

Why Your ACO's Data Strategy Is Your Biggest Competitive Advantage – And How to Build It



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VBCExhibitHall.com



Educational Webinar Series



WHY TRUST US TO TALK ABOUT THIS TOPIC?

WE'RE DEEP INTO IT.

MEASURE QUALITY & COST!

SUPPORT

ROI EPISODES

SUPPORT PAYMT MODELS

BE SAFE UNDER RISK!

EXCELLENT AGGREGATED DATA!

TELLS THE STORY OF VALUE!

ANALYSIS

DEEP KNOWLEDGE

LEARN

DEEP RESEARCH HUB



April Fool's Poll: What's Your ACO Data Profile?



A. We use claims data to identify patient risk, costs, and gaps. We collect QRDA1s for APP reporting.

B. We integrate claims data with some EHR data, and use for pop health.. We report APP using eQMs.

C. We integrate claims & clinical data From EHRs. We create Episodes for Improving cost/quality performance.

Landscape for ACOs in 2026



- Dominated by large players
- Continuing consolidation
- More physicians employed, engulfed in ever-larger systems
- Physician practice size growing
- Costs continue rising
- CMS winnowing and targeting payment models to Risk
- APP has led to growth of ACO Data, but not always best use
- ACOs are in competition, an underappreciated reality

The Uncomfortable Truth: Most ACOs sitting on gold they can't access.





The Problem

Undervaluing Data



Image by Tejas Kotha at Unsplash



ACOs are Betting on Losing Hands

- Incorrect interoperability assumptions
 - Patient summaries vs. data exchanges
 - Intra-practice documentation discrepancies
 - Fragmented patient profiles across settings
- Overreliance on CMS Data files
 - Inherent charge lag, varies by practice
 - Surprises in final claims runout file
 - Do not contain key clinical elements
- Focus on reaction, not prediction

Effects of Undervaluing Data

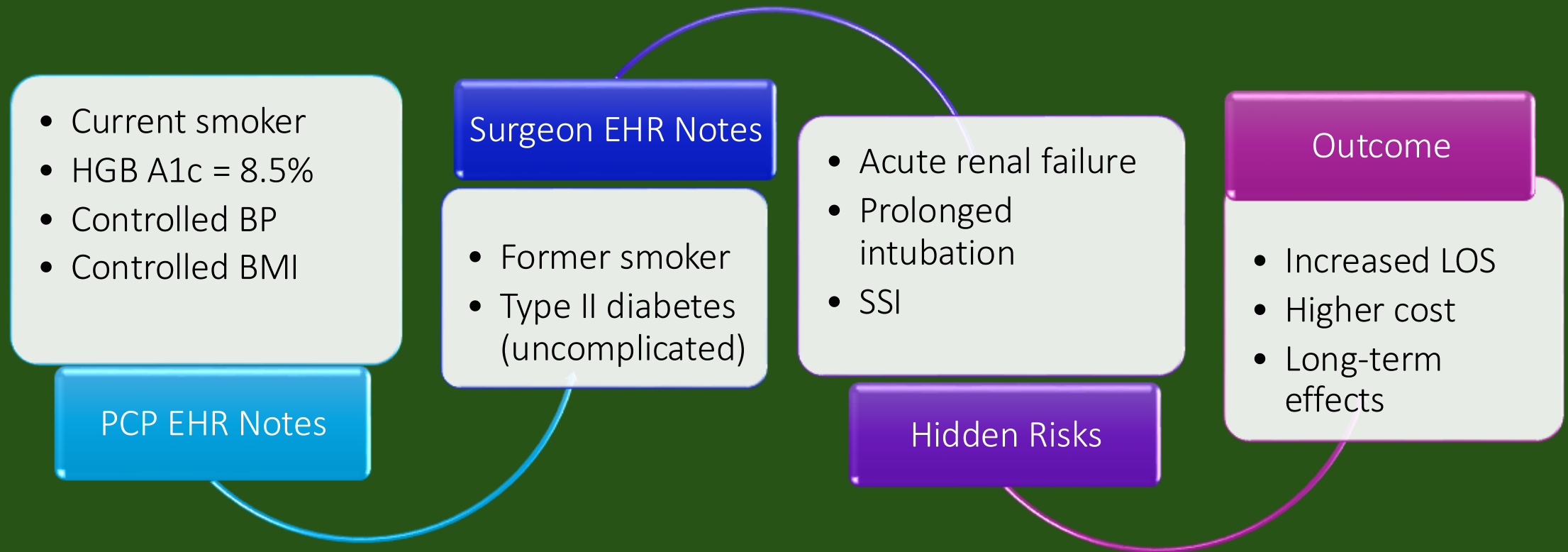
- Lost opportunities for improving savings
- Missed chances to intervene
- No analytics to guide direction
- No support for risk payment models
- Inability to collaborate with specialists



Image by Pixabay

Siloed Data Leads to Poor Outcomes

Example: A Patient with a scheduled CABG and underlying risk factors





The Opportunity:

Break Free from Competition
with a Mature Data Strategy

Go Further with Your Data



Unlock benefits of your data!

- Enables specialty & hospital collaborations
- Accurate patient attribution
- Enhanced risk stratification
- Real-time utilization tracking
- Proactive care gap closure

The Competitive Advantage Framework

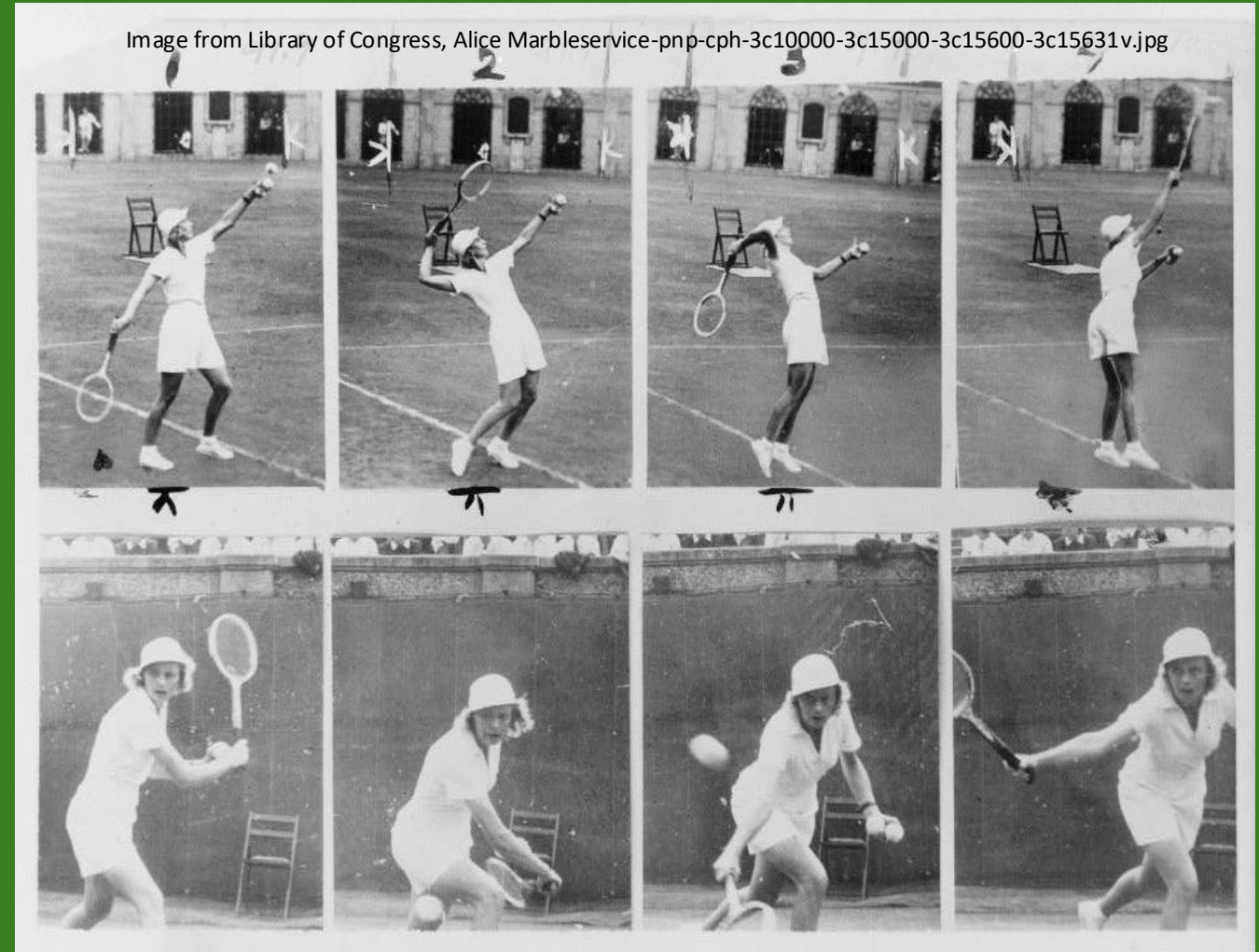
ACO is in central position to be hub for data brokering

Optimize network performance

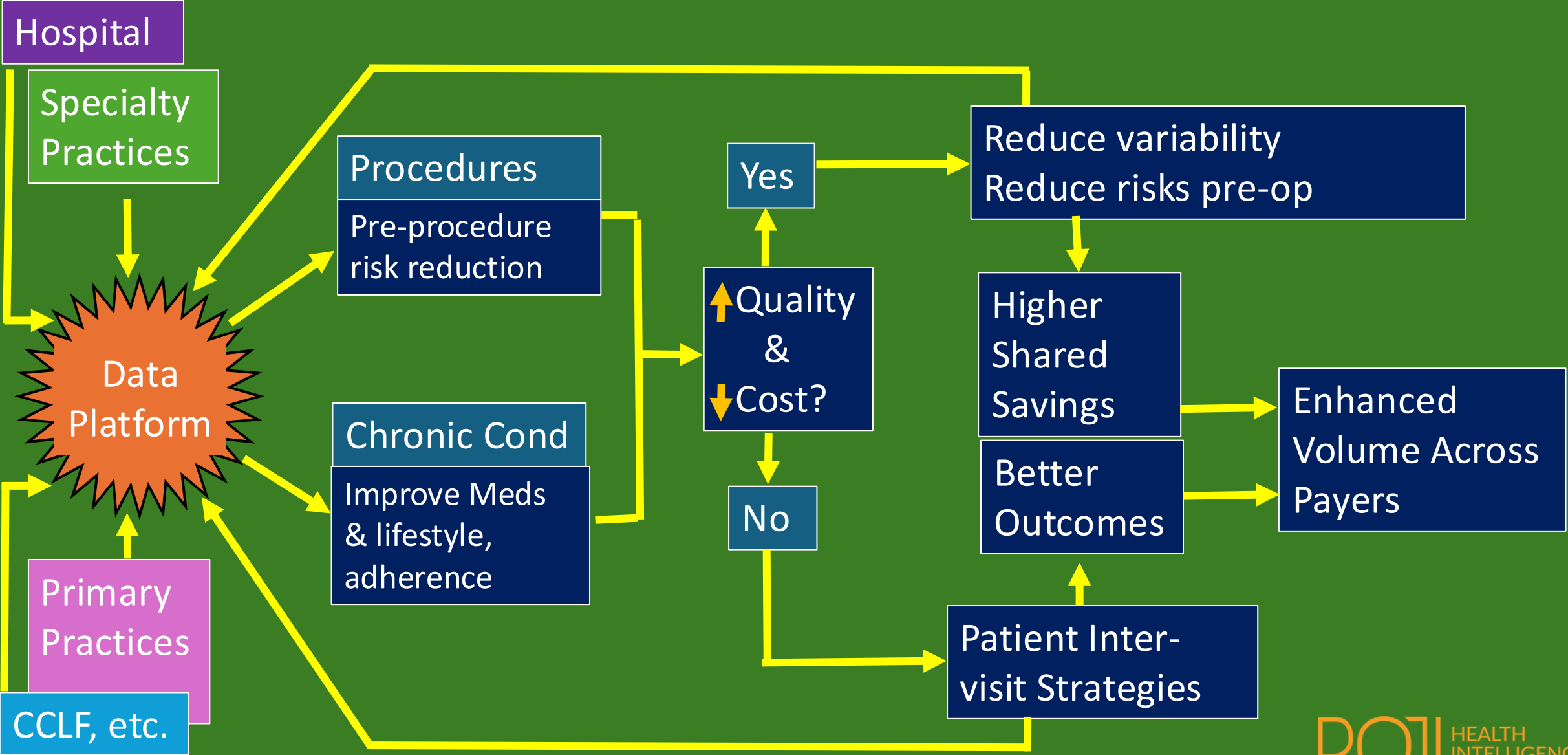
- Data-driven specialty referrals
- 360° degree episode views
- Top tier health plan status

See data as a pan-system asset

- Not limited to Quality Reporting
- Measure shortfall = opportunity
- Identify cost/quality variations
- Address root cause, not symptoms



How Data Flow Can Improve Competitive Position





Foundation to Your Winning Game

1. Financial Strength
2. Patient Growth
3. Patient loyalty & satisfaction
4. Primary care excellence
5. Specialty care excellence
6. Good contracts with payers and employers
7. Top tier with CMS

Data Basics: Key Concepts

- Critical data are not always visible.
What you see: 40%
What you don't see: 60%
- Data requires curating to make it visible and actionable
- Actionability: How do you help patients improve when they're not present?



5 Pillars for Competitive ACO Strategy



Data Integration

- Objective: Puzzle together the accurate stories of patients, systems, costs
- Feeds:
 - EHR (clinical history)
 - Claims (money & services)
 - Medicines
 - Labs
 - Devices
 - Patient sources
- Admin & Financial Data for payment modeling
- Formats: fastest and most direct to data (FHIR App) is key for clinical data



Data Integration Requires Provider Trust

- ACOs must move from regulatory/administrative role into collaborative leadership
- Practices on antiquated or old systems will need coaxing to change
- Creativity, flexibility, and protection of privacy is key with private practices
- Practices “renting” EHRs from large systems (e.g. with Epic) need collaboration with ACO & host system
- Specialty practice concerns over competition must be addressed

Episodes and Analytics

Comparative analytics of patients' conditions, treatment, procedure

Drill down into cost Drivers, quality issues

Engage clinicians in the results of their clinical services

See systemic problems In care / pathway

Without ability to see the full patient picture of real patient episodes, data are just numbers.

Episodes give physicians the agency to foster change by seeing cause and effects, patient by patient.



Paul Klee, The Physician

Interventions



- Interventions have power to transform individual patients and groups
- Individualized interventions improve outcomes of individuals
- Systemic interventions improve processes and pathways for all patients
- Both types are essential
- Both require actionable data

ACO Interventions

Individual

- Population Health
- Referrals for: dietician services, rehab, physical therapy
- Health coaching: lifestyle changes
- Clinician review of care plans

Group

- Projects to review episodes and to create new pathways & processes
- Adoption of ERAS standards in hospitals
- Specialty collaborations to streamline communication

Physician Collaboration

- Network Performance requires Physician Collaboration
- Physicians must have their own view of Episodes
- Critical actionable items for primaries:
 - % of patients in poor control > 1yr % of patients in poor control w/ 0 interventions
 - % of patients w/ chronic disease not meeting standard of care
- There must be means for physicians to provide feedback and negotiate



Financial Performance



- Your ACO's future Financial Performance requires harnessing more savings
- Aggregating and using data widely to build collaborations with specialists is key to relevance
- Data will help you benchmark where you are, and project performance under risk
- Cost variation is key to understanding what is driving costs

Benchmarking Data in the Future

- ACO financial expectations will change not from new imposed risk – but from competition from other ACOs
- CMS TEAM and ASM specialty payment models mandate ACO connections, & ACCESS envisions ACO use of specialty networks
- Without ability to tap into data, ACOs are passive and victims of costs
- Taking action to collaborate with specialists and build your strategy will help you meet new Benchmarks

Are you planning a competitive Data Strategy?

A.
Absolutely!



Photo by Kartik Iyer on Unsplash



Photo by Marina Grynyka on Unsplash

B.
No, I'm not
convinced
of the merit.

Building Your Competitive Data Strategy



Level Up Data

Level 4: Strategic

Data fuels patient care in all settings, even home

Level 3: Predictive

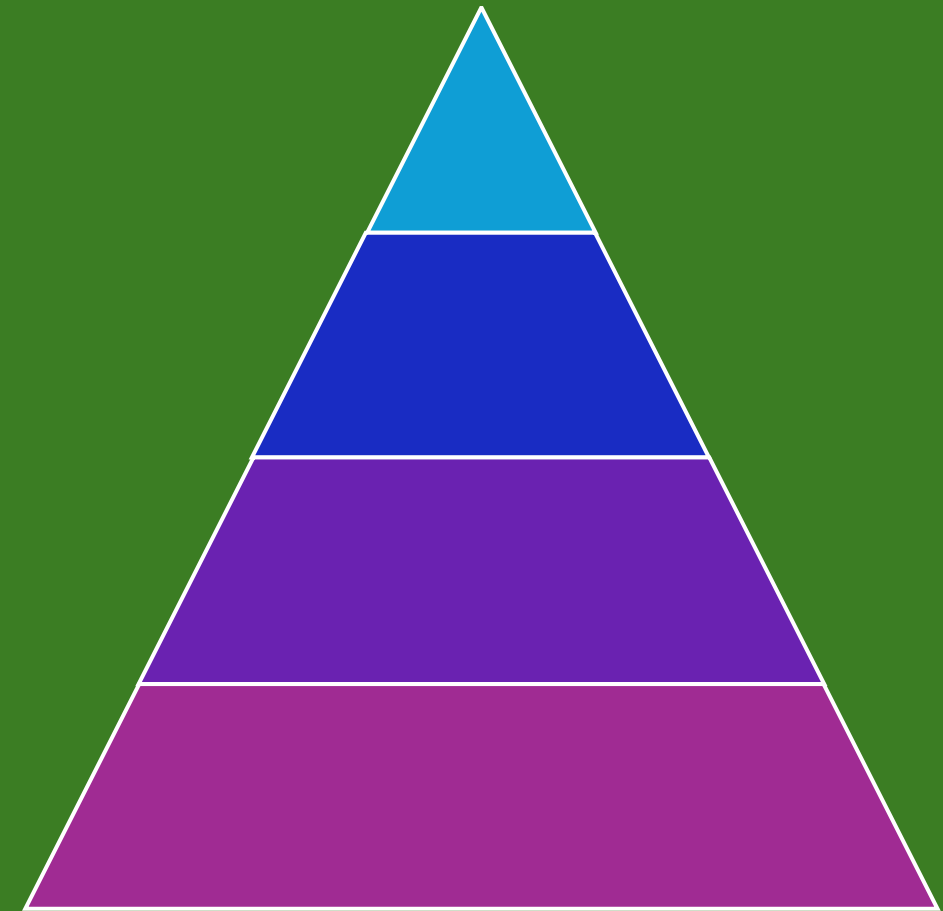
Targeted, data driven interventions

Level 2: Operational

Integrated data, basic risk scoring

Level 1: Reactive

Claims only, limited value





90-Day Quick Wins: What to Tackle First

- Prepare providers and recruit physicians to steer your effort
- Plan your Data Strategy, review vendor capabilities
- Log issues in accessing data from current physician systems

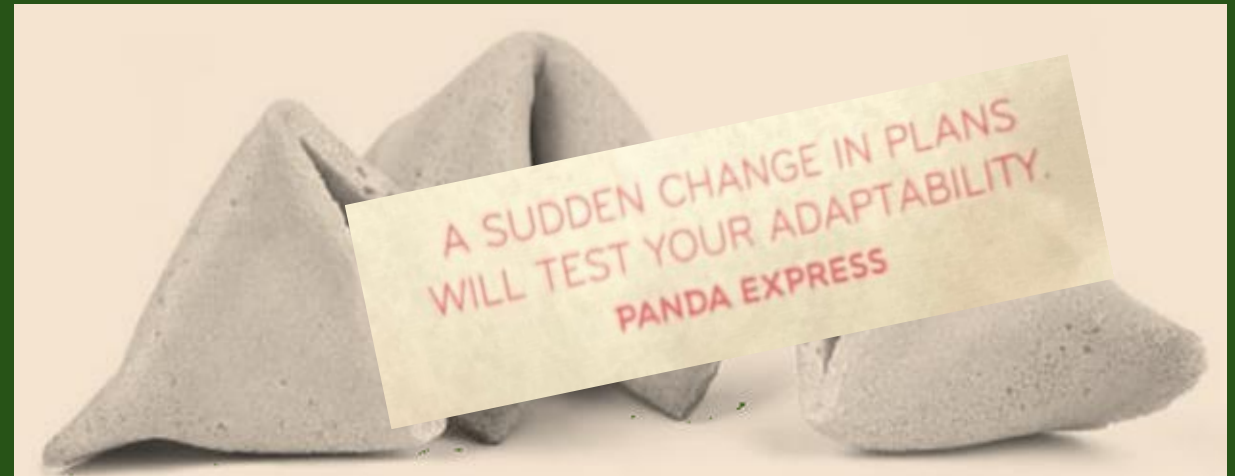
What is Your Physician System Aggregation Strategy?

Start Early

- Expect data-related obstacles
- Educate re: standardization
- Early feedback = time to improve

Prioritize Value, Not Formats

- QRDA's - Limited accuracy and single-use
- "Cookie Cutter" isn't Real World
- Some practices require flexible solutions
- Help physicians see value of fluid and fast data transmission

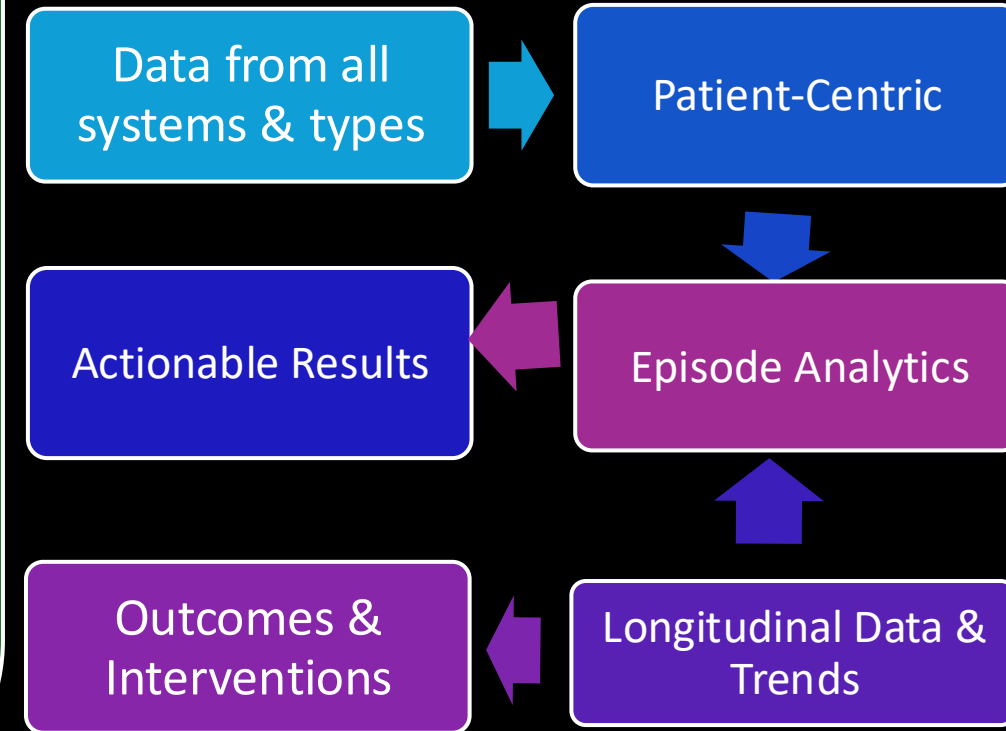


Build vs. Buy vs. Partner: Technology Decision Framework

Decision Considerations

- Does VBC fit? Add-on or wheelhouse?
- Do you have money and experience to maintain data accuracy and completeness?
- How much longitudinal data can you access?
- Time and resources to implement & maintain?
- Onboarding support, ongoing maintenance

Framework "Must Haves"



Summary: The 5 Pillars

- Pillar 1: Data Integration
- Pillar 2: Episodes & Analytics
- Pillar 3: Interventions
- Pillar 4: Physician Collaboration
- Pillar 5: Financial Performance



Your ACO's Data Strategy Checklist

- ✓ Evaluate VBC technology firms, select a partner
- ✓ Complete Business Associate and Data Use Agreements
- ✓ Contact practices, document EHR details
- ✓ Educate clinicians/practices on documentation re: VBC
- ✓ Review internal structure for role-based access

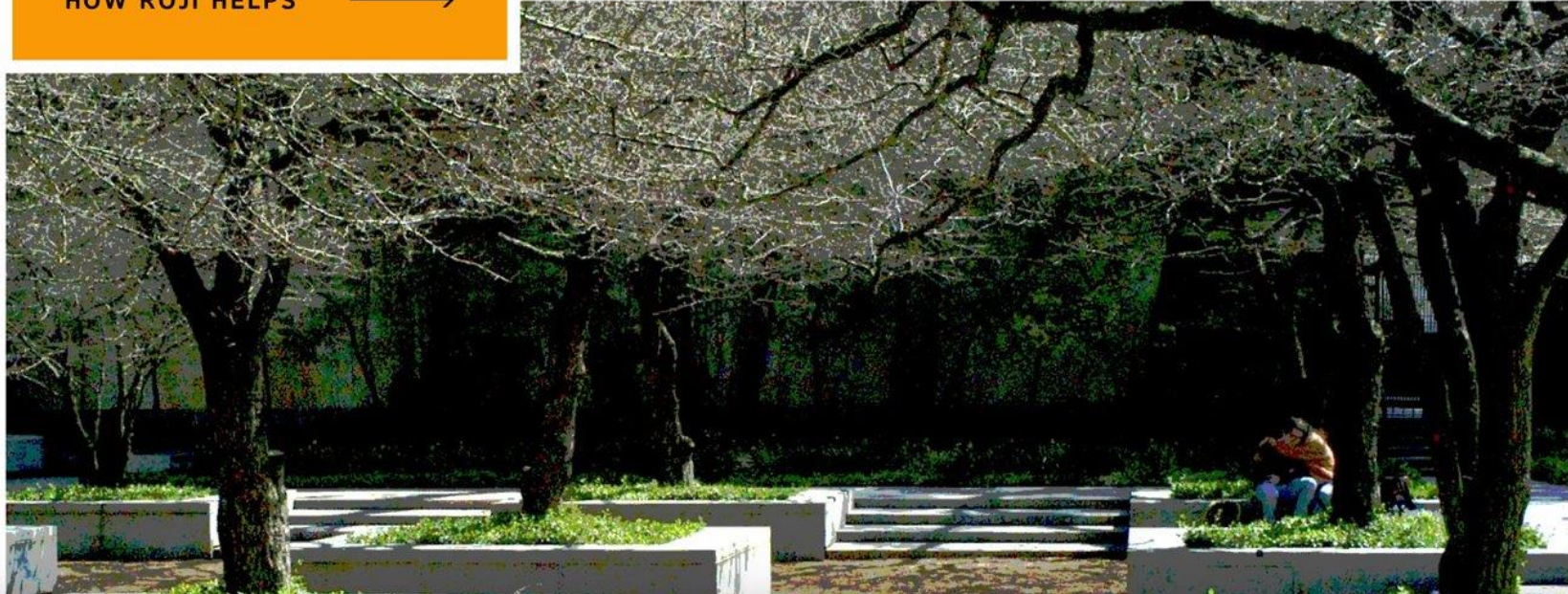
Photo by Danielle Barnes on unsplash.com

Start Your Journey Here



Our Mission Is Value-Based Care

HOW ROJI HELPS →



- A proven data platform is critical for success in episode-based or population-based models
- Contact us for a low-cost evaluation of your ACO's chronic condition and procedural episode cost drivers



Questions and Answers

Stop by our VBC Exhibit Hall Virtual Booth



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Thank You!

Roji Health Intelligence LLC

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