# Risk Adjustment, Quality, Utilization Reduction and Preventive Care:

What's Driving Value?

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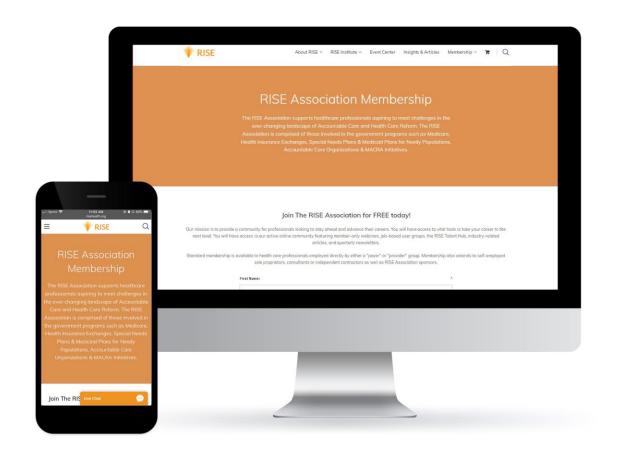




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## Poll Question 1

What do you think is driving the most value

– better care, reduced costs – in care today?

Risk Adjustment Quality Preventive Care Other



### **Agenda**

Aging and Polychronic Population

2 After a Year+ of COVID

Risk Adjustment

**Quality** 

Preventive Care & Utilization Reduction





### **Aging and Polychronic Population**





Polychronic population estimated to **triple** from 30.8 million patients in 2015 to 83.4 million patients in 2030.



### **Challenges with Polychronic Patient Care**

- Mobility issues impact access
- Limited provider-patient time to close gaps, document conditions, discuss health goals and advanced care planning
- Assessment of behavioral, social, support and safety challenged in a clinic

• Habituated 911/ER reflex for primary and after-hours care





### **Learnings from the COVID Pandemic**





- Can augment risk adjustment and quality programs
- Can increase patient 'touches'
- But, challenges persist in a complex, chronic population because of sight or hearing impairment, dementia, and those without technology or internet



## Home will become a clinical site of care

- Consumer demand for delivered care (virtual/inhome) will increase
- Fee-for-service is not sustainable for flexible and longitudinal care
- Simplified access to healthcare for frail patients delivers proven outcomes



### Machine and datadriven learnings matter

- Leverage analytics to prioritize patient outreach
- Predictive analytics move providers from the population view to individual needs
- Prompts during patient encounters help close care gaps



## Poll Question 2

How well is risk adjustment supporting your clinical work and outcomes today?

Great – I rely on RA data to help guide care planning

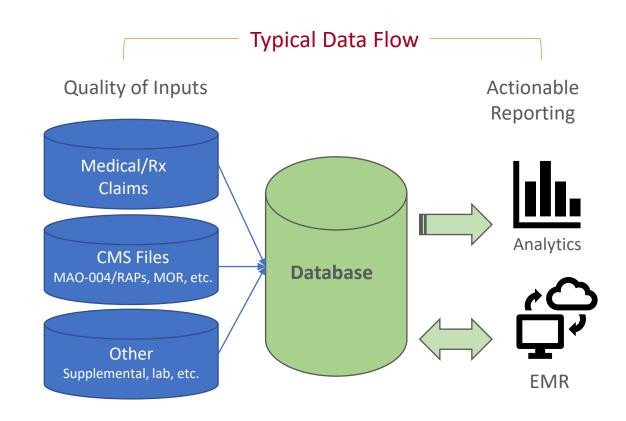
Mediocre – I find some value in previously captured data

Poor – It takes time and gets in the way of my care delivery



## Risk Adjustment – Leverage Data, Analytics and Tech

- Every single touchpoint is important, and improving documentation efficiency is key
  - Identify previously captured chronic conditions
  - ► Identify potential HCCs via suspecting technology to scan medical and Rx claims
  - ► Confirm findings through clinical assessment and evaluation
  - ► Create action-driven reports, e.g., list of patients with recapture gaps





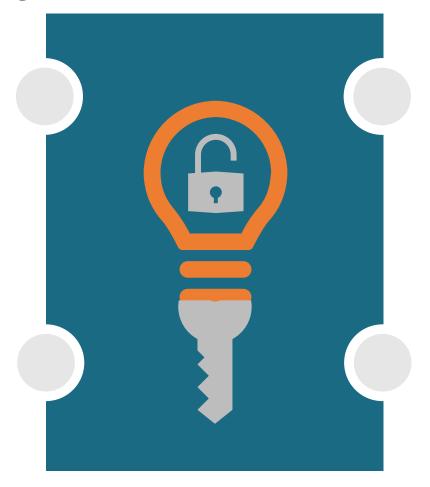
### **Keys to Quality**

#### Point-of-care Devices

- A1c
- Retinal Screenings
- Nephropathy Screenings

### Artificial Intelligence

Leverage to scan medical records for care gap closure records



### Analytics

Identify patients at high risk of non-compliance and target early in the year

### Technology

Ensure providers have the latest screening and test results in front of them to address a care gap



## Poll Question 3

Is your organization optimizing analytics to drive preventive care for the right patients at the right time?

**Yes** – We leverage *internal* (home-grown) analytics

**Yes** – We leverage *external* analytics

No – We are not doing this well yet



## **Effective Preventive Care Drives Utilization Reductions**

- Simplify access to medical care
- ► Identify new health conditions and prevent conditions from getting worse
- ► Identify mental, behavioral, and social needs
- Avoid unnecessary hospital visits
- ► Help patients take medications properly
- Assess and recommend safety measures
- ► Coordinate care and access to community services
- ► Ensure care is in alignment with patient goals and wishes

Respond 24/7 to patient needs.









### **Key Takeaways**



## Identify your complex chronic patients

 Tend to have varied clinical and social risk factors that often go unaddressed



## See patients in their homes

 Simplify access and provide better service to your patients most in need



## Leverage technology for quality and RA

- Point of Care Devices
- Data Analytics, including SDoH data
- Artificial Intelligence/Machine Learning



# THANK YOU

