



We Are  
**HealthPointe Solutions**

VBC Administration



# Provider: Value Based Care – Gap

# AS VBC programs expand, so does the burden on the provider...

*"If we look at the total clinic day, less than a third of that time a physician is actually giving direct patient care"*  
- Christine Sinsky, VP of professional satisfaction at AMA\*

When most of a provider's time is spent on administrative tasks:



**Patient Care  
Suffers**

Only 27% of time\*



**Providers  
Burn Out**

Use 'pajama time' to  
catch up



**Reimbursement  
Declines**

Missed opportunities

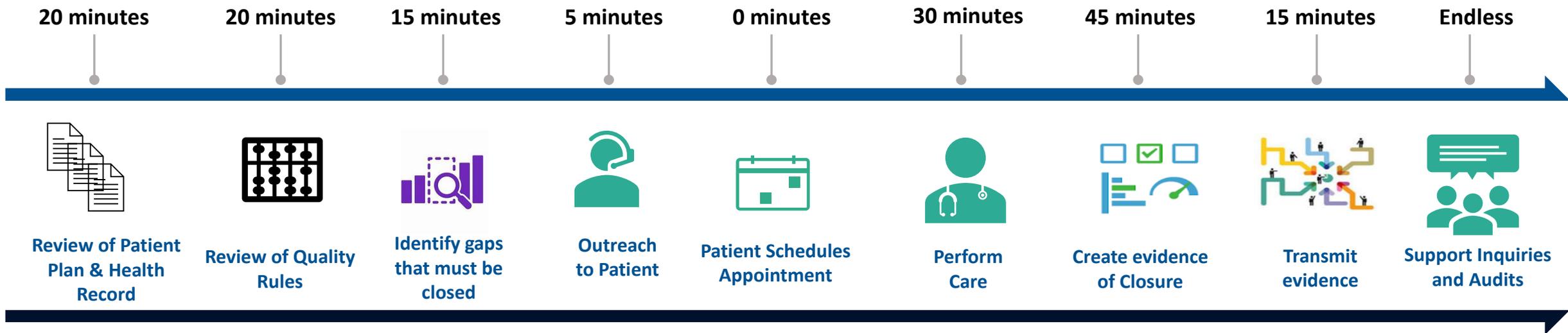
\*Advisory Board, The Daily Briefing: September 8, 2016

# What makes up the 73% of administration?

Physician Day in the life of a single VBC attributed patient...

For a single patient, **~2 hours** of administrative time is required to support an attributed patient!

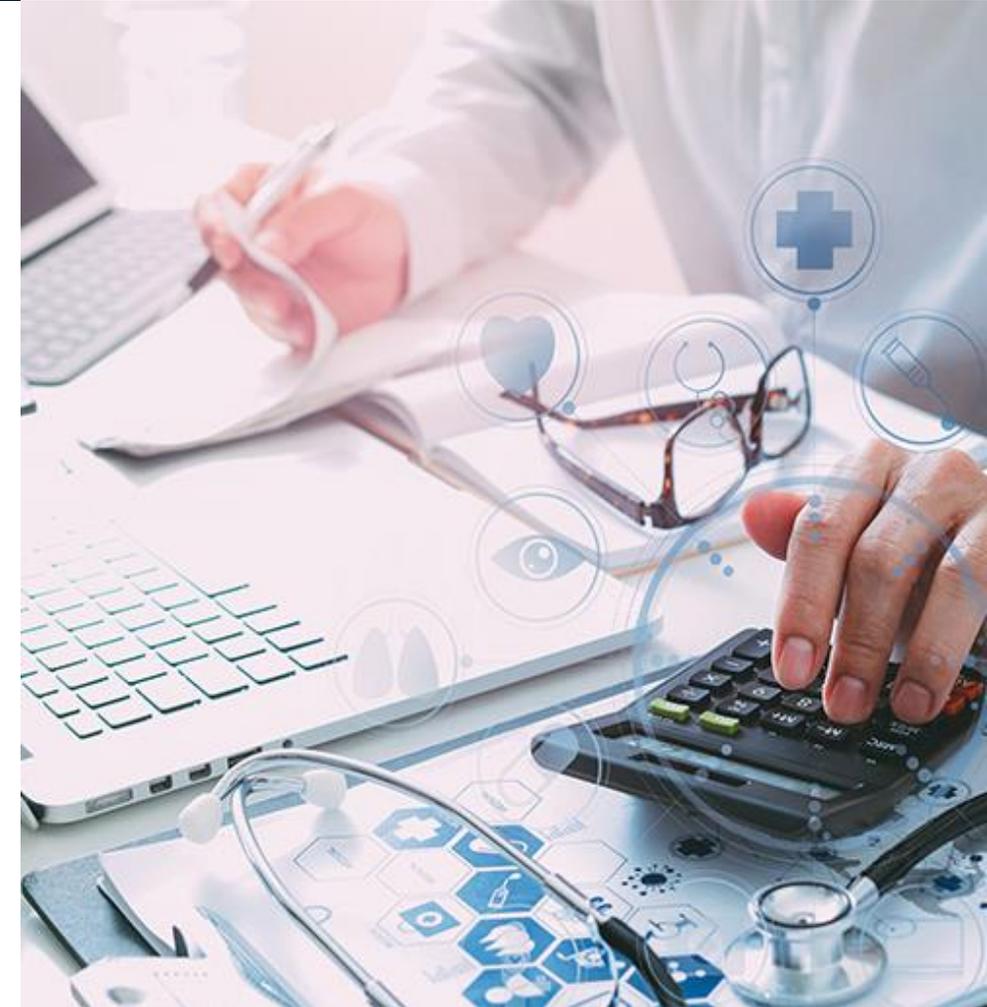
When multiplying by attributed patients, **1000s of hours annually** are taken away from patient care



# Challenge: VBC Administration Burden...manual, complicated and time consuming.

## Administrative Challenges

- Rules and success factors differ by each patient's Value Based Care program.
- Patients are elusive and difficult to get into an appointment; providers must maximize their time with them when they are present.
- Data submission requirements for each program are inconsistent and unique.
- Delays in payer processing often create duplicate requests for data.
- In 2020, COVID-19 stay-at-home restrictions mean that providers now have only six months to close nine months of gaps; putting even more pressure on providers to be more efficient.



# Challenge: Fragmented Clinical Data

Our Health Cloud Solution can source data from anywhere

## The Challenge

High-cost patients see many providers annually with data spread across care settings



## The Objective

Unified, Normalized Clinical Data Ready for Analytics



# Where does Healthpointe Solutions find the efficiencies?

## Provider VBC Needs

Raise  
understanding  
of the  
population

Efficiently  
identify  
patients that  
need care

Organize &  
Streamline  
Gap Closure

Maximize VBC  
Revenue

Simplify Payer  
Documentation

# Value: How does Healthpointe Solutions solve?

Healthpointe Solutions can transform the administrative burden for VBC programs by providing tools that take the heaviness out of non-patient facing activities.

## A Solution Impact

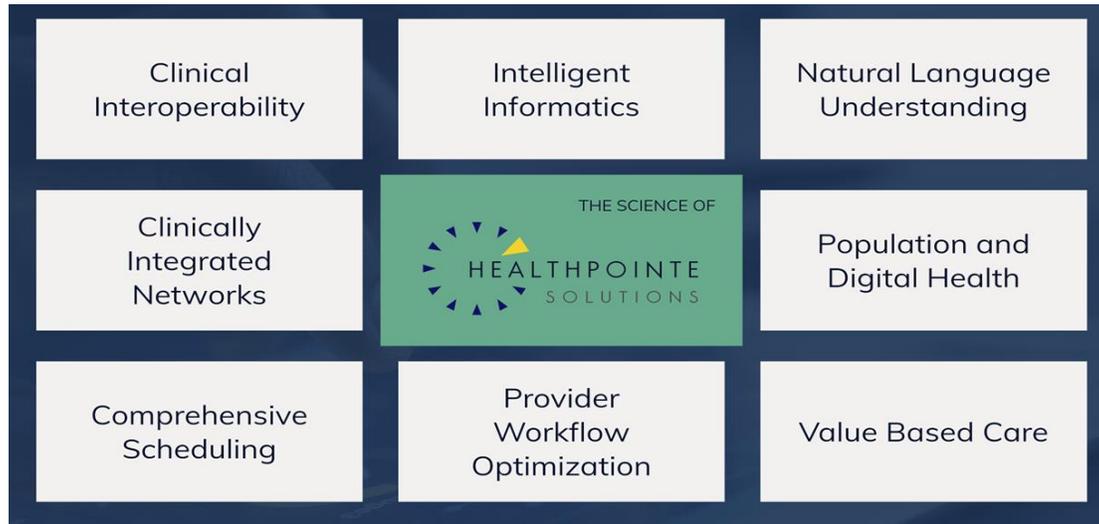
Automated and Expanded Clinical Insights earlier enabling increased personalized care



- ↑ Early identification of patient risk to ensure supported care pathways are assigned to patient
- ↑ Get the most out of patient visits thru organized visits
- ↑ Maximize revenue by aligning care given to Payer VBC programs
- ↓ Ops: Reduce organizations effort to support justification of risk and patient care pathway

# Healthpointe Solutions

A pathway to clinical decision sciences through seamless analytics and messaging services in the provider Experience



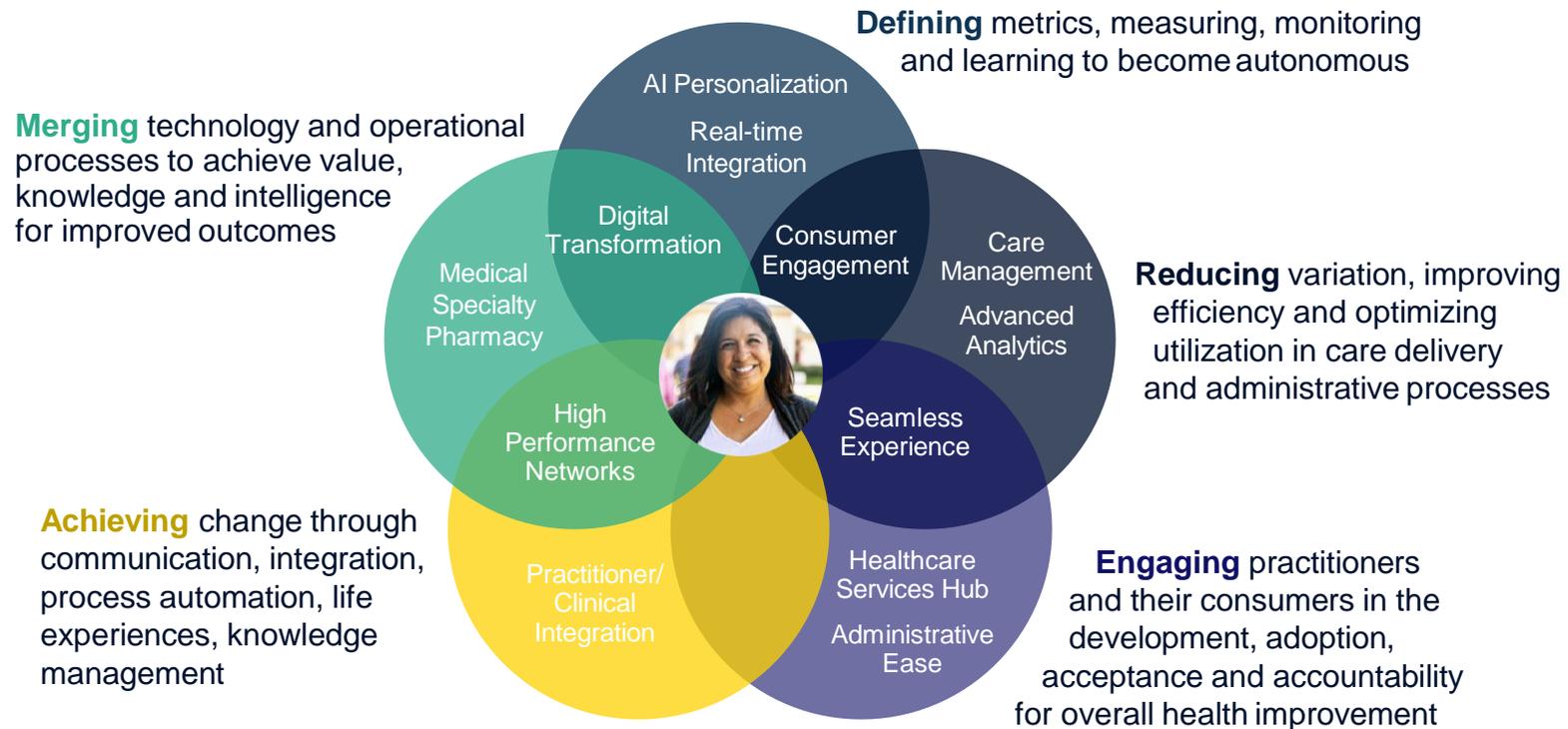
1. Interoperable across specialties and practitioners, eliminates the need to manage referrals and gaps in care across multiple systems
2. Provides real-time messaging services for all your gaps in care in one place
3. Clinical insights, risk adjustment gaps and comprehensive quality saves time and reduces errors by integrating with each consumer's medical record
4. Workflow coordination allows your actions to be seamless with the touch of a button

# How does Healthpointe Solutions solve provider needs?

HPS Capability	Provider Value	How?
Seamless retrieval of Medical Record without disrupting provider operations	<b>Reduce Time chasing medical record</b>	Connectivity to CMS and other clinical data partners enables HPS to provide analysis without minimal provider operational disruption.
Enhance data using Cognitive analytic insights about your attributed population and their diagnosis plan	<b>Quick, enhanced identification of patient needs</b>	A mature, robust analytic engine which has a wide variety of standard analytic packages in combination with proprietary analytic packages enable access on who needs care and what care is needed.
Identify and Organize patient gaps for more efficient closing of gaps	<b>Maximize Patient Interaction</b>	Enables a provider to see a prioritized and organized list of gaps for a member that allow for efficient use of a members visit closing multiple gaps with one visit.
Quick, advanced data processing	<b>Reduce time to gather clinical data.</b>	APIs provide near real-time processing and reduces the delays of reliance on claim and batch processes.
Automated submission of gap submission to payer	<b>Automation of payer gap reporting</b>	Use existing APIs to package, submit and document delivery of provider's gap evidence.
HPS helps identify and organize gaps resulting in gap closure enabling additional reimbursement	<b>Maximize VBC Revenue</b>	Identify reimbursable, appropriate value-based patient care services needed Improve percentage of bonus realized from VBC incentives.

# Clinical Insights helping to personalize delivery of care.

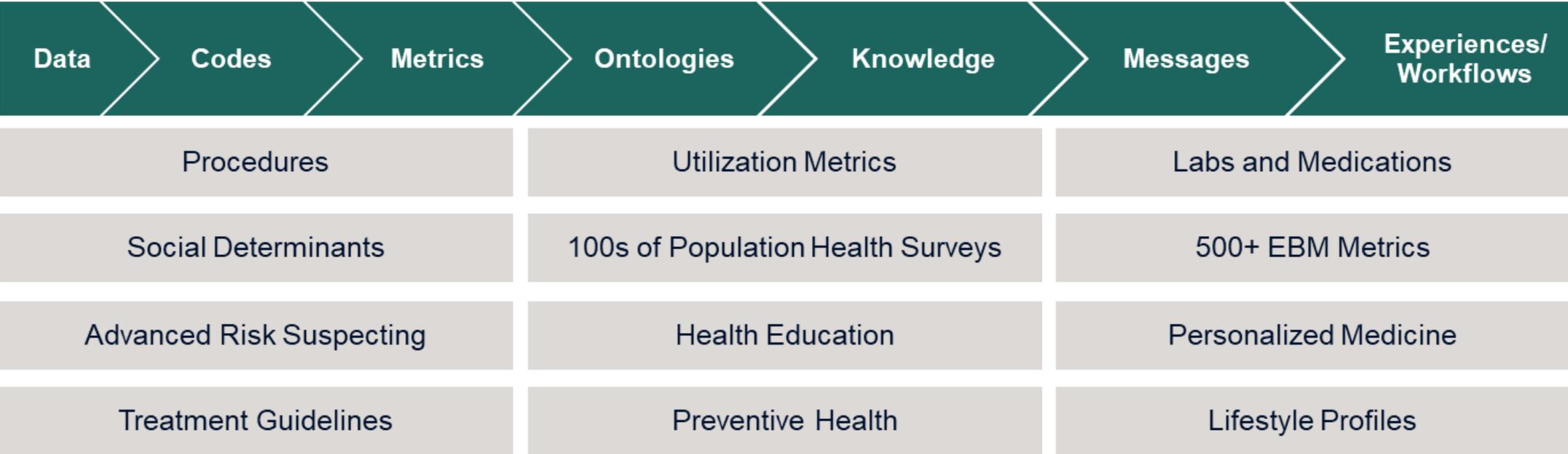
*We take a Consumer-centered approach to healthcare that fits seamlessly into a very local, digitized market.*



# Clinical Knowledge Base of Health

“Big data” doesn’t necessarily mean good data. As with all data, “big data” needs to be extracted and validated, transformed and normalized. And once it’s in a usable form, it needs analytic enrichment through Cognitive AI, so it can be understood in context within workflow.

## HealthPointe has aggregated a comprehensive knowledge base of Health and Wellness Insights



# Data Administration

Standardize/Organize, Enhance and Deliver

Our experience and existing API connections to common data/technology platforms make implementation easy for providers.

1

## Get Data

Leverage existing industry APIs to gain access to critical data

Minimize provider involvement in data delivery

2

## Enrich Data

Process with our standard and proprietary analytics packages

Create expanded and organized clinical insights

3

## Deliver Gap Evidence

Electronically package and send evidence of gap closure to payer

Store documentation of gap closure for easy retrieval

# Quick Launch Plan– Iterative Value at each Phase

Program Focus

Interoperability

Seamless connectivity

Workflow Automation  
& Optimization

Expanded Analytic  
Insights

Launch Guiding  
Principles



Minimal upfront investment



Value achieved from previous phase funds the next phase.

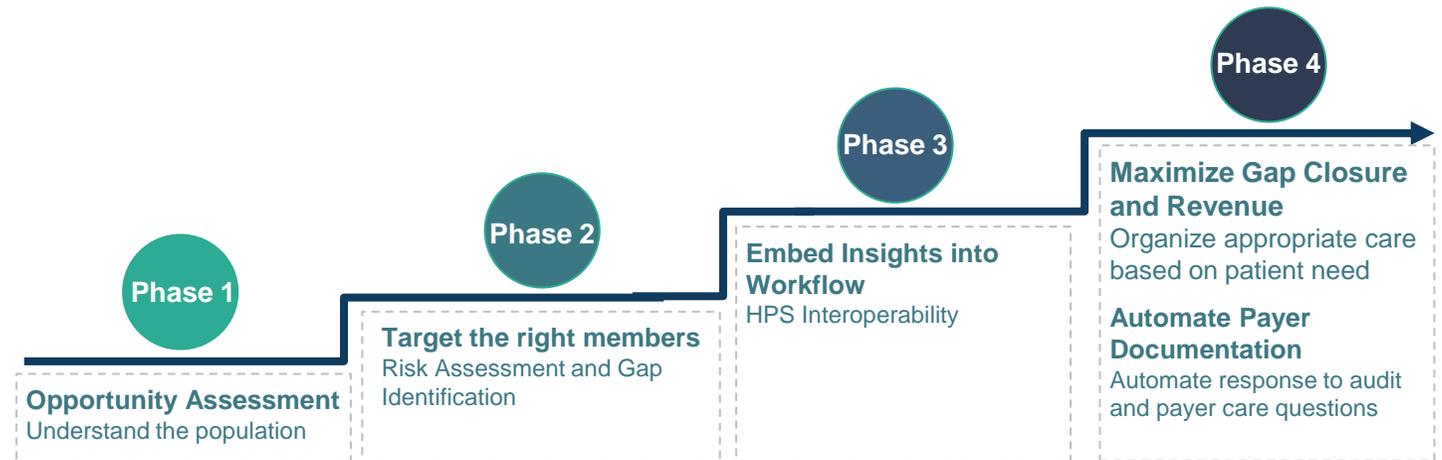


Modular allowing quick path to value



Low Impact to Existing Operations

Progression to Iterative Value



# Thank you.