CMMI Bundled Payment for Care Improvement Initiative

Risks: Perspectives From the Frontlines

Kelsey Mellard
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naviHealth
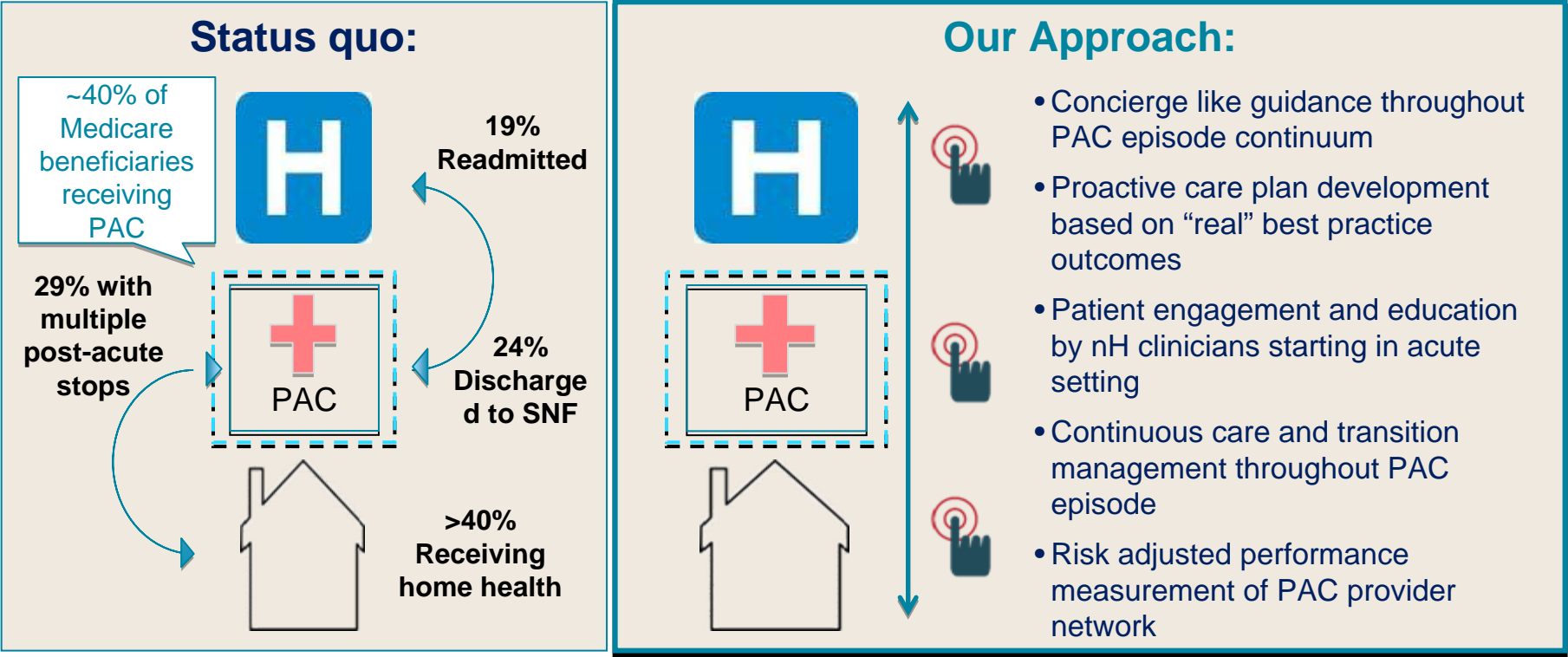*Navigating* Post-Acute

An Introduction to naviHealth

- **Partner to risk-bearing entities holding post-acute care (PAC) risk: MA Plans, Bundled Payment Participants, Provider Carve-outs and ACOs**

- **Managing 1.8 million Medicare beneficiaries**

- **Partner to health systems and providers on CMS Bundled Payments for Care Improvement (BPCI) program**

- **Over a decade of PAC operating experience**

- **Best in class PAC technologies, leading PAC analytics platform and largest PAC outcome database of its kind**

Mission: To engage, empower and guide each of our patients to optimize their personal recovery journey

Proven Operational Model

naviHealth is only company with a proven operating model for managing post-acute care at scale across multiple markets

Status quo:

~40% of Medicare beneficiaries receiving PAC

29% with multiple post-acute stops

19% Readmitted

24% Discharged to SNF

>40% Receiving home health

PAC

Our Approach:

- Concierge like guidance throughout PAC episode continuum
- Proactive care plan development based on "real" best practice outcomes
- Patient engagement and education by nH clinicians starting in acute setting
- Continuous care and transition management throughout PAC episode
- Risk adjusted performance measurement of PAC provider network

PAC

Proactive, patient-centric solutions for better management of post-acute care

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Best in Class Post-Acute Technology

LiveSafe™: the key differentiator versus other PAC solutions

- Generates individualized patient centered care plan based on outcomes database containing >700,000 patient records

- Patient function is key variable

- *LiveSafe™* projects:
  - PAC setting
  - Length of Stay
  - Therapy intensity
  - Expected functional improvement
  - Risk of readmission

- Common language across all PAC settings, ability to integrate with existing platforms

- Risk adjusted reporting to plan on the network of PAC providers

Targeting improved post-acute outcomes and decreased unnecessary utilization through use of __proven__ technology and in-market care management

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Severity Adjusted Network Reporting

naviHealth provides severity adjusted reporting on the quality and efficiency of the post-acute providers in a network allowing for more informed patient education and the development of preferred networks

	Efficiency measures						Quality measures				
Facility	Cases in LiveSafe	Rehab Start Lag (days)	Actual Therapy Cycle (days)	Rehab End Lag (days)	Actual LOS	Target LOS	ELOS Variance	Actual Discharge Function	Expected Discharge Function	Function Discharge Variance %	Therapy Hours / Day	Readmit Variance
Facility #1	45	1.1	9.5	0.7	11.3	10.5	8%	48.0	49.0	-2%	1.0	2%
Facility #2	67	1.3	12.1	0.8	14.2	14.0	1%	35.7	34.0	5%	1.4	-1%
Facility #3	19	1.3	9.5	1.1	11.9	12.0	-1%	35.0	40.6	-14%	1.5	11%
Facility #4	101	1.6	11.3	4.9	17.8	14.7	21%	31.6	38.0	-17%	1.0	9%
Facility #5	129	1.2	11.4	3.1	15.7	11.8	33%	36.0	40.0	-10%	0.9	0%
Facility #6	17	1.1	16.4	1.1	18.6	12.5	49%	39.6	42.0	-6%	0.9	5%
Facility #7	98	0.7	11.6	1.4	13.7	11.4	20%	36.0	39.3	-8%	1.0	13%
Total / Average	476	1.2	11.4	2.4	15.1	12.6	20%	36.2	39.5	-8%	1.0	5%

Measuring lag time between admission/discharge and therapy start/end

By facility, comparing actual length of stay to risk adjusted best practice

Track quality providers by measuring impact of therapy thru patient's functional improvement

Analyzing readmissions variance thru measurement of actual versus best practice

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Managing Operational Risks within Risk Arrangements

Considerations for managing risk across multiple care settings

Analytics	▪ Understanding base period data ▪ DRG selection: price and volume ▪ Duration of episode and risk track selection ▪ Quarterly options	*Are you chasing the wrong beneficiaries?*
Compliance and Reporting	▪ Data Compliance ▪ Contract Compliance ▪ Utilization of Waivers ▪ Quality and Evaluation: LiveSafe and BCare	
Acute Setting Partnerships	▪ Access to beneficiaries and records ▪ Underestimation of implementation work ▪ Building specific processes ▪ Alignment: Pre-op to Post 90 days	

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Managing Operational Risks within Risk Arrangements

Considerations for managing risk across multiple care settings

Financial	▪ Engaging your partners in risk sharing ▪ Cash flow: retrospective reconciliation ▪ Targeting your resources ▪ High risk vs low risk
Beneficiary Engagement	▪ Beneficiary choice ▪ Family/Caregiver engagement and adherence to care plan ▪ Beneficiary incentives ▪ Creating continuity with market specific brands
In-market PAC Partnerships	▪ Utilizing Acute Partner ▪ Tracking referral patterns: Quality and Efficiency ▪ Decreasing PAC utilization…market consolidation ▪ Sharing the beneficiary management with PAC providers

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