Enrollment and Claims Data in CPCI

February 10, 2017
Before Now, Tough Questions

<table>
<thead>
<tr>
<th>Attribution</th>
<th>Outcomes</th>
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<tbody>
<tr>
<td>• What patients are assigned to us that we haven’t seen?</td>
<td>• Are we meeting our quality incentive targets?</td>
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<td>• How do we contact our unseen assignees?</td>
<td>• How do I manage the care gaps?</td>
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<td>• Which of our patients do we need to get in for services?</td>
<td>• What resources do we need to manage our at risk populations?</td>
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<table>
<thead>
<tr>
<th>Patient Activity</th>
<th>Risk &amp; Utilization</th>
</tr>
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<tbody>
<tr>
<td>• Are my patients going elsewhere for care?</td>
<td>• Who are my most expensive patients (TME)?</td>
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<td>• Which of my patients are “frequent fliers at ERs?</td>
<td>• What services are they using?</td>
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<tr>
<td>• Where are they going for higher levels of care? (IP, ER)</td>
<td>• What diseases are contributing to our highest costs?</td>
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<td>• Are we managing patients’ transitions in care?</td>
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Overview

• Claims data has incredible breadth, but very shallow clinical detail about each event
• EHR data is clinically rich, but lacks knowledge of the outside world
• Together, they can answer questions neither could answer individually
Payer Data – What’s Out There?

- Enrollment Data
- Claims & Utilization
  - Medical
  - Pharmacy
  - BH
  - Dental
  - Vision
- Hospital & ED Authorizations
- Risk Scores
Why Do We Need Payer Data?

• Health Centers need to understand the full picture of their patients’ utilization.
  – Especially in P4P/Risk Sharing/ACO settings!
• Reliable capture of external utilization is rare in EHRs.
Why Do We Need Payer Data?

• CHCs are generally not the drivers of medical expenditure:

  - CHCs and Other PCPs
    - 11%

  - All Other
    - 89%

• However, they can play an outsized role in driving down costs
So How Does This All Work?
Match Members to Patients

- To payers, a person is a “member”
- To an EHR, a person is a “patient”
- In order to integrate the data, we must match members to patients
• The results of the matching process can answer some important questions:
  – How many of our assigned members do we have as patients?
  – Of those we do not know, how do we contact them?
  – Of the unknown members, who are the most costly?
  – Of those we do know, when were they last in?
• DRVS Matched Member Dashboard has this data
DEMO
Next Steps

- We have United Healthcare data for most NY FQHC’s
- Activation of this functionality is a 1:1 exercise
  - Determine who should have access to these reports?
  - Training
  - We plan to rollout methodically after UDS Season winds down
- Contact CHCANYS team or Azara to get in the activation queue
- Actively working with CHCANYS to recruit additional payers