

Letter from the Medical Director



Fredrick Wallisch, MD,
OCC Market Medical Director

Welcome to Fall!

Fall has always been my favorite time of year. The crispness in the air, the changes in color on the trees, the approach of Thanksgiving and the relief from the heat and humidity of another Midwest summer is always welcome in my house!

For Deaconess Care Integration/OneCare, fall is always a busy time with final performance data finally coming in for the previous year's performance and a sprint to the end of the year for our current performance.

This year we have much to be thankful for in our Network. The final 2017 performance numbers for the Next Generation ACO are in and it was a truly amazing year. **Shared Savings of over \$16 Million and a Quality score of almost 93%** highlight the fantastic work that you all have accomplished in your offices by providing high quality, cost-efficient care for the patients you see. At the time of writing this note, I am not sure where that places us compared to the other Next Generation ACOs across the country, but compared to our 2016 performance, this will put us near the top! Congratulations and Thank You for all the hard work put in by our Physicians and Providers, our nursing and office staff and our Care Advisors!

I also continue to be amazed at the work around our EPIC RAF process. Greg Stevens and team at our EPIC office have done fantastic work and helped coordinate the launch of this truly unique process for those of you on EPIC. We appreciate your work and persistence in learning and completing this important task. The PAC has been instrumental in guiding this from the beginning. We also look forward to the physicians in the Good Samaritan practices and the Methodist practices joining in the EPIC RAF solution for 2019.

As we look forward to another strong performance year in 2018 (we are on track for a repeat!), let's take time to enjoy the family and friends around us and take time to count the blessings that we all have and remember the patients that we serve on a daily basis.

Thanks,
Fred

Success Story: Complex Care

The Care Advising team received a referral for Complex Care for a patient living with multiple health conditions including chronic kidney disease, CAD, diabetes and peripheral vascular disease. Through the initial assessment and discussion, the patient expressed concerns with being able unable to walk any distance due to shortness of breath and swelling. In addition, one of the patient's specialists wanted the patient to stop a medication that was prescribed by the patient's primary care provider. The patient shared with the Care Advisor that they were unsure how to relay this message to their primary care provider.

The Care Advisor jumped into action to support the patient with communicating with their provider. First, the Care Advisor used the EMR to send a message to the provider with the patient's concerns. Once received, the provider requested the office notes from the specialist and set up an appointment for the patient to come in. During the office visit, the medication was stopped and the patient was placed on another medication.

As a result of the care coordination and support of the Care Advisor, the patient is now more active without the shortness of breath and swelling. The patient's diabetes is now controlled, sometimes not requiring medication. Both the patient and primary care provider were appreciative of the Care Advisor's support in addressing the patient's concerns and getting the patient on the correct medication regimen.

2018 Initiative Updates

2017 NGACO SUCCESS

On September 28th, 2018 we received our Final Settlement for our 2017 Next Generation ACO (NGACO) performance. For Performance Year 2017, our ACO saved \$16.1 million! This is an improvement in over \$10 million from 2016, which was our first year in the NGACO model. Our final quality score was also at 92.83%, which was higher than the 85% that we initially anticipated.

This high performance indicates that our ACO has been able to continually improve our ability to provide better quality of care for beneficiaries through strengthening management of patient complex conditions, improving quality, increasing the patient experience, and enhancing our ability to help patients appropriately manage utilization of healthcare.

Because of these efforts, \$38.66 was saved on average by month for each attributed patient. This represents 4.3% savings off our benchmark.

2017 was a milestone year for our ACO. From hitting all our engagement goals, achieving a higher than expected quality score, launching a new CMS 3 Day SNF Waiver, launching 4 new network initiatives, and going live with a ground breaking new process for risk adjustment- everyone involved in the ACO accomplished a lot in one year- and our results show! To everyone involved in our ACO in 2017, thank you for dedication and commitment to our patients!

RISK ADJUSTMENT IN EPIC SUCCESS

Our ACO has utilized paper RAF forms since 2015 focusing on only the top high-risk potential pts. For the 2015 and 2016 ACO performance years, we were able to achieve an improvement in risk adjustment scores for these performance years but were always challenged with increasing Payer pressure and goals.

In 2017 the Evolent RAF Team, Evolent Deaconess Market Team, Deaconess Physician Advisory Council, and Deaconess EPIC team worked together to ingest suspect condition data to the EPIC EMR and then build out a RAF alert tab in the EMR. The efforts of this collaboration resulted in launching a pilot of the EMR RAF tab at 4 pilot sites in 2017. After the pilot concluded, the Evolent RAF Team along with Evolent Actuary/Analytics was able to analyze risk adjustment data at the four pilot sites, and discovered that:

11% more RA visits were completed at RAF EMR sites

1. Claims Confirmation Rate was 60% higher at RAF EMR sites ($p < 0.001$)
2. Concordance Rate for RAF EMR sites were almost twice the paper RAF rate (84% vs 45%)

In late 2017, the Evolent RAF Team, Evolent Deaconess Market Team, Deaconess Physician Advisory Council and Deaconess EPIC Team reconvened to not only make enhancements to the workflow and EMR RAF tab based on lessons learned during the pilot, but also to build out an implementation plan for launching at all EPIC EMR sites in 2018. An aggressive timeline was agreed upon from kicking off the efforts in January 2018 to full launch mid-April 2018. With only a one-week delay, risk adjustment was fully launched in the EPIC EMR in 2018!

A large part of our implementation plan for 2018 involved 1:1 training of providers, practice managers, EPIC credentialed trainers, and scribes. Most of this education was completed by Evolent Deaconess Market in collaboration with the Evolent RAF Team and Deaconess EPIC Team.

Also, in order to try and maximize risk adjustment scores for 2019, the Evolent Deaconess Market decided to launch RAF for all NGACO pts instead of just the high risk pts. In the end of July 2017, there were approximately 2,000 NGAO RAF forms completed. For the same time period in 2018, we have already had 4,500 NGACO RAF forms completed!

Looking at our pilot data from 2017, we have confidence that the additional RAF being completed is not only due to the full panel burst, but also due to the ease of completing in the EMR. If the claims confirmation rate and concordance rate from the pilot are any indication, we are also optimistic that Deaconess will achieve a full 3% lift in our benchmark due to risk adjustment efforts in 2019. More importantly, we feel that this new process for addressing risk ensures that the burden of illness is appropriately documented for our patients. This helps us achieve an accurate benchmark and better identify patients for stratification into appropriate care management programs.

Looking ahead to 2019, we are excited to bring on Methodist Hospital and Good Samaritan Hospital Medical Center to our innovative approach for addressing patient risk!

2018 Initiative Updates - continued

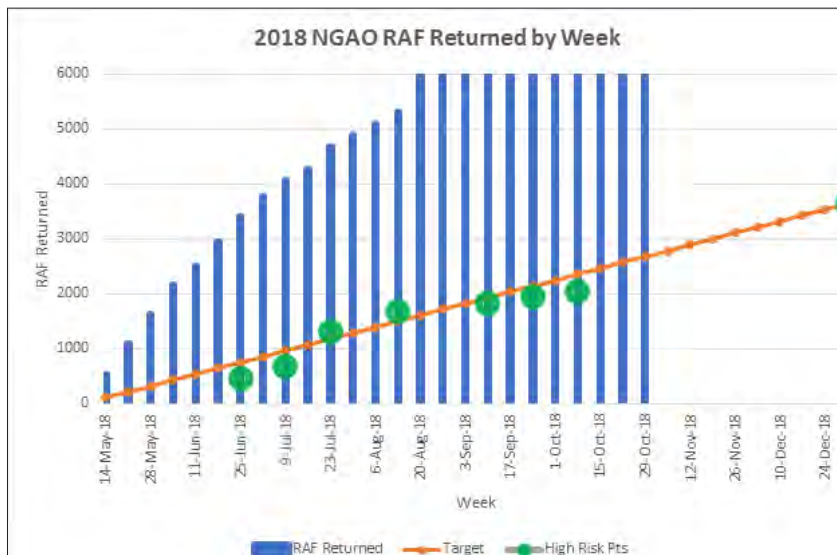
RISK ADJUSTMENT COMPLETION UPDATE

Our RAF efforts are underway and making incredible progress!

In the graph below you can see that our RAF completion rate is well above our target and exceeding even our highest expectations. The orange line represents our high-risk patient target (similar to last year's total target). This continues to ensure our patients are accurately coded and getting into the right Care Advising programs

Thank you to all the physicians and providers for your continued RAF efforts!

RAF Return Rate:
NGACO: 8973



CARE PROGRAM SUCCESS!!

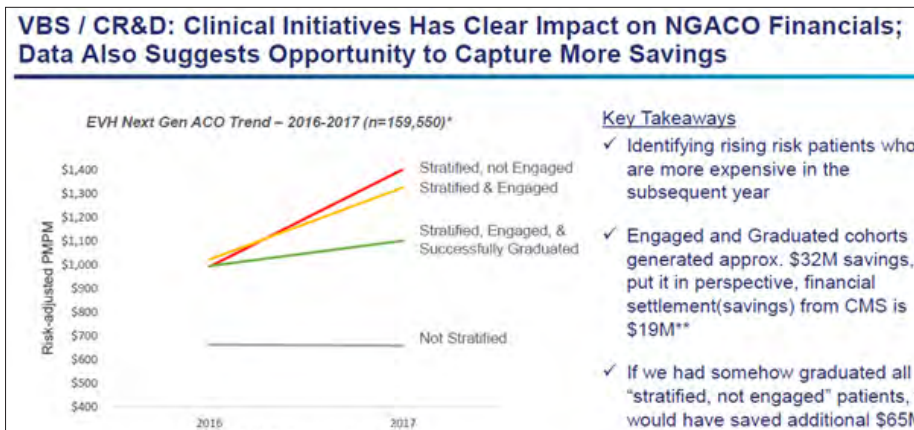
Over the last 3 years, we have engaged thousands of patients in our Care Management Programs (Transition, Complex and AIC). While we have studied the success of these programs previously, a comprehensive review of these programs was missing until now.

The OneCare Care Advising team delivers rosters and then works off those lists of patients identified by predictive analytics

and validated by the physicians, to reach out and engage patients into our programs. The Evolent R&D team looked across multiple markets to evaluate how our model of stratification and engagement performed. The result is truly amazing. By identifying, engaging and graduating patients who are at risk of events and high spend in the subsequent 12 months, we have seen a significant decrease in the events and spend for those patients compared to those that stratified but did not

engage. The graph below shows the spend from 2016 to 2017 of a group of patients that fell into 4 categories:

- Stratified but not engaged
- Stratified and engaged but not graduated
- Stratified, engaged and graduated
- Not stratified



The patients who started the programs had a lower spend, but those that graduated had a significantly lower spend (think lower utilization of healthcare) than those that never engaged. Truly amazing results and validation of

the work that we are doing in the market!

Thanks for participating and supporting the work of the care advisors!



SKILLED NURSING FACILITY 3 DAY SNF WAIVER OUTCOMES

Started in 2017, our ACO launched the 3 Day SNF Waiver. Normally, Medicare rules state that a beneficiary is eligible for inpatient skilled nursing care or rehabilitative services in a skilled nursing facility (SNF) only when the beneficiary has been admitted to the hospital as an inpatient) for no fewer than 3 consecutive days. However, one of the benefit enhancement waivers for NGACO attributed patients is the 3 Day SNF Waiver. This waiver allows patients whose doctors participate in the NGACO Model to be admitted to a SNF directly from their home, a doctor's office, or if they have fewer than 3 consecutive inpatient days in the hospital.

In 2017, we had over 172 patients utilize this waiver. In 2018 to date, we have had over 300 utilize this waiver! Recent 2018 NGACO claims data from January 2018 through May 2018 run by Evolent Analytics shows that patients who utilized the 3 Day SNF Waiver:

- Had a ALOS of 26.8 (compared to 31 for non-waiver SNFs)
- Had a Total Cost Per Case of \$12,675 (compared to \$14,667 for non-waiver SNFs)
- Had a readmission rate of 22.6% (compared to non-waiver SNFs)

Overall, it is estimated that the 3 Day SNF Waiver will have an estimated annual savings impact of \$3 million dollars to our ACO in 2018 (\$7.30 PMPM savings)!

PROVIDER VIDEO URL LINK

A video was recently put together which explains examples of the value of our ACO, a provider ACO perspectives, and an outstanding ACO patient

success story that is a must see. Our ACO is made up of Deaconess Clinic providers, Good Samaritan Hospital providers, Memorial Hospital and Healthcare Center providers, Gibson General providers, Methodist Hospital providers, Ferrell Hospital providers, and several independent providers. In this video you will hear from providers from several of these organizations!

<https://evolent.box.com/s/j31669stkwowq7s0t12d91h3byv6dbuy>

SUCCESS OF THE ED INITIATIVE

The One Care Collaborative started focus work around reducing PCP treatable ED visits in the middle of 2017. At that time 214 providers made over 600 distinct changes in the office setting to get the right patient to the right place at the right time. It was exciting to see in 2018 that 219 providers attested to the same changes plus several more. The Population Health Managers have been taking out ED visit data to the Pods each quarter this year. Claims based data shows that our total market has seen a decrease of 6% of ED visits per one thousand for the first two quarters of this calendar year. This is a reflection of the great work done by providers and practices this past year.

ED Visits/K	Year		
Quarter	2017	2018	% Change '17-'18
Q1	787	710	-10%
Q2	748	725	-3%
Grand Total	762	716	-6%

POD PLANNING FOR 2019

It is our goal to plan and execute successful provider meetings with meaningful data and topics. Each year the One Care Collaborative leadership team has a planning retreat to review the current Pod meeting structure and make modifications for the upcoming year. At this recent retreat we were able to lay out a great plan for 2019.

Topics	January	February	March	April	May	June	July	August	September	October	November	December
Pod Reports	Provider Performance			PCP Summary			Provider Performance			PCP Summary		
	2018 ED Data Q3 Reivew			2018 ED Data Year End FINAL								
Pod Updates	2018 RAF Review (Epic RAF education)			2018 RAF Roll Out (Epic RAF Education)			RAF completion updates			RAF completion updates		
	Care Advisor Story/Case Feedback			Care Advisor Story/Case Feedback			Care Advisor Story/Case Feedback			Care Advisor Story/Case Feedback		
	Care Advisor Program AIC			Care Advisor Program Complex Care			Care Advisor Program AIC			Care Advisor Program Transition		
	CKD Booklets			Dibetes Booklets			CAD & CHF Booklets			Asthma & COPD Booklets		
	Highlighted Measure - Hypertension			Highlighted Measure- A1C Poor Control			Highlighted Measure			Highlighted Measure - Flu & Pneum		
	OCC Newsletter/PAC Update			OCC Newsletter/PAC Update			OCC Newsletter/PAC Update			OCC Newsletter/PAC Update		
	2019 3 Day SNF Waiver											