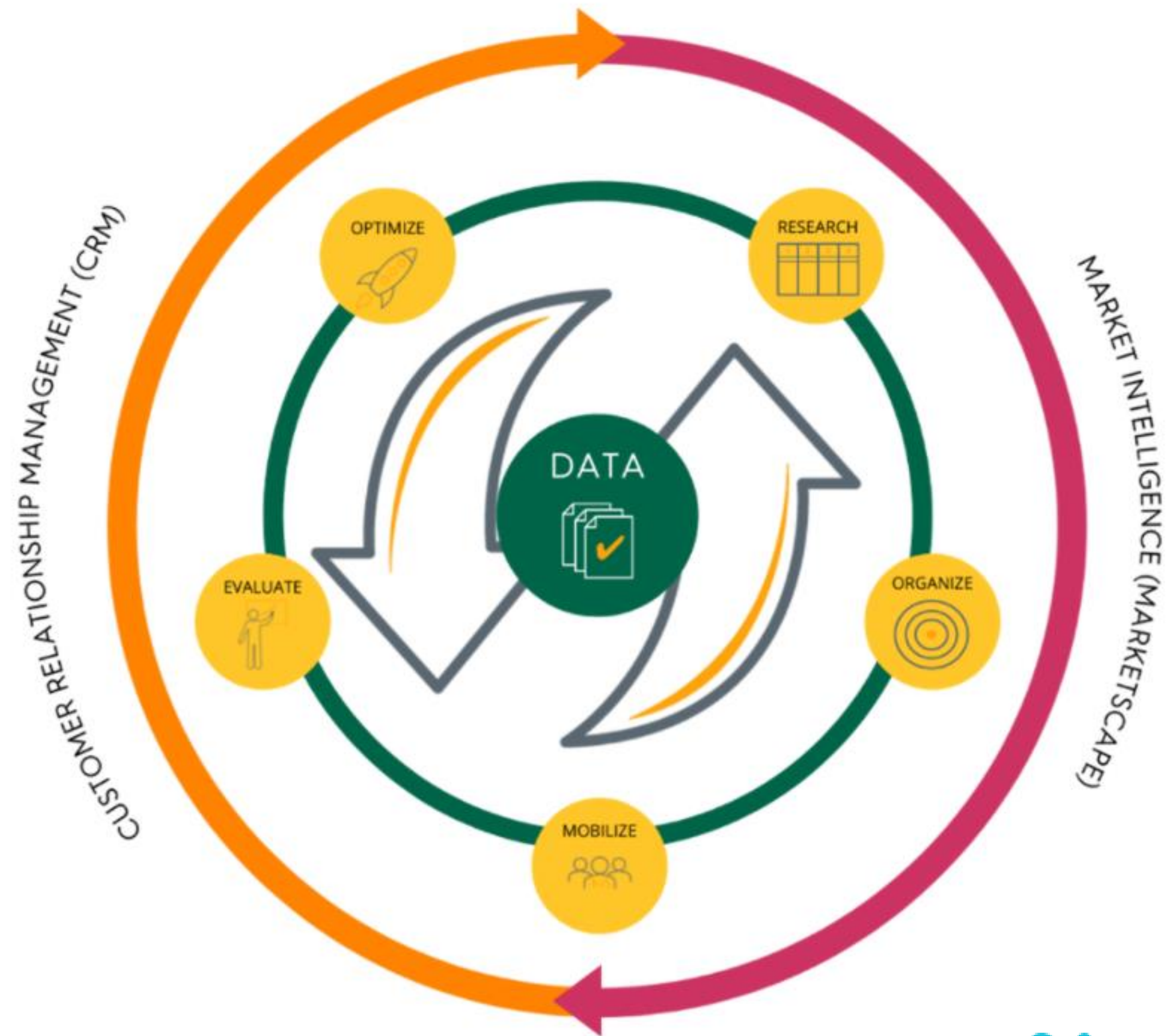
MOBILIZE



EVALUATE



OPTIMIZE





# Phase 1: RESEARCH

1	2	3	4

- ***Evaluate Your Market***
  - *Use the most up to date CMS data to create or grow your current network*
- ***Define Strategy***
  - *Create goals that are specific to your organization and use the data to identify your strengths*
- ***Identify the Leaders***
  - *Partner with the best providers for your organization to reduce overall cost of care while improving patient outcomes*



Totals

Reset

Save

Search Name, NPI, Location or Specialty

Clear Sort

+

E

Excel

DCE Growth Demo

DCE - Standard | CA, NV, NY

DCE - Standard

PY2021 (PY1) - DoS 2020

Physician Count:  
+3  
113  
Last Saved: 110

Patient Population Beneficiaries:  
+3,915  
6,374  
Last Saved: 2,459

PMPM (Unadjusted):  
+\$148  
\$748  
Last Saved: \$600

Patient Risk Score (HCC):  
+0.28  
1.06  
Last Saved: 0.78

<input type="checkbox"/> NAME ⓘ	CITY ⓘ	TAXONOMY SPECIALTY ⓘ	PHYSICIAN MEDICARE FFS PATIENTS (PROFESSIONAL+OP) ⓘ	FFS PATIENT RISK SCORE ⓘ	DCE CLAIMS ALIGNED LIVES (ESTIMATE) - PY1 ⓘ	DCE CLAIMS ALIGNED DUAL-ELIGIBLE LIVES (ESTIMATED) - PY1 ⓘ	DCE PATIENT RISK SCORE - PY 2021 (PY1) - (DOS 2020 CLAIMS) ⓘ	DCE PMPY - ADJUSTED PY 2021 (PY1) - (DOS 2020 CLAIMS) ⓘ
<input checked="" type="checkbox"/> ABRANTES, CLARISSA, DR.	LADY LAKE	Internal Medicine	1,708	1.58	1,400	<11	1.23	\$8,004
<input type="checkbox"/> DICKERT, ALEX, DR.	CRYSTAL RIVER	Family Medicine	2,572	1.96	1,353	15	1.70	\$6,120
<input type="checkbox"/> BERENSON, BRUCE, DR.	DELRAY BEACH	Internal Medicine	1,496	1.67	1,273	<11	1.38	\$9,840
<input checked="" type="checkbox"/> DHARIA, RUPESH, DR.	PALM BEACH GARDENS	Internal Medicine	2,058	1.31	1,261	<11	1.13	\$9,780
<input checked="" type="checkbox"/> VILLACASTIN, ALEX, DR.	CITRUS SPRINGS	Internal Medicine	2,397	1.74	1,254	113	1.34	\$6,996
<input type="checkbox"/> CONTI, ANDREW, DR.	THE VILLAGES	Internal Medicine	803	1.38	1,207	<11	0.99	\$8,916
<input type="checkbox"/> FOSTER, LARRY, DR.	LEESBURG	Family Medicine	3,387	1.51	1,162	14	1.10	\$7,764
<input type="checkbox"/> BOSS, DANIEL	JUPITER	Internal Medicine	463	1.56	1,141	<11	1.00	\$9,192
<input type="checkbox"/> MAXWELL, MARVIN, DR.	SEBRING	Family Medicine	1,781	1.34	1,129	<11	1.12	\$9,684
<input type="checkbox"/> ANAND, PAVAN	NAPLES	Internal Medicine	1,343	1.18	1,128	<11	1.04	\$9,948
<input type="checkbox"/> BURKETT, ELIZABETH	CHIEFLAND	Family Medicine	990	1.56	1,082	78	1.13	\$9,384
<input type="checkbox"/> MURPHEY, BRYAN	NAPLES	Internal Medicine	1,430	1.32	1,070	<11	1.02	\$10,152
<input type="checkbox"/> RIVERS, STEVEN	THE VILLAGES	Family Medicine	1,156	1.60	1,026	<11	1.21	\$7,668
<input type="checkbox"/> NATHAN, MEENA, MRS.	INVERNESS	Internal Medicine	1,250	1.29	1,013	23	1.13	\$8,700
<input type="checkbox"/> ICE, SHIRLEY, MS.	BELLEVIEW	Family Medicine	1,624	1.31	1,002	186	1.14	\$10,044
<input type="checkbox"/> COLLINS, JOHN, DR.	SARASOTA	Internal Medicine	1,298	1.29	985	<11	1.12	\$9,732
<input type="checkbox"/> LICHTINGER, DAVID, DR.	LEESBURG	Internal Medicine	1,454	1.43	961	<11	1.15	\$6,828
<input type="checkbox"/> JOHNSON, CHARLES, DR.	BOCA RATON	Internal Medicine	1,256	1.44	949	<11	1.18	\$10,584
<input type="checkbox"/> ALFONSO, RENATO, DR.	PALM COAST	Specialist	1,354	1.30	948	13	1.07	\$9,624
<input type="checkbox"/> MARK, TIMOTHY, DR.	WEST PALM BEACH	Internal Medicine	566	1.37	938	<11	1.02	\$10,356
<input type="checkbox"/> REBELLO, BRIAN, DR.	DELRAY BEACH	Internal Medicine	1,440	1.82	935	<11	1.56	\$8,556
<input type="checkbox"/> JOHN, GERALD, DR.	SARASOTA	Internal Medicine	1,217	1.34	934	<11	1.13	\$9,684
<input type="checkbox"/> REICHEL, DAVID, DR.	SARASOTA	Internal Medicine	1,290	1.26	932	<11	1.05	\$9,192
<input type="checkbox"/> DELBAKSH, FARIBORZ, DR.	SUMMERFIELD	Specialist	1,604	1.75	932	<11	1.29	\$7,800
<input type="checkbox"/> SPERDUTO, JOSEPH, DR.	DELRAY BEACH	Internal Medicine	1,464	1.24	931	<11	1.04	\$8,028

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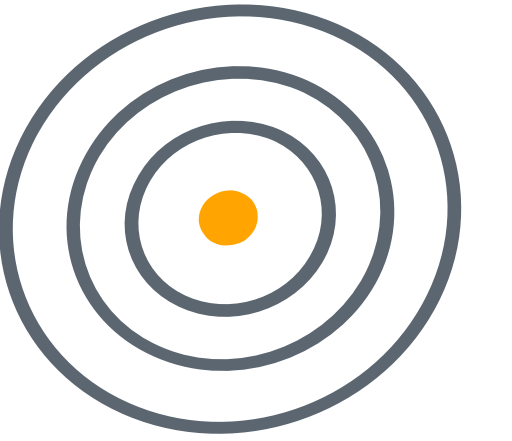
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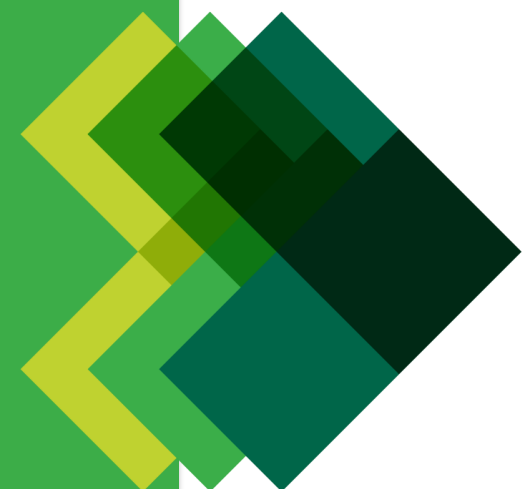
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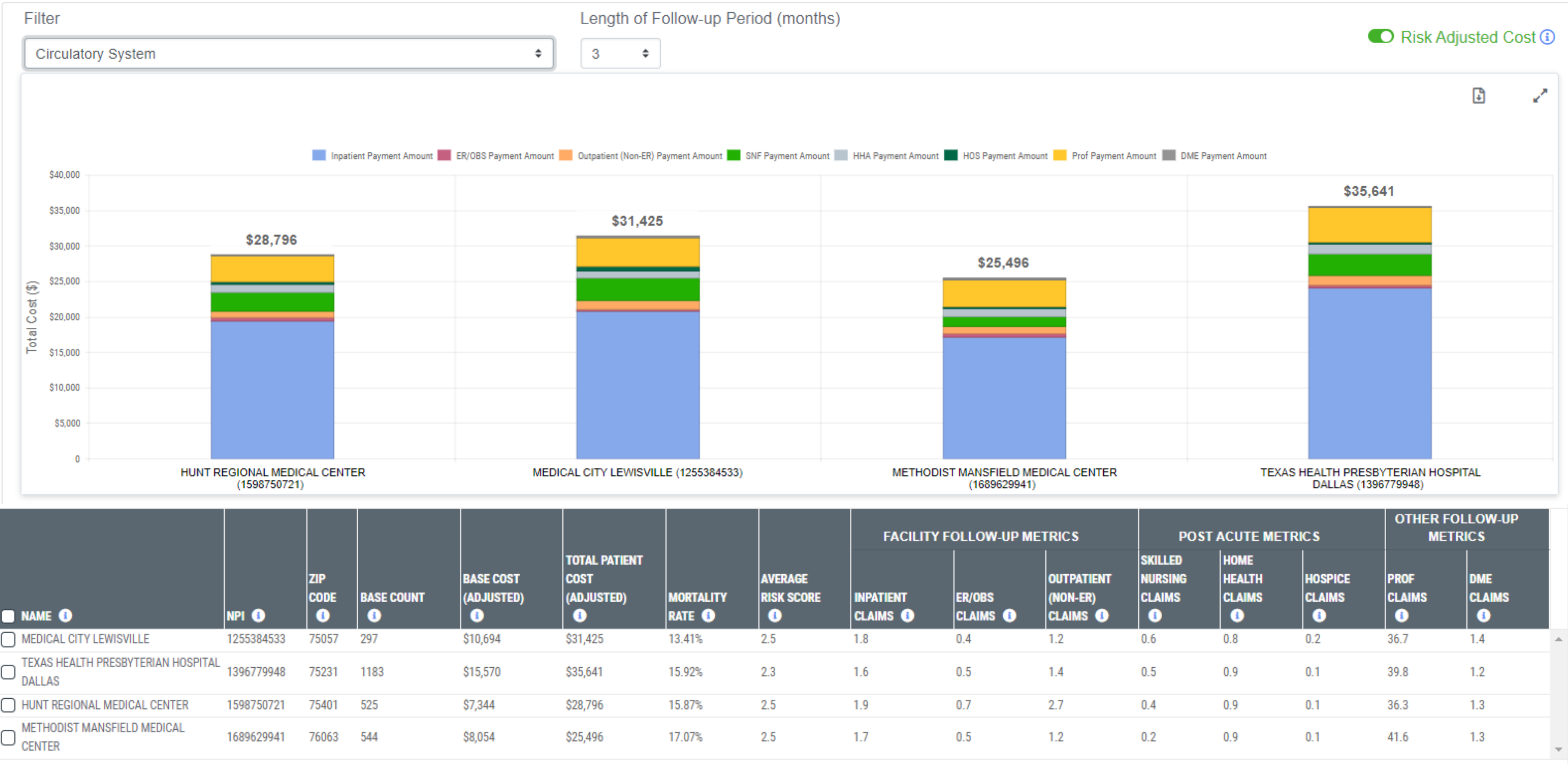
items per page

# Phase 2: ORGANIZE



- ***Gather Intel***
  - *Use data collected during the research phase to evaluate your strategy*
- ***Identify Gaps***
  - *Review claims data to pinpoint opportunities for savings.*
- ***Create a tactical plan***
  - *Identify how you want to take your strategy into the market*







# Phase 3: MOBILIZE



- ***Take Action***
  - Leverage beneficiary level data to identify gaps
- ***Tailor Your Approach***
  - Where can you make the greatest and most immediate impact?
  - Find opportunity to provide targeted care and focus your efforts where it's needed most



# Point Of Care “At A Glance” Information On Each Patient

## CM Opportunity:

The CM Opportunity Report is also referred to as the CM Print or Face Sheet that providers use at the point of care.

This document will display AWW Status, alerts, ED, inpatient hospitalizations, palliative and hospice candidates, risk scores, expiring or lost HCC’s that may need to be recorded for risk adjustments, and referral status updates.

Schedule Appointment

Patient Name

DOB: Payor Name: Last PCP Visit:

Appt Date: Scheduled PCP: AWW Status:

None  
AWV Due 2019-01-01

Patient Profile

Medical Costs (Last 12 months)		ER, IP & OP Hospitalizations (Last 12 months)		Risk Score	
Professional:	\$0.00	ER Discharges:	1	Current HCC Comm Score:	1.998
Institutional:	\$0.00	Office Visits:	0	Suspect Opportunities:	
Pharmacy:	\$5,039.71	IP Hospitalizations:	0	Lost Opportunities:	1.861
Total Expenses:	\$27,198.42	Total Visits:	1	Projected Risk Score:	3.859

Alerts & Notifications

High Risk/ High Cost Patient (Top 10%) - Patient needs to be seen monthly

HCC Summary - PLEASE ADDRESS AND RECODE ACCORDINGLY

Status	DX Code:	Description	HCC	Source	RAF Score	Funding
Lost	M46.96	Rheumatoid Arthritis and Inflammatory Connective Tissue Disease	40	Spec. Claims	0.376	\$263.2
	G62.9	Polyneuropathy	75	Spec. Claims	0.281	\$196.7
	I11.0 I50.30 I50.9 I50.33 I50.31	Congestive Heart Failure	85	Spec. Claims	0.361	\$252.7
	I21.9 I21.3	Acute Myocardial Infarction	86	Spec. Claims	0.283	\$198.1
	I63.9	Ischemic or Unspecified Stroke	100	Spec. Claims	0.333	\$233.1
	N18.9	Chronic Kidney Disease, Mild or Unspecified (Stages 1-2 or Unspecified)	139	Spec. Claims	0.227	\$158.9
Dropping Off	I20.0	Unstable Angina and Other Acute Ischemic Heart Disease	87	Spec. Claims	0.283	\$198.1
Existing	J96.00 J96.90 J96.91 J96.01	Cardio-Respiratory Failure and Shock	84	Spec. Claims	0.326	\$228.2
	I48.91 I48.0 I48.2 I48.92	Specified Heart Arrhythmias	96	Spec. Claims	0.276	\$193.2
	J44.9 J44.1	Chronic Obstructive Pulmonary Disease	111	Spec. Claims	0.388	\$271.6

Referral Status Update

Date	Status	Reason	Notes	Program Type
01/13/2020	Complete	Enrolled	enrolled 1/13/20	Island Doctors Live Well
07/08/2019	Complete	Did not Return Contact		

Close Print

Schedule Appointment

Patient Name:

DOB: Phone: Provider:

Appt Date: Payor Name: Last PCP Visit:

Patient Profile

ED		InPatient		Risk Score	
ED visits last 12 mths	13	IP Admits last 12 mths	4	Current ACG Risk Score	16.140
Injury	2019-08-22	Unplanned IP Hosp	2019-03-16	Probability of High Util	22%
Non-emergent	2019-08-11	Unplanned IP Hosp	2019-01-04	Probability of Hosp Admit	52%
Emergent	2019-07-29	Unplanned Readmit 30 day	2018-10-13	Probability of Hosp ReAdmit	58%

Alerts

Frailty Flag | High Admit Risk | High Readmit Risk | SSA Disability Cond.

Actions - PLEASE ADDRESS ACCORDINGLY

High ER UtilizationAWV Due

HCC Summary - PLEASE REVIEW AND RECODE AS APPROPRIATE

Status	HCC Category	Description
Expired	33	Intestinal Obstruction/Perforation
	167	Major Head Injury
	169	Vertebral Fractures without Spinal Cord Injury

Close Print

# Phase 4: EVALUATE



- ***Delivering the Right Care at the Right Time***
  - Similarly, is the right care being provided to the right patients?
- ***Review Your Impact***
  - Review if operating approach is effectively serving your patient population
  - Identify gaps in strategy that can be addressed either within your action phase or if they need reviewed and addressed later



# Expenditure & Utilization – Historical Trend (5 Qtrs)

5 Quarters of historical CMS financial reporting highlights trends in specific performance areas.

Raw Data Summary   Tin List   Provider List   Advanced Analytics   HCC Report   Insight Report   PMPM Report   ACO Report   Historical Qtrly Expenditures Utilization Report <span>✕</span>		
Totals - Primary Partners Reassigned	Qtr - 2020Q2 <span>i</span>	Qtr - 2020Q1
Total Assigned Beneficiaries	12,004	
Total Person Years By Assigned Beneficiaries	5,962	
Total Expenditures	\$52,713,231.24	
Component Expenditures per Assigned Beneficiary		
Hospital Inpatient Facility, Total	\$2,646.75	
Short-Term Stay Hospital	\$2,455.98	
Long-Term Stay Hospital	\$1.43	
Rehabilitation Hospital or Unit	\$148.00	
Psychiatric Hospital or Unit	\$18.18	
Skilled Nursing Facility or Unit	\$445.92	
Outpatient Facility	\$1,410.49	
Hospital Outpatient Department	\$1,121.55	
Outpatient Dialysis Facility	\$185.95	
Part B Physician/Supplier (Carrier)	\$3,486.83	
Evaluation and Management	\$1,034.80	
Procedures	\$865.23	
Imaging	\$308.35	
Laboratory and Other Tests	\$374.53	



# RAF Scores – Total, Location, PCP, Patient

Current RAF scores allow quarterly trend reporting by Practice or PCP.


aryTin ListProvider ListAdvanced AnalyticsHCC ReportInsight ReportPMPM ReportACO ReportACG HCC Institutional

ActiveAttribution: 2020Q2, 2020Q1, 2020Q0

CSVExcelPrintColumn VisibilityQueryFilters(1)Search:

age	sex	line of business	company	Provider	cms factor type	cms medicald eligible	cms orig rsn for entitlement	cms lti status	cms pace status	cms model	cms sub model	cms exclude from risk adjustment	cms cc codes	cms hcc codes	cms risk score	cms member months	cms total member months
72	M	pp_reassigned			I	N	0		N	24	Institutional	N	018 019	018	1.769	12	12
55	F	pp_reassigned			I	N	1		N	24	Institutional	N			1.043	12	12
68	F	pp_reassigned			I	N	0		N	24	Institutional	N	019	019	1.423	12	12
58	F	pp_reassigned			I	N	1		N	24	Institutional	N	019 023 047	019 023 047	2.198	12	12
77	M	pp_reassigned			I	N	0		N	24	Institutional	N	018 019 096	018 096	2.009	12	12
70	M	pp_reassigned			I	N	0		N	24	Institutional	N	084 085 108 111 115	084 085 108 111 115	2.969	12	12
75	F	pp_reassigned			I	N	1		N	24	Institutional	N	010	010	1.611	12	12

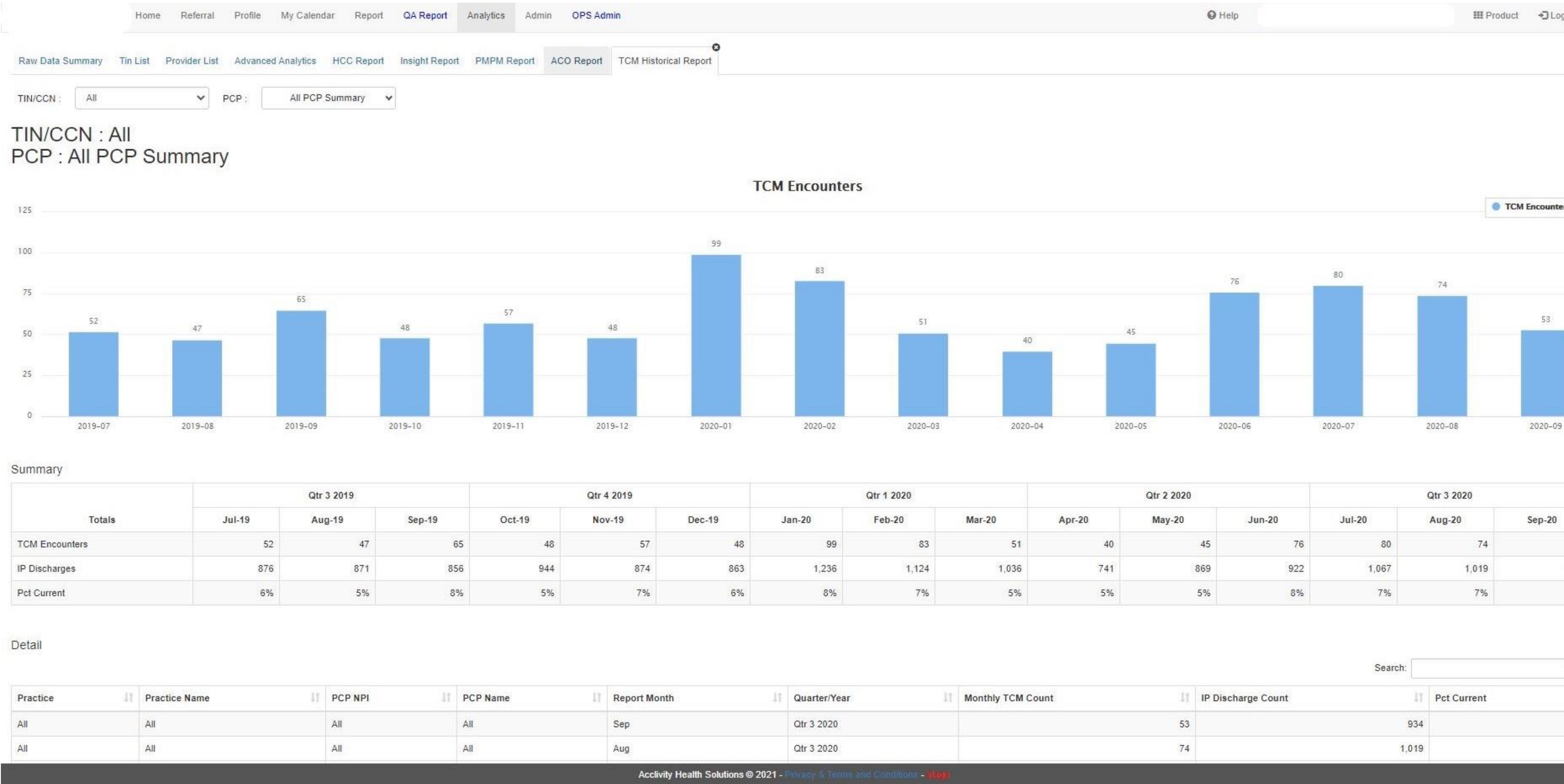
# Rx Compliance

<div> <div>  <div> <div>Home</div> <div>Referral</div> <div>Profile</div> <div>My Calendar</div> <div>Care Coordinators</div> <div>Report</div> <div>Analytics</div> <div>Admin</div> </div> </div> <div> <div> <div>Help</div> <div>PGS Training</div> <div>Logout</div> </div> </div> </div>									
<div> <div>Raw Data Summary</div> <div>Practice List</div> <div>Provider List</div> <div>Advanced Analytics</div> <div>HCC Report</div> <div>Insight Report</div> <div>Care Management List</div> <div>Rx Compliance Issue Report</div> </div>									
Member ID	First Name	Last Name	DOB	Practice	PCP ID	ACOName	Rx Compliance Issue	Action	
MID_EEHDMJDD	Lqjp	D{gtu	xxxx-xx-xx	PCP_HOE=	TIN_EEDHLHEMEI	RIU	Rx Compliance Issue - Disorders Of Lipid Metabolism; Rx Compliance Issue - Glaucoma	<div> <div></div> <div></div> <div></div> <div></div> </div>	
MID_EEHGMG	Tcecnfkc	Ueqvv	xxxx-xx-xx	PCP_HOE=	TIN_EEDHLHEMEI	RIU	Rx Compliance Issue - Disorders Of Lipid Metabolism	<div> <div></div> <div></div> <div></div> <div></div> </div>	
MID_EEMDKG	Dctfjg	Ogoc	xxxx-xx-xx	PCP_HOE=RIU=	TIN_EDIGGGKKLF	RIU	Rx Compliance Issue - Glaucoma; Rx Compliance Issue - Hypertension	<div> <div></div> <div></div> <div></div> <div></div> </div>	
MID_EFDFJEDD	Ogtngpg	lctpgt	xxxx-xx-xx	PCP_EURE=HOE=NCDE=	TIN_ELFEDEGHIM	RIU	Rx Compliance Issue - Disorders Of Lipid Metabolism	<div> <div></div> <div></div> <div></div> <div></div> </div>	
MID_EFFHHJ	Okejcg	Ewtvku	xxxx-xx-xx	PCP_EURE=HOE=NCDE=	TIN_EMEFMFKFGK	RIU	Rx Compliance Issue - Hypothyroidism	<div> <div></div> <div></div> <div></div> <div></div> </div>	
MID_EFIIEHDD	Htcpm	Dtqyp	xxxx-xx-xx	PCP_HOE=EUC=	TIN_ELFEDEGHIM	RIU	Rx Compliance Issue - Glaucoma	<div> <div></div> <div></div> <div></div> <div></div> </div>	
							Rx Compliance Issue - Disorders Of Linid		

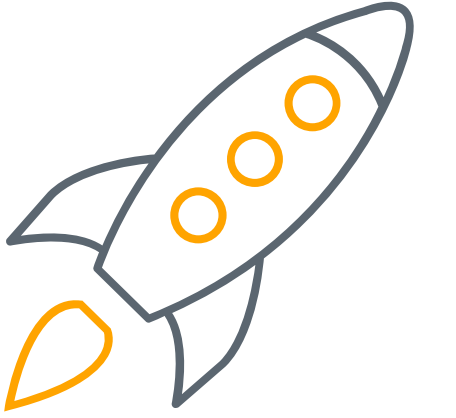
# TCM Workflow

## TCM Workflow (Historic Reporting):

TCM Workflows are instrumented so that we know where and when and how many TCM opportunities are accomplished.



# Phase 5: OPTIMIZE



- ***Review Network Performance Data***
  - Metrics for Successor KPI's
    - Cost & Utilization
    - Patient Outcomes
    - Downstream cost
  - Identify top performers
- ***Adjust your Strategy***
  - Identify areas for improvement and reevaluate your market





DCE Growth Demo

DCE - Standard | CA, NV, NY



Performance Year 2021 (PY1) - DoS 2020



PMPM

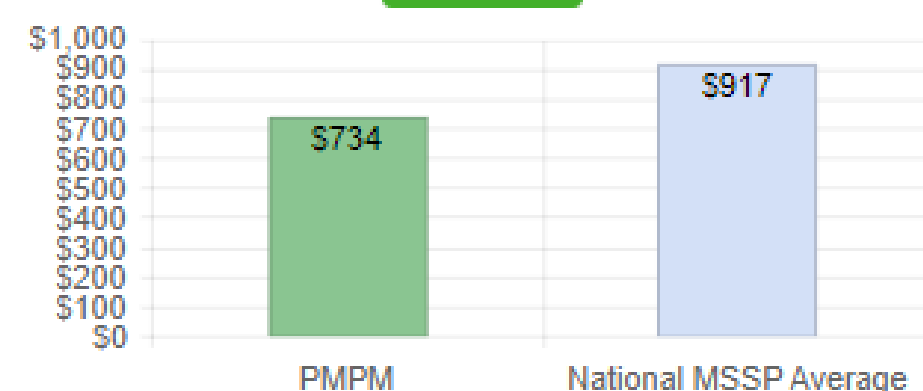
\$734

PMPY

\$8,808

This is better than 98% of all CMS MSSP ACOs

Details



National MSSP Average

Patient Risk Score (HCC)

0.78

This is higher than 0% of all CMS MSSP ACOs

Details

All Causes Readmissions

17.4%

This is better than 12% of all CMS MSSP ACOs

Details

Patient Population Beneficiaries

2,483

SNF Admissions

2.8%

This is higher than 29% of all CMS MSSP ACOs

Details

ED/OBS Visits

16.6%

This is better than 100% of all CMS MSSP ACOs

Details

Inpatient Admissions

10.2%

This is better than 100% of all CMS MSSP ACOs

Details

Home Health Admissions

7.9%

This is higher than 35% of all CMS MSSP ACOs

Details

Hospice Admissions

1.1%

This is higher than 4% of all CMS MSSP ACOs

Details



# Poll Question



# Questions and Discussion



# Stop by our VBCExhibit Hall Virtual Booth

[Click Here](#)





# LET'S CONNECT!

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Arun Narayanan: [anarayanan@trellahealth.com](mailto:anarayanan@trellahealth.com)

Jeremy Powell [Jeremy.Powell@acclivityhealth.com](mailto:Jeremy.Powell@acclivityhealth.com)

# Appendix

HOW WE DO IT :

# Analytics

