Leading impactful partnerships with value-based care

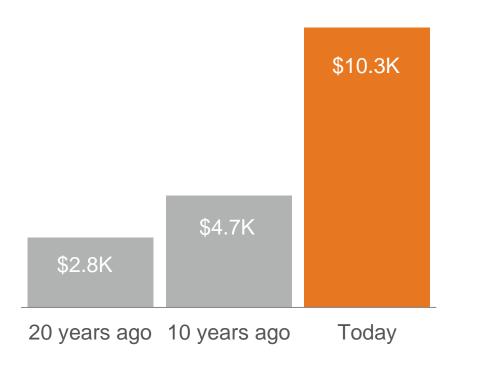


What is the future of value-based care?

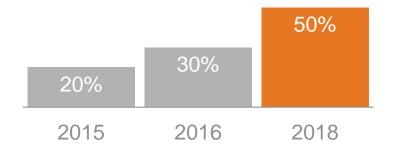


The imperative to lower costs and improve quality will not change

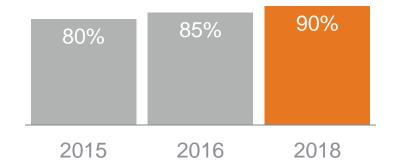
Growing annual health care costs per American



Growing Medicare payments tied to quality



Growing Medicare payments tied to risk





The path and timing to transformation will vary

Scaling for growth

 Repeating success with payerinvolved risk contracts

THE ADVANCER

- Building scale with population health success
- Meaningful reductions in cost of care

THE DISRUPTER

Leading markets

- Partnering and sharing results across entire continuum
- Cutting edge integrated resources and models get cutting edge results

THE INTENDER

Laying the foundation

Protecting

Physician loyalty

THE BUILDER

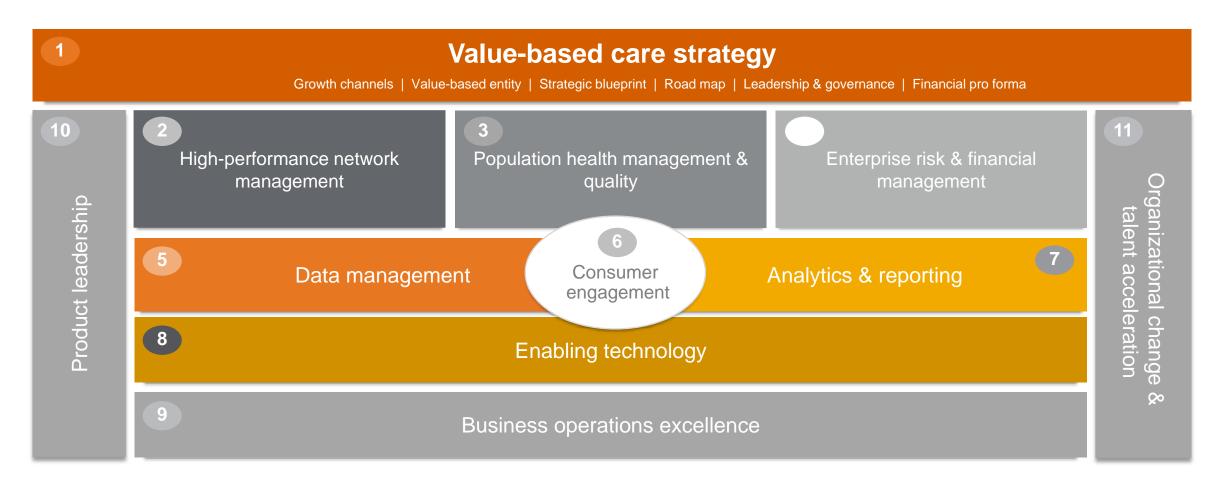
Gaining risk experience

- · Learning by trial and error
- Experiencing failures and successes

Care transformation



Framework for value-based care





There are minimum requirements for success

Risk management and growth strategy

Craft a sustainable valuebased strategy with a solid financial foundation for profitability and growth.

Network formation and contracting

Develop an aligned physician network; match cross continuum and regional partnerships to market opportunities.

Integrated care delivery

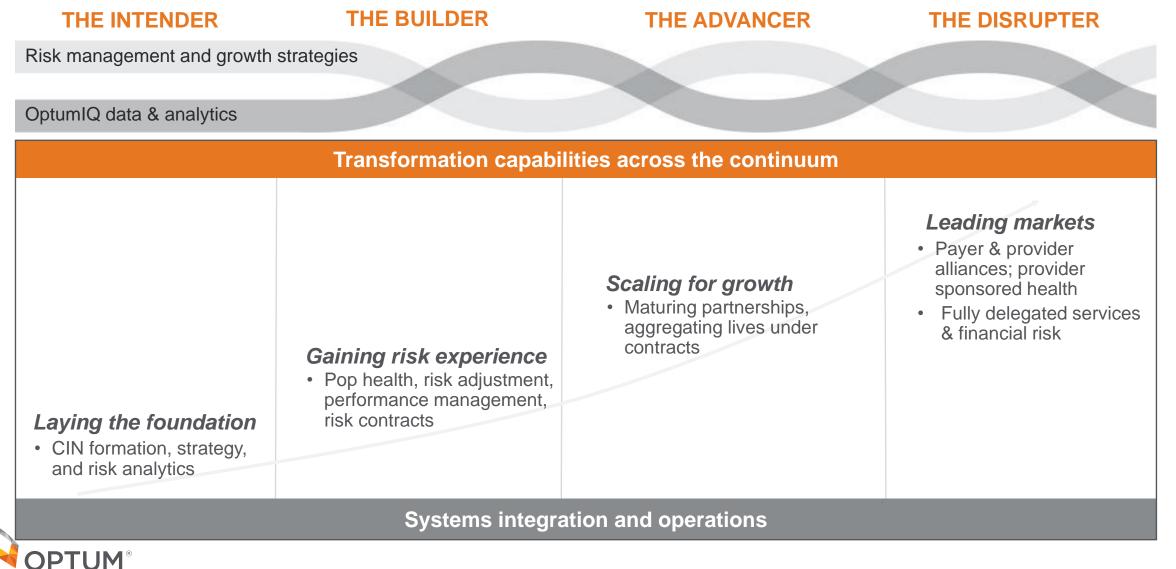
Develop and implement comprehensive, customized, scalable and standardized clinical programs and services.

Integrated partnerships

Develop partnerships, centralized infrastructure and local market governance to drive efficient operations. Integrate data and analysis and drive patient health at lower costs.



Leading the right pace with the right capabilities





The Journey to Revolutionizing Value

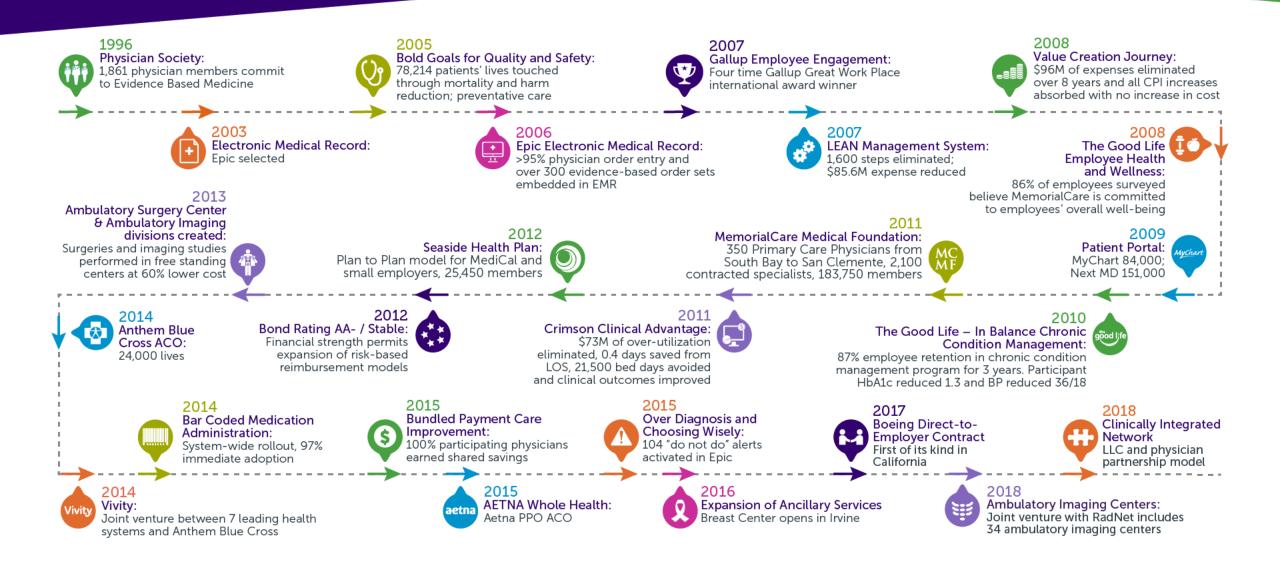
Helen Macfie, Pharm.D., FABC Chief Transformation Officer for MemorialCare, and Executive Director, MemorialCare CIN

National Value-Based and Pay for Performance Summit

February 2019

A 20+ Year Journey High Intensity 2011 →





Strategic Focus

Strategic Planning set the stage

- Commitment to Value, 2010
- Site visits and deeper dives

Getting from there to here

- "Building" our Medical Foundation
- Expanding our ambulatory footprint
- Jumping in to risk-based models





Moving to Value

Value Based Products Membership & Descriptors	
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 HMO, shared and global risk experience since th # Lives: 156,000 	e 1980's
 HMO, 7 Founding Health Systems # Lives: 43,400 	
• PPO, Attributed & Product Model • # Lives: 40,900	
Anthem. Bue Cross • PPO, Attributed Model Only • # Lives: 26,200	
MemorialCare Health Alliance	Comm
 Medi-Cal (Medicaid), Medicare, Limited Comment # Lives: 41,700 	rcial
Next Generation ACO Model Medicare FFS, 2016-17 Hives: 17,000	
BPCI Model 2: Retrospective Acute & Post Acute Care Episode•Medicare FFS Episodes, 2015-2018; CJR 2018→ Cases: 700 annually – Cardiac, Hip/Knee	

MemorialCare is in more valuebased products than any other health system in Southern California. 316,000 Lives including Sr & Commercial HMO



Encouraging Creativity Innovation is a GOOD thing!







1. Expanding our ambulatory footprint

- Medical Foundation both Group and IPA owned/run by physician shareholders (MHS owns the infrastructure and contracts)
- Partnerships and JVs competencies, intentional expansion over time
- Site neutral shift differentiator

365 PCPs - Group & IPA
2,200 Specialists
>80 PCP Locations
13 Urgent Care Centers
31 Imaging Centers
8 ASCs
13 Dialysis Centers
Evaluating other services













Expanding our ambulatory footprint 1.

- **Partnering with other health systems** 2.
 - **Building virtual scale fewer bricks and** ۲ mortar, geomapping
 - **Partnering for learning, shared processes** and performance improvement





Hospital

F



Q	UC	Irvine	Health
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UCLA Health







- **1. Expanding our ambulatory footprint**
- 2. Partnering with other health systems
- 3. Expanding tailored networks
 - Co-creating health plans products at the table, sharing in design and marketing with clinicians
 - Building our own network for Boeing (hospitals, medical group partners)





- **1. Expanding our ambulatory footprint**
- 2. Partnering with other health systems
- 3. Expanding tailored networks
- 4. Engaging and coaching patients
 - PCP selection across med group and IPA
 - 5* 2017 for Experience
 - MemorialCare MG and GNP IPA rated top 3 and 4 in CA for 2018 Patient Assessment Survey for Doctor ratings. Top 1 and 2 in Orange County

Gold Card				
Urgent Care Skip the Wait				
Text Communications with				
Patients				
Scheduling Apps				
Patient Portals				
Practitioner Training & Tools				
Staff Training & Tools				













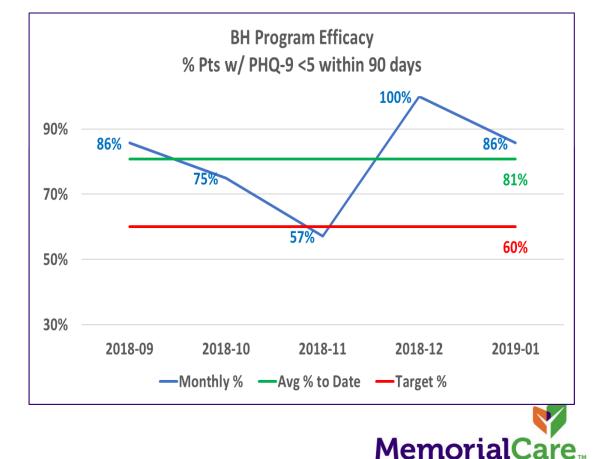
- **1. Expanding our ambulatory footprint**
- 2. Partnering with other health systems
- 3. Expanding tailored networks
- 4. Engaging and coaching patients
- 5. Building out our infrastructure
 - Big and small data
 - Daily huddles at/rising risk, hospitals
 - High risk triage and navigation clinics, services, medical managers
- 6. Managing pharmacy and behavioral cost

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- 2. Partnering with other health systems
- 3. Expanding tailored networks
- 4. Engaging and coaching patients
- 5. Building out our infrastructure
- 6. Managing pharmacy and behavioral cost
 - Dedicated pharmacist team centralized support model, trends and drilldowns, linked to PI/quality
 - Embedded behavioral model pilot, spreading to more products, adding locations, launching virtual health



Value-Based Results

Health Plan Partnerships & Direct-to-Employer (DTE)			
Offered by Anthem. BlueCross	HMO, 7 Founding Systems	 ↓ C-section rate from 34% to 24% Met/exceeded quality & patient experience metrics 	
aetna [®] MemorialCare	PPO, Attributed & Product Model	 Out-performed market trend by 5% in 2018 ↑ Wellness testing and screening by 30% Avoidable ED visits ↓ by 15% Achieved 100% on quality metrics 	
Anthem Blue Cross	PPO, Attributed Model	 Out-performed market trend by 2.5% in 2018 Beat shared savings quality threshold 	
MemorialCare Mealth Alliance	Boeing Direct-to- Employer, PPO	 Reduced total-cost-of-care by 4% Y1 ↓ Admits PKPY 47%, ED PKPY 17% Reduced Pharma spend by 25% YOY 	
Medicare FFS Bundles, 90-day Episodes	Cardiac, Orthopedics	 Beat Target by \$1,200 per case (90 day episode) Physician shared savings: 100% Y1, 96% Y2 	
Medicare FFS NextGen	Adv. Alternative Payment Model 2016, 2017	 NORC estimated Medicare savings \$12.6 M, 2016 Best/Top 4 performance across U.S. on OP ED visits, SNF, Hospital Admits and ASC Admissions PMPY 	



Next Major Focus Areas

- 1. Continued push to risk-based Value product diversification and learning
- 2. Advances in tele-X and virtual care
- 3. Ease and access, amazing scheduling
- 4. More robust, predictive analytics
- 5. Leveraging our C.I.N. for alignment around key pop health initiatives





Thank you. Questions?

