

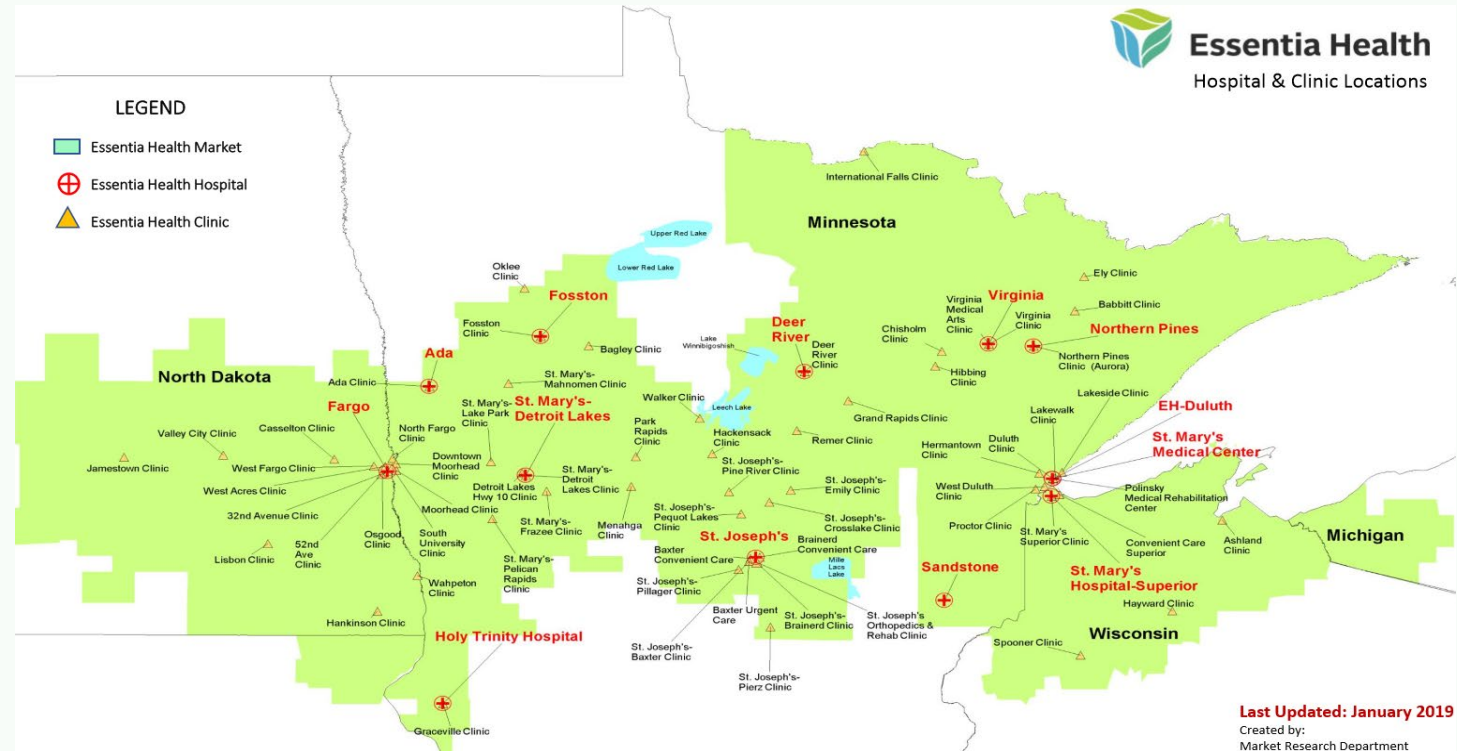
# Today's Agenda

- Welcome
- Introduce the topic of Staffing Your Data Analytics Operations
- Introduce the Panelist
  - Debbie Welle-Powell, CPHO, Essentia Health System ACO
  - Stephen Knuckles, CEO Costal Caroline – Single ACO, Physician led
  - Gary Albers, CEO Imperium Health - Multiple ACOs
  - Melody Danko-Holsomback, Keystone ACO plus system and health plan
- Questions and Answers

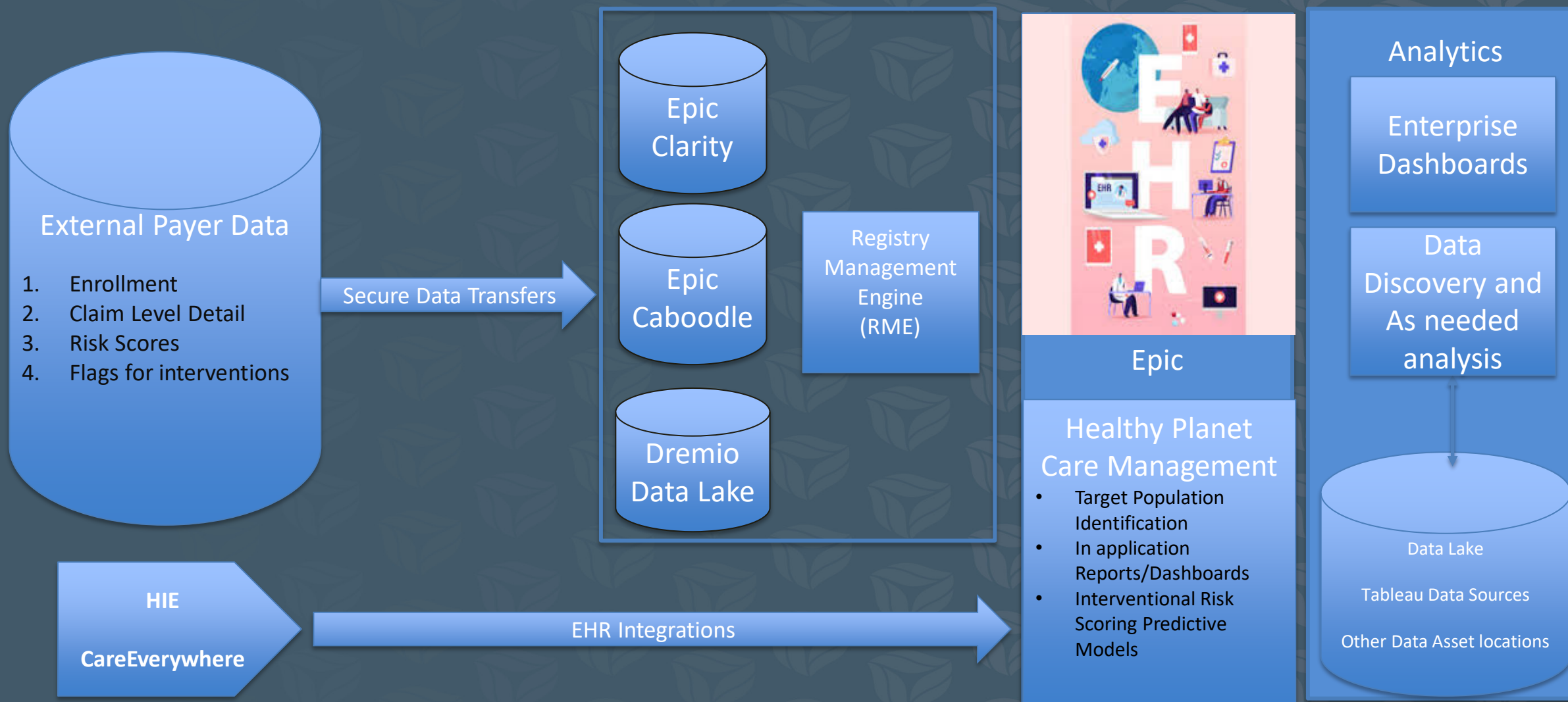


# At a glance: Essentia Health

- Nonprofit, integrated health care system headquartered in Duluth, MN
- 14,700 employees
- 15 hospitals, 75 clinics
- Serving 560,000+ unique patients in Minnesota, Wisconsin, and North Dakota
- NCQA Level 3 ACO
- 180,000 at risk Lives: Commercial, Medicare – Enhanced Track MSSP, and Medicaid
- Approximately 43% of Revenue flows through Total Costs of Care Contracts



# External Population Health Data Sources



# Epic Population Health Data Sources

## Essentia Epic Instance

- Integrated Care Delivery through 1 Core System



Utilized for



Epic

### Healthy Planet Care Management

- Target Population Identification
- In application Reports/Dashboards
- Interventional Risk Scoring Predictive Models

### Analytics

Enterprise Dashboards

Data Discovery and As needed analysis

Data Lake

Tableau Data Sources

Other Data Asset locations



# FTE Breakdown Analytics

## Enterprise Analytics

## Population Health

Director  
Enterprise  
Analytics

1.0 FTE  
VP Finance  
and Analytics

Manager  
Analytics and  
Architecture

Manager  
Analytics

Manager  
Analytics

1.5 FTE  
Data Engineer  
ETL Developer  
Caboodle Admin

2.5 FTE  
Healthy Planet Analyst  
RME Analyst

2.5 FTE  
Business Intelligence  
Developer

1.0 FTE  
Business Analyst

1.00 FTE  
Data Analysis

\*\*\*Enterprise Analytics not inclusive of Application

Team Resources(Pam Marlatt)



# Population Health Data Management Success Stories

How have analytics been used to improve population health

- Referral management has improved due to access to payer claims data improving coordinated care of our ACO members
- Healthy Planet has enabled care management capabilities and automated workflows
- Analytics have been leveraged to evaluate care management interventions among broader affordability initiatives such as remote patient monitoring and other virtual services
- Development of community partnerships
- Social determinants of health community engagement
- Tableau Dashboards: High Costs Claims, RX Management, SNF Performance

# Challenges

- **Bringing together disparate data from many different sources**
- **Data provided by payers is incomplete, often inaccurate, and not timely**
- **Competing organizational priorities**
- **Transforming data into actionable insight is a slow process**
- **Recruiting and retaining staff with strong technical skills while at the same time are experienced in population health management**
- **Lack of formal data management governance structure**

# Staffing Your Data Operations

## A Case Study

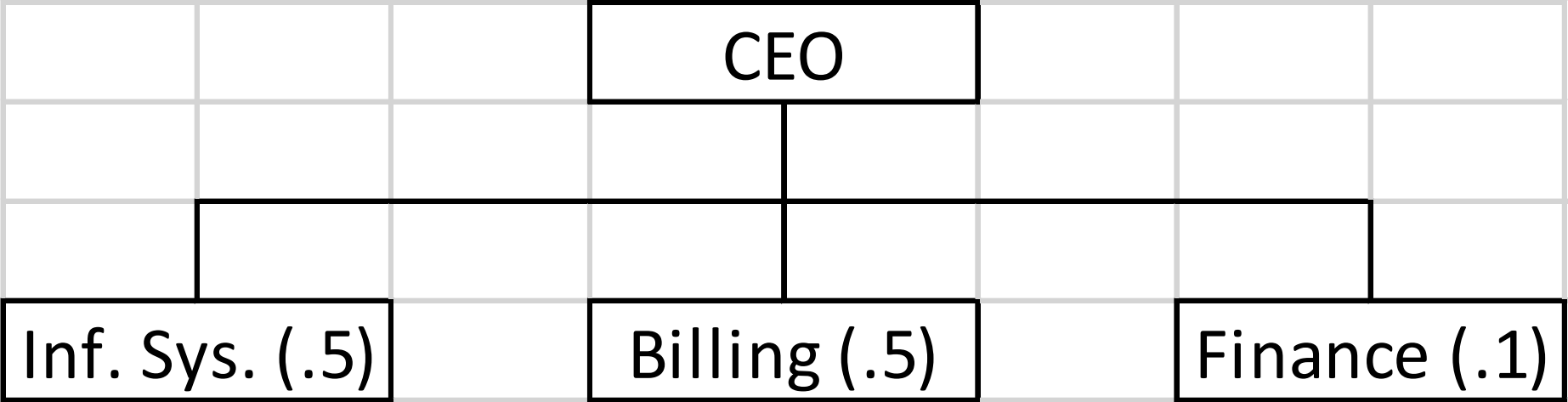
Stephen W. Nuckolls, MAC, CEO



# Coastal Carolina Overview

- Medical Practice Based ACO (2 Non-Owner Specialty Participants)
- >22,000 Attributed Beneficiaries (Medicare, BCBS of NC, Humana, UHC with \$200+ Million Combined TCC Budgets)
- 2-Sided Risk with MSSP & BCBS of NC

# Organization Chart with FTE Staff



# Clinical and EHR Based Data Operations

- Quality Improvement (Inf. Sys.)
  - POC Dashboards
  - Monthly Reports
  - Pursuit Lists
- Quality Reporting (GPRO/eCQM) (Inf. Sys.)
- MA Gap/Quality Operations (Billing)
- Diagnosis/HCC Coding and MA Recapture (Inf. Sys/Billing)

# Financial and Claims Based Data Operations

- Variation in Care (Inf. Sys.)
  - Medical Neighborhood
  - Benchmarking
- Participant Gainsharing Calculations (Inf. Sys.)
- Distribution Calculations (Finance)

# **KACO Analytics Staffing and Support**

**Melody Danko-Holsomback, CRNP, MSN**

# Keystone ACO Analytic Support Historical Experience



Utilizes a combination of internal and external support



**2010-2012:** Utilized Geisinger internal actuarial support that tracked and supported the PGP Demonstration to analyze data for ACO start-up.



**2012- 2018:** Transition to xG analytics vendor



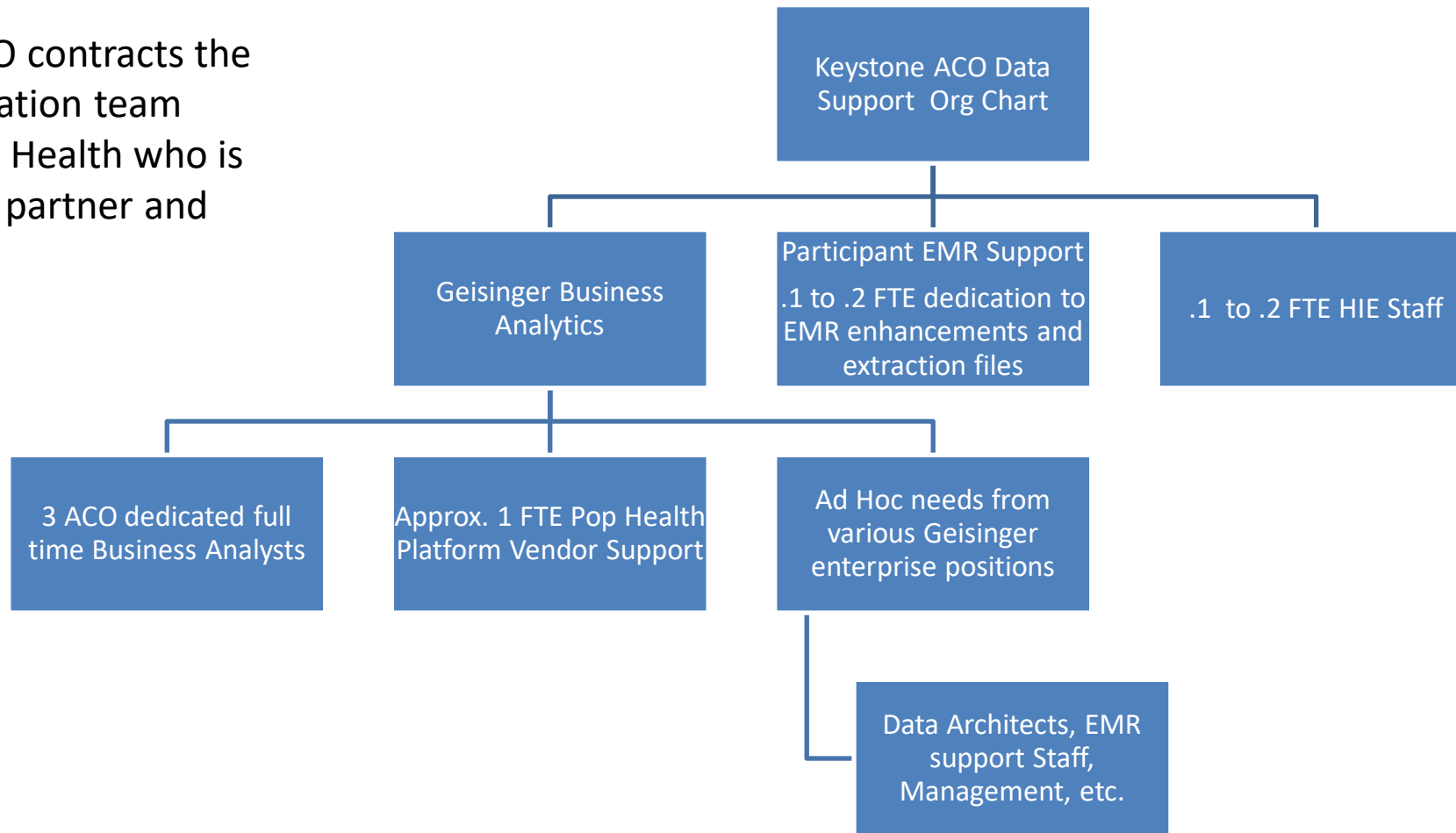
**2018 to present:** Transitioned to Geisinger internal data analytics support and their subcontracted vendors

# Keystone ACO's Current Analytic Structure



# KACO Data Support Structure

\* Keystone ACO contracts the ACO Administration team from Geisinger Health who is an ACO paying partner and participant





# Analytic Service Evaluation and Procurement Considerations

## Resources are available inhouse vs vendor

- Data storage and processing, file transfers
- Claims analysis
- Report coding
- Dashboards with drill down capabilities
- Number of Payors, TINS, providers, sites and beneficiaries included in analysis needs
- Population Health Platform that can aggregate multiple data sources include claims, registry and EMR data

## Internal FTE and skill needs

- Number of new positions verses utilizing portion of current positions

## Vendor choice

- Full analytic package (including data ingestion, processing and staffing) or carve out needs (specialty reporting, data exchange or interfacing , etc.)
- Development flexibility

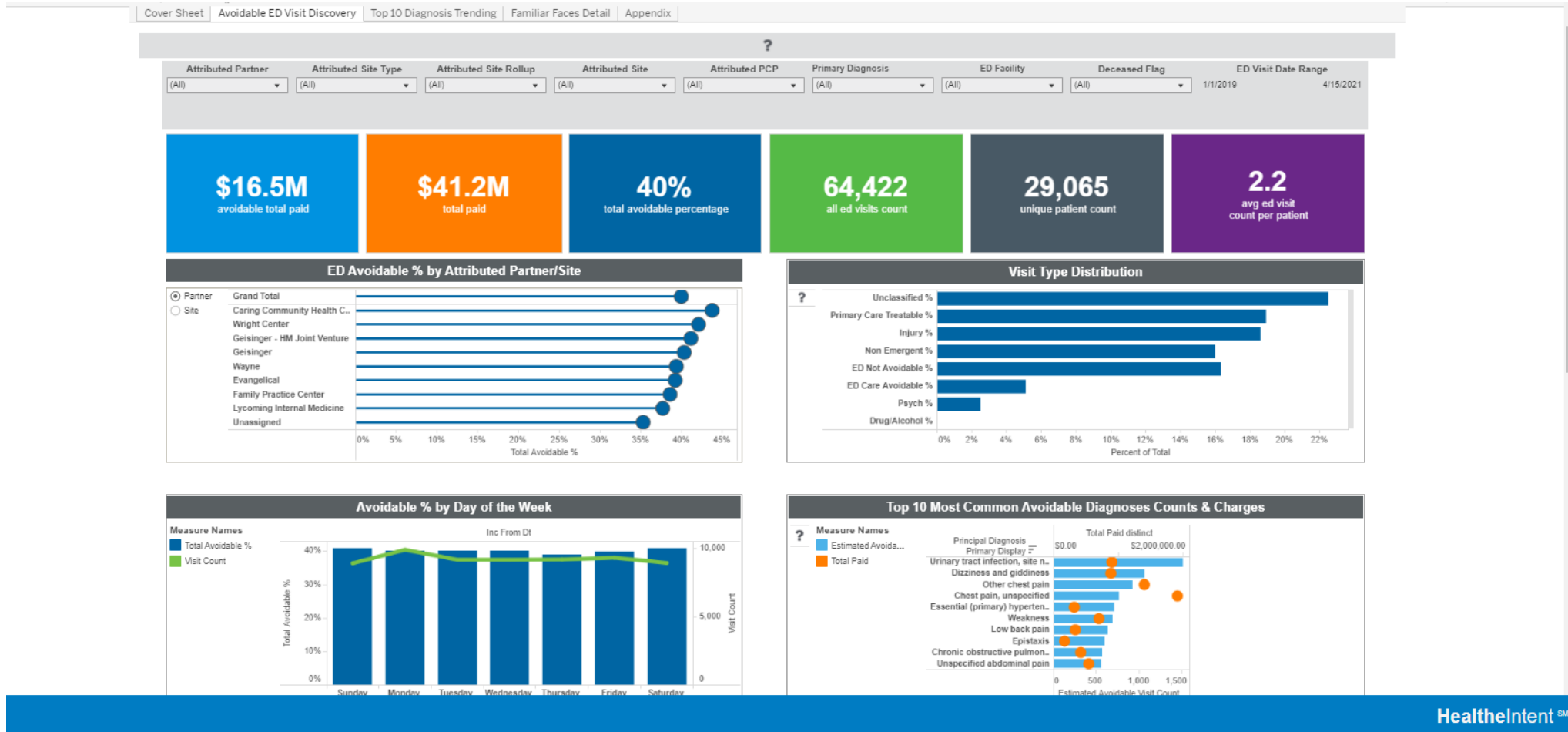
## Budget

- How much does one option cost over the other?
- % of budget to potential savings (size of ACO and Medicare revenue impacted by contracts)

# Appendix

## Dashboard and Report Examples

# ED Dashboard



# Quarterly Expenditure Dashboard

Full Detail | Expenditure by Enrollment Type | Expenditures by Component | Expenditures by Percent | Utilization | Transition of Care | SNF Report

**Keystone ACO** CMS Quarterly Expenditure and Utilization Analysis: *Main Page*

Major Category: (All) | Sub Category: (All) | Assignment: Track 1+ vs Pathways

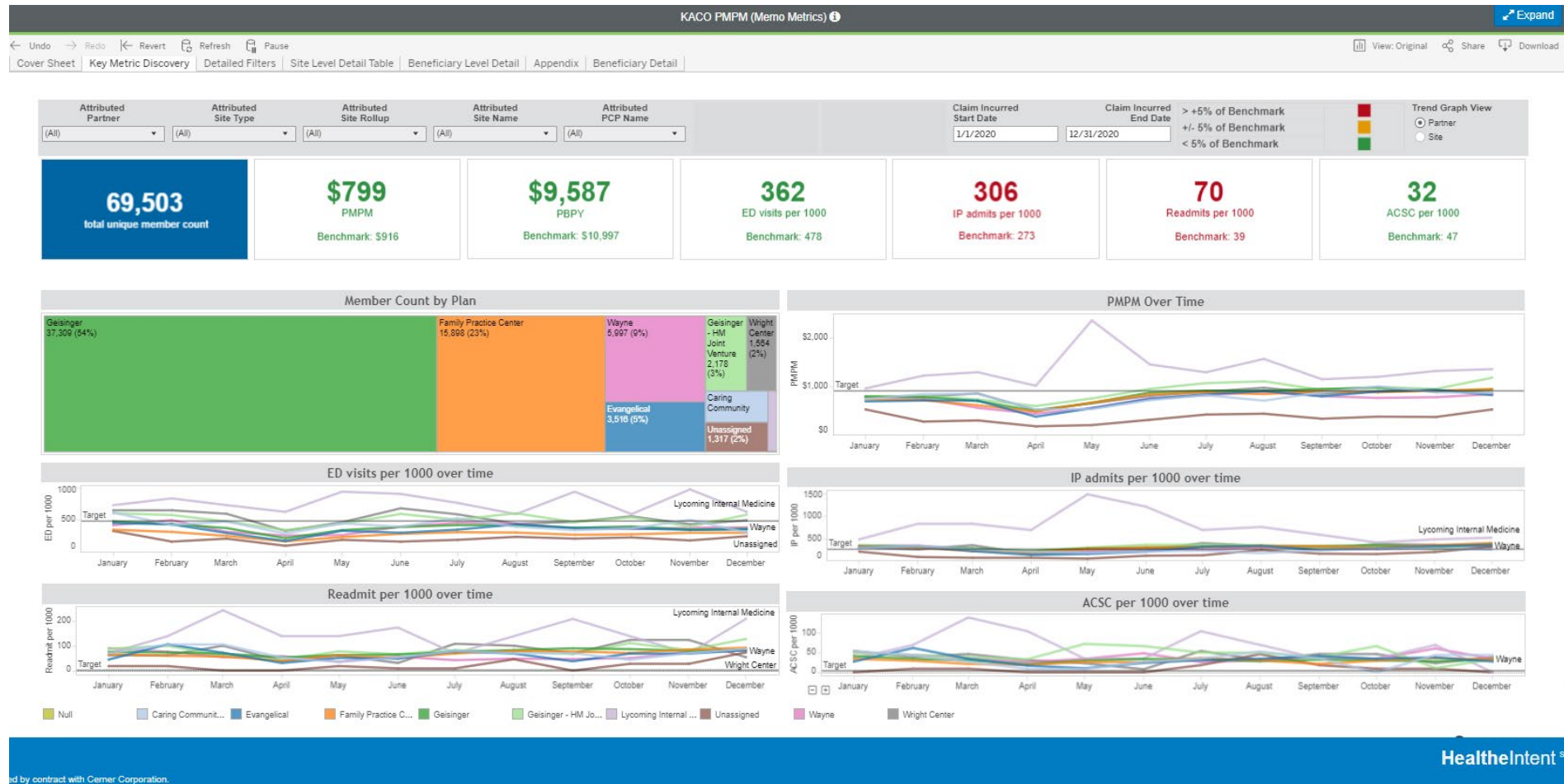
(All)  
 PATHWAYS  
 PATHWAYS COVID EXCLUDED  
 TRACK 1+

Quarter of Year Quarter: 2019 Q1 | 2021 Q1

		2019 Q1	2019 Q2	2019 Q3	2019 Q4	2020 Q1	2020 Q2	2020 Q3	2020 Q4	2021 Q1
<b>Number of ACOs</b>	Number of ACOs	1	1	1	1	1	1	1	1	1
<b>Total Assigned Beneficiaries</b>	Total Assigned Beneficiaries	75,238	74,791	74,454	74,198	75,932	75,544	75,124	74,890	70,395
<b>Person Years by Assigned Beneficiary Medicare Enrollment Type[5]</b>	Aged/Dual	1,276	2,105	3,771	4,984	1,237	2,048	3,577	4,703	1,077
	Aged/Non-Dual	14,413	29,001	42,547	56,351	14,763	29,664	43,521	57,584	13,844
	Disabled	2,913	5,651	8,258	10,790	2,786	5,423	7,937	10,371	2,422
	End Stage Renal Disease	128	251	370	477	121	241	356	464	109

HealtheIntent™

# KPI Dashboard with Drill Down





Health System Enterprise MSSP Enablement



# IMPERIUM – Data Teams Needed

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Claims data expertise/ingestion



Analytics review/creation based on business needs



Clinical Data acquisition/integration



Intake/Evaluation team for data request review and monitoring of CMS Updates



Support Team for infrastructure questions/issues along with End User Training/Documentation

# IMPERIUM HEALTH – Data Integrations (Sources)

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- Sources of Data:
  - Payor Claims
  - Clinical Feeds
  - External Lab Company Feeds (LabCorp/Quest)
  - HIE Integrations



# IMPERIUM – Clinical Data acquisition/integration

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- Interface types:
  - Multi payor/claims
  - EMR
  - HIE
  - Hospital ADT
  - Labs
- CCD/CCDA/HL7/Flat file expertise
- Knowledge of EHR's, common data issues that occur for data governance
- Communication/management between both sides of integration tools/nuances for increased efficacy of data loads



# IMPERIUM – Claims/Analytics Teams

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Understanding of CCLF data, what it contains, how to ingest/modify for analytics usage



Create attribution, benchmark and financial reconciliation algorithms to the patient level



Track performance against risk-adjusted TIN and NPI specific targets and contribution to performance against national/regional benchmarks



Enable mass deployment of Analytics Reports to end users for patient level initiatives/tracking



# IMPERIUM – Intake/Evaluation and Support team

## Intake/Evaluation:

- Works closely with Analytics team to understand data available
- Create smooth workflow for report request intake
- Assess hours/ability of report to be created and alignment/value it brings with current ACO Initiatives



## Support Team:

- Triage incoming support issues along with analytics clarification requests
- Work closely with Analytics team provider clarity on calculations/usage of system
- Understand backend calculations of reports to report true issues quickly in analytics report and assure correction in reports
- Identification of common poor coding practices by disease grouping
- Daily report detailing coding areas to consider at patient level for providers

