

Benefits of payer-sponsored risk adjustment and quality programs

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- In the Event window, in the Panels drop-down list, select Q & A.
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Agenda

Introductions

General Physician PC

- Reservations about a point-of-care program
- Resolution of concerns
- Results

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- Requirements for a payer-sponsored program
- Sharing incentives with providers and impact on participation
- Taking advantage of incentives earned

Wrap up

- Key takeaways

General Physician PC

- One of the largest medical groups serving Western New York and Northern Pennsylvania
- Established in 2010
- Broad, integrated network
- Patient-centered care
- Integrated approach between PCPs and specialists

274

Providers

20

Specialties

73

Practices

45

Locations



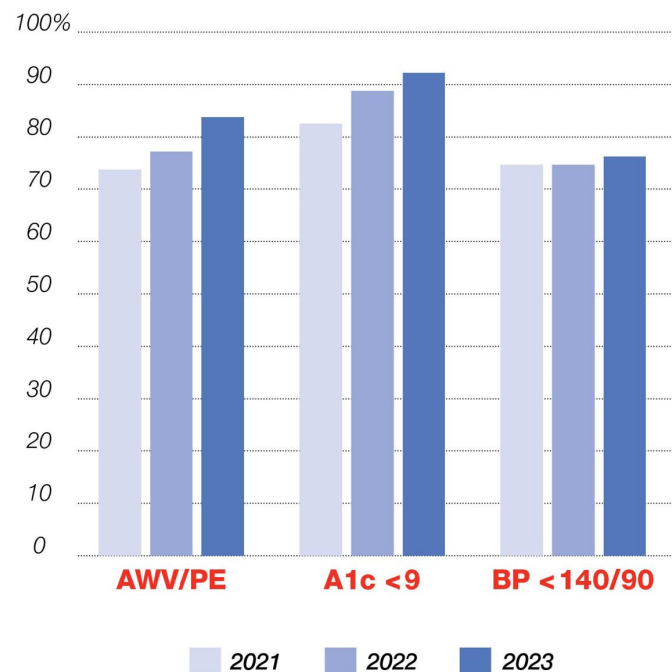
Reservations about a payer-sponsored risk adjustment and quality solution

- Must be quick and easy for providers
- Integrate with current workflow
- Provide assistance to the PCP before and after the visit
- Provide incentive for the practice and the treating PCP
- The right solution resolved these concerns



Benefits of the right point-of-care solution

Year-Over-Year Performance



- Identify true burden of illness to stratify patients
- Identify gaps in care during multiple visit types
- Improved performance on HEDIS measures
- Improved risk score accuracy of about **10% per patient**
- Helped us change clinical practice for all patients, not just those in the payer program



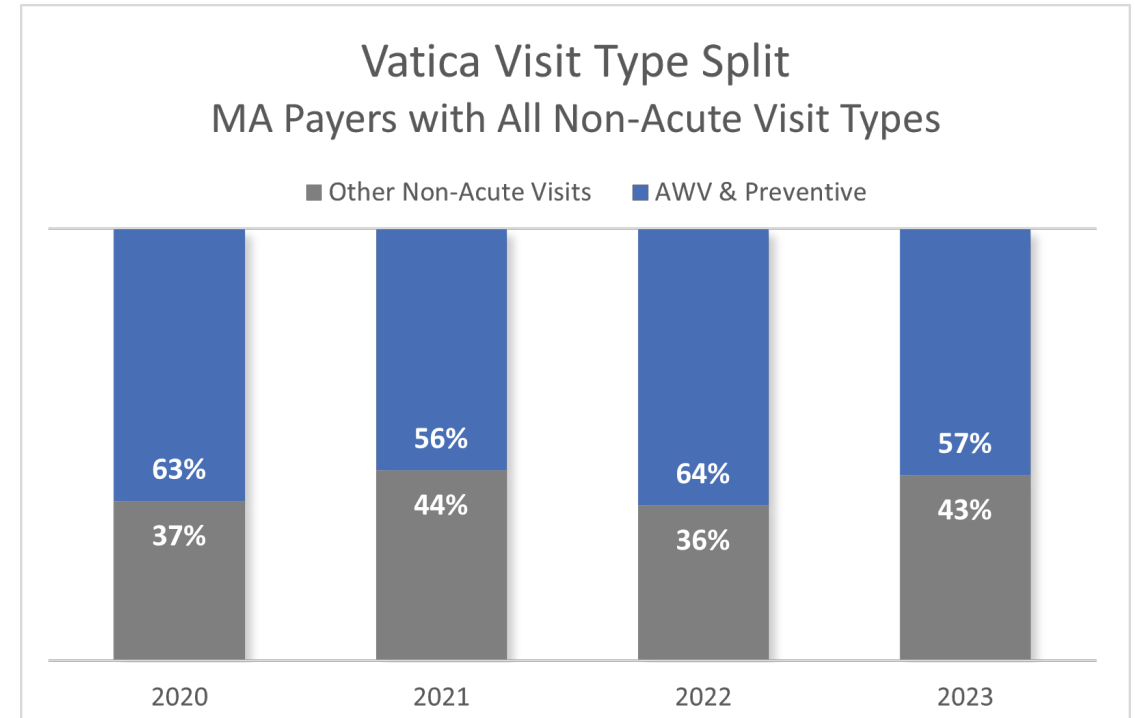
Financial gain has broad benefit

- Increased patient satisfaction and retention: helps PCPs to efficiently review areas of importance during patient visit
- Captured more revenue, allowing practices to add support services, e.g., care management programs and enhanced pharmacy programs
- Performance on screenings improved: met VBC goals and earned additional revenue



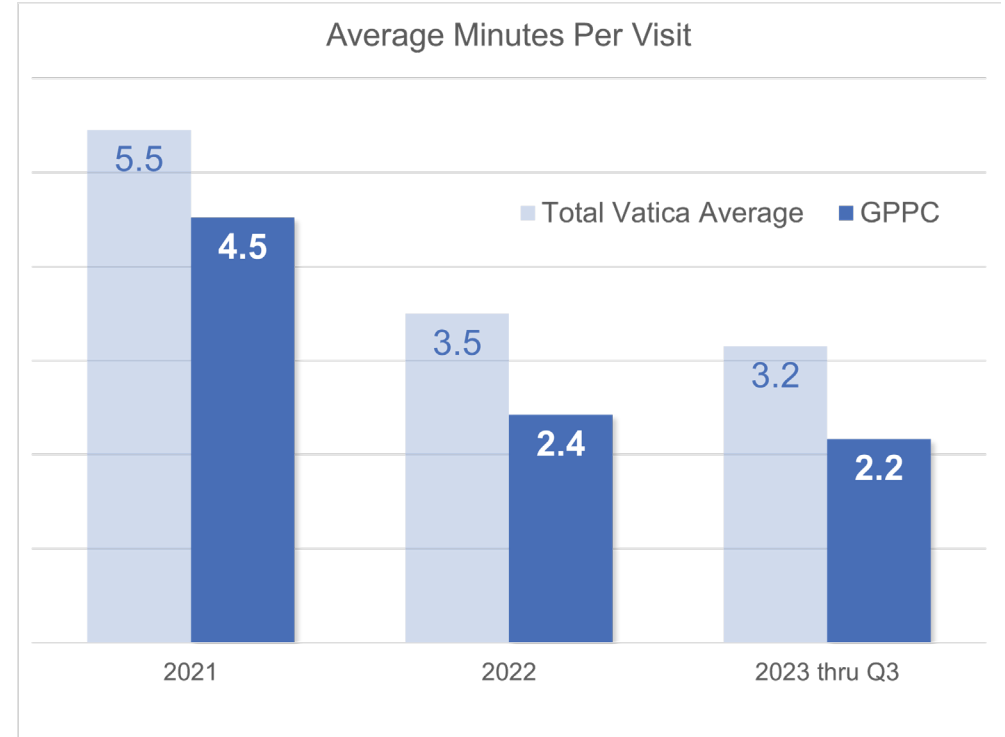
Payers can help

- Help us capture information right away, with most visit types
- Payers' care management programs should work with us, not be a separate outreach
- Communicate: keep us informed about services you offer that could benefit patients, providers and payers



Best practices for PCP engagement

- Share data so PCPs can understand how this work affects financial performance
- Give us a payer-agnostic solution
- Provide a solution that's easy and efficient to use: **2 minutes/patient** on average
- Do all the work you can for providers. Allow us to work at top of license



Guthrie Lourdes Medical Group

- Part of a multi-specialty health system based in Binghamton, NY
- Formerly Ascension owned: recently acquired by Guthrie



11

Locations using payer solution

35

Providers using solution

5,270

Visits signed since 2022

Requirements for RA program

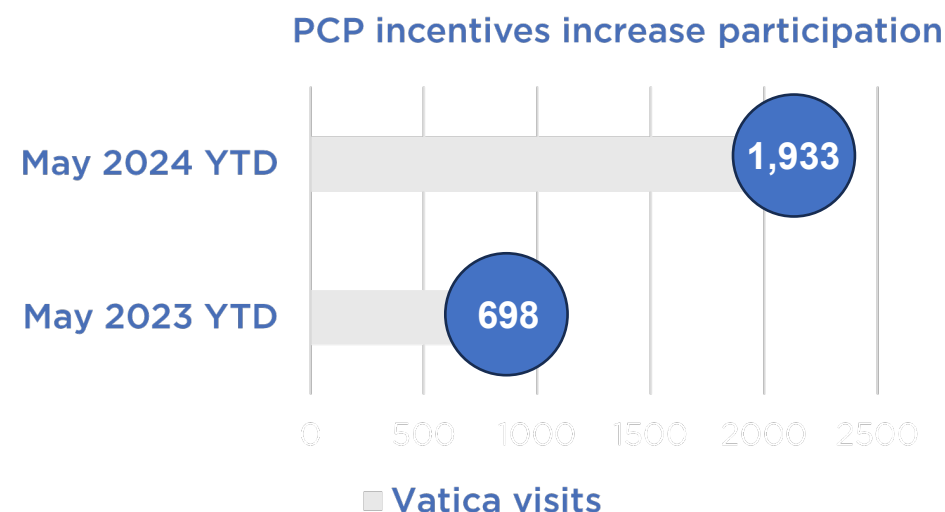
- Easy to learn
- Integrates easily with current workflow
- Helps identify and close care gaps
- Opportunity to share incentive with treating PCPs
 - Required collaboration with multiple departments to implement: legal, finance and operations
 - Required several months of time to implement

Payer-sponsored solution has many benefits

- Provides pre-visit summary of conditions to address, open care gaps and prescriptions to reconcile.
- Saves PCPs significant time: less chart review.
- Identifies care gaps so PCPs can more easily address them during visit
- Helps PCPs improve documentation to increase RAF score accuracy. PCPs can be most specific when face-to-face with the patient, e.g., CKD stage, obesity stage.

Sharing incentive increases participation and improves results

- Program launched in early 2023.
- First PCP payment in December 2023
- Hired social worker to assist patients with SDOH and related issues
- Plans for increasing staff on nursing and pharmacy teams



Key takeaways

- Physician leadership buy-in is a must.
- Simple, intuitive and easy-to-use solution required.
- Documentation improves.
- Provider incentives help reinforce PCP buy-in and can be used to hire needed staff.
- Addressing chronic conditions and closing care gaps make patients healthier and support lower overall healthcare spend.

THANK YOU



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