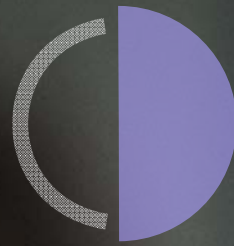




Population Health: Coordinated Continuum

Stephen Kahane, MD, President, Client Organization
Bridget Buckley, Population Health




50%

Fewer C-Sections



40%

Fewer days in NICU

- 62,000+ providers on athenaNet®
- Clients ranging from 1 to 5,000+ providers
- All 50 states and 112 medical specialties
- Growing 30+% / year for 10+ years
-  Acquired Epocrates March, 2013



2014 Best in KLAS



#1

Practice
Mgmt
System
(1-10 physicians)

#1

Practice
Mgmt
System
(11-75 physicians)

#2

Practice
Mgmt
System
(Over 75 physicians)

#2

Ambulatory
EMR
(Over 75 Physicians)

#2

Patient
Portal

#1

Vendor
Integration



SOFTWARE



KNOWLEDGE



WORK

RESULTS

athenaNet's services combine to help providers thrive providing world class care

Revenue Cycle

DESIRED RESULT:

Increase in collections, increase in patient payments

Clinical Performance & EMR

DESIRED RESULT:

Improved provider productivity, quality management success, MU performance, broad provider adoption

Population Health & Engagement

DESIRED RESULT:

Close gaps in care, demonstrable improvement in quality, lower TME, increased market-share

Patient Access & Care Transitions

DESIRED RESULT:

Decreased appointment wait times, reduction in referral-related denials, improved patient satisfaction

Epocrates Point of Care Medical Applications

DESIRED RESULT:

Faster clinical decision support, confident prescribing at the point of care, easier care team collaboration

Let's talk
athena's POV on
population health

By 2018, half of all Medicare payments will flow through alternative payment models, with 90% of payments tied to quality and value.

Days later a group of commercial payers, providers, and industry partners were the first to pick it up, committing to putting 75% of its business into value-based models by 2020.



The Office of the National Coordinator for
Health Information Technology

Even if you opt to wait, population health is coming!

Year	Deficit reduction sequester	E-Prescribing	Health Information Technology/ Meaningful Use	Physician Quality Reporting System, including Maintenance of Certification (MOC) Program	Value-Based Modifier (Budget neutral increases and decreases in payments based on cost/ quality data measures from 2 years earlier)	Total Possible Payment Cuts including Sequester
2014	(-2%)*	(-2%)	\$4-12K	0.5% if no MOC; 1.0% if MOC		(-4%)
2015	(-2%)		\$2-8K (-1% to 2%)	(-1.5%)	(-1%) Applied to groups of 100 or more/2013 data**	(-5.5% to 6.5%)
2016	(-2%)		\$2-4K (-2%)	(-2%)	(-2%) Groups of 10 or more/2014 data**	(-8%)
2017	(-2%)		(-3%)	(-2%)	(-4%)	(-11%)
2018	(-2%)		(-4%)	(-2%)	(-4%) all physicians/2016 data	(-12%) or more
2019	(-2%)		(-5%)	(-2%)	(?) all physicians/2017 data**	(-13%) or more

*Red text indicates penalties, green text indicates bonuses.

**2017 marks the third year that the VBM will be applied; the magnitude of the adjustments that will be made in future years is determined through annual rulemaking. Since the adjustments have doubled each year since the VBM was first implemented, the potential for increasingly severe cuts in 2018 and beyond is significant. Some physicians will qualify for payment bonuses of an amount not yet known.

Providers struggle with basic patient communication and engagement

87%

of eligible providers attested to Stage 1 MU



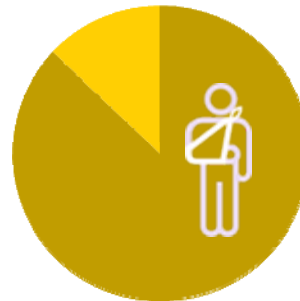
2%

of eligible providers have attested to Stage 2 MU



72%

of adults can't access their online medical record



88%

of patients have not received their annual Medicare Annual Well Visit



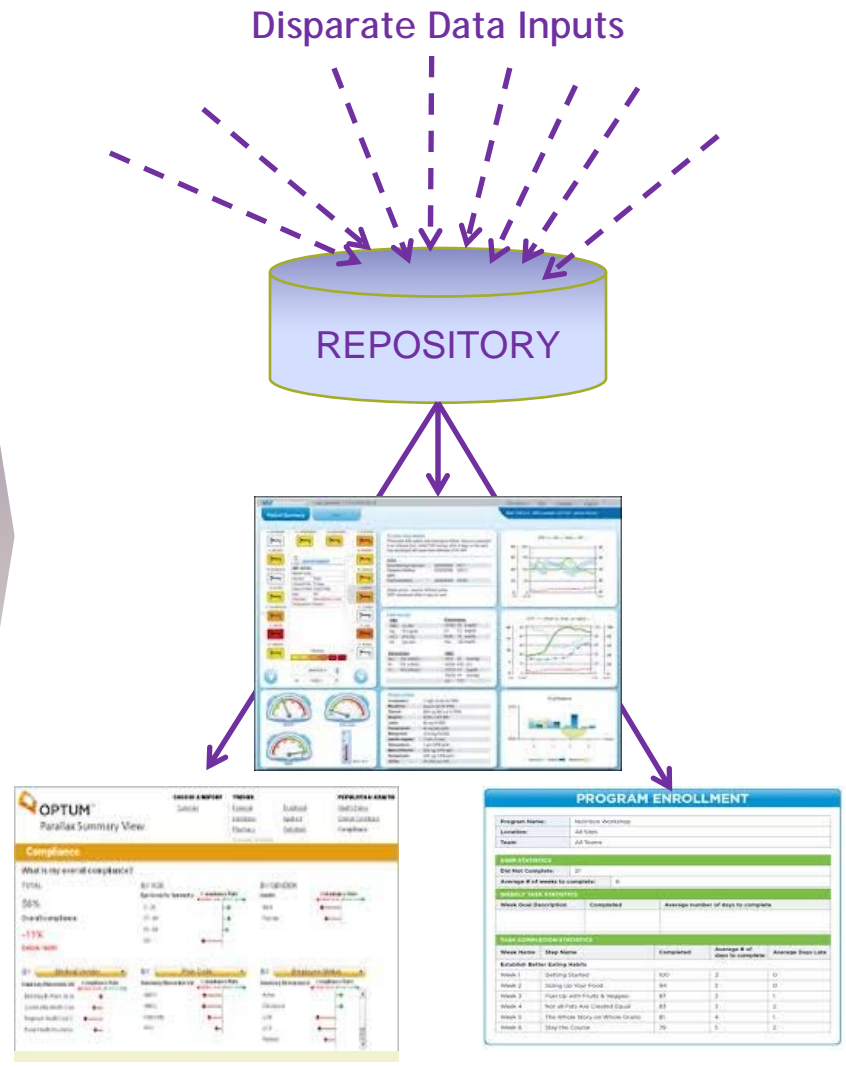
Equity

#1

#2

#3

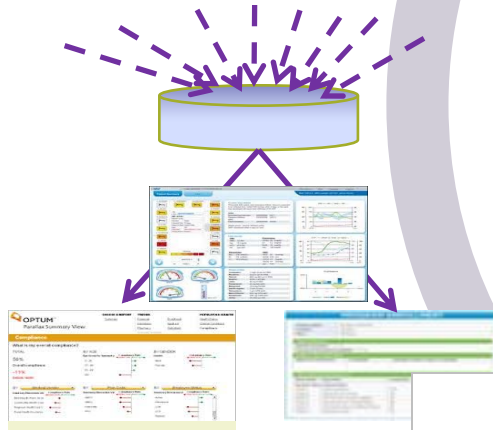
Over 100+ population health companies exist, however software alone is not the answer.



We add knowledge and work to achieve closed-loop care coordination.

Software

- Repository
- Data feeds
- Reports
- Network facesheet
- Secure messaging
- Patient communication tools
- Direct scheduling



Knowledge

- Quality management rules
- Patient outreach best practices
- Scheduling logic
- Curated risk stratification
- Care coordination best practices



Work

- Population health campaigns/gap in care outreach
- Patient scheduling for campaigns (live operators)
- Interoperability service
- Pre-certification, pre-registration
- Referral management with care coordination

athena's approach

Our core competencies allow us to provide a new level of holistic population health services.



Cloud-based future proof open platform

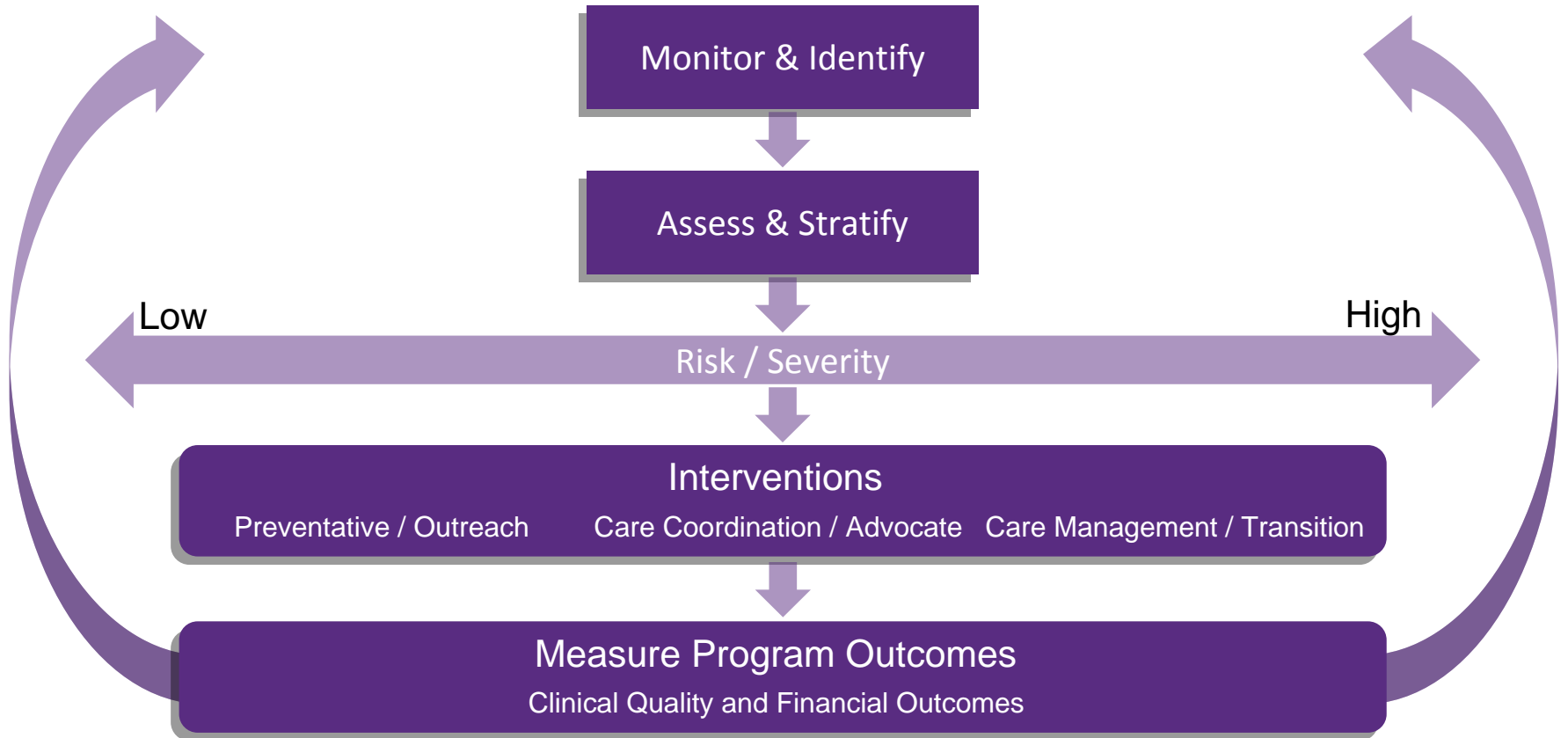


Learning network



Closed-loop care coordination

Aligned incentives focused on RESULTS



Data Sources

PAYER DATA

Medical
Pharmacy
Eligibility

EHR DATA

Encounter
Lab/Vital
Etc...

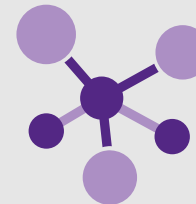
OTHER DATA

Lab
Formulary
Etc...

Functionality



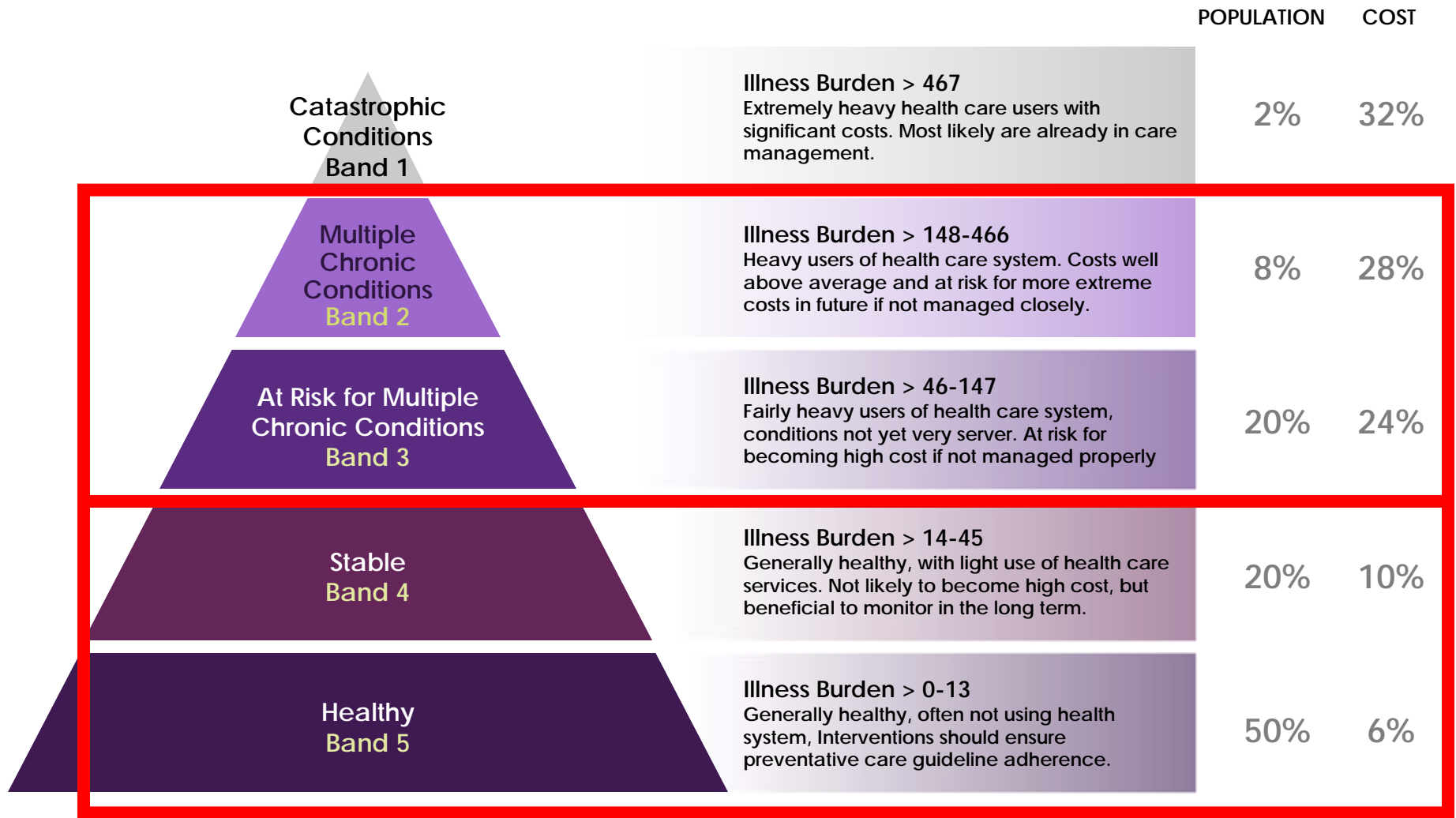
Care
Manager



Quality
Manager



Analytics
Platform



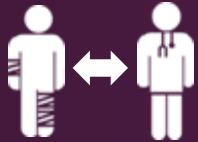
SOURCE: CareFirst PCMH Program Description and Guidelines, pg 17



1. Get the patient in



2. Manage gaps in care



3. Create seamless transitions in care

The image displays the Athenahealth dashboard and mobile app interface. The dashboard shows various quality metrics and patient lists, while the mobile app shows a scheduling interface. Three green callout circles highlight key features: 'Interactive dashboards & reporting to identify gaps in care', 'Deep insight on population', and 'athena will engage patients via text, email & phone'.

Severity Stratification

Total Risk Score	Rx Risk	IP Risk	OP Risk	Prof. Risk
1.39	0.25 18%	0.40 29%	0.26 19%	0.47 34%

All Quality Programs

Export patient panel

NCQA-HEDIS

44 Tests

Goal reached
14 Tests

Breast Cancer Screening (BCS)
Breast Cancer Screening Performed
589 (47%) from upper goal of 1120 (90%)
531 (43%)

Cholesterol Management (CMC)
LDL-C Control <100mg/dL
36 (16%) from upper goal of 204 (90%)
168 (74%)

Colorectal Cancer Screening (COL)
Colorectal Cancer Screening Performed
3794 (67%) from upper goal of 5662 (90%)

Deep insight on population

athena will engage patients via text, email & phone

Send SMS **Send email** **Add to group call** **Create letters**

Mobile App Interface:

Home Schedule New Sign Out

Dial 911 in the case of emergency.

Jump to date
1/21/2013

LAST WEEK NEXT WEEK

Su M T W Th F S
20 21 22 23

November 21, 2013

10:30 AM
10:45 AM
11:00 AM
03:00 PM
03:15 PM
03:30 PM

Privacy Policy Terms and Conditions Feedback Full Site

Back Book Appointment



Our tools help manage

6%

of the at-risk lives in the country



Appointment wait times reduced to **3.25** days from over **30** days



65.2% reduction in referral-related denials



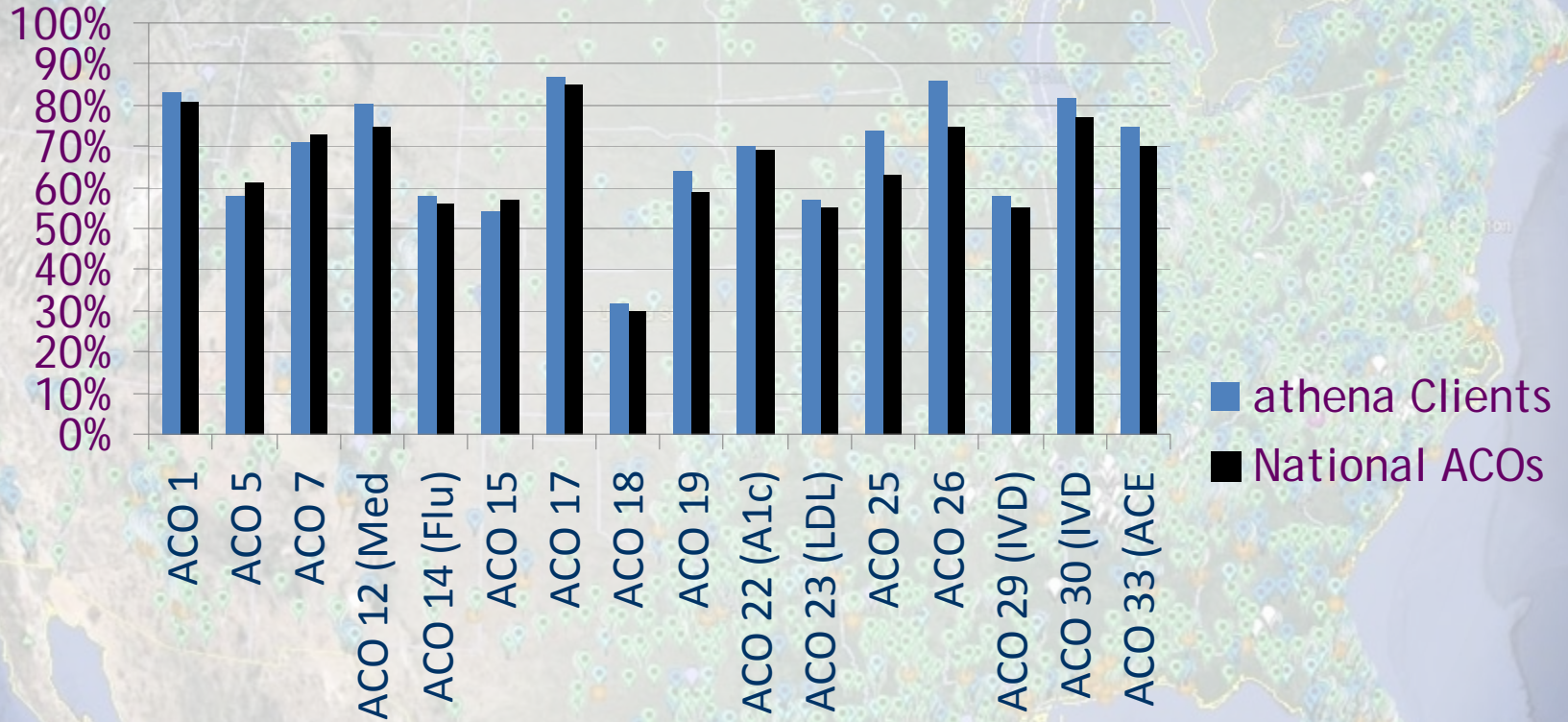
45.6% improvement in first year ACO33 quality scores



18.8% of appointments directly scheduled by affiliated entities

Source: athenahealth data

Our ACO clients outperform the national average on 25 out of 33 measures





The ACO Guarantee

We guarantee performance against the Medicare's 33 ACO quality measures – you pay only for the quality points you achieve.

Our clients include some of the most forward-thinking provider organizations





Privia Overview

March 24, 2015



950 N. Glebe Road
Suite 4000
Arlington, VA 22203

(571) 366-8850
www.priviahealth.com

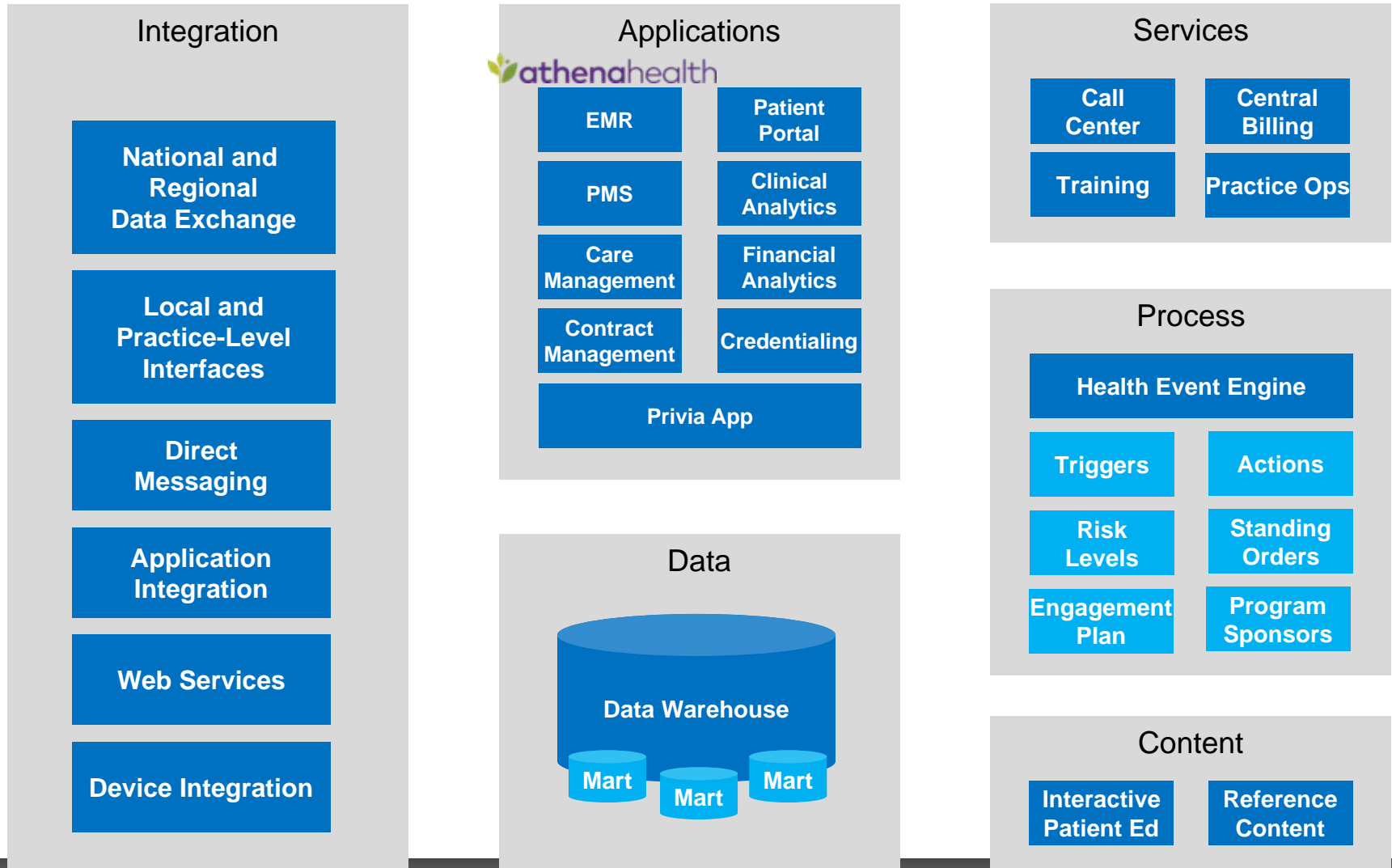
Twitter: [@priviahealth](https://twitter.com/priviahealth)
Blog: blog.priviahealth.com

Privia Medical Group

- **High-performance physician group** initially concentrated in the Mid-Atlantic, now expanding nationally
- In less than 18 months, we've **brought together over 100 separate practices with 335+ total providers into Privia Medical Group**, making us one of the largest medical groups in the Mid-Atlantic, and one of the fastest growing physician organizations in the nation
- We are a medical group that's **built-for-purpose** around managing risk/performance-based reimbursement
- Multi-specialty, **heavily focused on primary care (60%+)** and medical specialties that treat high cost chronic patients (endocrinology, pulmonology, cardiology, etc)
- **Single, shared medical record** and cloud base EHR (athenahealth) across entire group
- Focus on **rapidly organizing small/medium sized practices** into a sophisticated practice mgmt, tech, and pop health platform
- PMG doctors get better economies of scale from being in one medical group:
 - Centralized revenue cycle management (billing and collections)
 - Centralized practice management systems
 - Centralized EHR, patient engagement portal, HIE, business intelligence tools, analytics
 - Centralized credentialing, compliance management, legal
 - Centralized medical supply purchasing, malpractice insurance, benefits/retirement
 - Centralized population health management infrastructure
 - Clinical and financial performance benchmarking, quality mgmt, & quality improvement



Privia's Technology Driven Care Management



Privia's Population Health Technology

- Proprietary patient engagement technology **that interfaces and works directly with health plan systems** to close gaps in care and improve patient experience
- Being fully integrated with Privia's cloud-based EMR (athenahealth) with **single shared medical record** across the entire medical group
- Care alerts, tracking & monitoring of key doctor orders, recommendations and health targets
- Private health exchange so we know when patients are admitted/discharged from the hospital, when out-of-network care occurs, or when medication pick-ups are missed
- Interfaces with population health analytics that can consume data from payor claims, EMR, lab, pharmacy, hospital and identify patients at-risk and in need of services (athenaClarity)
- Secure messaging to connect patient, doctor & care team



Privia Integration with athenaNet

Dial 911 in the case of a medical emergency.

Welcome to the Privia Medical Group Patient Portal

New to the Patient Portal?

Create an account to access these features and more.

- Schedule appointments
- Pay bills securely online
- View bills securely online

[Create account](#)

Make a One-Time Payment

Statement ID # [What's this?](#)

By clicking **Make a Payment**, you represent that you are authorized to address the patient's billing matters.

[Make a Payment](#)

Sign In to Your Account

Email address

Password [Forgot your password?](#)

[Sign In](#)

or

Our sign-in process has changed. [sign in](#) using your date of birth, phone number, and PIN to update your account and create a password. [Learn more](#)

About the Patient Portal

Welcome to the Privia Medical Group Patient Portal

We are pleased you have chosen to utilize the portal to communicate in a secure and confidential manner with your healthcare team.

Taking just a few minutes to Register will give you access to valuable information and services provided in a secure and confidential manner. Once Registered and Logged on you will be able to:

- View details about your upcoming appointments with our practice
- Receive secure messages from our staff
- Update your contact and insurance information
- Update your contact preferences to include text message appointment reminders
- Read and print important forms
- Access your most recent lab results and health data

For urgent medical matters, please contact us during our regular office hours at 1-888-774-8428. In case of a medical emergency, call 911.

powered by **athenahealth**

[FAQ](#) [Terms and Conditions](#) [Privacy Policy](#)

Privia Integration with athenaNet – Main Page

Welcome, Wesley | [Sign Out](#)

Home


- Appointments
- Billing
- My Health
- Tasks and Tools
- My Profile
- Messages
- MyPlan

Health & Wellness


Search [Health Topics](#) [Symptom Checker](#)

My Privia Medical Group Account

Notifications

 [Set your security questions](#)
If you forget your password, you can use these questions to verify your identity.

Quick Links


 [View, download, or transmit health data](#)
Support the Blue Button® initiative by downloading your health data for your personal records.


[Edit your profile](#)
Make sure your contact information is accurate.

[Turn on SMS Notifications](#)
Receive appointment reminders, test results, and more via text message.

[Update your contact preferences](#)
Determine how our practice should contact you.

[Review your insurance](#)
Make sure our practice has your current plan information.

 [Schedule an appointment](#)

 [Download forms](#)


About the Patient Portal

Our office is pleased to provide you with online access to your health information through our patient portal. From here, you can:

- View details about your upcoming appointments with our practice
- Exchange secure messages with our staff
- Update your contact and insurance information
- Read and print important forms
- Access your most recent lab results and health data

[Visit the Privia Premium Member page »](#)

[Visit our practice website »](#)
[Get directions to our practice »](#)

powered by 

[FAQ](#) | [Portal Feedback](#) | [Terms and Conditions](#) | [Privacy Policy](#)

EXTRAS

Let's talk
population health:
Panel Discussion

- **2018: 90% of Medicare payments tied to quality.**
- **2020: 75% of commercial plans will be value-based.**



Patients disconnected from their own care and from cost



62M

patients without a PCP

<http://www.nachc.com/pressrelease-detail.cfm?pressreleaseID=897>

88%

of patients not receiving
"Well Patient" visits

SOURCE: <http://downloads.cms.gov/files/Beneficiaries-Utilizing-Free-Preventive-Services-by-State-YTD2013.pdf>

Providers disconnected from patients by EMRs, regulations, etc.



:08M

Average visit duration

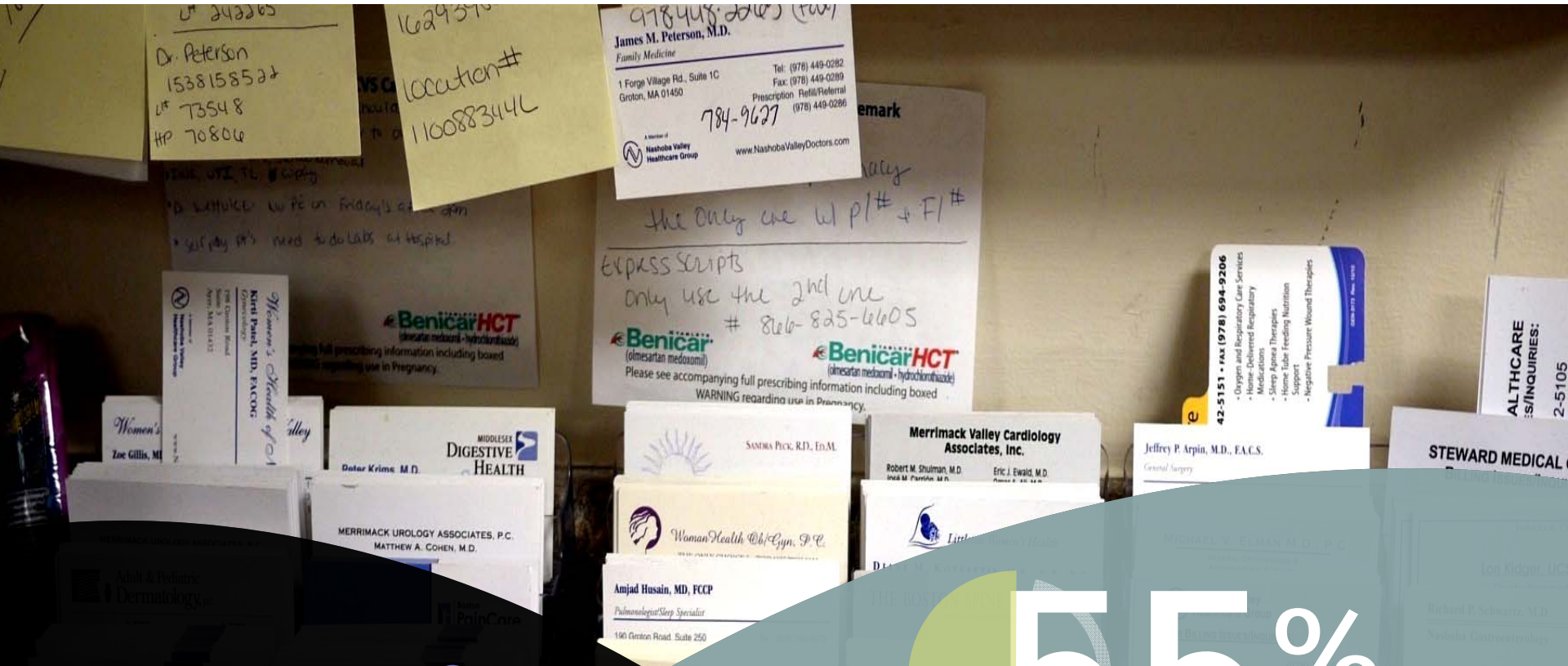
http://well.blogs.nytimes.com/2013/05/30/new-doctors-8-minutes-per-patient/?_r=0

59%

of doctors wouldn't recommend medicine

<http://www.prweb.com/releases/2013/6/prweb10881121.htm>

Providers disconnected from each other...

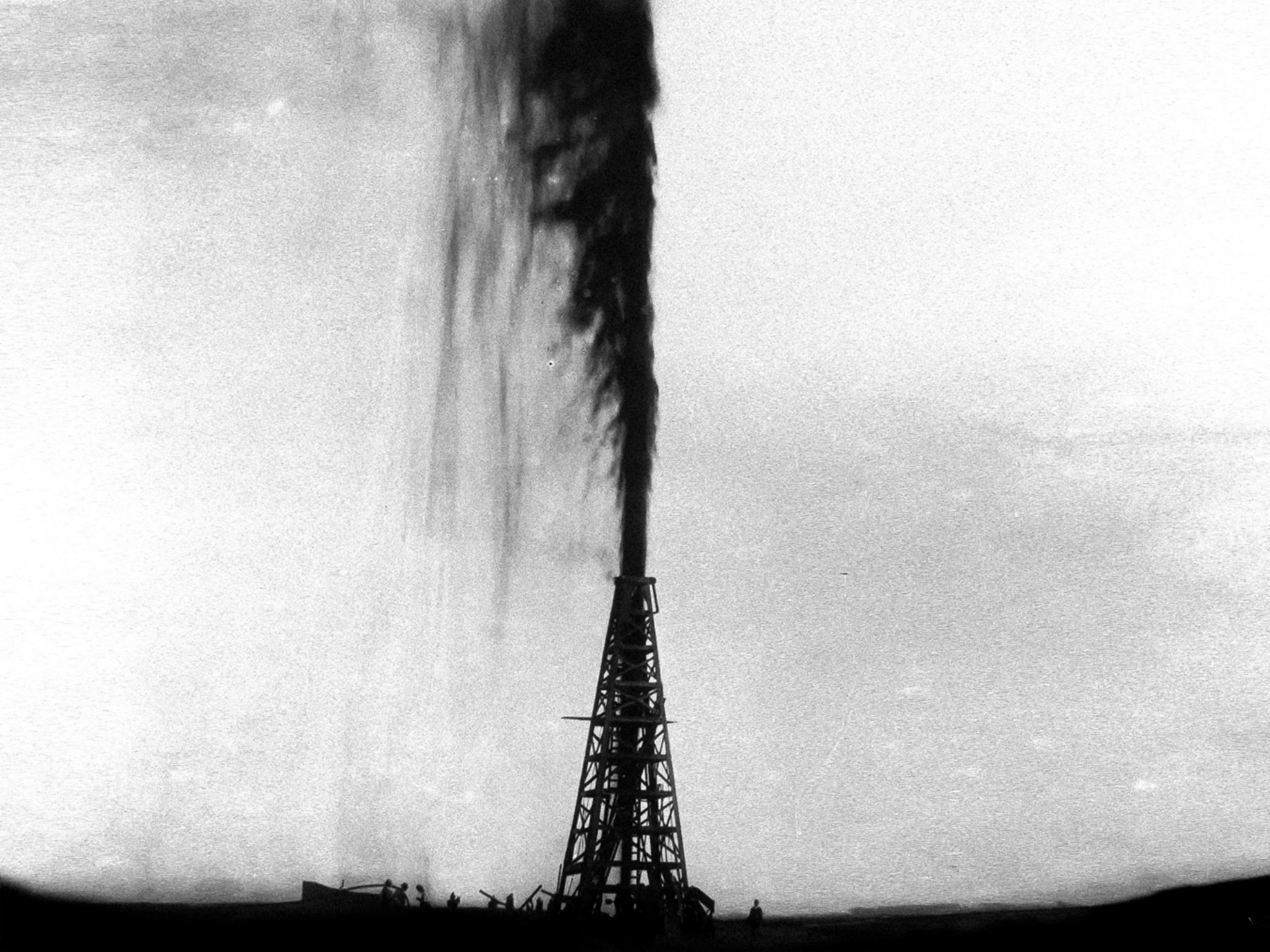


Only **0.15%**
of patients currently
self-schedule
appointments

55%

of referrals
disappear

Source: The New England Journal of Medicine,
March 6, 2008, p. 1065.



1. Get patients

2. Get coordinated

3. Get risk (RAF scoring)

Boston [Change location >](#)

Date mm/dd/yyyy

11/10/2014 ▾

Time

7:00 PM ▾

Party Size

2 people ▾

Find a Table

List

Map

▼ **Narrow results**

Location

- Back Bay
- Cambridge
- North End
- [More >](#)

Cuisine

- American
- Italian
- Contemporary American
- [More >](#)

Price

- \$\$ (\$30 and under)
- \$\$\$ (\$31 to \$50)
- \$\$\$\$ (\$50 and over)
- 7:00 PM Only
- 1,000 Point Times

Restaurants with 1,000-Point times available [what's this?](#)

Grill 23 & Bar Back Bay American	★★★★☆ 349 reviews	\$\$\$\$	6:00 1,000pts	6:30 1,000pts		8:30 1,000pts	
Stephanie's On Newbury Back Bay Comfort Food	★★★★☆ 277 reviews	\$\$	6:30 1,000pts			8:00 1,000pts	
Nico North End Italian	★★★★☆ 247 reviews	\$\$	6:00 1,000pts	6:30 1,000pts	7:00 PM 1,000pts	7:30 1,000pts	8:00 1,000pts
The Kirkland Tap & Trotter Somerville Contemporary American	★★★★☆ 230 reviews	\$\$	6:30 1,000pts				
Fleming's Steakhouse - Boston Theater District Steak	★★★★☆ 148 reviews	\$\$\$	6:30 1,000pts	6:45 1,000pts	7:00 PM 1,000pts	7:15 1,000pts	7:30 1,000pts
Sandrine's Cambridge French	★★★★☆ 143 reviews	\$\$\$	6:00 1,000pts	6:30 1,000pts	7:00 PM 1,000pts		

[See all 53 restaurants with 1,000-Point times >](#)

327 restaurants with availability

Sorted by: **Popularity** Name Neighborhood Ratings Price

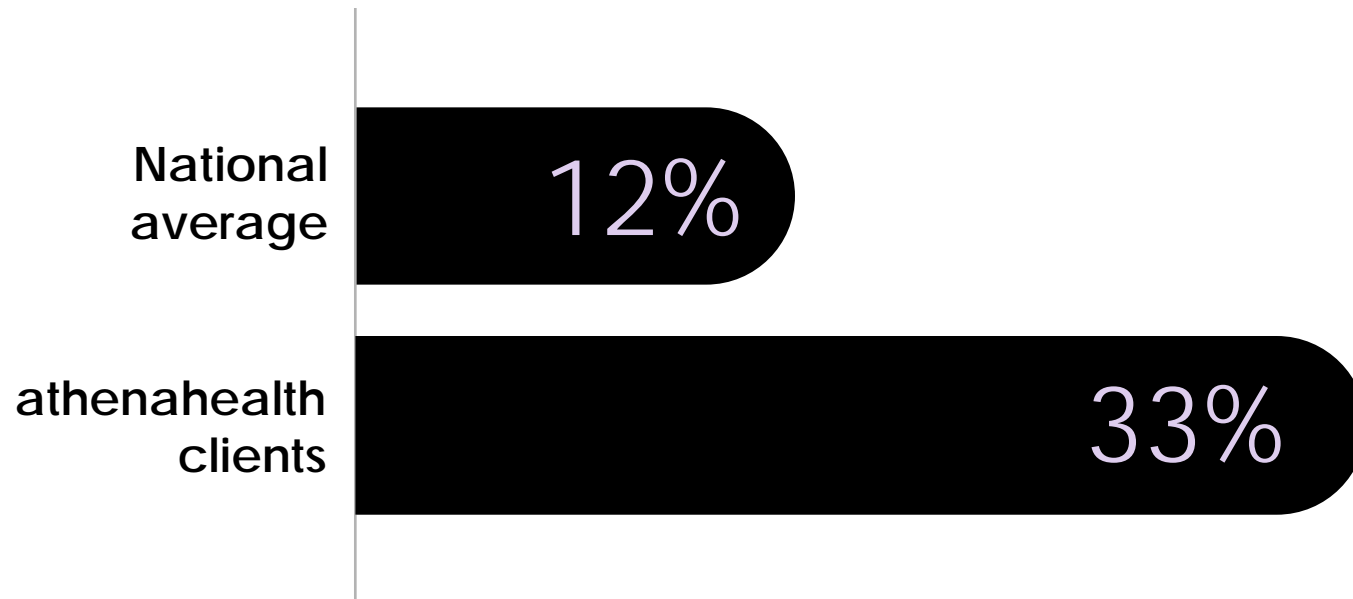
Filtered By [Location](#)

Granary Tavern Financial District American	★★★★☆ 94 reviews	\$\$	6:30	6:45	7:00 PM	7:15	7:30
Emerald Lounge Back Bay Contemporary American	Reviews coming soon	\$\$\$	6:30	6:45	7:00 PM	7:15	7:30
Saloon Somerville Comfort Food	★★★★☆ 30 reviews	\$\$	6:30	6:45	7:00 PM	7:15	7:30

We help get patients in

Medicare Annual Wellness Visit

% of patients who utilized annual service



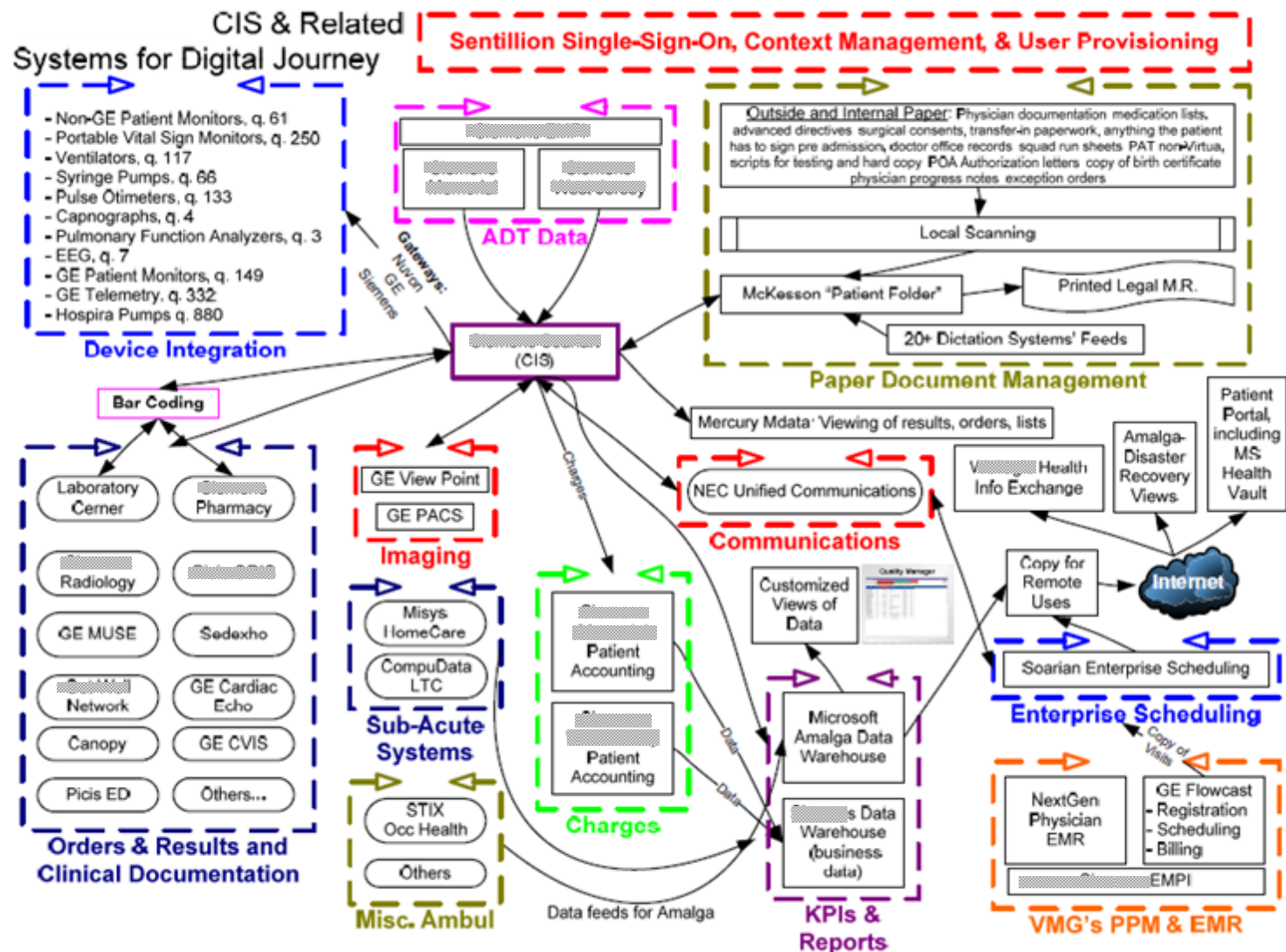
SOURCE: <http://downloads.cms.gov/files/Beneficiaries-Utilizing-Free-Preventive-Services-by-State-YTD2013.pdf>

1. Get patients

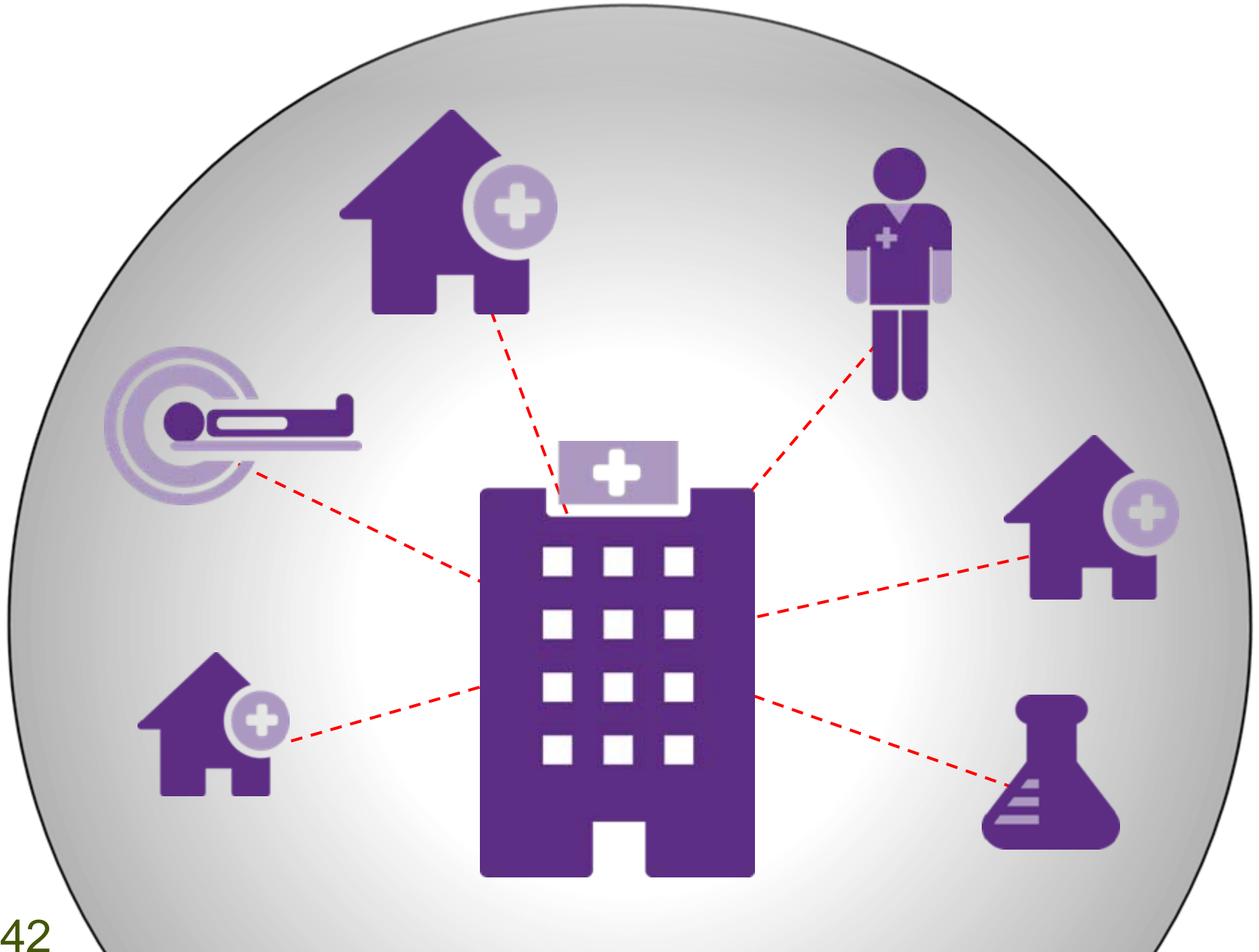
2. Get coordinated

3. Get risk

HL7 was designed to glue together departments within the 4 walls of a hospital



The health care biosphere



Problem with a biosphere: You can't own everything.



Patient



110,000 INTERFACES

51 MILLION PATIENTS



7 BILLION ELECTRONIC PATIENT EXCHANGES

50B WEB HITS / YEAR

We support health systems seeking to establish high performing medical groups – groups that include employed & affiliated physicians



1. Get patients

2. Get coordinated

3. Get risk

“Success” Defined: a maniacal focus on *results*

Aligned Incentives: we both win together

Immediate Results: benefits within 6 months of implementation

Full Transparency: perpetual monitoring, sharing of best practices

Partnership: governance with great rhythm focused on those results!

1. Get organized

2. Set the chessboard

3. Play the game

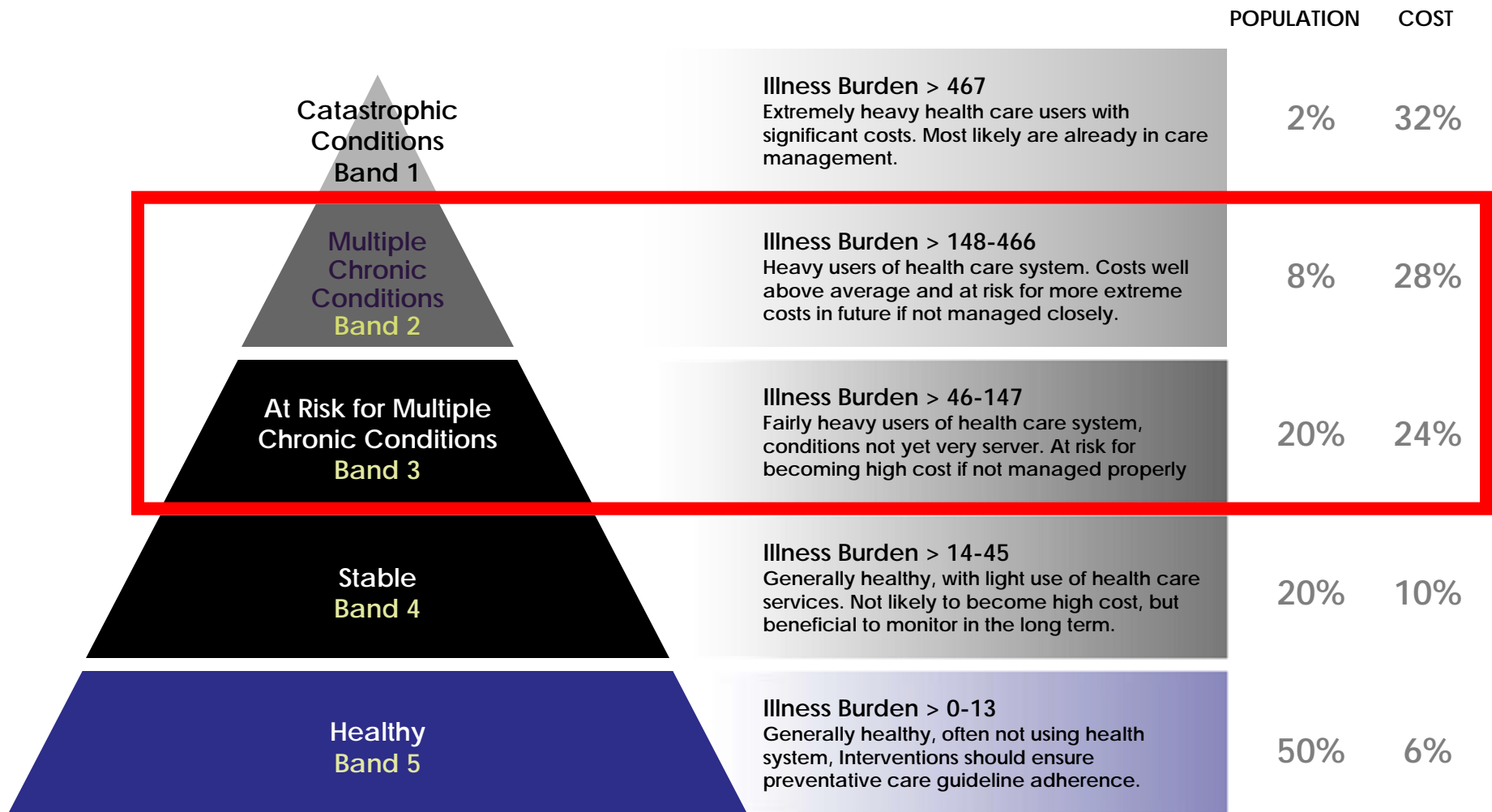
The triple aim is motherhood and apple pie



So how to play? First you have to set your chessboard

- **Do you want to be part of a Medicare Shared Savings ACO? If so, which one?**
- **Do you want to take on commercial risk (e.g. the BCBS AQC)? Who do you want to partner with?**
- **Do you want to set up a plan for your own employees? How are you doing it?**
- **Or do you want to stay in FFS and wait for risk to come to you?**

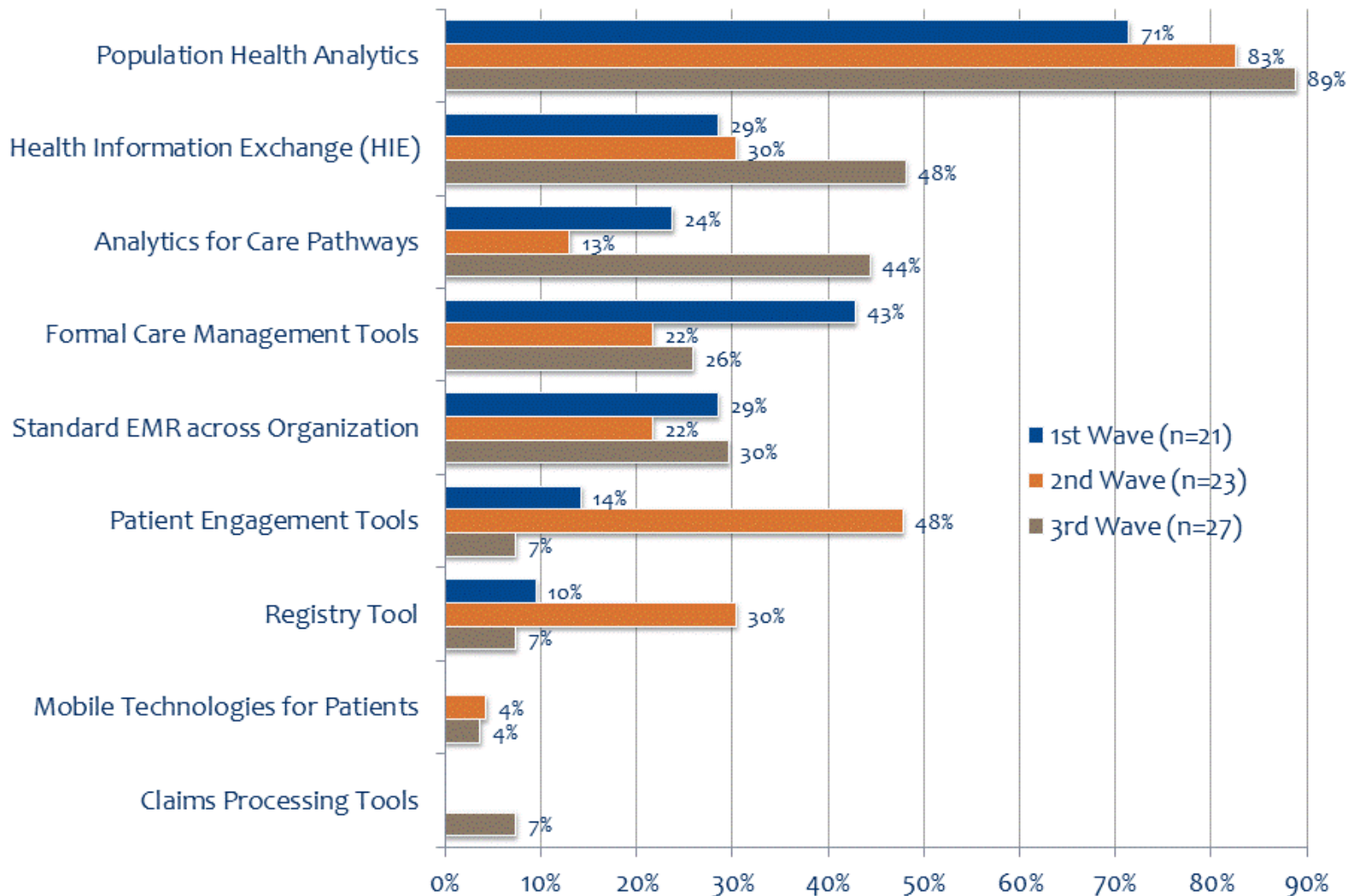
New payment models will focus on reducing the cost of care for chronic conditions



SOURCE: CareFirst PCMH Program Description and Guidelines, pg 17

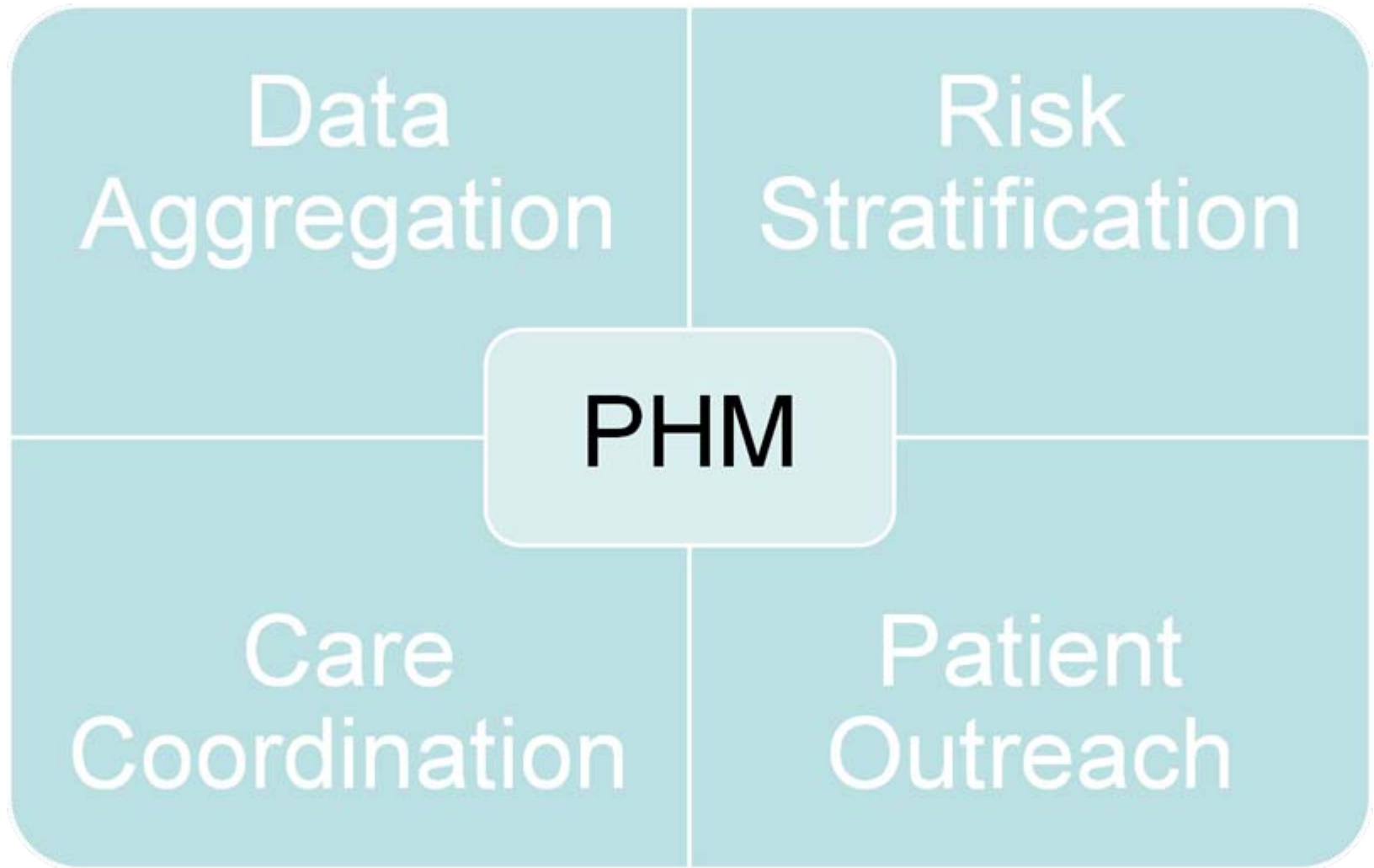
Technology priorities

What are your top 3 technology priorities?

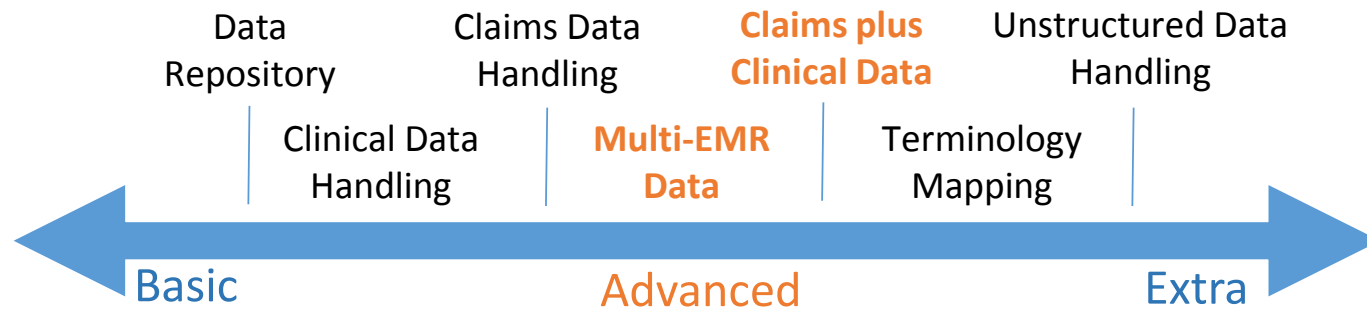


The PHM stack

What is population health management

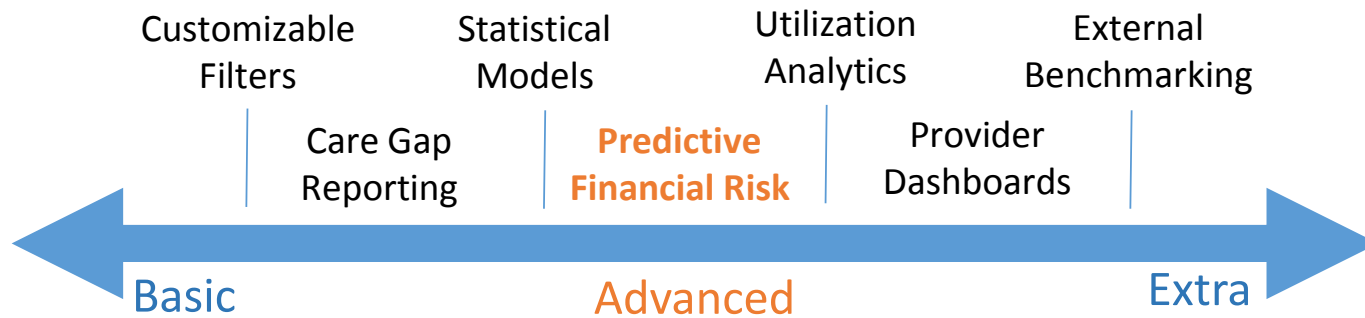


Data aggregation functionality



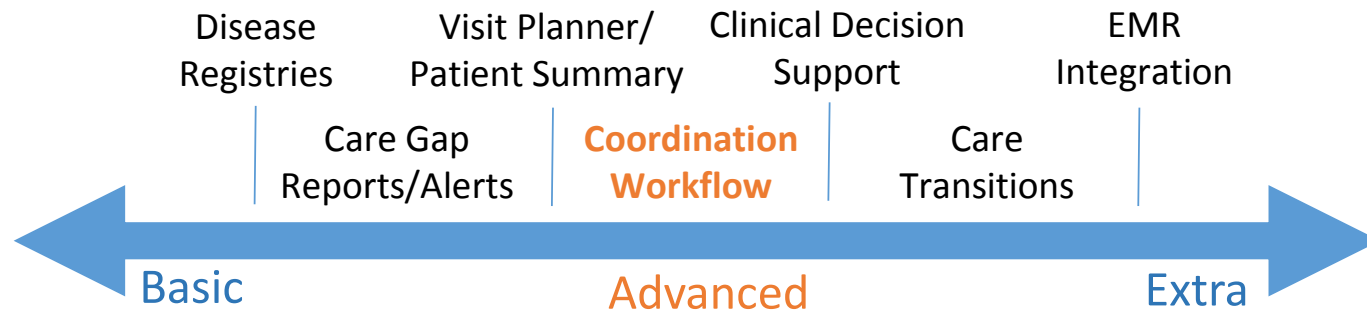
DATA AGGREGATION

Risk stratification functionality



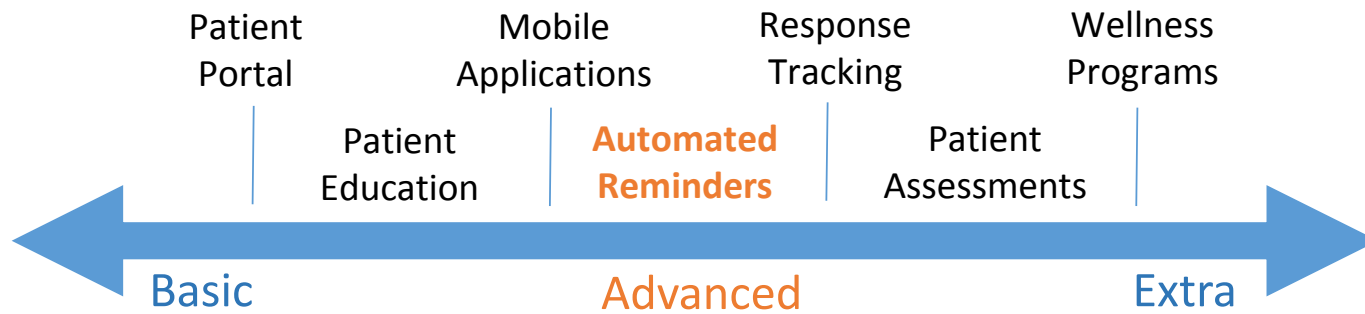
RISK STRATIFICATION

Care coordination functionality



CARE COORDINATION

Patient outreach functionality



PATIENT OUTREACH