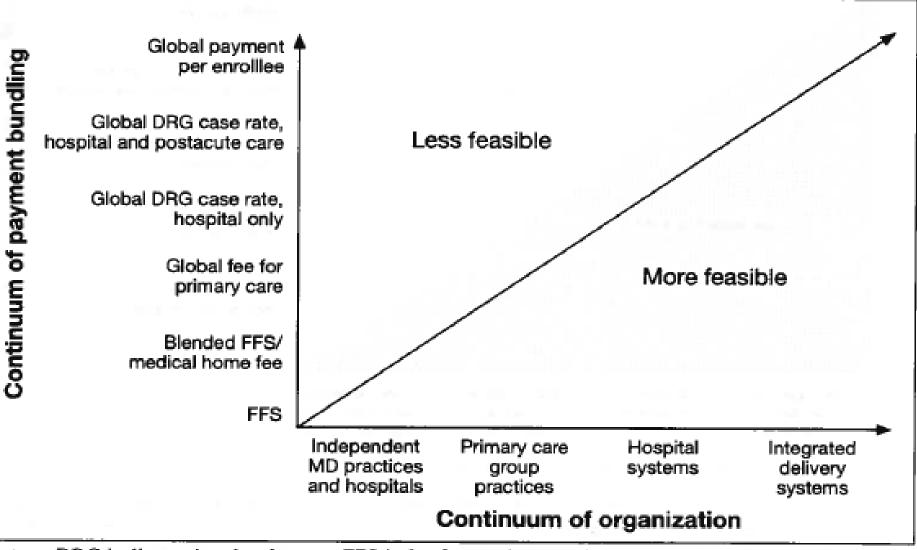


Hard-Wiring Your ACO the California Way

How much integration is enough?

Keith Wilson, MD

Exhibit 3: Medicare Payment Reform Framework: Organization and Payment Methods



Notes: DRG is diagnosis-related group; FFS is fee-for-service; MD is medical doctor.

Source: S. Guterman, K. Davis, S. C. Schoenbaum, and A. Shih. "Using Medicare Payment Policy to Transform the Health System: Framework for Improving Performance," *Health Affairs* Web Exclusive (Iap. 27, 2009): w238-w250



Talbert Medical Group

Eleven Centers

- Orange County
 - Anaheim
 - Fountain Valley
 - Huntington Beach
 - Santa Ana
 - Tustin
 - Ambulatory SurgeryCenter

- Los Angeles County
 - Compton
 - Downey
 - Long Beach (Plaza)
 - Long Beach (Downtown)
 - Lakewood



In-house Specialties

- Allergy
- Cardiology
- **Dermatology**
- L ENT
- Family Practice
- Gastroenterology
- Hospitalist Program
- **Internal Medicine**
- Neurology
- Obstetrics/Gynecology

- Otolaryngology
- Out-Patient Surgery
- Pediatrics
- Podiatry
- Pulmonary/Critical Care
- Radiology
- Rheumatology
- Urology
- Physical Therapy

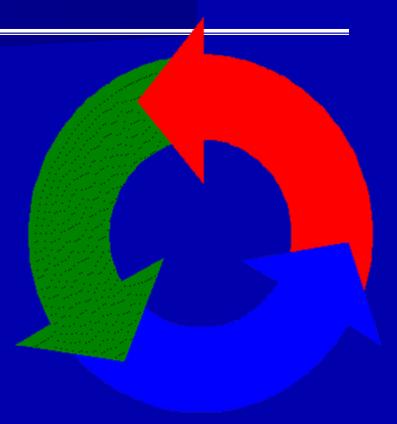


Talbert's Health Care Continuum

- Hospital
- Clinic

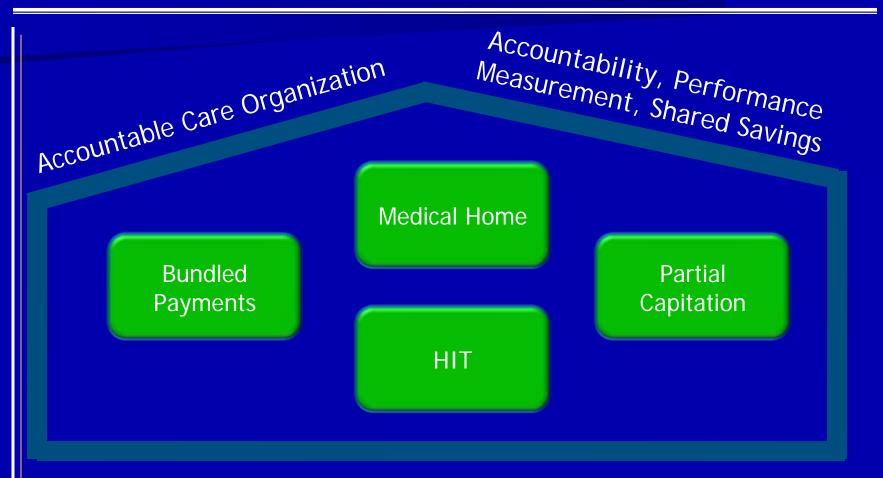
- SNF/ECF/Assisted Living
- Home

The Disease Process from beginning to end





The ACO is the overarching structure within which other reforms can thrive





Connecting the Docs



Other
Possible
Components:

Home Health

Mental Health

Rehab Facilities



Talbert--A Fully Integrated System



eAccess

EMR Online

(Application Suites)
Web Access



Patient Portal

- •LUCY
- Medical Record
 - Scheduling
- ■Referral Status
- Prescription Renewals
- Notifications/Reminders



External Provider

- (External Providers)
- Referral-View/Create
- Claims-View/Create
- Eligibility-View
- **■**Medical Record Notes



·Lab ·RX

·Elig. Verif

Electronic
Medical Records
Patient Centric



Care EveryWhere
Hospital
Other Groups



Care Management



Scheduling/Appointments



Ambulatory Surgery Center



Billing & Registration



Patient Web Portal

- Appointment scheduling
- Medication list & refill request
- Secure communication with providers & customer service staff
- Allergy list
- Immunization record
- Lab results
- After visit summary



Affiliated Provider Web Portal

- Referral creation and status view
- Claims status view
- Eligibility status & benefits view
- Complete clinical record view
- Provider communication



Interfaces (HIPAA Compliant)

- Electronic lab orders and results with multiple labs
- Electronic medication orders and refills with pharmacies
- Real-time & Batch electronic eligibility downloads and verification
- Electronic claims & encounters submission to CMS and to health plans



Electronic Medical Records

- Visit documentation
- Computerized order entry (CPOE)
- Medication management
- Allergy & drug interaction
- Problem list
- Telephone & Electronic Patient Messaging
- Health Maintenance and Best Practice Alerts (Based on evidence based medicine)
- Scan, store and view external documents
- Electronic submission of prescriptions
- After visit summaries for patients

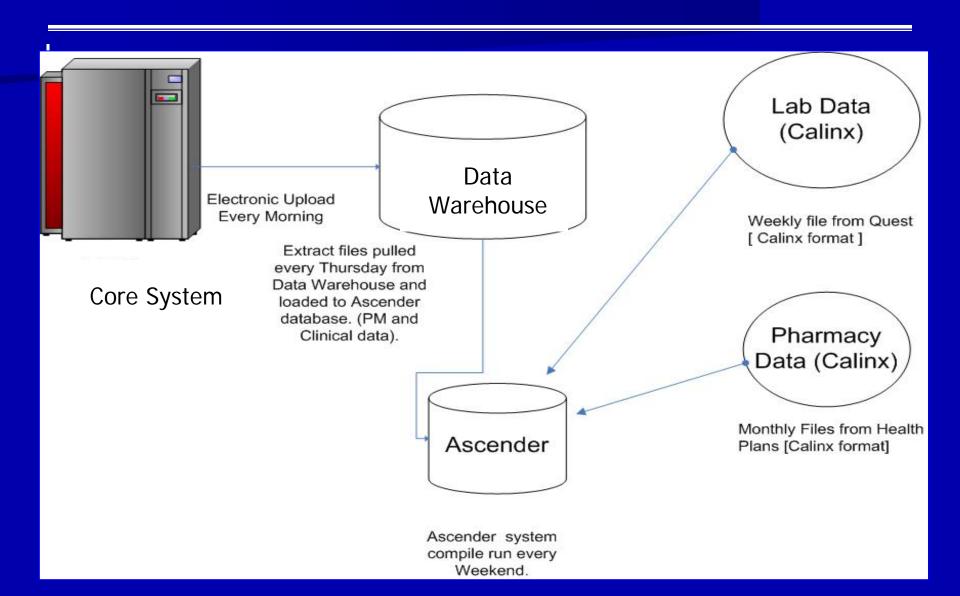


OpTime, Care Everywhere & eAccess

- Ambulatory surgery center integration
- View only clinical data exchange with Hospital Partner at point of care
- Access patient's complete clinical record from a secure web portal from home and other locations



Data Sources





Electronic Prescribing Network

- Electronic Medication Orders
- Refill requests are received electronically
- History of all meds filled by the patient using his/her Prescription Drug Plan
- Formulary warnings at point of prescribing
- Therapeutic subclass alternatives
- Allergy and drug interaction testing and alerts



Ascender Clinical Measures and Risk Adjustment

The Pay for Performance Module

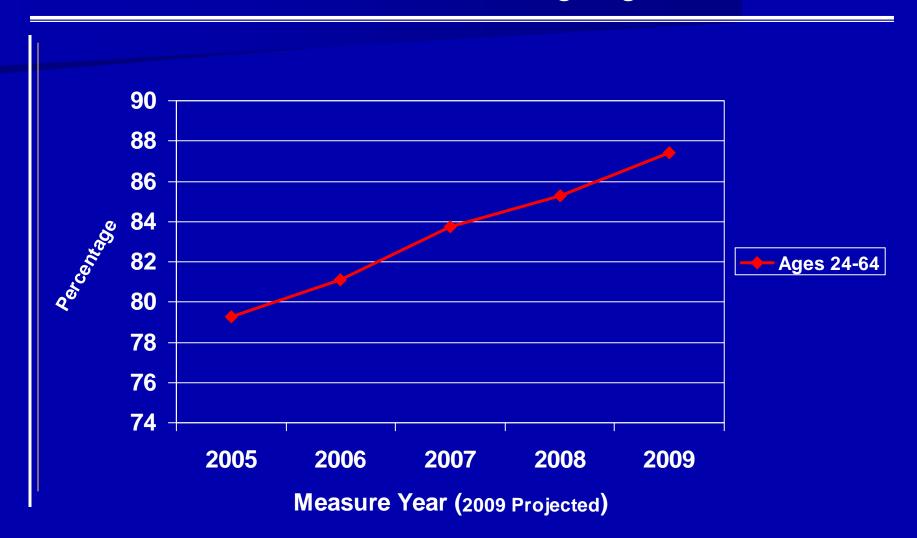
- Collect, compute, manage and report on the Clinical Measures.
- Drill down data organization.
- Talbert staff can easily monitor and manage patient care needs for the Clinical Measures.
- Supported by a Communications Manager (CM) component which allows for proactive management of out-ofcompliance patients.
- Creates and manages letters and phone list communications.

The HCC Module

- Assists with managing our senior population for Risk Adjustment.
- Date based algorithms for conditions to address annually.
- Algorithms to identify patients that are suspect for risk conditions.
- Efforts can focus on contacting patients about care needs as well as identifying records for audits.
- Supported by the Communications Manager (CM) component.

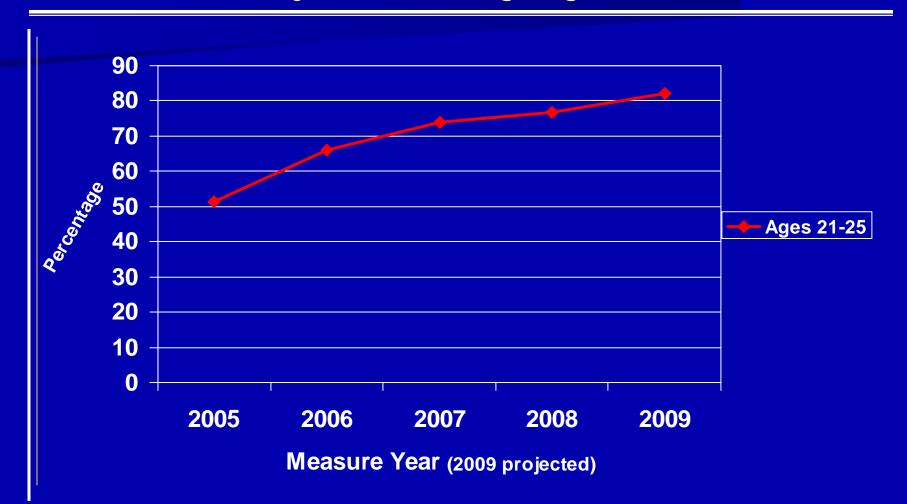


Population Management Clinical Measure Progress Cervical Cancer Screening (Ages 24-64)



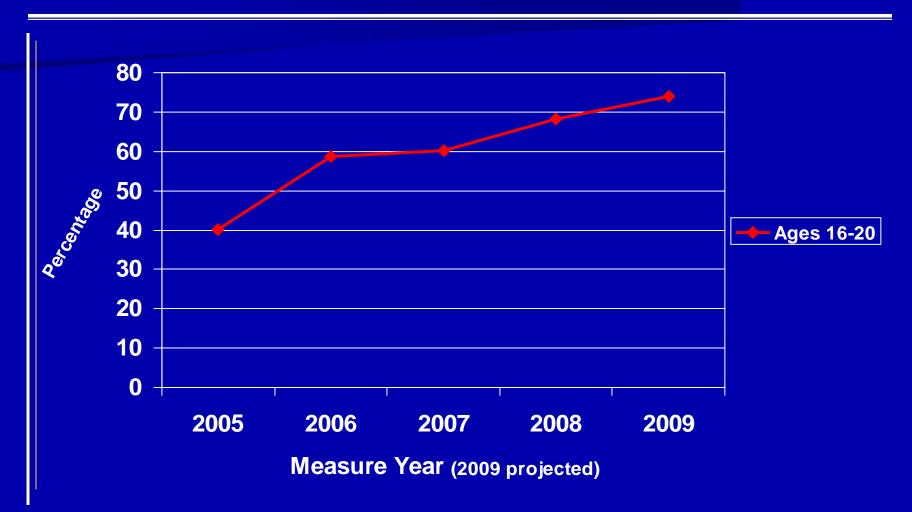


Population Management Clinical Measure Progress Chlamydia Screening (Ages 21-25)



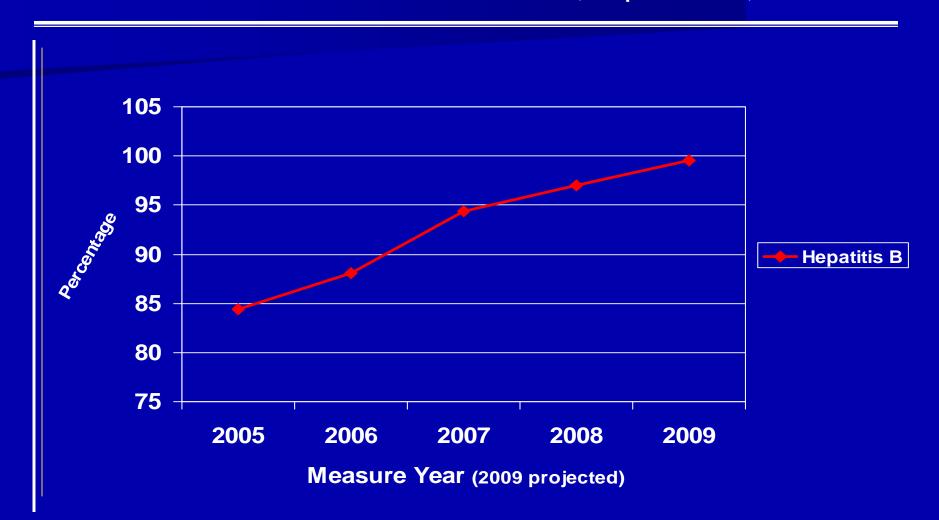


Population Management Clinical Measure Progress Chlamydia Screening (Ages 16-20)



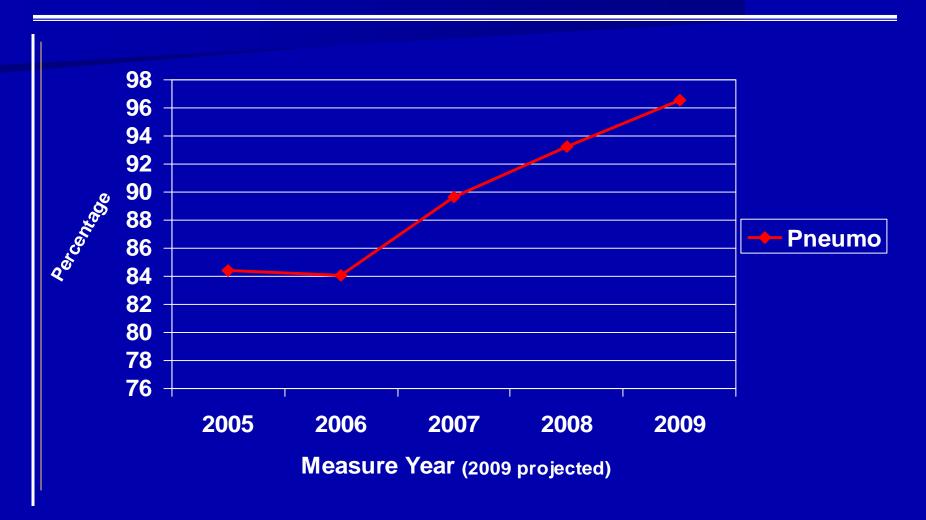


Population Management Clinical Measure Progress Childhood Immunization (Hepatitis B)



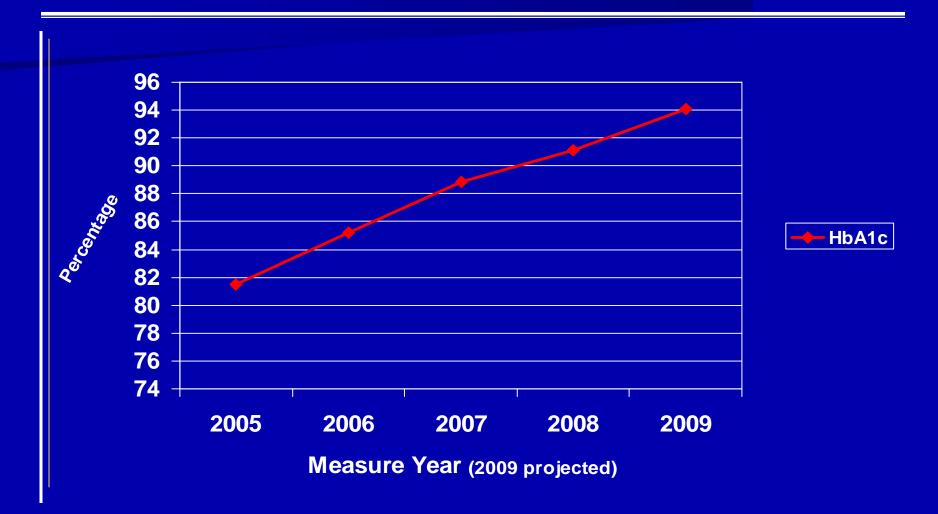


Population Management Clinical Measure Progress Childhood Immunization (Pneumo)





Population Management Clinical Measure Progress Diabetes Care - Screening





Discussion