

Colorado Springs Health Partners

Colorado Springs Health Partners Drives Patient-Centered Medical Home with Analytics from Optum One



The patient-centered medical home (PCMH) is emerging as an important population health model. Its focus is to organize the way primary care is delivered so that care coordination and patient communication are emphasized. The goals of medical homes are to improve quality, lower costs and improve both patients' and providers' experience of care.

Colorado Springs Health Partners, PC (CSHP) is a physician-owned, multispecialty practice serving the people of the Pikes Peak region for more than 65 years. With a strong foundation in primary care, CSHP is committed to further advancing its PCMH, known as Patient Care Compass. Since 2009, its eight primary care sites have achieved Level 3 recognition by the National Committee for Quality Assurance (NCQA). CSHP also participates in the Comprehensive Primary Care Initiative sponsored by the Centers for Medicare & Medicaid Services (CMS) to advance coordinated patient care.

CSHP recognized that access to trusted clinical and operations data is foundational for population health and wellness initiatives to:

- Understand the clinical, demographic and financial characteristics of at-risk populations and monitor these over time
- Identify patients most likely to benefit from care coordination services
- Compare the performance at all levels of the organization
- Model the impact of improvement processes on outcomes

CSHP selected Optum One's Population Analytics to anchor its population health and wellness initiatives improvement. Optum One gathers and normalizes data from electronic medical records, practice management systems and claims to create a longitudinal view of individual patients and populations. It provides CSHP the analytic capability to advance the effectiveness of its PCMH and to demonstrate the value of its services to CMS and other payers.

Engaging physicians with clinical intelligence

With Optum One Population Analytics in place, CSHP focused on improving the management of patients with hypertension and diabetes. CSHP chose these two chronic conditions because they are ambulatory-care-sensitive yet offer fairly straightforward and generally accepted process and outcome metrics. They also offer CSHP the opportunity to engage with and learn from well-respected peer groups across the country through the American Medical Group Association's (AMGA) Anceta Learning Collaborative.

CSHP's new clinical innovation department leverages Optum One's advanced analytics to promote care coordination and medical home operations. Measurable improvements have been achieved through improved coordination of care for patients recently discharged from the hospital or seen in the emergency department. Coordinated transitions of care and well-designed care processes improve care outcomes and lower costs. CSHP's chief medical officer (CMO) personally introduced Population Analytics data to clinicians at each clinic and engaged clinicians in a discussion about variation in levels of control by clinic and physician. He engaged physicians in meaningful dialogue about possible gaps in care, opportunities for improvement and CSHP's standards of practice. This approach helped overcome the tendency to question the accuracy and validity of data and increase support for the use of data.

Population health and wellness management goals

Hypertension

CSHP participates in the AMGA's "Measure Up/Pressure Down" campaign, which has a goal of achieving blood pressure control for at least 80 percent of all patients with hypertension. The national rate of uncontrolled hypertension is currently 46 percent.

CSHP:

- 105 physicians, 2 out of 3 primary care
- 9 sites across the Colorado Springs-area communities
- 100,000+ patients and nearly a half-million annual encounters

Challenges:

- Build an analytics capability to support PCMH, including CMS's advanced primary care and meaningful use of electronic medical records initiatives
- Engage physicians and clinical team in information-supported dialogue about ways to improve clinical process

Solution:

- Use Optum One Population Analytics to manage improvement goals for diabetes and hypertension
- Participate in collaborative population health initiatives on hypertension and diabetes
- Arm clinicians, care managers and navigators with consistent clinical data

Results:

- Improved coordination of care post-discharge and emergency department visits
 - After one year, CSHP achieved interim goal of 70% rate of hypertension control; on its way to 80% target
 - Rates of hypertension control improved at each clinic; improvements ranging from 3.5% to 19.8%
 - Organizational learning regarding information informed clinical process improvement using 36-month patient profile
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As shown in Figure 1, in the baseline year of 2012, CSHP’s results at 70 percent control is well above the national average, with a high of 82 percent control and a low of 72 percent. Yet, the data revealed variation across the CSHP clinics. Variation is an important starting point in engaging clinical teams to achieve the best rate of hypertension control possible given the patients’ comorbidities and other factors. Optum One Population Analytics provides both benchmarks and comparative data so that clinical teams can monitor their progress.

“We chose to start with prevalent chronic diseases of hypertension and diabetes, deliberately taking the information to the physicians and working with them one-on-one if necessary to help them understand what the data showed. This has fostered trust in both the data and the process. We believe that revealing variation will lead to improvement, but we need to do this in a supportive way.”

— Dennis Schneider, MD
Chief Medical Officer

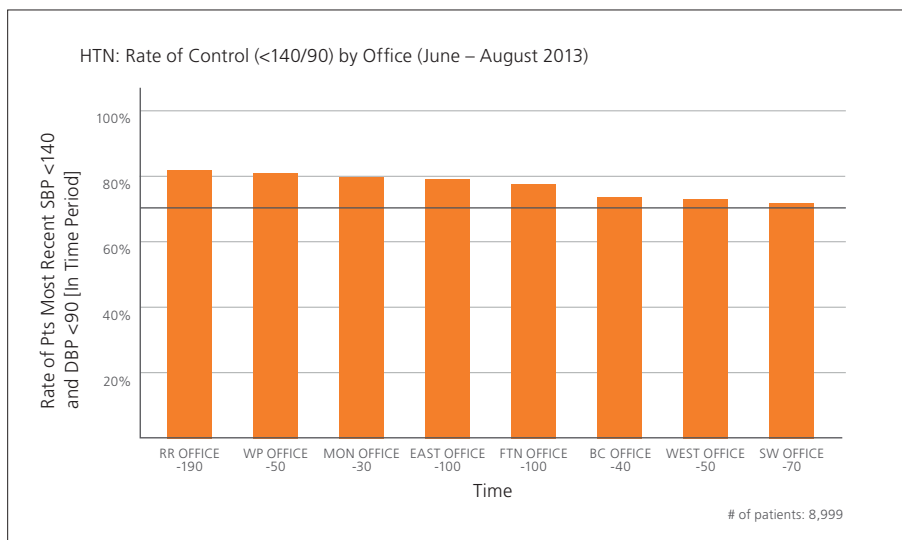
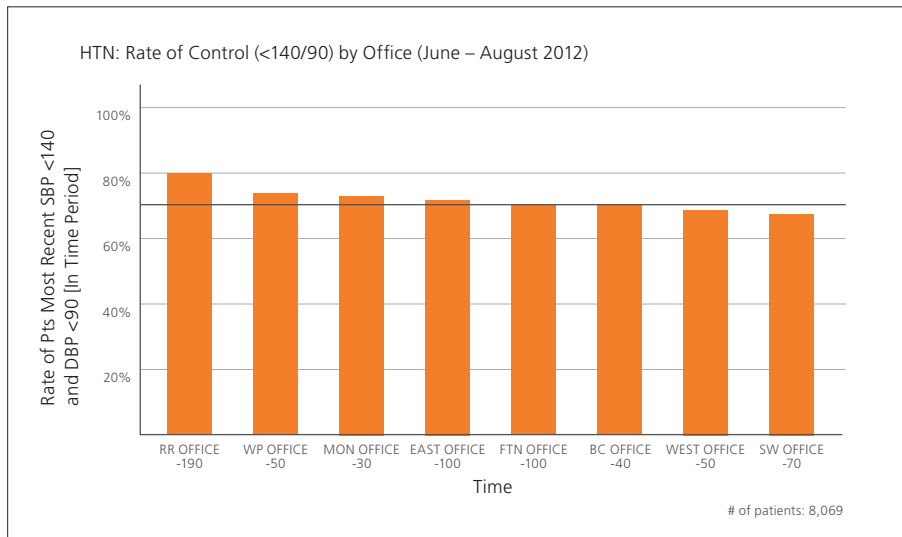


Figure 1: 2012 vs. 2013 Rates of Hypertension Control across CSHP. In baseline measurement period in 2012, rates of control ranged from a high of 80.7 percent to a low of 66 percent. One year later, after initiating population health management, all CSHP clinics showed improvement and exceeded the 70 percent incremental target, with rates ranging from a high of 82 percent to a low of 72 percent.

Diabetes

CSHP set an incremental goal for improving the rate of control in its diabetes population to 75 percent of patients by the end of 2013. With Population Analytics clinical data, CSHP is able to understand the subpopulations within this complex disease and examine their prevalence and impact on outcomes. Optum One Population Analytics also supports the examination of sustaining control over time with the engagements of various cohorts of patients as determined by their clinical and demographic circumstances.

Clinical innovation and improvement happens on the front line by clinical care teams working to improve advanced care coordination. Through its commitment to being a top-performing medical home, CSHP had been developing care coordination processes and workflows to advance, and the results are being seen in hypertension, diabetes and overall care coordination. Optum One Population Analytics provides the clinical intelligence to fuel the work of the site care teams and unifies CSHP as it works to incrementally achieve its clinical improvement goals.

Learn more about how Optum can help your organization manage risk.

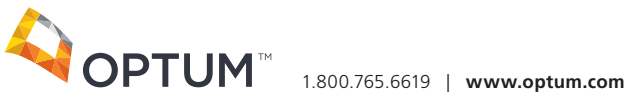
Contact us at **1.800.765.6619** or **discover@optum.com**.

About Colorado Springs Health Partners

Colorado Springs Health Partners, PC is the largest physician-owned, multi-specialty practice in the state. Established in 1946, CSHP is proud to continue offering quality health care to residents of the Pikes Peak Community through its 135+ providers in 10 practice locations. Committed to a coordinated, integrated system of care, CSHP is Level 3 certified in Patient-Centered Medical Home through the National Committee on Quality Assurance (the highest level awarded), Meaningful Use attested, and a participant in the Center for Medicare and Medicaid Services' Comprehensive Primary Care Initiative. In addition to primary care, they offer more than 20 additional medical specialties, full-service diagnostics, ambulatory surgery services, urgent care, hospitalist medicine, health management, a sleep center and pharmacy.

About Optum

Optum is a leading health services and innovation company dedicated to helping make the health system work better for everyone. With more than 85,000 people collaborating worldwide, Optum combines technology, data and expertise to improve the delivery, quality and efficiency of health care. Optum is part of the UnitedHealth Group (NYSE:UNH).



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