

Be Bold: MSK Clinical Interventions driven through Quality Programs

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Presented By:

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Webinar Participant Tips

All participant lines are muted. To protect your privacy, you will only see your name and the presenters names in the participant box.

- To submit a question to the presenters any time during the event;
- In the Event window, in the Panels drop-down list, select Q & A.
- Type your question in the Q & A box.
- Click “Send”.

About the Speakers

About Luna:

- In-home, in-person outpatient physical therapy
- 3,500 therapists across 55 metro-areas in 28 states
- Specialized clinical interventions to the home delivered by licensed physical therapists
- Learn more at www.getluna.com

About CAT 5 Strategies:

- Consulting expertise for health plans, vendors, value-based providers, and health systems doing business in the government programs space.
- Stars, Quality, Compliance and Strategy Programs
- Learn more at www.healthbizconsulting.com

Agenda

- Introductions
- The Focus & Facts
- The Foundation
- Critical Elements of a Quality Program for MSK Care
- In Year: Plug and Play Quality Program
- Q&A

Why a MSK Focus for a Quality Program?

As an industry, we see:

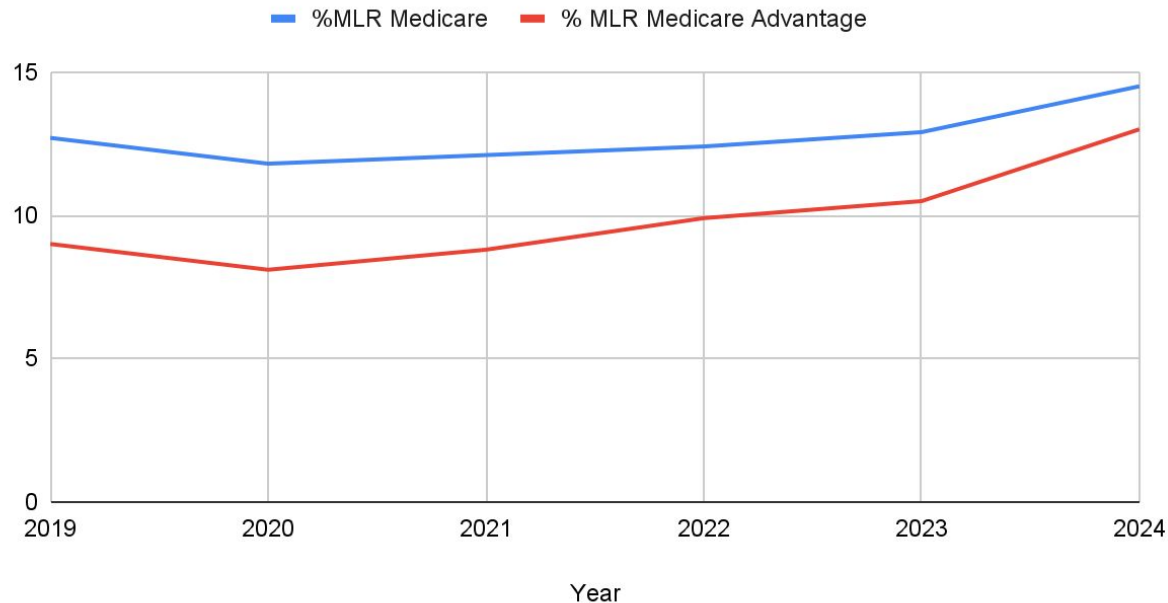
- Escalating costs
- Increasing prevalence
- Poor outcomes
- Goal for aging with independence and staying in the home
- New opportunities with CMS and HHS benefits and program designs
- Need to simplify the care journey,
- A commitment to member experience
- Need to improve Star/HEDIS metrics
- Capture risk adjustment conditions compliantly
- Challenge of implementing successful high-risk and raising programs.

Keys to Success:

- Clarity of Goal and Scope
- Targeting of Population
- Uniformly Apply Program
- Partner Alignment
- Treatment
- Metrics to Measure
- ROI
- Why this will be successful

Musculoskeletal Medicare Spend Expectations for 2024

%MLR Medicare and % MLR Medicare Advantage



- Original FFS Medicare
 - Ranges from 12% - 14%
- Medicare Advantage Plans
 - Ranges from 9%-12%
- We see the spend heading to 14-16% for 2024
- MSK diagnoses are typically in top 3 for total dollars spent by condition

Why is Musculoskeletal (MSK) Care a Top Driver of Medical Spending?

- Multiple causes: Trauma, Autoimmune disease, Degenerative MSK
- Other issues exacerbate poor outcomes: obesity, behavioral health (anxiety/depression), diabetes, neurological (i.e., dementia), falling
- Widespread prevalence of debilitating conditions, and members seeking treatment for MSK:
 - 27% of commercial enrollees
 - 58% of Medicare enrollees
 - 78% of Medicare enrollees complain of pain
- Barriers in adhering to treatment plans
- Inappropriate utilization of services that deliver low value
 - Unnecessary imaging
 - Unnecessary procedures and surgery

Opportunity to Affect Change Through Quality Framework - 10 Steps

1. Select target conditions
2. Select target population
3. Identify data sources
4. Identify participants
5. Understand the research
6. Set program goals
7. Target interventions
8. Measure progress
9. Identify opportunities
10. Act on opportunities



- Reduce avoidable costs for care that delivers lower value
- Improve quality outcomes
- Improve Star Ratings
- Ensure Risk Adjustment accuracy
- Improve retention



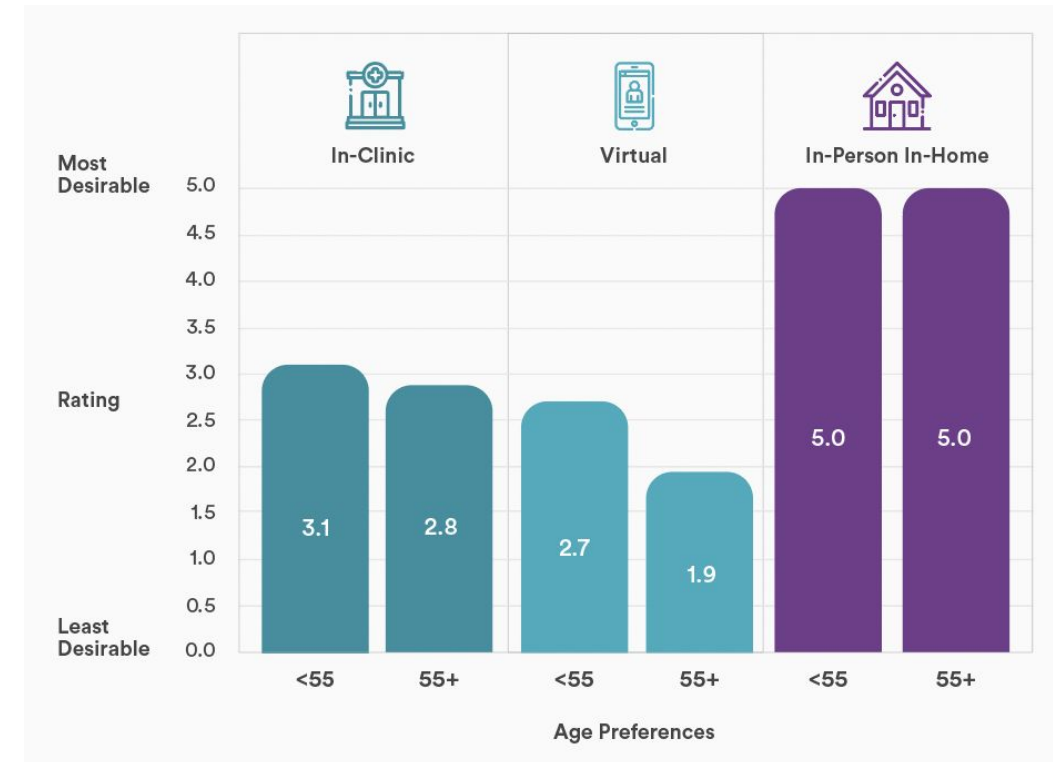
Target Conditions, Triggers, & Events

- Trauma-related injuries such as fractures and muscle tears,
- Autoimmune disorders like Rheumatoid Arthritis and Multiple Sclerosis, and
- Degenerative musculoskeletal disorders encompassing issues such as osteoarthritis, back, hip, and joint pain, and herniated discs.
- Exacerbating issues (obesity, behavioral health, dementia)
- Similarly situated members, such as “fallers”
- Conditions identifiable by ICD-10 codes, procedure codes, events



Understanding the Target Population, Identifying Program Participants and Data Sources

- **What are their commonalities and differences?**
 - Diagnosis and medical history
 - Symptom severity and functional impairment
 - Risk factors and comorbidities
 - Healthcare utilization patterns
 - 76% of patients self select not to go to PT due to inconvenience, pain, transportation, affordability or health literacy issues
- **Data sources for monitoring progress**
 - Clinical assessments
 - Member-reported outcomes
 - Utilization metrics
 - Claims and administrative data
 - Feedback and satisfaction surveys



Understanding the Research and Setting Goals

Purpose: Targeting a complex MSK population to improve health outcomes, reduce pain, increase Star rating, recapture risk adjustment codes, and lower the total cost of care (inpatient, outpatient, and pharmacy).

Objectives:

- **Target:** 22% of the MA population
- **Activate & Engage:** 80%
- **Adherence:** 70%
- **Reduced pain in:** 82%
- **Improved condition outcome:** 82%
- **Reduce avoidable surgeries:** 18%
- **Lower outpatient cost:** 23%
- **Member Experience:** 90 NPS
- **Member Retention (yoy):** 94%



Proven Intervention: In-Home Physical Therapy with Wraparound Quality Program

Clinical Engagement

- Screening for program appropriateness
- Proprietary clinical scoring frameworks
- Weekly clinical reporting
- Pathways based on surgery/injury type
- In-session checklists for therapists
- Care coordination and clinical oversight

Member Engagement

- Member outreach for scheduling
- Therapist prescribed and monitored exercises
- Remote patient monitoring
- Reminders and alerts to stay on track

Align Target & Goals with Optimal Clinical Interventions



Reduce Avoidable Costs

Increase adherence to physical therapy, enabling better outcomes and reduced downstream costs.



Surgical Appropriateness

Avoid/defer unnecessary surgeries for hips, knees, shoulders, and spines.



Ensure Post-Op Success

Significantly more cost-effective alternative to home health.



Prevent Fall Cascade

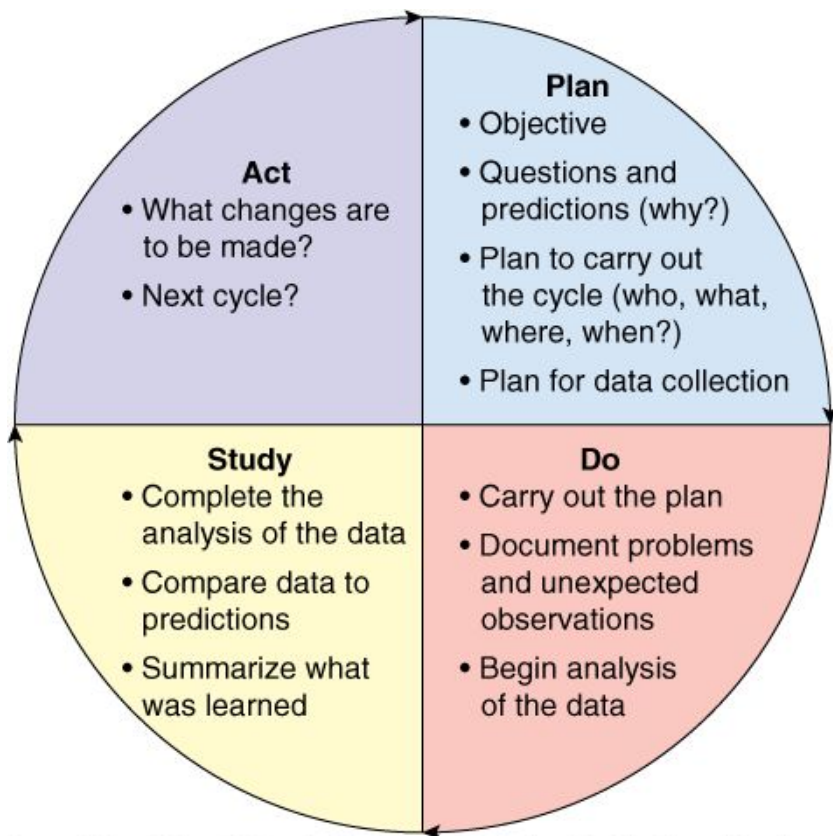
Protect from falls and improve safety.



Improve Mobility

Regain independence, improve mobility, and reduce cost of care.

Measuring, Identifying, and Making Improvements



Within the PDSA Framework, consider:

- **Do Phase:** Barriers encountered and how did you address?
- **Study Phase:** Analyze results or findings, including achieved outcomes that relate to or accomplish the target goal. How did the intervention(s) help to contribute or link to any degree of improvement.
- **Act Phase:** Next steps, action plan, best practices, lessons learned

Results by Clinical Intervention

Intervention by Condition or Goal	% of Population Targeted	Average Visits	Member Experience Score	Pain Relief	% Adherent	% of Population with Successful Outcome	Cost Saving Per Participant	Retention
Pain	33%	8	87	81	82	72	\$18,500	95%
Fall Prevention	33%	8	87	NA	85	85	\$33,000	95%
Post Fall Recovery	13%	12	87	82	85	85	\$72,000	95%
Wellness & Welcome (1)	100%	1	87	NA	100	100	\$1,100	94%
Wellness & Welcome (2)	100%	1	87	NA	100	100	\$1,100	94%
Surgical Readiness	22%	With Surgery: 4 visits and 4 -pre-hab visits Without Surgery: 4 assessment visits and 8 treatment visits)	87	84	86	86	\$32,750	94%
Post Operative Success	9%	8	87	84	82	82	\$3,823	94%
Luna Complete (other not Neuro)	33%	8	87	84	82	82	\$6,500	92%
Average			87	83	84	84	\$20,034	94%
							(*) allow for copay reduction	

Program Can Work Through Benefit Design and/or Quality Initiatives

Benefit Design

- **Leverage Existing PT Benefit:** Bring Luna onboard as a network provider with episodic reimbursement
- **Tweak PT Benefit:** add PBP note to include in-home PT
- **Leverage Uniformity/Flexibility:**
 - Eliminate/reduce copays for similarly situated
 - Eliminate/reduce copays for participation in wellness program
 - Eliminate/reduce copays for receiving care from high-value provider

Quality Initiatives

- Fund through CM/DM as pilot to test intervention (i.e., as a CCIP)
- Fund as Quality Improvement Expense (QIE) activity to spend down MLR
- Potential R&I for participation in wellness interventions

In-Home PT Impact on Star Rating Measures

Physical Therapist can drive Star gap closures. Examples include:

- Collect Self-Reported HEDIS data
- Patient Engagement and Satisfaction
- Care Coordination
- Functional Outcomes and Mobility
- Fall Prevention
- Difficult HOS survey measures


Improving or Maintaining Physical Health
Improving or Maintaining Mental Health
Monitoring Physical Activity
Care for Older Adults – Pain Assessment
Osteoporosis Management in Women who had a Fracture
Reducing the Risk of Falling
Medication Reconciliation Post-Discharge
Plan All-Cause Readmissions
Getting Needed Care
Getting Appointments and Care Quickly
Customer Service
Rating of Health Care Quality
Rating of Health Plan
Care Coordination
Complaints about the Health Plan
Members Choosing to Leave the Plan
Health Plan Quality Improvement
Complaints about the Drug Plan
Members Choosing to Leave the Plan
Rating of Drug Plan
Getting Needed Prescription Drugs

MSK & Risk Adjustment

- Provider Type: 63
- CPT codes: 13
- ICD-10: 100+
- Range of impact: .3-.6
- Innovation Step: MSK Assessments: Fall Risk, Surgical Readiness, Post-Operative, Mobility & Independence, Frailty, and Welcome & Wellness

Physical Therapy

Innovating the Delivery Models

	Home Health	 Luna In-Home Outpatient	Outpatient Clinic
Payer	Medicare Part A	Medicare Part B	Medicare Part B
Place of Service	Patient's home	Patient's home	Clinic
Regulatory Requirement	Homebound status required	No homebound status required	No homebound status required
Accessibility to Care	Good	Excellent	Poor
Patients Functional Status	Poor	Poor, moderate, or good	Moderate or good
Clinical Goal	Stabilize environment and prepare for next level of care	Optimal function and safety in both home and community	Optimal function and safety in the community
National Average Cost of Care	\$3,500 - \$4,000 per POC	\$1,000 - \$2,000 per POC	\$1,000 - \$2,000 per POC

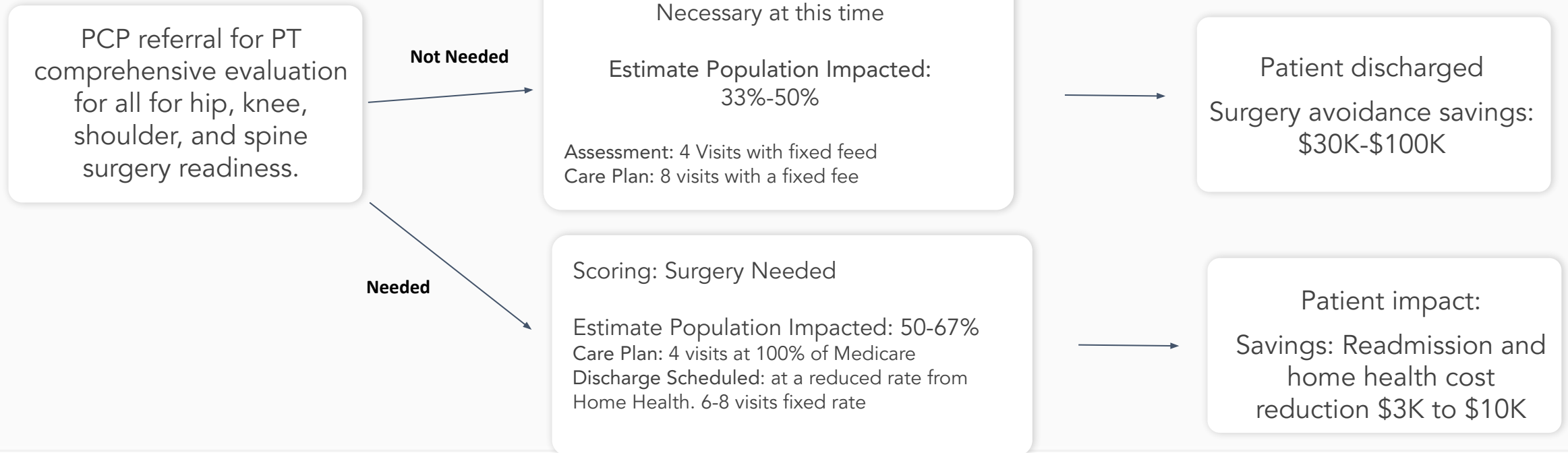
Surgical Readiness™ Population and Impact

Approach Application:

1. ICD-10 Diagnosis by PCP and/or imaging CPT with referral sent to Luna
2. Embed into referral/authorization policy pre Orthopedic Consultant



Surgical Readiness™



Luna Complete™ Population and Impacting Adherence

VBC Triggers: Select ICD-10 diagnoses, rising risk or non-adherence populations



Luna Complete™

Physician Referral or population target list pushed to Luna Concierge

Via high-touch nurturing outreach and scheduling, initial evaluation with SDoH, care coordination elements



Care plan and exercise regime created with the member and a consistent PT.

Commercial Avg: 6 visits
Medicare Advantage Avg: 8 visits



Reduce/eliminate Consults, Imaging, Pain Medications, DME, Home Health, ER, and Urgent Care.

Commercial Savings: \$4,000+
Medicare Advantage Savings: \$10,000+

Here is your MSK Care- Quality Program

I. MSKC-QP Program Summary

- Target Conditions
- Target Population and Participant Identification
- Measurement of Progress and Data Sources
- Clinical Knowledge and Research

II. Population Description

- Opportunity for Improvement
- Improving Health Outcomes for the Target Population

III. Goals of MSKC-QP

- Lower Total Cost of Care for MSK Populations through Adherence to Care Plans
- Reduce Avoidable MSK-related Surgeries
- Reduce Unnecessary Cost in Low Value Care, including imaging, consults, medication, and devices

IV. Planned Interventions

- Home-Based Physical Therapy Sessions
- Surgical Readiness Assessments and Recommendations

V. Measurement Methodology

- Utilization of Data Sources
- Quantifiable Measures of Success

For more information, please contact
RaeAnn Grossman at rgrossman@getluna.com

*Get your customizable program description template MSK
Care- Quality and other conditions are available at
www.getluna.com/resources*

Align the Goal with Target Population and Intervention



Luna Complete™

Increase adherence to physical therapy, enabling better outcomes and reduced downstream costs.



Surgical Readiness™

Avoid/defer unnecessary surgeries for hips, knees, shoulders, and spines.

Uses the *Luna Surgical Readiness Score™*.



Postoperative Success™

Significantly more cost-effective alternative to home health.

Uses the *Luna Protocol Library™*.



Fall Safeguard™

Protect from falls and improve safety, particularly repeat falls.

Uses the *Luna Fall Safeguard Score™*.



Mobility Empowerment™

Regain independence, improve mobility, and reduce cost of care.

Uses the *Luna Mobility Empowerment Score™*.

Appendix

CPT Codes Used to Identify Surgeries:

Cervical Surgery	22551, 22552, 22600, 22614, 22840, 63020, 63021, 63001, 63002, 63075
Lumbar Surgery	22554, 22558, 22585, 22612, 22614, 63030, 63035, 63042, 63047, 63048
Hip Surgery	27130, 27125, 27132
Knee Surgery	27447, 27446, 27488

CPT Codes Used To Identify Physical Therapy: 97110, 97112, 97116, 97140, 97150, 97530, 97535, 97750, 97761, 90901, 90911

ICD-10 Codes Used To Identify Prevalence

Cervical Spine	Lumbar Spine	Hip Pain	Knee Pain	Fall Related Conditions	Fall Related Injuries
M47812	M4316	M0550	M0500	G20	S02
M47813	M4806	M0560	M0510	M05	S08
M5030	M4807	M0570	M0530	M056x	S12
M5031	M489	M160	M170	M057x	S13
M5032	M511	M161	M171	M06	S14
M5033	M512	M164	M172	M066x	S22
M531	M513	M169	M173	M067x	S23
M5412	M5389	M24151	M174	M15	S24
M5413	M544	M24152	M175	M16	S32
M542	M545	M255	M179	M160	S33
M791	M546	M7060	M255	M161	S34
M792	M548	M7061	M792	M17	S42
S134XXA	M5489	M7062	M79604	M170	S43
S138XXA	M549	M79609		M171	S44
S139XXA		M797		M172	S52
		M8705		M173	S53
		M8706		M174	S54
		S720		M18	S62
		S721		M19	S63
		S722		M1907	S64
				M1917	S72
				M1927	S73
				M80	S74
				M81	S82
				R26	S83
				R260	S84
				R261	S92
				R262	S93
				R268	S94
				R269	