# The red and green flags of value-based care contracts

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**DATALINK** empowering better health

**Educational Webinar Series** 

### Presenters



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### Objectives

- Discuss VBC contract components you can't ignore
- Review pitfalls to avoid
- Provide real-world strategies to implement into your contracting process

# **Polling Question**

What VBC contracts do you participate in? Select all that apply.

- a. Pay for performance
- b. Shared savings upside only
- c. Shared savings upside and downside risk
- d. Partial or Full Capitated
- e. None

### **Reconciliation Terms**



- Reconciliation frequency
- Claims run out period
- Final settlement date
- Dispute resolution terms



### Patient Attribution



- PCP selected/attributed
- Plurality of primary care services
- Retrospective and/or prospective
- Panel size requirements
- Baseline date
- Attribution disputes

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### Data Sharing

- Key component of VBC contract management
- Payers flat files/ccd/EMR access
- Providers quality/utilization/claims
- Frequency of reporting
- Mechanism for data analytics





# **Polling Question**

How are you currently managing payer data?

- a. Internal team/technology
- b. Third party vendor
- c. Combination of both a & b
- d. Receive data, but don't manage it
- e. Not currently receiving data

### **Financial Considerations**

- Revenue/cost inclusions
- Carve outs
- MLR/MCF Medical Loss Ratio/Medical Cost Fund Thresholds
- Shared savings/loss percentage
- Deficit carry forward
- Evergreen Contracts





# **Polling Question**

My organization is prepared to manage VBC contracts with downside risk. a. Agree b. Somewhat Agree c. Somewhat Disagree d. Disagree

### **Quality and Performance Metrics**



- Alignment with internal initiatives
- Total number of measures
- Measure weights
- Measure targets/thresholds
- Methodology
- Payer provided support through staffing or care coordination / technology payments



### Key Takeaways

- Ensure reconciliation terms align with organization's needs i.e. frequency of payouts, final settlement
- Be aware of reconciliation dispute submission deadlines
- Consider the impact of attribution methodology and ensure there is a way to address attribution disputes
- Note any requirements of patient panel size and how it impacts potential incentives/rewards
- Be prepared to share and manage contract data
  - Ensure responsibilities are clear, how data will be delivered, and if any support will be provided
  - Ensure the type of data and frequency that you want to receive it is addressed
- Carefully review what is included/excluded from revenue and cost address any concerns
- Understand the implications of contracts that carry forward a deficit
- If you are in an evergreen contract review terms before it auto renews and consider asking for a new contract
- Try to negotiate quality metrics that align to your internal initiatives and can be managed across contracts



#### **Connecting the healthcare ecosystem**

#### to enable more meaningful insights and better care



### Improve quality performance

Use actionable data that increases the opportunity for optimal health outcomes.

#### Ensure risk accuracy

Capture more complete diagnoses, document care, and ensure more appropriate reimbursement.

### Enhance provider collaboration

Enable your network to capture the right data at the point of care to close gaps and improve care.





# Questions?





## Thank you for joining us

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