



# Overcoming Provider Data Challenges: Strategies for Payers

October 8, 2024

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*Educational Webinar Series*

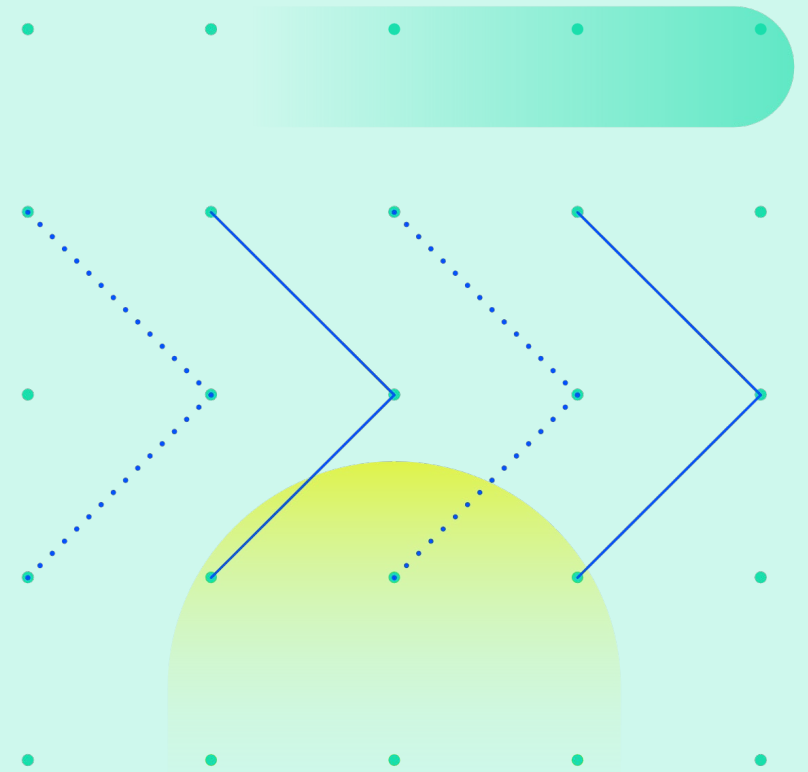
# Today's Agenda



- Meet Today's Speaker
- About MRO
- Common data challenges that impact value-based care success
- Addressing data fragmentation to improve care coordination.
- Streamlining data management to reduce administrative burdens
- Strategies for better ACO collaboration
- Key Take Aways
- Q&A

# Meet Today's Speaker

*Brad Hawkins*  
*National Director,*  
*Health Plan Sales*



## Brad Hawkins

### National Director, Health Plan Sales

Brad leads MRO's commercial efforts with Health Plans, leveraging the leading Provider network to simplify clinical data exchange.

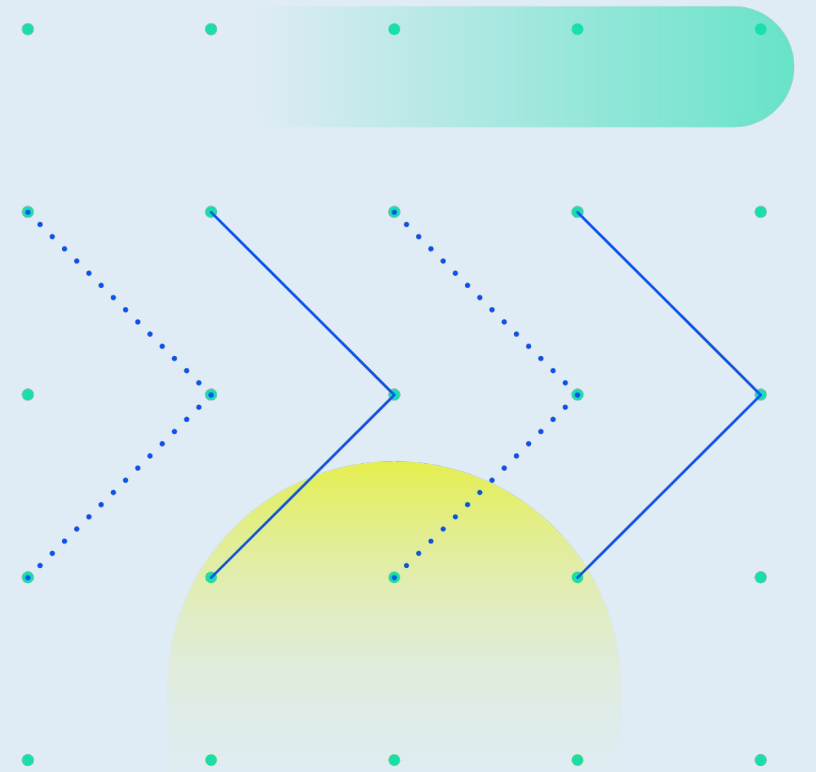
For more than 20 years, Brad has driven adoption of digital health solutions to optimize both the Provider and Patient experience. Specifically, Brad has advocated for clinical data exchange solutions and the adoption of Interoperability in his leadership roles at Moxe, Kyruus, and WebMD.

Brad is a native Texan (Grapevine) but holds a BS in Business Administration from Oklahoma State University. Brad lives in Lafayette, Louisiana with his Wife, Virginia, their 15-year-old son, Merrit, as well as two Dobermans that occupy much of the family's time and financial resources.

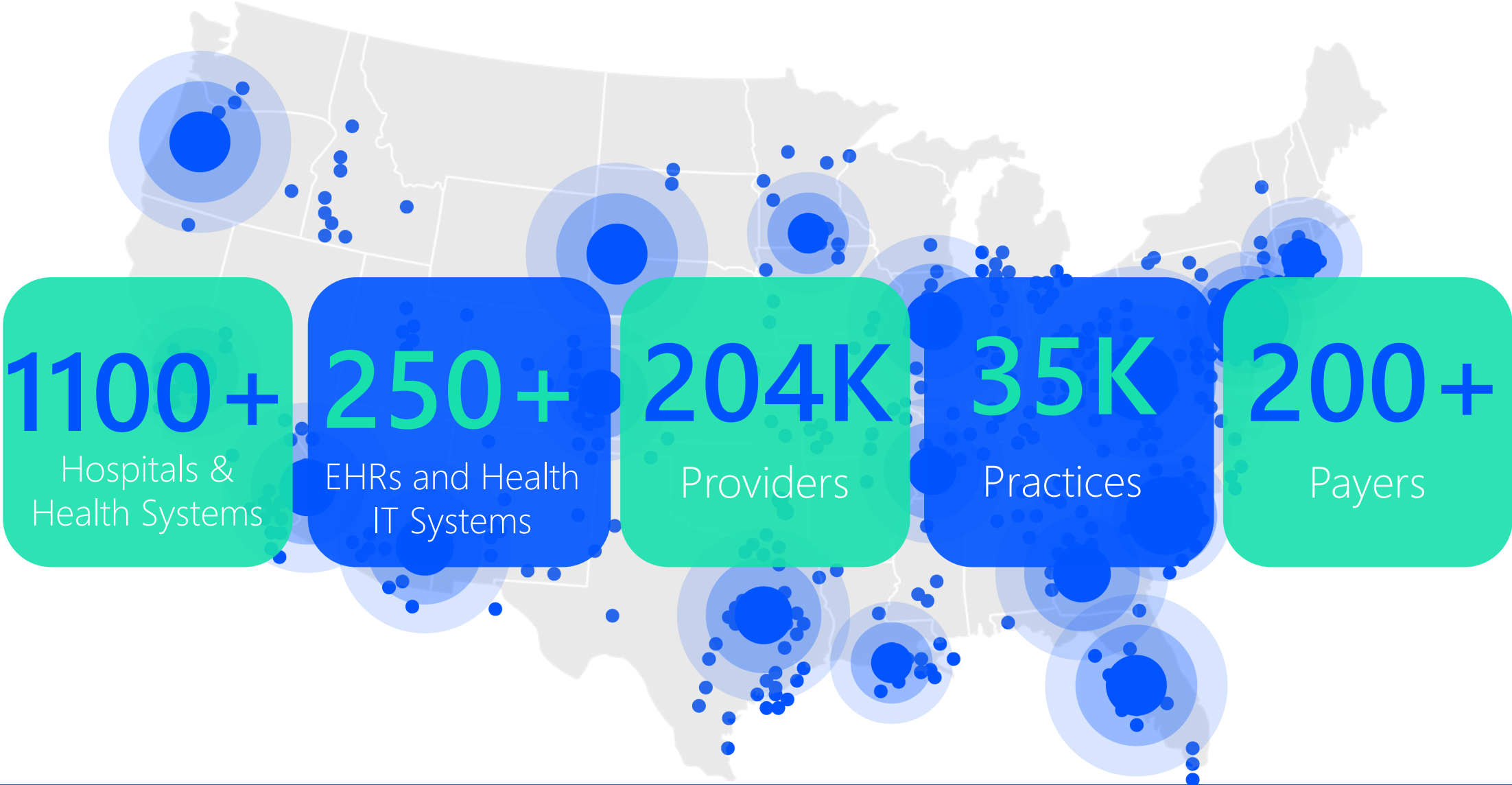


# About MRO

Accelerating Clinical Data Exchange



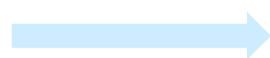
# Extensive Connectivity Across the Healthcare Ecosystem



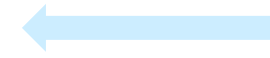
# One Platform—A Multitude of Tailor-Made Solutions



Treatment



Payment



Operations



Support **Risk Adjustment**, HEDIS scoring and quality initiatives



Reduce administrative burden in care settings



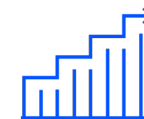
Identify patients for **care coordination** and expedite closure of **care gaps**



Support management of **Value-Based Care Contracts**

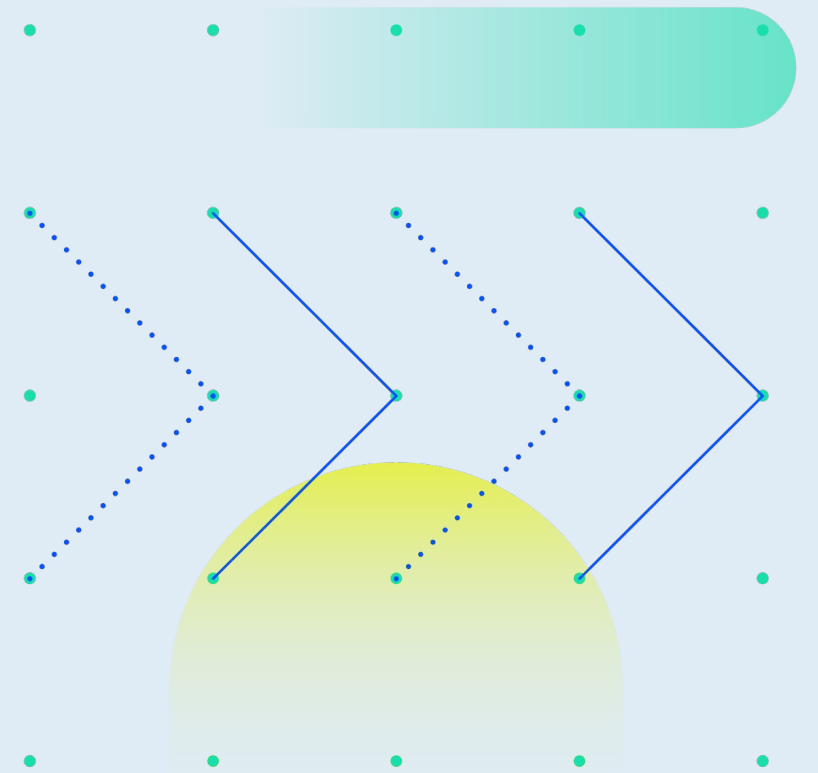


Timely processing of **claims and appeals**



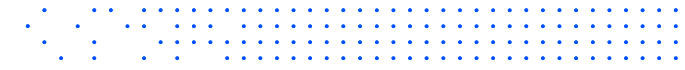
Enhance data-driven **payer-provider relationship**

# Overcoming Data Challenges to Succeed in Value-Based Care





# Accurate Data is A Necessity to Meet the Changing Market



**30%** of healthcare spending tied to administrative cost

**90 million** lives will be in VBC models by **2027**



NCQA pushing for all **digital HEDIS measures** by 2030

**73%** MGMA staff shortages

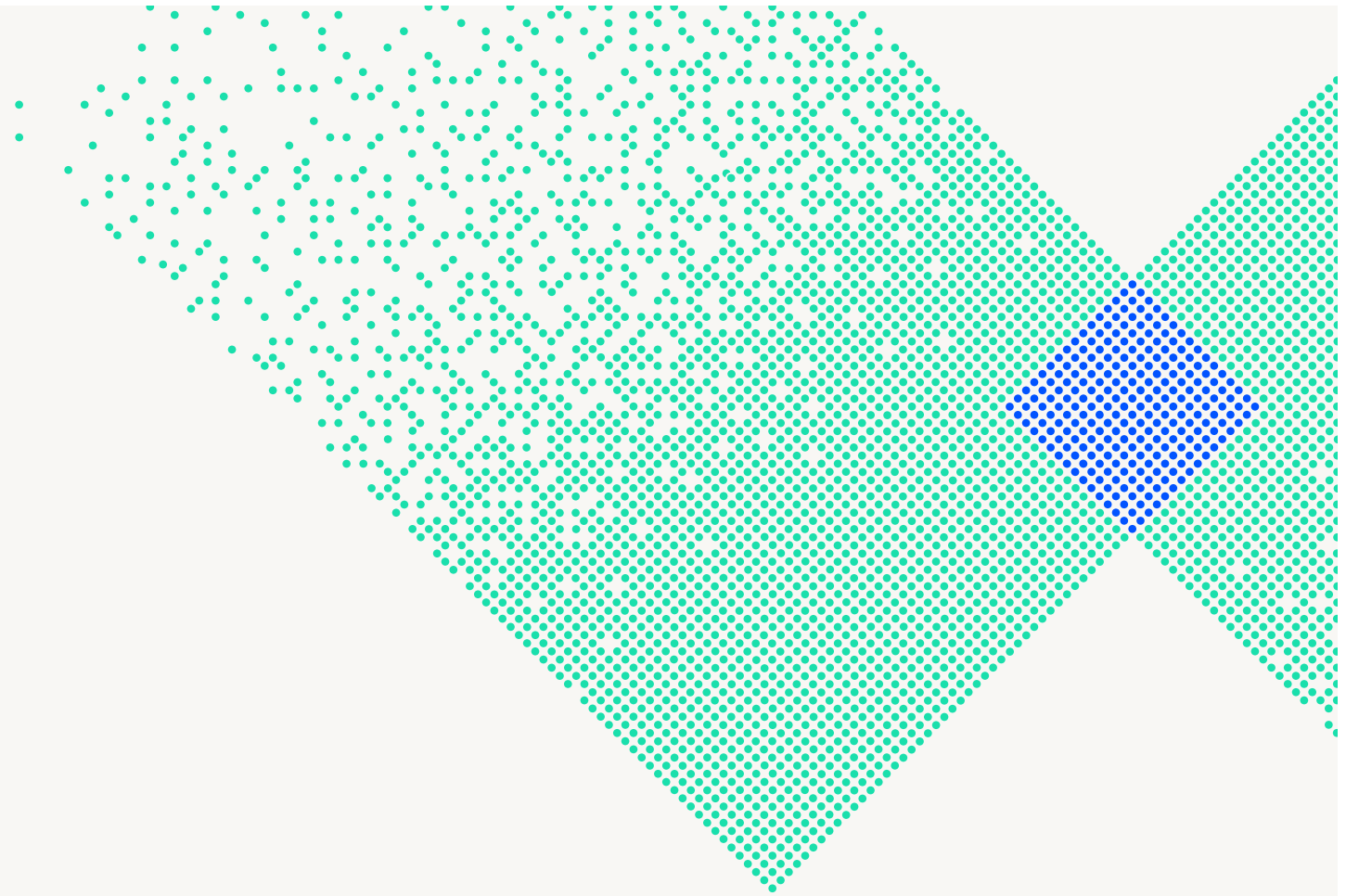


**10k** Americans turning 65 every day through 2029

CMS aims to have all **Medicare beneficiaries** enrolled in accountable care programs by **2030**.



# Poll Question # 1



# Common Data Challenges that Impact VBC Success



**1**

**Multiple/Siloed Data Sources:**  
*Data quality and availability may vary.*

**2**

**Limitations in Resources:**  
*Variations in providers, practice size, or Health IT.*

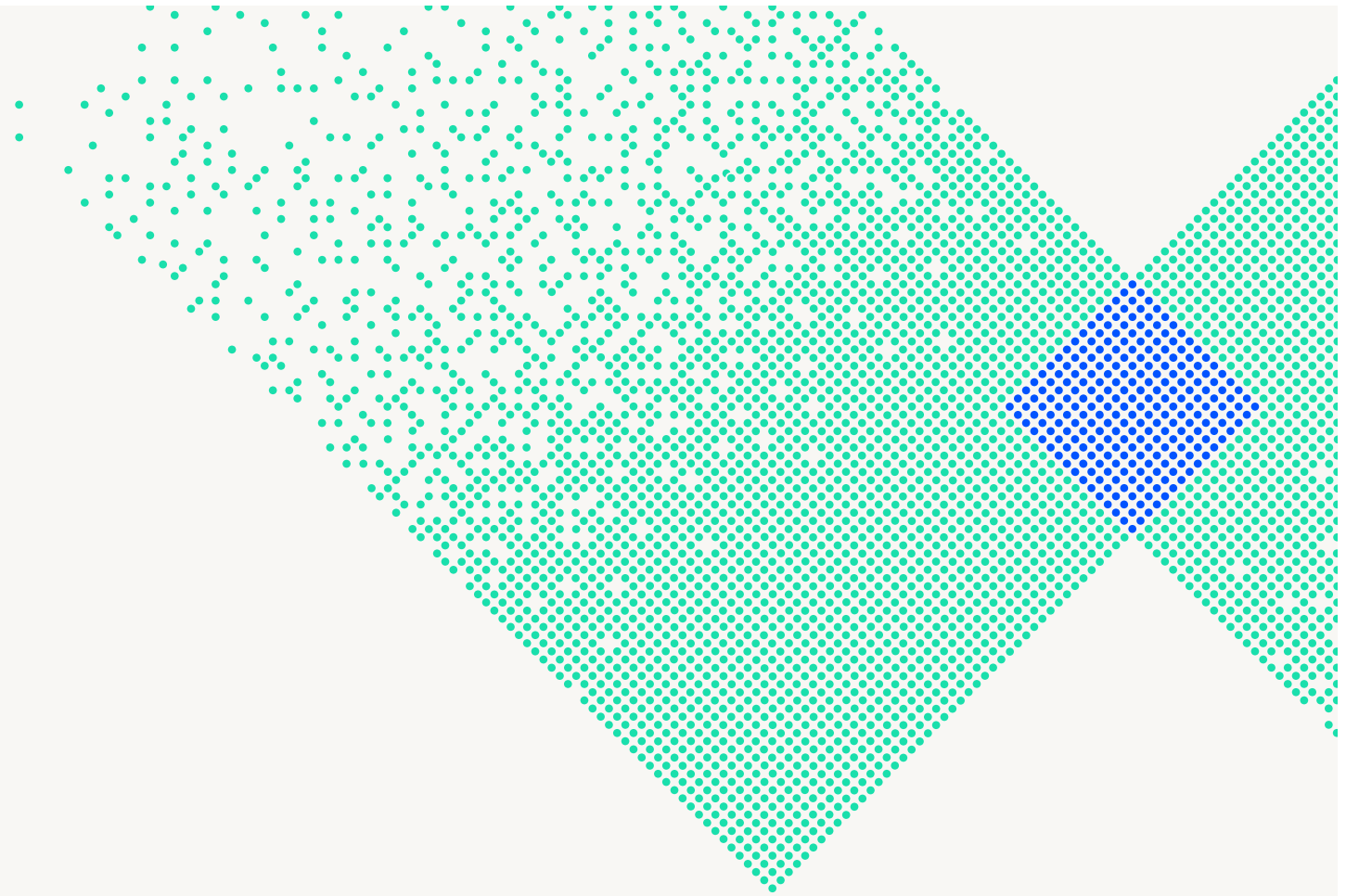
**3**

**Data Sets Needed:** *Different data needs based on performance measures, populations or contracts.*

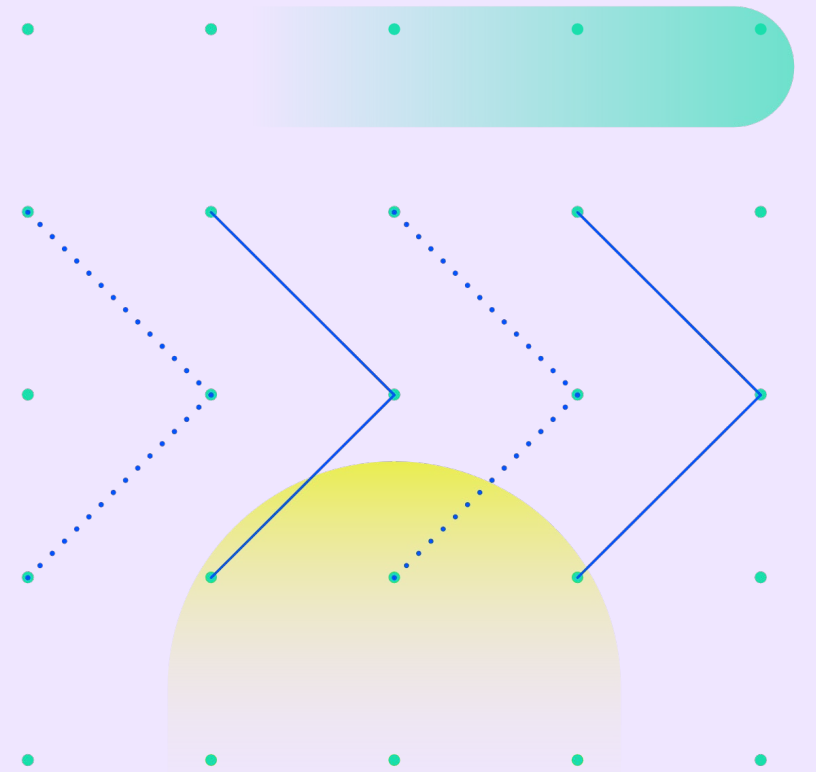
**As healthcare becomes increasingly data-driven, the accuracy and consistency of that data directly impact the quality of care provided.**

- Inconsistent standards create barriers to unified patient records, complicating care coordination.
- Complex reporting requirements increases the burden on organizations, with growing needs for audits and data validation.
- As VBC models grow, organizations face challenges in managing larger data volumes while maintaining data accuracy and integrity.

# Poll Question # 2



# Data Quality and Validation for VBC Success



# Digital Quality and Validation is a Necessity



**Primary Source Verification:** Ensures data accuracy and integrity, resolving any discrepancies through detailed reviews and discussions.

**Data Validation Process:** Comprehensive validation of key data elements (CDEs) such as patient demographics, encounter details, procedure, lab results, immunization history, and vital signs.

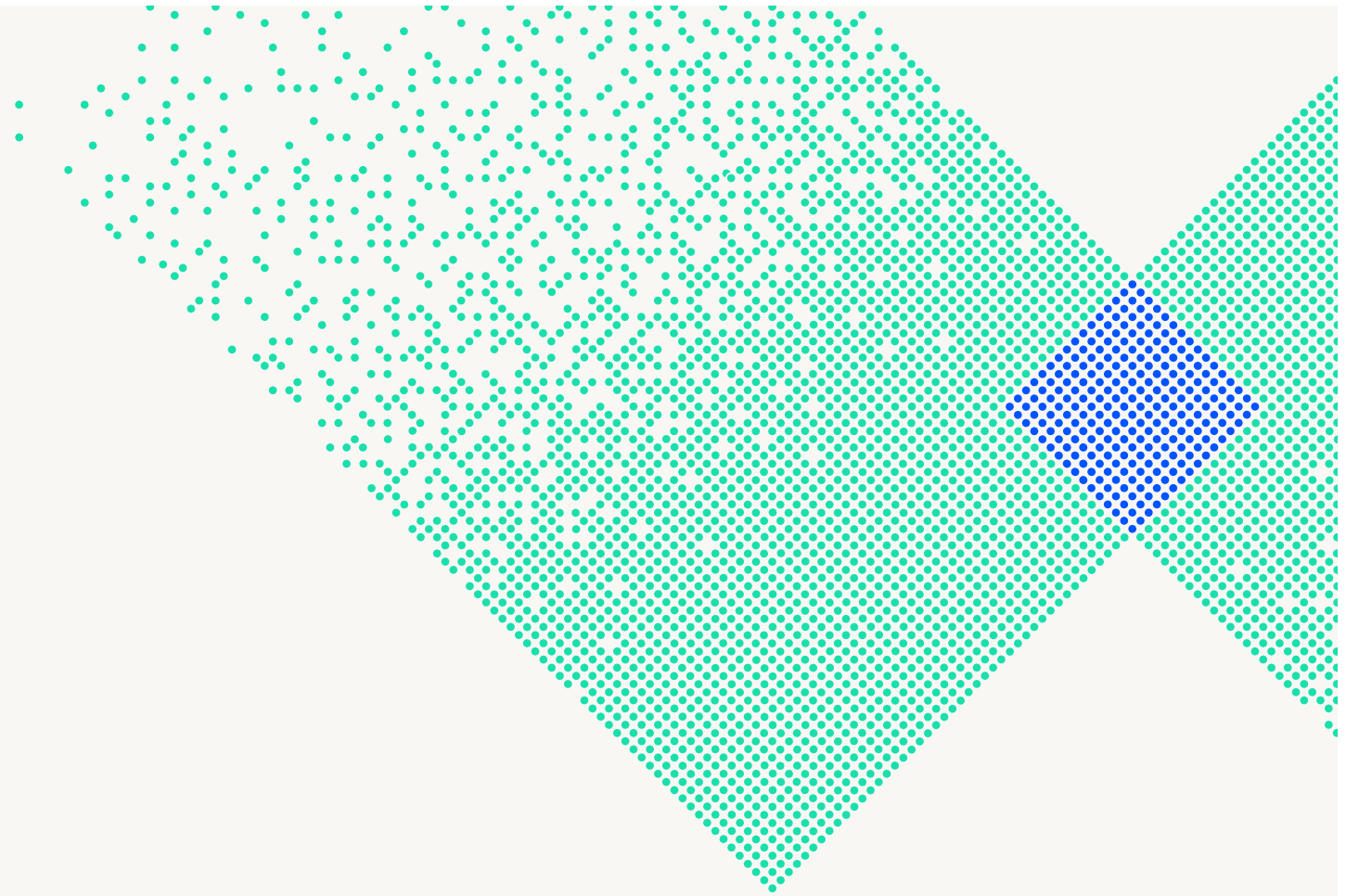


**Data Extraction and HIPAA Compliance:** Meets the standards set forth by NCQA's Data Aggregator Validation Program, adheres to HIPAA regulations, with filters to exclude self-pay and psychotherapy notes.

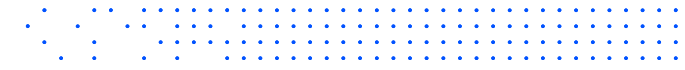


**Supports Various Use Cases:** Risk adjustment, clinical quality reporting (PCMH, ACO), HEDIS, claims adjudication, care coordination, rapid diagnosis, utilization management, and payment integrity.

# Poll Question # 3



# How Validation and Standardization Drive Healthcare Quality



## What do most people get wrong about digital quality and data validation in healthcare?

Collecting data alone isn't enough. It must be validated, standardized, and interoperable; otherwise, it risks being incomplete and impacts care quality.

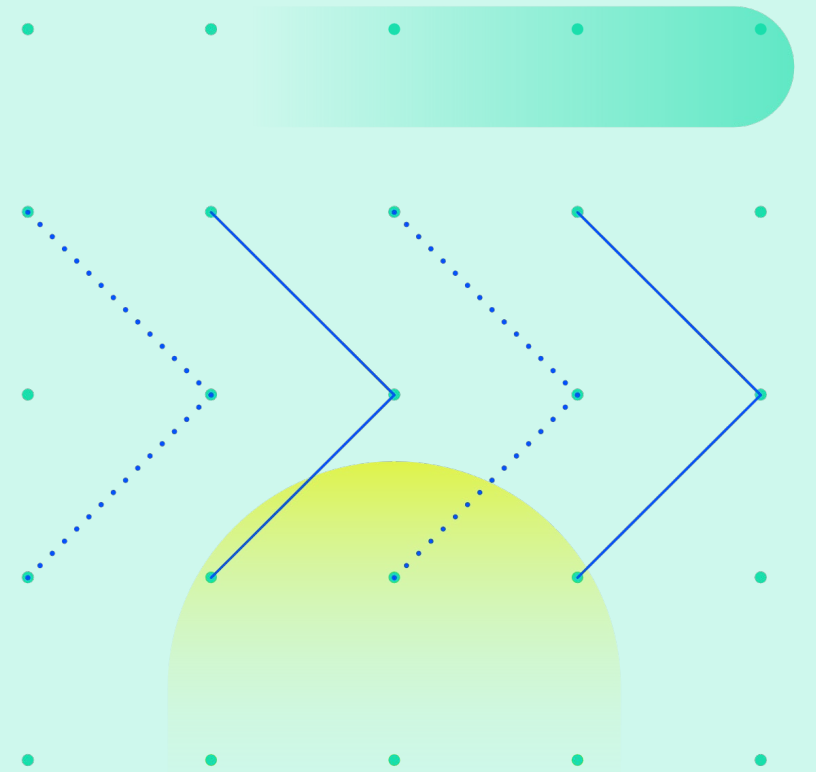


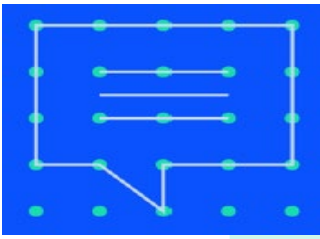
## What have we learned about digital quality and data validation?

The focus was initially on interoperability, but data validation is just as vital. Without accurate, standardized data, interoperability alone won't ensure reliable decision-making.



# Strategies to Strengthen ACO Partnerships





**“Administrative health-care costs are higher as a share of GDP in the United States than in other countries.”**

*- Brookings Institute*



### Adopt Standardized Data Formats.

- Implement formats like HL7 FHIR to enable seamless data sharing across systems.
- Adopt new ways of managing and understanding unstructured data.



### Centralize Data Aggregation.

- Use a single, centralized repository to consolidate data from multiple sources.
- Incorporate unstructured data, such as clinical notes, for a complete patient view.



### Align on VBC Contracts and Incentives.

- Shared goals and trust enhance data-sharing and collaborative efforts.
- Implement contracts linking payments to quality and cost metrics.
- Establish shared savings programs to reward efficiency and care coordination.



### Integrate Health IT Systems.

- Invest in interoperable systems that ensure patient data is available at the point of care, no matter where treatment occurs.

# Key Take Aways



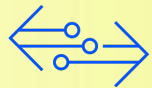
**Accurate Data Drives VBC Success:** Reliable, validated data ensures payers can effectively measure and report on ACO quality metrics like HEDIS and CMS requirements.



**Operational Efficiency Through Automation:** Reduces administrative burdens, minimizes errors, and empowers payers to support ACOs with real-time data, leading to better decision-making and financial performance.



**Data Validation and Standardization:** Validated data, ensuring the accuracy of quality reporting and compliance with performance metrics, enhancing trust in shared savings models.



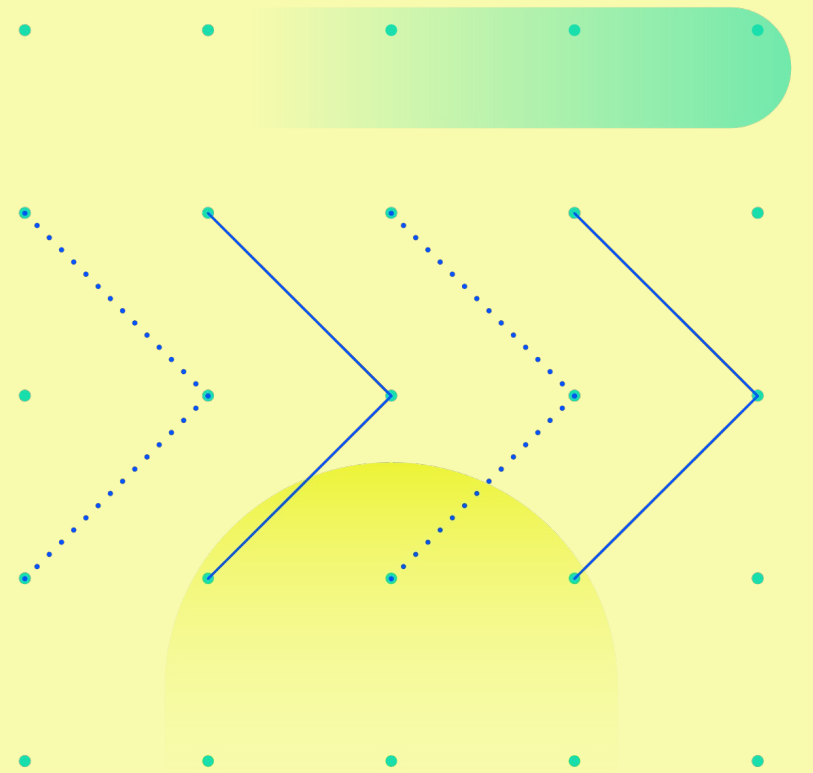
**Interoperability for Seamless Care Coordination:** Facilitates smooth data sharing, ensuring timely, actionable insights to improve care coordination and outcomes.



**Centralized Repositories:** Consolidating data into a single source reduces fragmentation, allowing a holistic view of patient care, and performance tracking across critical VBC measures.



# Q&A





MRO

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mro™ Accelerating Clinical Data Exchange™

f in X

MRO is accelerating the exchange of clinical data throughout the healthcare ecosystem on behalf of providers, payers and users of clinical data.

RESOURCES

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mro™ Accelerating Clinical Data Exchange™

Payer Solutions

- Enabling Accurate, Intelligent and Accelerated Clinical Data Exchange
- Automate medical record retrieval
- Simplify data acquisition from extensive provider network with over 200+ EMRs & PMs
- Support HEDIS, Risk Adjustment and other quality programs
- Take action with identifiable gaps in care
- Easily incorporate clinical quality measurements into VBC programs

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