

Learning Objectives

- ✓ REACH Model Overview
- ✓ Health Equity, Social Determinants of Health (SDOH) affects
- ✓ Point of Care Testings' impact on Health Equity/SDOH
- √ How the Point of Care Diabetic Eye Exam increase Health Equity



What is The ACO REACH Model?

- Formerly known as the Global and Professional Direct Contracting Model
- Focus:
 - Promoting health equity and addressing historical healthcare disparities for underserved communities.
 - Continuing the momentum of provider-led organizations participating in riskbased models.
 - Protecting beneficiaries and the model with more participant vetting, monitoring and greater transparency.



What's Changed?

- Two voluntary risk-sharing options. In each option, participants accept Medicare claims reductions and receive some compensation from their ACO
- Professional
 - Lower risk sharing arrangement- 50% savings/losses
 - Primary Care Capitation Payment risk-adjusted monthly payment for Primary care services, provided by the ACO's participating providers
- Global
 - Higher risk sharing arrangement 100% savings/losses
 - Primary Care Capitation Payment
 - Total Care Capitation Payment risk-adjusted monthly payment for ALL covered services, including specialty care, provided by the ACO's participating providers



Poll Question 1

- How many of your organizations are participating in a REACH ACO?
 - a) We are all in
 - b) Exploring
 - c) Interested
 - d) Never



What is Health Equity¹?

- The CDC defines Health Equity as the state in which everyone has a fair and just opportunity to attain their highest level of health.
- Achieving this requires focused and ongoing societal efforts to address historical and contemporary injustices; overcome economic, social, and other obstacles to health and healthcare; and eliminate preventable health disparities.
- Achieving health equity requires valuing everyone equally with focused and ongoing societal efforts to address avoidable inequalities, historical and contemporary injustices, and the elimination of health and healthcare disparities.

https://www.cdc.gov/nchhstp/healthequity/index.html #: ``text= Health % 20 equity % 20 is % 20 the % 20 state, their % 20 highest % 20 level % 20 of % 20 health. The state of the state



What are the SDOH²?

Social Determinants of Health



Social Determinants of Health
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Social determinants of health (SDOH) are the conditions in the environments where people are born, live, learn, work, play, worship, and age that affect a wide range of health, functioning, and quality-of-life outcomes and risks.

- 1. Economic Stability
- 2. Education Access and Quality
- 3. Health Care Access and Quality
- 4. Neighborhood and Built Environment
- 5. Social and Community Context

2 Healthy People 2030, U.S. Department of Health and Human Services, Office of Disease Prevention and Health Promotion. Retrieved [January 6, 2023], from https://health.gov/healthypeople/objectives-and-data/social-determinants-health



What Populations are affected by SDOH?

Populations³

- African American
- Latino
- American Indian and Alaska Native (AI/AN)
- Asian Americans, Native Hawaiian, Pacific Islanders (AANHPI)
- LGBTQ+
- Rural Residents
- People with disabilities

Disparities³

- Infant and Maternal Mortality
- Heart disease
- Diabetes
- Hypertension
- Chronic Illness
- Disability
- Cancer
- Mental Illness
- Substance Use
- Overall life expectancy



³ https://aspe.hhs.gov/sites/default/files/documents/e2b650cd64cf84aae8ff0fae7474af82/SDOH -Evidence-Review.pdf

Point-of-Care Testing











Poll question 2

- I have seen an eye care professional
 - a) Within the last year
 - b) Within the last 6 months
 - c) Within the last 4 weeks
 - d) I can't remember the last time



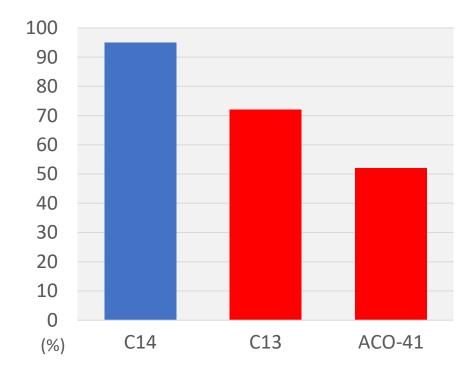
Improving Access to Care

C14: Diabetes Care – Kidney Disease Monitoring

95%

of Medicare Advantage plan members with diabetes had a kidney function test in 2018

Screening for Complications





Diabetes in the U.S. – Over 30 Million patients⁴



KIDNEY DISEASE



HEART DISEASE



LOSS OF TOES, FEET, OR LEGS



VISION LOSS



⁴ Centers for Disease Control and Prevention website, "National Diabetes Statistics Report", Accessed December 12, 2019, https://www.cdc.gov/diabetes/data/statistics/statistics-report.html

Diabetic Retinopathy

- Most common cause of vision loss among US adults⁸
- More than 2 in 5 Americans with diabetes have some stage of diabetic retinopathy⁵
- No symptoms in the early stages of the disease⁵
- 95% of vision loss can be prevented with early detection⁷
- Up to 50% of Americans with diabetes were not tested for Diabetic Retinopathy⁶





⁵ National Eye Institute website, "Diabetic Retinopathy", Accessed December 12, 2019, https://www.nei.nih.gov/learn-about-eye-health/eye-conditions-and-diseases/diabetic-retinopathy

⁶Lee DJ, Kumar N, Feuer WJ, et al. Dilated eye examination screening guideline compliance among patients with diabetes without a diabetic retinopathy diagnosis: the role of geographic access. BMJ Open Diabetes Research and Care 2014;2:e000031.doi:10.1136/bmjdrc-2014-000031



Diabetes Eye Exam Care Gap

Primary Care Physician Eye Care Specialist Specialist returns report which closes HEDIS measure 60% 40





Reasons for Care Gaps

- 1) Patient compliance
- Scheduling
- Transportation
- No symptoms
- Financial Concerns

Impact of a Care Gap

- 1) Patient outcomes
- 2) CPT Reimbursement
- 3) HEDIS/ Star Measures
- 4) Risk Adjustment



Diabetes Eye Exam Care Gap

Medicare Shared Savings Program







Health for **Populations.**



Crowth in Expenditures.



- ACO-41: Diabetes: Eye Exam
- 2018 Performance data average
- •52%

- C13: Diabetes Care Eye Exam
- 2018 Report Card Average
- •72%



Impact of Undiagnosed Diabetic Retinopathy

- Negatively impacts patient outcomes¹⁰
- Diabetic retinopathy at later stages reduces a patient's quality of life¹⁰
- Later stage retinopathy increases utilization costs
- Requires urgent medical treatments upon diagnosis
 - Injection Eye Drug \$300
 - Fluorescein ICG Angiography \$650
 - Ocular Photo Dynamic Therapy \$1,200
 - Injection, verteporfin, 0.1 \$2,700
- Treatment costs can exceed \$10,000 annually¹¹



¹⁰ Kamran, Jannat & Jafroudi, Shirin & Leili, Ehsan & Chafjiri, Sedighi & Paryad, Ezat. (2017). Quality of Life in Patients with Diabetic Retinopathy. Journal of Holistic Nursing and Midwifery. 27. 69-77. 10.18869/acadpub.hnmj.27.1.69.

¹¹ https://www.jmcp.org/doi/pdf/10.18553/jmcp.2020.19245

Diabetic Retinopathy Screening at Point of Care

• Indian Health Service-Joslin Vision Network (IHS-JVN)¹²

- Established in 2000 to use telemedicine technology to provide high quality, cost-effective, annual diabetic eye exams
- This program has significantly contributed to a decrease in diabetes related vision loss and blindness

Veterans Administration¹³

- Reliably determined the level of diabetic retinopathy
- Opportunity to engage with patients
- Patients' responses to non-mydriatic teleretinal imaging are universally positive

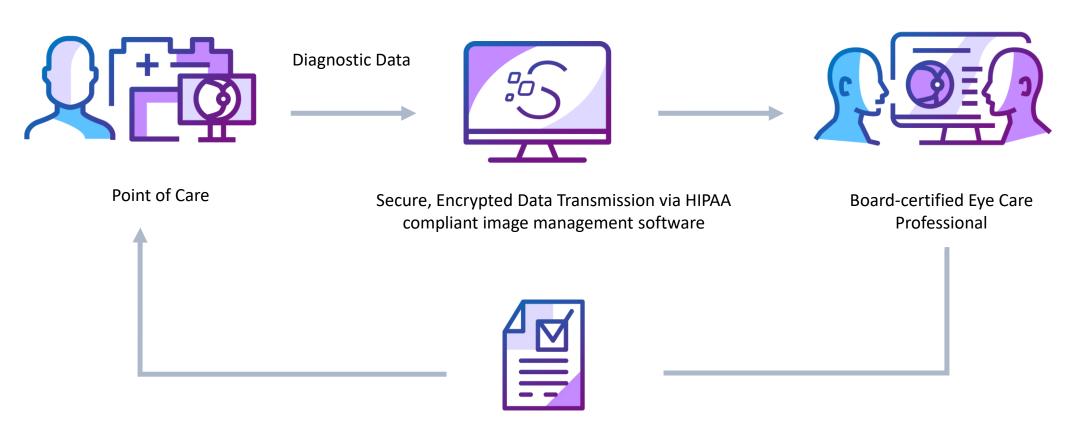


Crozer-Keystone Health System, Springfield, PA

- Partners at Point of Care: Topcon Healthcare, Vantage EyeCare
- Solution: Topcon TRC-NW400 tabletop retinal camera in two primary care practices
- Findings: 30/80 first patients screened, nearly 37% had abnormal studies
- Benefits:
 - Increase patient access to screening during primary care visits
 - Provide quality, convenience and value for patients
 - Identify uncovered pathology
- This is an effective front-line defense against diabetic retinopathy
- www.crozerkeystone.org



Topcon Screening Workflow



Interpretation reports returned to practice within 24 hours



Solutions for Non-mydriatic Retinal Cameras

SIGNAL Handheld Camera:

- Portable
- Technique driven
- Wi-Fi enabled



TRC-NW400 Tabletop Camera:

- Robotic camera automatically captures both eyes
- Completed screen in under 2 min



Impact on REACH Model

- Improved Access
 - Providing the right care at the right time
 - Improves compliance necessary care
- Improved Affordability
 - Less financial burden on the patient
 - Co-pay
 - Transportation
 - Parent or Child Care
 - Time Off
 - Overall lower cost of care through early diagnosis
- Clinical Impact
 - Primary Care Physician is essential component to accessing care
 - Sight threatening pathology detected early



Financial Impact to the Practice

- One HEDIS quality measure can be worth \$17 million to a plan with just 100,000 members. 14
- The two largest Medicare Advantage plans by enrollment have \$5.3 billion in bonus money on the table in 2021. 15
- 81% of Medicare Advantage enrollees are plans that receive a bonus payment from Medicare on star quality ratings. 15
- The bonus pool from the federal government to Medicare Advantage insurers has quadrupled from \$3 billion in 2015 to \$11.6 billion in 2021. 15
- Achieving a 4.75 and above Star rating can be worth as much as \$100 PMPY



¹⁴ https://carenational.com/how-do-hedis-scores-affect-health-plan-reimbursement/.

¹⁵ https://www.kff.org/medicare/issue-brief/medicare-advantage-in-2021-star-ratings-and-bonuses/

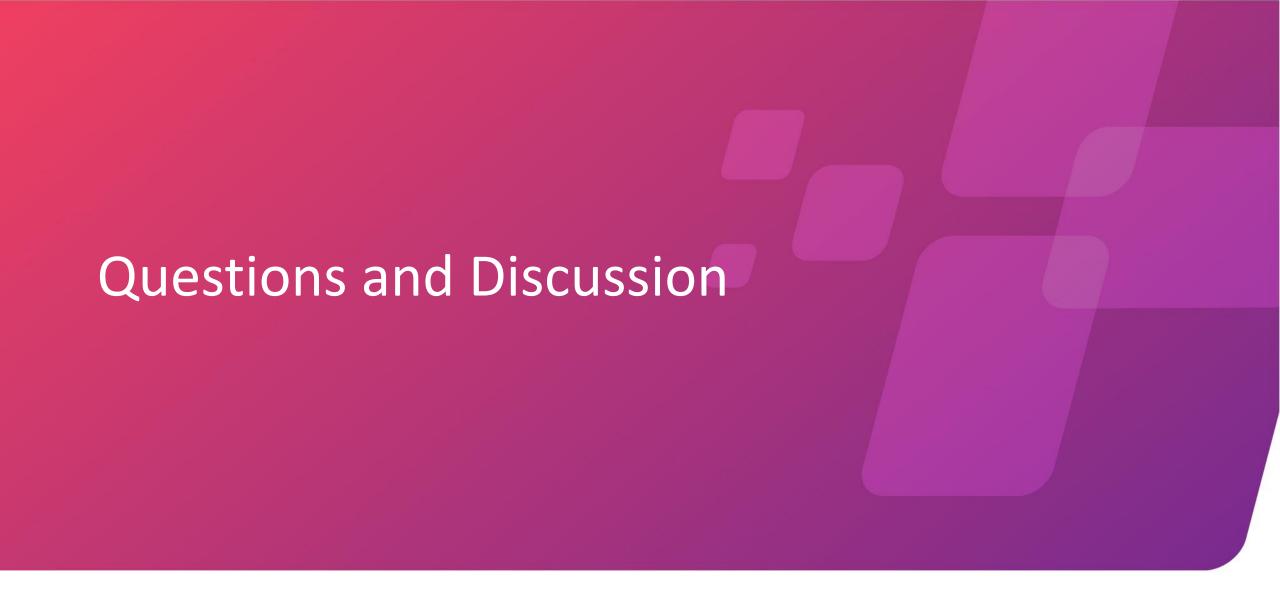
Topcon Screen Solution

Fundus Camera	Diagnostic Report
 Option to Purchase 	 Per patient exam fee
 Option to Lease 	 NO Software fees
 Zero Capital Option 	 NO training fees

Success Begins with our Onboarding Program:

- Determine workflow
- Determine reimbursement
- No risk for denied claim during first 90 days







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Thank you

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