

Enrollment and Claims Data in CPCI

February 10, 2017



Before Now, Tough Questions

Attribution

- What patients are assigned to us that we haven't seen?
- How do we contact our unseen assignees?
- Which of our patients do we need to get in for services?

Outcomes

- Are we meeting our quality incentive targets?
- How do I manage the care gaps?
- What resources do we need to manage our at risk populations?

Patient Activity

- Are my patients going elsewhere for care?
- Which of my patients are "frequent fliers at ERs?"
- Where are they going for higher levels of care? (IP, ER)

Risk & Utilization

- Who are my most expensive patients (TME)?
- What services are they using?
- What diseases are contributing to our highest costs?
- Are we managing patients' transitions in care?

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

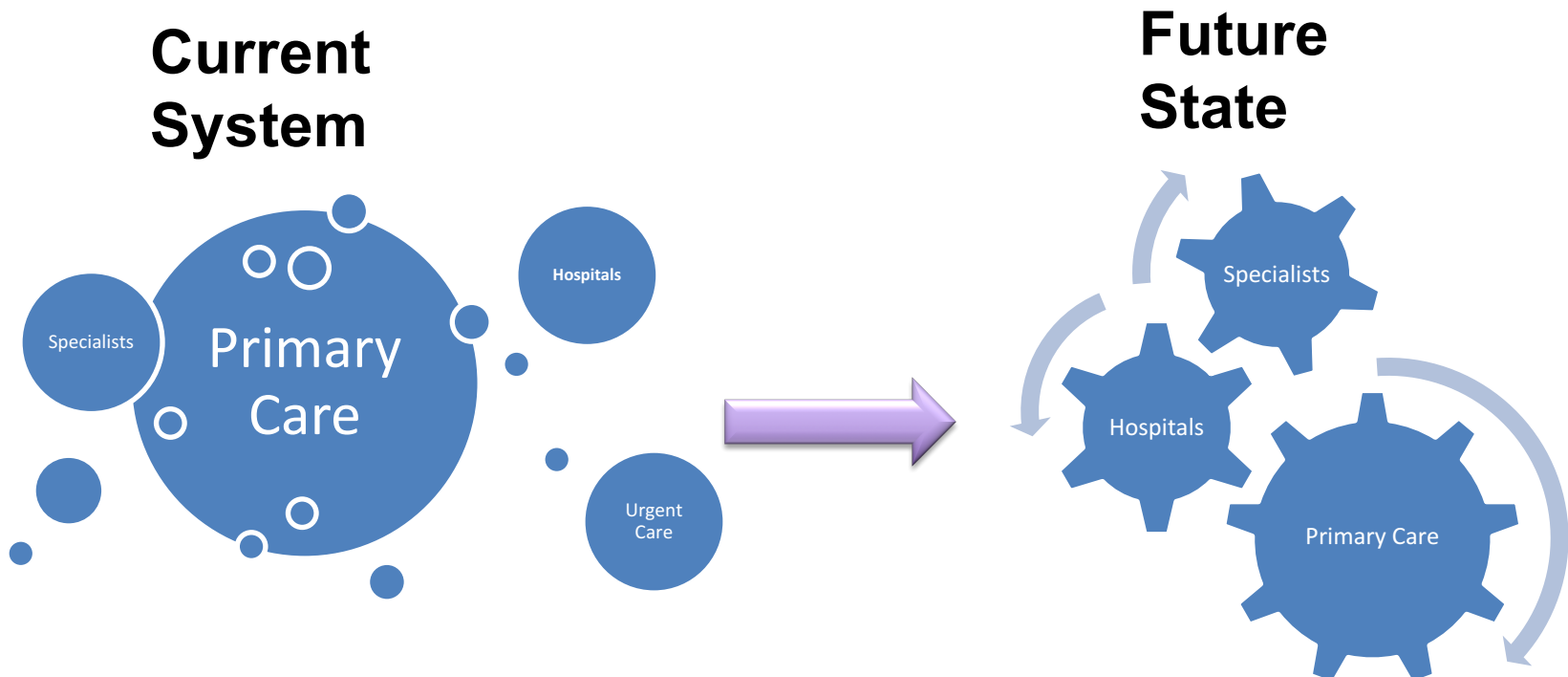


Payer Data – What's Out There?

- Enrollment Data
- Claims & Utilization
 - Medical
 - Pharmacy
 - BH
 - Dental
 - Vision
- Hospital & ED Authorizations
- Risk Scores

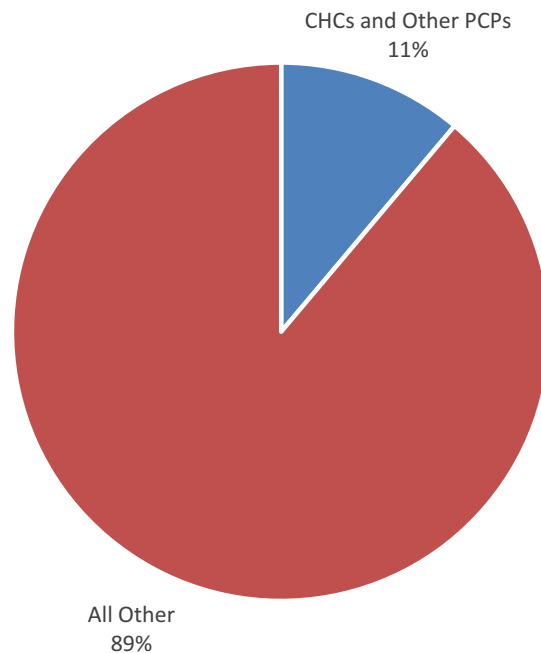
Why Do We Need Payer Data?

- 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:

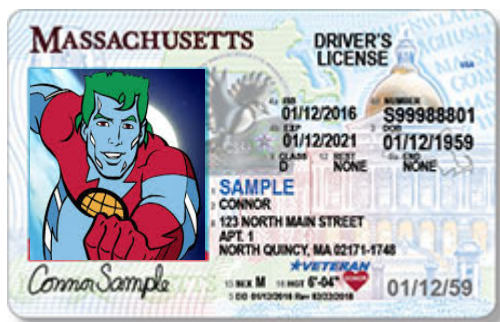


- However, they can play an outsized role in driving down costs

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



Not Just Means To An End

- 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

- 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
- More reports and enhancements slated for 2nd half of 2017.
- Contact CHCANYS team or Azara to get in the activation queue
- Actively working with CHCANYS to recruit additional payers