How IT can help support successful ACO performance

By : Faron Thompson

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Skeptics have been critical of the accountable care organization model not meeting expectations, even though the concept is in line with the move from fee-for-service to value. Promises to improve quality, reduce costs and earn shared savings have been met with mixed results.

Some of the lackluster results may be attributed to "growing pains," as the healthcare industry adjusts to the new paradigm. However, some ACOs have achieved success, not only in terms of cost reduction but in delivering quality care to patients.

For example, Innovation Care Partners (ICP) made headlines earlier this year when the ACO model was among a few that met Medicare Shared Savings Program (MSSP) expectations, joining 31 percent of ACOs in meeting benchmarks and earning substantial savings.

While the ACO concept is still in its infancy, the example of ICP shows that the underlying idea behind ACOs—that care can be cheaper and better—is a good one, and cooperation and the right technology can make value-based healthcare models a functional reality.

ACOs on the fast track
Medicare plots rapid growth in alternative payment models

● Percent of Medicare payments tied to alternative payment models
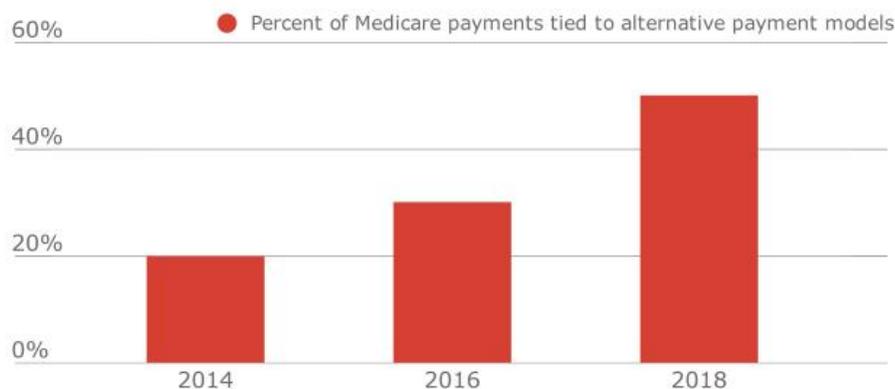
Source: CMS

ICP is a multispecialty physician-led clinical integration network (CIN) based in Scottsdale, Ariz., that is wholly owned by HonorHealth. ICP is home to more than 1,600 physicians at more than 350 physician offices, covering more than 100,000 patients, through eight different insurance contracts, including Medicare Advantage, commercial insurance and HonorHealth's employee health plan.

While MSSP success continues for ICP, the bigger story here is the success of the ICP's business model, which relies on five key strategies to ensure it has the flexibility and support necessary to offer a benefit to patients and providers alike in an ever-changing healthcare landscape.

Engage physicians

At a foundational level, an ACO is a partnership of physicians working with peers for better care, and thus the incentives have to match that core philosophy. ICP incentivizes physicians to attend meetings, participate in quality programs and properly engage with their patients in a number of ways, but most notable is a points system that rewards individuals for their personal engagement with the larger ICP physician community.

A minimum point threshold must be met for physicians to remain a member of ICP, and another threshold must be met in order to be eligible for gainshare that's paid out to individual practices, which leaves those who are left out incentivized to participate more in the future to earn the same gainshare distribution as their peers.

In addition to gainshare, which all ICP physicians are eligible to receive, primary care physicians are also eligible to receive care management fees. This is a per patient per month calculation that is paid out to PCPs for taking care of ICP patients and participating in all ICP quality initiatives. Care management fees are paid quarterly, which are especially beneficial to primary care physicians (PCPs) who are often poorly reimbursed and stretched thin in today's economy.

A lot of what ICP does is aimed at engaging doctors directly. The ACO brings PCPs all kinds of reports on engagement, information about their patients and their use of ICP's technologies so they can make the most of ICP participation. Physicians are rewarded for helping to keep ICP strong and solvent.

Improved access to data for clinicians

There are a number of challenges physicians face in accessing data, from hospital portals that require different logins, to tracking down lab and radiology results for patients. Sometimes, practices are forced to have patients redo tests and procedures, which drives up the cost of care and irritates patients. This is the unfortunate reality of living in a world where health information doesn't flow as freely as it should.

One of the primary jobs of an ACO is to alleviate this burden. For ICP, Orion Health's Health Information Exchange (HIE) is the anchor technology for data access and aggregation, offering clinical data from sources that are challenging for physician offices to access. ICP captures data from a variety of valuable sources and puts it all together into the HIE.

Clinicians can simply login to the HIE and see a complete view of a patient's health history, including all test results and past care that patient has received. ICP also adds innovative customizations to drive value for clinicians—not just physicians, but care coordinators and medical assistants, too, because data access also helps them do their jobs better.

An example of an innovative customization is how ICP integrated the Orion Health HIE to TigerConnect, a secure messaging technology, to provide clinicians with real-time status alerts on patients. With this innovative integration, PCPs, care coordinators, and transition care managers are all alerted immediately when an ICP patient registers at the emergency department or for an inpatient admission.

Other value-add enhancements include an application designed to curb opioid abuse. With the single click of a button that ICP added to their Orion HIE, a physician can see their own narcotic prescribing history, as well as the history of narcotic prescriptions given to a patient. This helps providers stay compliant while reducing the number of narcotics that are given to patients unnecessarily.

Care coordination and transitional care management

Everything ICP does is based on the principle of building relationships. For patients, this means keeping in touch, and motivating them to engage in their own healthcare so they can achieve their health and life goals. ICP seeks to

know what its patients want out of life, and then a path is developed to help them achieve their goals.

Because patients are engaged in their own health and are aiming for goals that are solidified in their everyday life, this means fewer readmissions and major cost savings. Following this line of thinking, ICP has RNs working as transitional care managers (TCMs) who plan care post-discharge and avoid a situation where patients fall through the cracks.

TCMs help fill gaps and get the care patients need, while looking into a patient's personal life to ensure, among other things, they have access to transportation for future care and to ensure their home is an environment suitable for healing. For patients who work with a TCM after a hospital stay, the readmission rate is around 5 percent. The average rate of readmission in Arizona is closer to 17 percent.

ICP plans to work with Orion Health to build a solution called "Coordinate" to help make care coordination and transitional care management even easier. The solution will have visual tools to help ICP's care coordinators and TCMs with assessments and other clerical tasks, with the end goal being to support them in their efforts to help patients meet benchmarks for success.

Improve provider communications and coordination

To achieve ICPs goals and do right by patients, physicians must collaborate and effectively communicate with one another. The secure messaging application (TigerConnect) is used to facilitate this collaboration and ensure patients receive quality care. It works on tablets and phones much like a standard text message, and it's fundamentally changed the way care is delivered at ICP.

With secure, real-time, asynchronous messaging for clinicians, patient care is now more appropriate and timely. Physicians communicating using TigerConnect wind up accelerating care when necessary and also avoiding unnecessary consultation visits.

Manage population health

ICP gathers and houses a vast amount of data from a number of sources. But at the end of the day, since ICP's contracts are with private payers and Medicare, success of the ACO is measured by claims data. On a monthly basis, payers send us claims data that is analyzed to identify new opportunities to improve outcomes. ICP can analyze data by patient, physician, disease, procedure or

facility. With good data analysis, the ACO then can determine where to focus improvement efforts.

Technology from Change Healthcare supports ICP in these efforts, and without the ability to break down patient population data in detail, the ACO would not be successful. The ability to properly expend energy for care improvements is the key to running a successful business of any kind, but in healthcare where extra income means better care for patients, filling gaps is even more important.