Optum® Performance Analytics
A unified health care data and analytics platform
Dynamic health care market forces, fueled by delivery and payment reform, have posed many new and difficult questions for clinical and financial leaders within provider organizations. How do you deliver high-quality, cost-effective care to patients, while strengthening your care delivery network and cultivating the right relationships with health plans? Answering these questions has proven even more challenging for providers, as clinicians and administrators within these organizations are often unable to see a complete and accurate picture of their health care ecosystem:

80% of health care data conforms to no standard ontology

Data is spread in silos across technology systems

More than half of patient care is delivered outside the primary care system

Critical social determinants of health feel completely out of a physician’s reach

In today’s health care world, strategic decision-making requires a comprehensive view into a number of areas across the enterprise, including: the current state and future risk of patient populations, care delivery network design, provider variation opportunities, regulatory quality program progress and financial performance.
Position your organization for success with Optum Performance Analytics

To help clinicians and administrators clinical and financial performance across care settings and payment models, the Optum® Performance Analytics unified health care data and analytics platform pulls on rich data and analytics to provide dashboards and reports that offer a comprehensive view of each patient, provider and facility, as well as an aggregated understanding of your entire population and health network.

Whether you are a fee-for-service-based organization or an organization increasingly employing fee-for-value payment models, you can use the analytical power and flexibility of Optum Performance Analytics to reduce care variation, improve care quality, optimize care coordination and manage financial performance.

With a long heritage in and deep understanding of both payer ad provider analytics, Optum helps nine out of 10 hospitals in designing and deploying solutions with a care delivery focus.

“A proven track record in health care data and analytics

• Frost and Sullivan awarded Optum the 2019 Best Practices Award for Growth, Innovation and Leadership in the U.S. Healthcare Data Analytics Market.
• Everest Group named Optum the leader in health care analytics in 2019 out of 18 vendors evaluated.
• IDC Health Insights recognized Optum as a market leader in population health analytics in 2018.
• Fortune: World’s Most Admired Health Care Company in Insurance and Managed Care (awarded to the Optum parent company, UnitedHealth Group), 2011–2019.

“Optum Performance Analytics brings together clinical and claims data, alongside socio-economic data, to support the best possible quality and cost outcomes. We can leverage advanced analytics models to address real-world solutions, incorporating the latest algorithms to quickly identify the best actions. With Optum Performance Analytics, we can avoid unnecessary tests and care gaps, keeping patients within our system while providing the best possible care.”

— Matthew Penziner, Executive Director, NYUPN Clinically Integrated Network
What you can do with Optum Performance Analytics

Provider organizations use Optum Performance Analytics to continuously improve their efficiency and effectiveness in four critical competencies: care variation reduction, care quality improvement, care coordination optimization and financial performance management.
Reduce variation in care delivery

By closely monitoring trends in referrals, utilization and quality, Optum Performance Analytics can help organizations identify areas to minimize unwarranted variation and avoidable utilization in care delivery across their network, and minimize out-of-network referrals.

For example, organizations can drill into utilization, prescribing, referral patterns and network leakage to gain an in-depth perspective on practice variation. To get this level of detail, we leverage Symmetry® — an Optum-developed platform that captures all services and costs related to a condition during the course of treatment.

Organizations can also look at network performance across several levels — such as clinician, facility, group or system — and measure that performance against peer benchmarks to identify outliers and variations in care delivery.

The Migration Dashboard summarizes overall system migration and surfaces areas of high migration by type of service, specialty, major diagnostic category and primary care affiliation levels.

The clinically integrated network associated with NYU was able to analyze its referral patterns and educated its physicians about how care was delivered across its organization. This increased its in-network utilization of referrals by 5%, generating millions in new revenue in the competitive New York market.
Improve quality performance

Optum Performance Analytics can help providers identify quality improvement opportunities, assess measure compliance and close gaps in care — as well as track, report and benchmark the performance of their clinicians, care teams and programs against key quality indicators across ambulatory and acute care environments.

Throughout the platform, there are over 700 quality measures, 250 labs, 400 conditions and thousands of mapped medications — with standardized units — to help organizations assess quality and identify areas for improvement.

The Quality Measures Performance Dashboard summarizes year-to-date achievement for selected quality measures compared to payer-specific targets.

UMass Memorial Health Care leveraged our analytics to capture quality measures using multiple data sources to engage their providers in improving quality. This helped it earn $9.1 million from its CMS contracts.
Optimize care management programs

Optum Performance Analytics offers organizations a flexible, longitudinal view of patient care across the continuum by linking and normalizing disparate data sets for a simplified, apples-to-apples view. Organizations can use this data, along with industry benchmarks, to power insights and decision-making according to their patient populations and care delivery patterns.

Users can look at more than 400 disease definitions in the platform to see which ones are driving the most significant trends and opportunities, and proactively manage care — through interventions and resource allocation — on those most relevant patient cohorts to reduce readmissions and enhance population health. Using this tool, you can also perform powerful trend-based analytics on population characteristics to identify and manage high- and rising-risk patients, and segment the population to align programs and resources appropriately.

Analytics can be integrated through an organization’s own electronic medical records (EMR) or workflow tool (such as Optum Care Coordination Platform) to hardwire changes.

CASE EXAMPLE

Lehigh Valley Health Network leveraged our analytics to optimize outreach to high-risk patients, which helped it achieve $7.4 million in shared savings through its commercial contracts with payers.

The Population Overview Summary lets users view demographic information that describes defining characteristics of their population to better design care programs and segment specific populations.
Manage financial performance

Optum Performance Analytics can help provider organizations evaluate contract performance, understand cost and utilization trends, optimize coding, assess out-of-network utilization, and more effectively predict risk and future costs.

Users can leverage the system-wide view of performance and trends to ensure both payer contracts and patient mix align with growth strategies — and that all are in line with industry benchmarks. This knowledge of risk helps leaders advance contract negotiations with payers, enhance claims administration and manage clinical activities to support risk-based operations.

The HCC-RAF Dashboard includes patient demographic details, HCC recapture rates, patient prevalence of HCCs and suspect HCC conditions to ensure accurate HCC coding, identify patients in need of additional care management and provide line-of-sight into organizational risk exposure for at-risk contracts.

CASE EXAMPLE

Wilmington Health used our solutions to increase its HCC-RAF score by 15 percent. This had big impacts on the benchmarks it was graded against by CMS, and led to a $3 million bonus.
Comprehensive patient-linked, longitudinal data set

*Trusted by the nation’s leading hospitals and health systems for over a decade*

240 million lives. That’s the size of our integrated, longitudinal data warehouse that is used to develop the analytics in Optum Performance Analytics. The data in it comes from de-identified electronic health records, claims and other benefits information that has been collected over decades. This unparalleled volume and breadth of patient-linked data gives Optum Performance Analytics the unique ability to find deeper correlations and patterns among patient populations.

Optum Performance Analytics can further augment this view with key data concepts from over 7.9 billion clinical observations from unstructured notes processed monthly using advanced methodological engines and natural learning processing (NLP) software, more than 11 billion lab results and over 5.8 billion diagnoses. Optum has a long history of merging clinical data from a diverse set of EMR systems and combining it with claims data and other sources into a single, validated, analytics-ready data set — giving our provider clients the highest-quality, most complete view of their patients and the interactions their patients have within the health system.

**Analytics built to meet the needs of any health care organization**

*Flexible and adaptable in the face of changing health care environments*

Recognizing that the health care environment is uncertain and each provider organization has different needs, Optum built Optum Performance Analytics with the flexibility to meet the goals of any health care system.

Provider organizations that are seeking specific direction can **leverage pre-built dashboards and opportunity reports** within Optum Performance Analytics that have been designed to proactively analyze an organization’s data and **recommend opportunities** to enhance care or reduce unnecessary costs.

Optum Performance Analytics also has an **advanced workspace functionality** for those organizations and users who want to discover and analyze new or **organization-specific opportunities** for improvement.

Regardless of your strategy, Optum Performance Analytics can help you uncover and prioritize areas in which to take targeted and timely action to improve outcomes.
Over 20 years of health care business intelligence expertise and extensive domain knowledge across payer, provider, employer, life sciences and government spheres gives Optum a singular understanding of the health care landscape and the unique perspective needed to build truly effective solutions for providers today. Informed by a team of 24,000 applied mathematical and statistical experts as well as clinical, financial and operational professionals, Optum Performance Analytics can give provider organizations a more informed, robust view of their health system, and can offer more prescriptive insights. By tracking the performance of provider clients, Optum Performance Analytics can understand where and how provider organizations have succeeded, and then bring that knowledge back into the platform as data that can then be leveraged by other provider clients to enable a cycle of continuous, dynamic learning.
A demonstrable emphasis on interoperability
*Scalable data and insights into your existing workflows and internal systems*

Optum Performance Analytics is open and supports standards-based APIs, including HL7v2 and web services. This open architecture enables you to automate the sharing of data and analytics between Optum Performance Analytics, EMR(s) and/or other internal systems, allowing you to leverage existing investments and data infrastructure with Optum Performance Analytics to efficiently scale your population health initiatives throughout the enterprise. Working with over 17 EMRs and 130 claims technology vendors, Optum is well-positioned to integrate relevant information into your other internal systems, such as updating risk scores in an EMR or exporting a patient registry or list of patients to a care coordination application. Optum implementation teams work side-by-side with your information management professionals to make sure that the correct interfaces are built, and that your clinical and administrative teams are able to take action on your data when Optum Performance Analytics goes live.

A collaborative partnership model
*Long-term, nurturing relationships to drive the success of your organization*

Committed to helping our provider clients succeed and thrive, Optum arms you with analytics and health management experts to help you collaboratively advance your business strategies and improve performance with techniques relevant to your mission and the constituents you serve. Partnering with a dedicated professional specially assigned to your organization, you can fully evaluate the opportunities provided to you within the Optum Performance Analytics platform, and together come up with a set of recommended actions based on your unique goals, to gain further understanding of your populations and networks through custom reports built specifically for your organization. Whether you are looking to improve care quality or profitably enter into risk-sharing agreements, Optum has a seasoned staff on hand to work closely with and advise you as you implement and adopt the Optum Performance Analytics platform.

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**ADVISORY SERVICES**  
**CURATED DATA**  
**ANALYTICS PLATFORM**  
**MANAGED SERVICES**