DATA VS. ANALYTICS VS. INSIGHTS VS. ACTIONS

Value-based care requires analytics that identify specific clinical actions that apply meaningful insights to positively influence quality measures. Let's explore what each of these elements really means and how you can achieve them.

DATA

☐ **Electronic medical record (EMR)**	☐ **Clearinghouse data**
☐ **Claims data**	☐ **Social determinants of health**
☐ **Specialist provider EMRS**	☐ **Patient-reported outcomes**

ANALYTICS

DATA CURATION

DATA CLEANSING	DATA NORMALIZATION	MAPPING TO INDUSTRY STANDARDS	VALIDATION
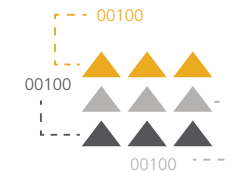
Operational Analytics

- Understand variation, outliers and areas for improvement.
- Compare performance across cohorts.
- Track quality measures.
- Assess trends in seasonality of health conditions and interventions.

Predictive Analytics

- Identify risk types and prioritize next best actions.
- Model future utilization, quality and cost of outcomes.
- Provide a benchmark of cost drivers.
- Close loop on care delivery.

INSIGHTS

Risk and contract optimization

- Analyze value-based cost and utilization trends to manage against risk contract goals.
- Measure per patient per month cost by service, attributed physician and contract.
- Identify trends in service leakage and opportunities to bring necessary services in network.
- Track service migration and engage physicians around managing referral patterns.

Care coordination and patient engagement

- Stratify your patients according to prospective risk and necessary interventions.
- Create registries by diagnosis, condition, multidimensional risk and other key metrics.
- Identify your rising risk patients, those bearing hidden risk and those who will respond best to intervention.
- Forecast expenditures and medical service needs across sub-populations to determine where to focus resources.

Quality and clinical integration

- Identify gaps in care.
- Develop and test optimal clinical care pathways.
- Gauge and track success on ACO, HEDIS and MIPS measures.
- Maximize and streamline quality and regulatory performance programs, including PQRS/MIPS, ACO, HEDIS, bundles and CPC+ programs.

Provider network management

- Identify provider practice variation to identify areas for intervention and reward best practices.
- Benchmark physician performance on cost and quality against their peers.
- Assess network adequacy to serve at-risk patient population.
- Ensure that payer contracts, patient mix, and facility and clinical resources align with your growth strategy.

ACTIONS

SPECIFIC ACTIONS PUT INSIGHTS INTO PRACTICE

Analytics-driven program design

Manage work at a glance

Patient-focused care plans

Intelligent workflow

Easy care planning through pre-designed pathways and custom assessments

Data and reports aren't enough to improve your quality measures while controlling costs. Successful population health management requires an analytic function capable of not only providing **key insights** into your business but also **identifying specific interventions** within care delivery that can advance your goals.

OPTUM IQ™

Navigating the constant change in health care requires the right level of health intelligence. Infused into all our solutions, OptumIQ™ represents our unique combination of data, analytics and health care expertise that help clients measurably improve outcomes, better manage cost, and improve access to appropriate care and therapies. Our team of over 26,000 data and analytics experts focuses on health care, constantly updating our analytic building blocks to yield prescriptive insights that reflect industry best practices, changing regulations and technology advancements. We continue to curate our rich library of data, crafting purposeful analytical methods and models that focus on pragmatic applications of artificial intelligence.