We bring the **analytics**, you bring them **to life**

Using **quality metrics** to do more than measure

UMass Memorial Health Care puts quality measures to work:
Engaging providers and meeting value-based care goals

Encouraging providers to engage with data

UMass Memorial is engaging providers by providing actionable data and communicating how both the system and patients benefit when quality measures are met.

The central Massachusetts health care system uses Optum® analytics to track claims-based quality measures required by the Medicare Shared Savings Program (MSSP) and commercial payers' value-based contracts. UMass Memorial leaders are able to connect with all affiliated providers — even those who do not use the same electronic medical records system. The goal is alignment and communication to increase quality and reduce costs.

They regularly share insights providers find valuable. Tracey Wilkie, Senior Director of Population Health Reporting & Analytics at the UMass Memorial Office of Clinical Integration (OCI), says providers may not need all types of data provided but will engage with analytics surrounding quality of care. *"We're asking primary care providers to directly try to impact and influence the quality measures in the Medicare program, measures like depression screening, fall risk, mammograms and colonoscopies,"* says Wilkie. This approach is driving results. For example, through analytics and outreach, UMASS Memorial was able to control their hypertension increase compliance by 5%, while increasing their breast cancer screenings by nearly 3%.*

UMass Memorial Chief Medical Officer of Population Health, Dr. Thomas Scornavacca, says when data is used to inform patient outreach, he sees opportunities arise to improve care which helps drive engagement across the system. *"Once you have one example in a practice of how a patient benefits, all of a sudden, the secretary, the receptionist, the medical assistant, the nurse — they totally understand why we're doing this,"* Dr. Scornavacca said.

The Optum analytics platform also supports an annual incentive program with providers. Claims data is used with outcomes data and patient satisfaction data to track performance and reward high-performing providers with a year-end quality reward.

"With data reporting, [providers] can see how they perform within their peer group," says Wilkie. When data reveals providers are not on track to meet their quality goal, those providers can now ask for help in reaching their desired level of quality performance. *"We can offer them workflow redesign and specific action plans. There's also help for improving documentation or mining data."*

Goals

- Transparent communication with providers
- Deliver comprehensive, high-quality care to patients
- Improve quality performance
- Reduce costs associated with caring for the communities we serve
- Achieve shared savings

Solution

Quality improvement and the reporting that comes with it are unavoidable realities for health care systems and providers transitioning to value-based care and rolling out population health management strategies.

With the use of Optum analytics Massachusetts-based UMass Memorial Health Care is not only managing quality measurements but also successfully using available tools to engage providers, control the cost of care and earn shared savings.

Reducing population health costs

Providers might find other data insights less directly applicable, but health systems can find value in key variables that lay the foundation for improved quality and reduced population health management costs.

For example, UMass Memorial uses Optum for claims-based predictive analytics to forecast future high-cost patients in the Medicare population. The results are compared to the patient's Total Medical Expense (TME) to find emerging risk. In 2017, UMass Memorial was able to keep the increase in medical spend per beneficiary to 2.5% vs. a national median of 3.5% growth for MSSP ACOs. In addition, UMass Memorial was able to hold growth in short-term admissions per 1,000 to just 1.45% (vs. 1.67% national median growth) and they were able to hold readmissions per 1,000 flat over 2016 (vs. national median increase of 1.3%).

"We recently did an analysis to go back a year to see if an emerging risk variable identified the right patients, and it did," says Wilkie. Finding the right patients — those at risk for rising medical costs — can help providers target care and improve outcomes.

"When data is used to inform patient outreach, opportunities arise to improve care and that drives engagement across the system."

Dr. Thomas Scornavacca

Results

2.5% growth in medical spend per beneficiary versus national median of 3.5% growth

1.4% growth in short-term admissions versus national median of 1.6% growth

2.7% increase in breast cancer screenings

5.2% increase in controlled hypertension compliance

$9.1M earned from CMS after achieving shared saving for the first time in 2017[*]

"Our work is much more efficient now because we are no longer coding the 50 or so quality measures we manage. It's helpful to be able to just push a button and get the results that we need."

Tracey Wilkie

What's next?

UMass Memorial plans to dig deeper into provider engagement and its effect on care quality. Starting in 2019, leaders plan to pilot a program that will require practice champions to engage with the OCI. Practice champions will meet with a practice improvement facilitator and review data analytics reports. The program includes a scoring methodology to help determine whether engaged providers have higher quality scores. *"CMS' annual update of quality benchmarks challenges MSSP ACOs to continuously improve quality performance, so that's our message now. We're telling our providers, we did well but we would've done better if our quality score was higher,"* says Wilkie.

[*] https://www.cms.gov/Research-Statistics-Data-and-Systems/Downloadable-Public-Use-Files/SSPACO/Downloads/2017_SSP_ACO_PUF.zip

"We consider providers and their practices to be our clients; they are the people who we are trying to serve … Our team is constantly working to figure out ways we can be a resource."

Dr. Thomas Scornavacca

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