

Introduction to Southwest Medical

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Southwest Medical is a **patient-centric**, **physician-led**, **data-driven** and **integrated** medical group. We focus on cost-effective, high quality health outcomes for our patients.

Nevada's Largest Multi-Specialty Medical Group

- **Offering Over 350 Providers** that deliver care across southern Nevada and growing!
 - **Eight specialty departments** dedicated to caring for patients with certain medical conditions or ailments
 - Allergy, Cardiology, Endocrinology, Gastroenterology, Neurology, Pain Management, Podiatry, and Rheumatology
- **30 Health Care Health Care Centers**
- **Six Urgent Care locations**, including one that is **open 24 hours** with a **23 hour observation unit**
- **Two Surgery Centers**
- **Seven Convenient Care locations**
- **Two Senior Lifestyle Centers**
- **On-site Radiology and Laboratory Services**
- Robust and integrated **EMR (electronic medical records) System**

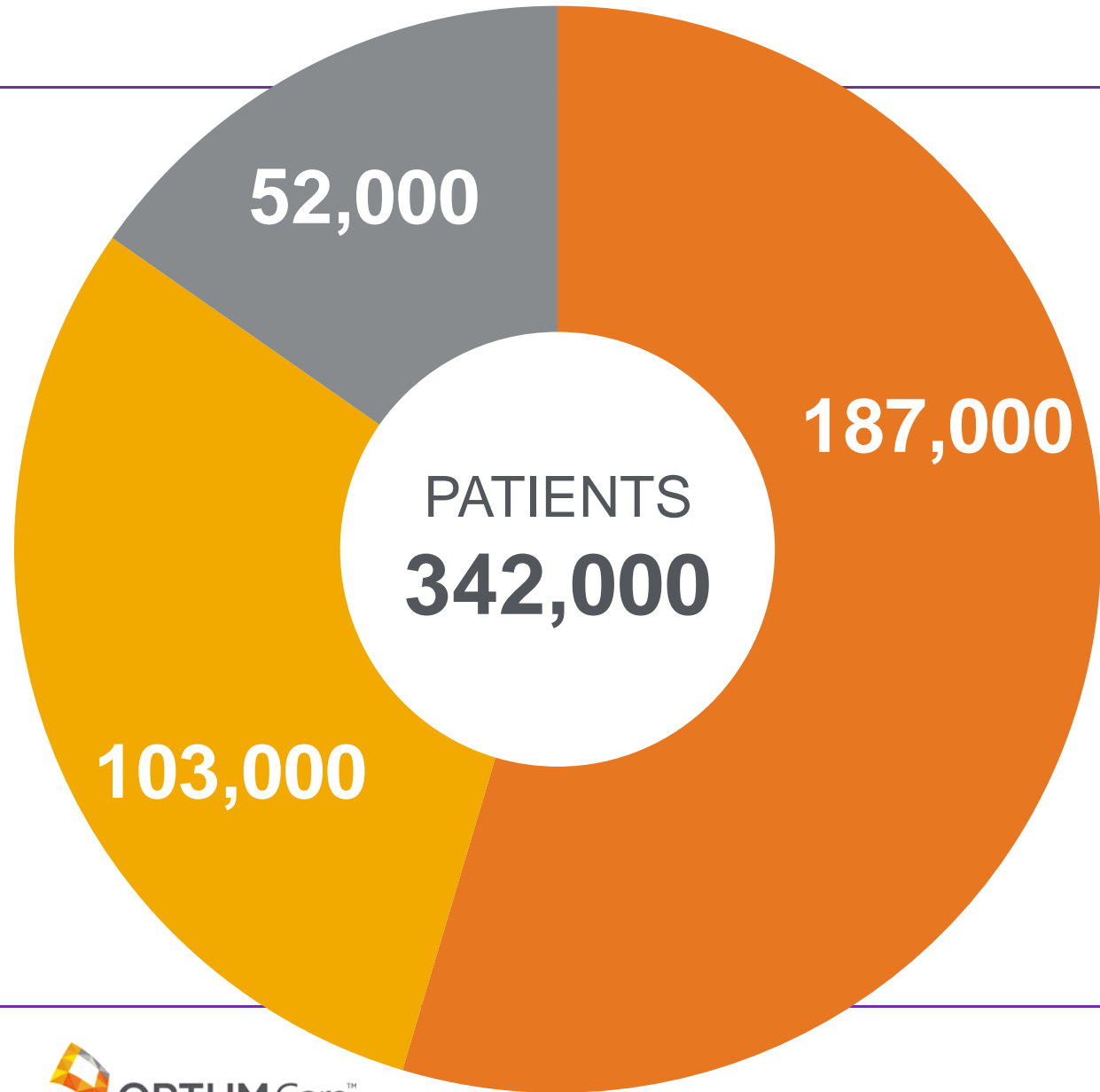


SMA Locations

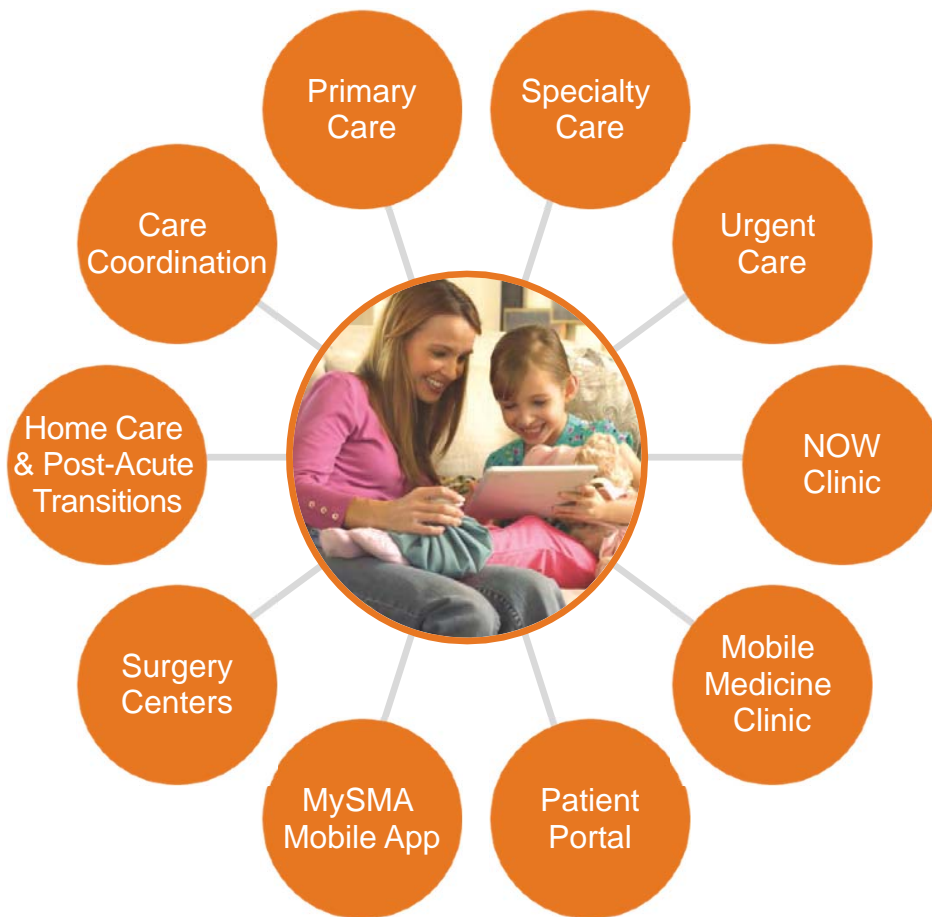


Patient Population

- Commercial**
Professional risk
- Medicaid**
Professional risk
- Medicare Advantage**
Global risk



Integrated Patient-Centered Care



A single electronic medical record connects all of our services

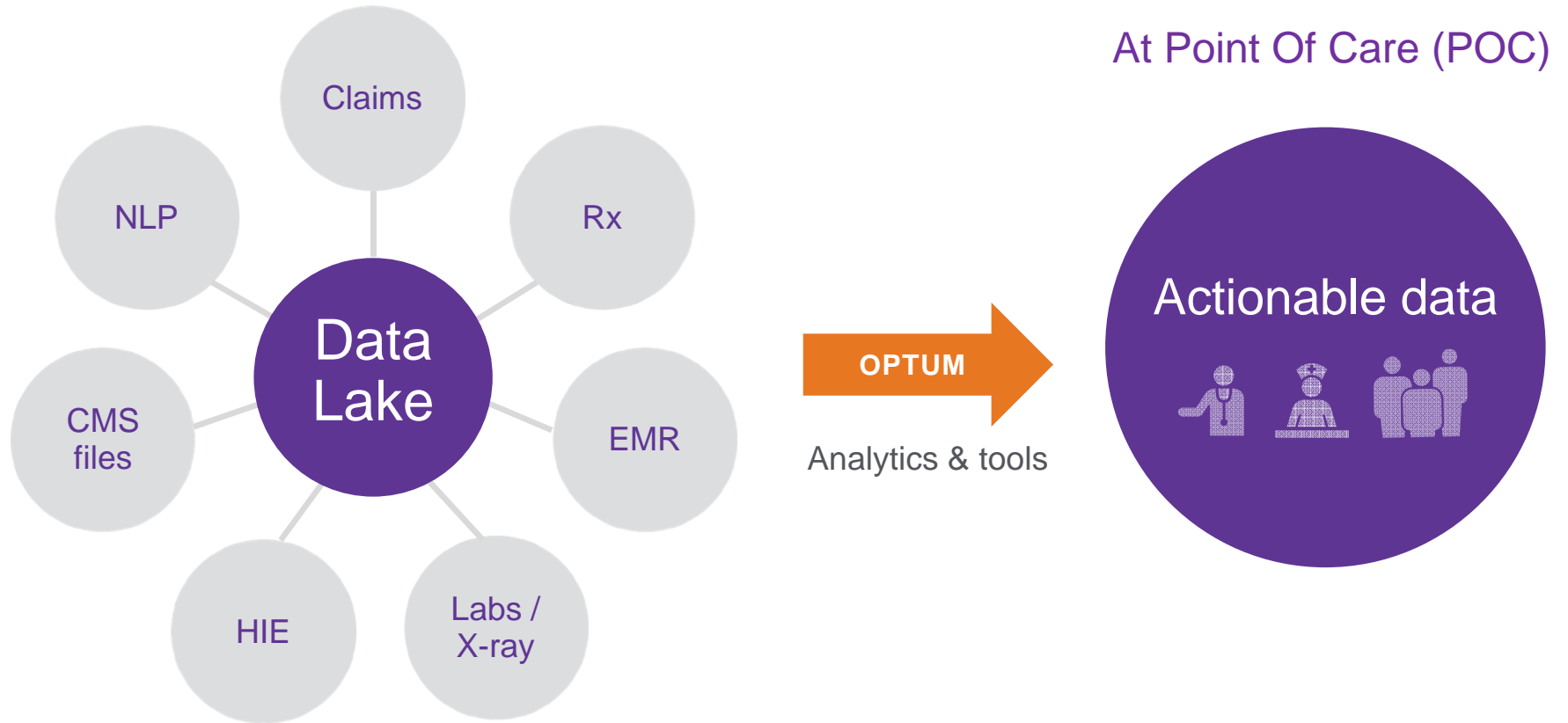
A Population Health Approach Utilizing OptumCare's Data, Analytics, and Tools

Population health tools which enhance and are integrated with the EMR to enable the **most efficient proactive patient centered care** by our provider teams.

- Broad Population Analysis at Group Level: **Optum One** Analytics
- POS Tool during the patient-provider interaction: **CORE**
- Provider Team Performance Dashboard and Patient Action Lists: **Data Lake**

All powered by the OptumCare data lake and predictive analytics engines

Optum Capabilities | Data Lake



Case Study at Group Level: OptumOne Technology and Predictive Analytics

Analyze
patient population



Align local
care resources



Customize
care plan



18,000+ employees
and dependents

1,100 diabetic
patients

Patient Action List

Leverage **Optum-wide**
analytics

Identify **highest cost**
patients

Use providers to **broaden**
primary care reach

Integrate **appropriate**
access to care sites

Personally direct
patients to the right site

Adapt care to
patient need

Case Study: Results

Decreases in A1c (7.9 to 6.7) and **LDL** results (92 to 85)

Those not scheduled showed increasing A1c (7.6 to 10.2) & LDL (89 to 122)

Decreases in BMI (33.7 down to 31.4 vs. increase of 33.3 to 38.4)

Higher adherence with insulin use (23% vs. 12%)

Lower emergency department utilization (529.4 visits/K vs. 695.7)

Lower patient cost per member per month (\$1,794 vs \$2,275)

Point of Care Tool = CORE: Care Opportunities REporting

CORE

Patient Schedule Tasks Chart Documents MD Charges Call Processing User Options Print Queue Site SMA Custom Patient Referrals Manage Referrals Manage Prior Auth Resource Info Up To Date Patient Acuity CORE FPCC Admin Portal Account HomeCare

TEST, AMY **MRN:** 1494149 **Sex:** F **Allergies:** Unknown **Pri Ins:** PAY FOR PRIVACY **Note:** SELECT
AKA: COREAMY TEST **Age:** 27 Years **Directives:** O-Onfile **FYI:** FYI
H Phone: (702)555-1212 **DOB:** 14-Jan-1989 **PCP:** Orr, Richard **Email:** ANN.ZIMMERMAN@OPTUM.COM

Condition Recapture Alert (14) Condition Suspect Alert (0) Core Quality - Staff (59) Core Quality - Provider (24) Patient Snapshot

HCC Category	ICD10 Diagnosis Code	Diagnosis Description	Date	Source	Accept	Reject	Defer
9	C34.90	Malignant neoplasm of unspecified part of unspecified bronchus or lung	04/06/2015	Problem List	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
18	E11.42	Type 2 diabetes mellitus with diabetic polyneuropathy	02/16/2016	Problem List	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
18	E11.42	Type 2 diabetes mellitus with diabetic polyneuropathy	06/08/2016	RAPS	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Code to be recaptured

Measure Title	Description	Display	Action				
Colorectal Cancer Screening (1x measure)	Patient is 50-75 during this calendar year and has not had a documented colon cancer screen. *FIT testing is good for 1 calendar year, while colonoscopy is good for 9 years.		Please discuss colonoscopy option with patient if appropriate	discussed with patient - cpsy ordered	discussed w pt - cpsy and FIT ordered	discussed w pt - declined cpsy FIT ordered	discussed w pt - declined all screenings
Breast Cancer Screening (1x measure 50-74)	Patient is 50-74 during this calendar year and has not had a mammogram in the past 12 months.		1. Please check the chart for a completed mammogram in the current calendar year if no mammogram found 2. Order Screening Mammogram and encourage patient to schedule	discussed with patient mammogram ordered	discussed with patient mammogram scheduled	discussed with patient - declined mammogram	
Osteoporosis Fracture Mgmt	Patient >67years has a fracture diagnosis; current practice policy requires the patient has a BMD test or be prescribed Osteoporosis medication therapy within 180 days post fracture date	Trigger Date: 06/27/2016	Please review Fracture diagnosis for treatment. If the fracture dx is not applicable, please select and save the Dx Clarification button to remove the fx diagnosis.	reviewed			

Quality care gaps served up to provider



HEDIS Information for Montecito

Location

Montecito

Team

All Teams

HEDIS Measures

- Breast Cancer Screening
- Colon Cancer Screening
- Controlling Blood Pressure
- Diabetes A1C Less Than 9
- Med Adherence Cholesterol
- Med Adherence Diabetes
- Med Adherence Hypertension

Current Quarter Provider HEDIS

Provider	Eligible Members	Compliant Members	Rate	Rating
BAUZON,SAMUEL R	100	82	82.00%	5 Stars
EZEANOLUE,CHINENYE	380	264	69.47%	< 4 Stars
MANUEL GARATEIX,RICARDO	273	189	69.23%	< 4 Stars
MAXHAM,LAUREN ELAINE	113	85	75.22%	4.5 Stars
MOLINA,MARIA C	378	293	77.51%	5 Stars
NGUYEN,DANIEL JOSEPH	83	67	80.72%	5 Stars
ZDOROVYAK,INNA	367	264	71.93%	4 Stars

Current Quarter HEDIS Measures

Measure	Eligible Members	Compliant Members	Rate	Rating
Breast Cancer Screening	823	682	82.87%	5 Stars
Colon Cancer Screening	1,694	1,244	73.44%	4 Stars
Controlling Blood Pressure	1,135	919	80.97%	5 Stars
Diabetes A1C Less Than 9	518	440	84.94%	5 Stars
Med Adherence Cholesterol	1,742	1,440	82.66%	4 Stars
Med Adherence Diabetes	648	579	89.35%	5 Stars
Med Adherence Hypertension	1,692	1,475	87.17%	< 4 Stars

HEDIS Measure

Cases Needed for 5 Star

Compliant Members

Goal

Colon Cancer Screening

...

60

1,244



Low Medium High

Provider HEDIS Detail Report

- Colon Cancer Screening



EZEANOLUE, CHINENYE

Montecito POD 1 - Team 1

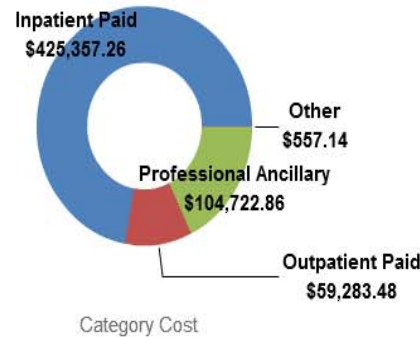
Bonus Measure	MRN	Next Appt Dt	Appointment With
Colon Cancer Screening	30895	Nov 22 2016	EZEANOLUE MD, CHINENYE
Colon Cancer Screening	1860676	Nov 11 2016	EZEANOLUE MD, CHINENYE
Colon Cancer Screening	1586911	Dec 19 2016	AHN DO, CHANG HOON
Colon Cancer Screening	1414724	Dec 5 2016	EZEANOLUE MD, CHINENYE
Colon Cancer Screening	1048013		



Provider Costs for BAUZON,SAMUEL R

Cost Subcategory	Category Cost
Observation	\$27,124.35
Outpatient Surgery	\$14,594.89
ER	\$10,377.39
ASC	\$7,186.85
CT_MRI	\$0.00
Dialysis	\$0.00
Total	\$59,283.48

Click on pie segment to show category breakdown



Current Report Period Ending June 2016

Total Fee For Service Cost	\$300,000.00
Total Capitated Cost	\$420,000.00
General and Admin Cost	\$360,000.00
Total Empanelment Cost	\$1,080,000.00
PMPM Cost	\$600.00
RAF Score	1.4258

Bonus Payout 150%

Month	Total Cost	Fee For Service Cost	PMPM Cost	Bonus Payout
Jan 2016		\$50,000.00	\$600.00	
Feb 2016		\$50,000.00	\$600.00	
Mar 2016		\$50,000.00	\$600.00	

150% 120% Baseline

MRN	Inpatient Paid Cost	Outpatient Paid Cost	Professional An Cost	Other Cost	Total Cost
1219828	\$150,000.00	\$150,000.00	\$900,000.00	\$0.00	\$1,200,000.00
1067446	\$250,000.00	\$100,000.00	\$700,000.00	\$0.00	\$1,050,000.00
67724	\$0.00	\$50,000.00	\$750,000.00	\$0.00	\$800,000.00

Select Report Period 201606

[Utilization Definitions](#)

[RAF Payout Grid](#)

Purpose - Reward Adult Medicine teams for effectively managing the medical loss of their panels (Population Management)

Southwest Medical Performance

88% generic RX utilization rate

99.6% generic RX substitution rate

20% better than peers on standard quality measurements

12.5% lower health care cost for patients accessing primary care at Southwest Medical compared to peer groups


4.5 STAR 2017 CMS Quality Rating
(+5% Revenue Increase)

Thank you
