

# Population Health Analytics and Innovative Care Delivery Generates an Average \$31M in Shared Savings Every Year for More than Ten Years





\$31M average annual shared savings during the last 10 years.

#### **PRODUCTS**

Nealth Catalyst® Data Operating System (DOS™)

### **EXECUTIVE SUMMARY**

With healthcare spending on the rise, UnityPoint Health needed advanced analytics to support clinical decision-making when balancing population health priorities and shared savings. UnityPoint Health and UnityPoint Accountable Care formed a partnership, leveraging its analytics platform and high-value data and analytics to aid in developing the analytics support required for improving patient outcomes while decreasing costs and driving success in risk-based contracts.

# POPULATION HEALTH STRATEGIES CAN CONTAIN ESCALATING COSTS

U.S. healthcare spending recently reached \$4.1 trillion, compelling payers and providers to look for more opportunities to reduce costs.<sup>1</sup> As UnityPoint Health matured in its value-based care journey, it needed advanced analytics to support clinical decision-making to move forward with its population health priorities while managing costs.

The organization had volumes of clinical and claims data, but it lacked the consistent data definitions required to support consistent measurement of outcomes and care quality across all care settings, limiting its ability to use high-value data and analytics to drive success in risk-based contracts, including shared savings. It sought to identify patients who would best benefit from care management interventions, but it lacked the predictive models allowing it to segment and risk-stratify patients at risk of increased utilization.

UnityPoint Health needed to develop standard analytics, processes, measures, and tools that could be used across the ACO to further develop high-performing facilities, improve patient care processes and outcomes, and drive success in risk-based contracts.







# FINDING POPULATION HEALTH AND SHARED SAVINGS SUCCESS WITH ANALYTICS

UnityPoint Accountable Care leverages the high-value data and analytics in the Health Catalyst® Data Operating System (DOS™) platform and a robust suite of analytics applications. The team used the platform to develop the analytics support required to help create happier, healthier patients while driving success in risk-based contracts.

The organization focuses on continuous performance improvement, engaging clinicians in developing common care pathways, using consistent definitions for quality measures and patient outcomes, and partnering in shared-risk incentives.

## Analytics for strategic planning

The organization's enterprise analytics team serves as a problem-solving partner, focusing on delivering the most valuable solutions. Analytics are embedded into the strategic planning process, enabling clinical and business leaders to make use of its high-value data and analytics to identify opportunities for improvement and make data-informed decisions. UnityPoint Health leverages its analytics platform to establish a single source of truth across its disparate systems to convert raw data into usable data that is accessible and consistent across all settings, gaining insight into patient characteristics and healthcare utilization patterns. The organization uses its high-value data and analytics to develop the value-based care analytics required for ACO success.

#### Analytics for models and predictions

UnityPoint Health used claims and clinical data integrated into the analytics platform to develop a model to predict population health and financial trends. The predictive model risk-stratifies patients into low, rising, and high groupings, identifying the likelihood of inpatient admission, emergency department (ED) utilization, 30-day readmission, and the probability that the patient will fail to arrive for a scheduled outpatient visit.

The organization uses its high-value data and analytics to identify improvement opportunities at the point of care. Clinicians use the utilization risk score generated by the predictive model to better prepare for annual wellness visits (AWVs). The organization's data demonstrates patients with AWVs require fewer care coordination resources and higher usage rates in prevention and maintenance services. These patients also have lower risk-adjusted per member per month (PMPM) and risk scores. UnityPoint Health focuses on ensuring patients receive AWVs, using the AWV to ensure important screenings and interventions are provided to improve patient outcomes and address care gaps, thereby improving value-based care contract performance measures.



# ABOUT UNITYPOINT ACCOUNTABLE CARE

UnityPoint Accountable Care, a subsidiary of UnityPoint Health, is one of the longest-standing participants in the Centers for Medicare & Medicaid Services Accountable Care Organization (ACO) Model in the country. The organization employs more than 8,000 providers, delivering care to 500,000 patients in rural and urban communities across lowa, eastern South Dakota, western Illinois, and southern Wisconsin.



Providers leverage the high-value data and advanced analytics from the Health Catalyst analytics platform at annual wellness visits to effectively manage their panels and provide the right care for patients at the right time, improving patient outcomes and on average achieving more than \$31M in shared savings annually.

Megan Romine, DO, MHA, FACP Interim Chief Executive Officer, UnityPoint Accountable Care







## Analytics for better patient outcomes

The care management team leverages the utilization risk score and event monitoring to identify patients with high or rising risks. Care managers perform post-acute-care outreach, engaging with patients to assess their needs, scheduling appointments with the appropriate clinician in the most appropriate setting, and modifying care plans, mitigating unnecessary healthcare utilization.

Providers across all care settings participate in developing and using datainformed standard work to reduce and improve patient outcomes and decrease unwarranted healthcare utilization, including high-cost imaging, ED and inpatient utilization, and 30-day readmissions, driving down PMPM costs.

#### RESULTS

Using high-value data and population health analytics, UnityPoint Health provides consistent care across all settings, improving patient outcomes while decreasing costs. Results include:

- \$31M average annual shared savings during the last 10 years. Shared savings are the result of high-quality measure performance and effective management of utilization.
- Improved post-discharge utilization:
  - > 70 percent of discharged patients received outreach from a care manager, resulting in 3K more office visits and 900 more home health visits.
  - 25 percent relative reduction in average skilled nursing facility (SNF) length of stay.
  - 5.5 percent relative reduction in SNF admits per 1K patients.
- Improved ED utilization:
  - ambulatory care.

# 40 percent relative reduction in ED visits through effective

### WHAT'S NEXT

UnityPoint Health will continue to use a suite of analytics products that support clinical decision-making and move the needle forward for valuebased care priorities. The organization plans to further expand its population health support to gain better insight into the impact of social determinants on the health of its patient populations, pursue additional opportunities to integrate claims and clinical data sets, and expand key programs to support network partners. W



We're able to leverage the integrated claims and clinical data in the Health Catalyst analytics platform to predict population health utilization and financial trends, providing teams the opportunity to intervene.

Mandy Abbas, MPA Analytics Manager, Value-based Care, UnityPoint Health









REFERENCES
<ol> <li>Centers for Medicare &amp; Medicaid Services. (n.d.). National health expenditures 2020 highlights.</li> <li>Retrieved from https://www.cms.gov/files/document/highlights.pdf</li> </ol>
ABOUT HEALTH CATALYST
Health Catalyst is a leading provider of data and analytics technology and services to healthcare organizations committed to being the catalyst for massive, measurable, data-informed healthcare improvement. Its more than 500 clients leverage the cloud-based data platform or its other software applications—powered by data from over 100 million patient records and encompassing trillions of facts—as well as its analytics





software and professional services expertise to make data-informed decisions and realize measurable clinical, financial, and operational

improvements. Health Catalyst envisions a future in which all healthcare decisions are data informed.

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