Network Insight™ Network Optimizer
Leveraging physician network opportunities for high performance

It's no secret that hospitals, health systems, and health plans have acquired physician practices and increased the number of employed doctors at an unprecedented pace over the past three to five years. Based on our Deloitte Center for Health Solutions 2013 Survey of US Physicians, two-thirds of physicians believe that physicians and hospitals will become *more integrated* in the next one to three years.

Along with understanding, preparing, and responding to the rules and enterprise business implications of the Centers for Medicare and Medicaid Services (CMS), patient relationship categories and codes as required under the Medicare Access and CHIP Reauthorization Act of 2015 (MACRA). Investments within the physician enterprise to optimize are top of mind for our client executives across the country. With new opportunities for physicians to improve care and control costs with more timely access to data that could help them make changes to improve care.

> Optimize performance of in-network providers based on the quality, resource use, and other criteria defined in the proposed MACRA rule.

Unlike past trends where volume was the main driver and acquiring or affiliating with as many physicians as possible was the goal; today's physician strategy is driven by quality and value based care (VBC) delivery.

Maintaining a High Value Network of aligned physicians is no longer just a market share play, it significantly impacts quality and continuity of care that are foundational to VBC arrangements and a post MACRA incentive payment environment.

Key questions being asked by leading organizations

As hospitals, physicians, and health plans shift to VBC delivery models, the ability to form a high performing physician network to adequately serve specific populations has become increasingly important.
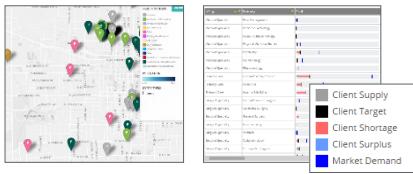
The following questions are at the forefront:

- Do we have an adequate mix of primary care and specialists to effectively coordinate care and manage costs for our patient populations?

- Can current capacity keep up with population dynamics, patient access expectations, and market demands?

- How do we prioritize our specialties in relation to projected population shifts, disease prevalence, and our clinical strategy?

- Have we engaged with the right physicians to meet the quality, outcomes, and cost improvements in VBC delivery models?

- Can we distinguish performance of physicians and physician groups within our market?

- How can we optimize performance of physicians based on the quality, resource use, and other criteria defined in the proposed MACRA MIPS rule?

- Do we know which health systems potential affiliates are already aligned with?

- Do we know which physicians and physician groups to "say no to" that are seeking network affiliation?

- How does our physician network compare to that of our competition in terms of cost, quality, and market positioning?

- Do we have the right mix of physicians in the right locations, with the right performance to meet our patients' care delivery needs?

A snapshot of ConvergeHEALTH's Network Optimizer

Explore current footprint and need in the market	Optimization set up	Optimization results

Client Supply
Client Target
Client Shortage
Client Surplus
Market Demand

To set the context, Market Landscape allows the client to view its current physician practices and the competitor surrounding practices. Then, the client can determine which specialties to focus on by analyzing the physician supply and demand in the market. Based on the user defined target market share, the client can identify gaps that remain in its network.
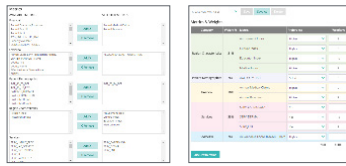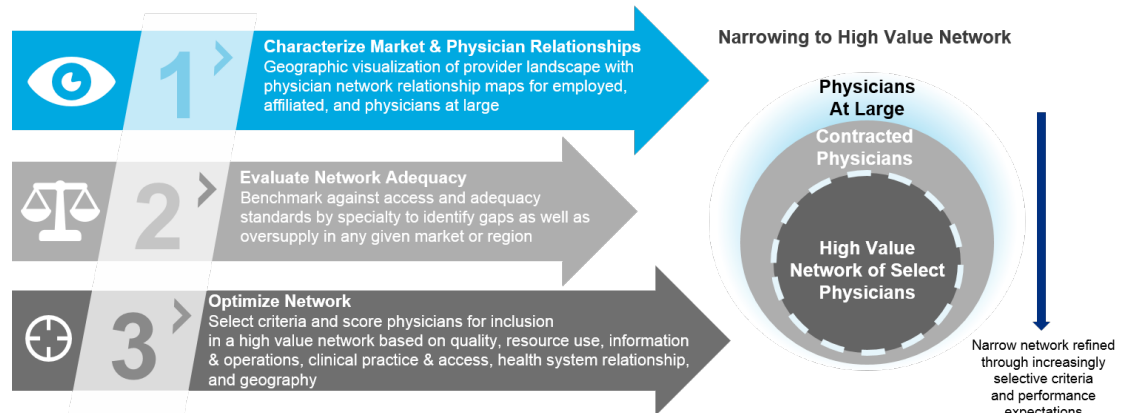
The client can select the specific geographic and performance third-party metrics that are most important when evaluating physicians to target. These metrics are incorporated into an optimization algorithm to develop a prioritized list of physicians to integrate into the client's network.
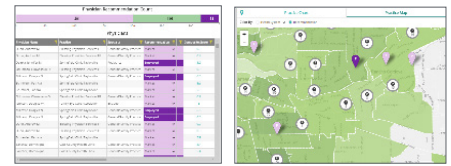
The optimization results is preconfigured to estimate and assess eligible providers against the proposed MACRA MIPS composite scoring methodology. The results provide a consideration for each physician, derived from geographic and performance value scores to determine their readiness to practice. A physician's performance score is comprised of quality, resource use, information & operations, clinical practice & access, and health system relationship.

ConvergeHEALTH's Network Optimizer has helped our health care clients with an innovative approach to physician network development. The method can be tailored to address the overall network strategy and understand the market landscape with real-time scenario modeling to reduce decision cycle times.

1 **Characterize Market & Physician Relationships**
Geographic visualization of provider landscape with physician network relationship maps for employed, affiliated, and physicians at large

2 **Evaluate Network Adequacy**
Benchmark against access and adequacy standards by specialty to identify gaps as well as oversupply in any given market or region

3 **Optimize Network**
Select criteria and score physicians for inclusion in a high value network based on quality, resource use, information & operations, clinical practice & access, health system relationship, and geography

Narrowing to High Value Network

Physicians At Large
Contracted Physicians
High Value Network of Select Physicians

Narrow network refined through increasingly selective criteria and performance expectations

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Bottom-line benefits

Our Network Optimizer can provide the insight necessary to leverage the opportunities relative to an organization's community of physicians by:

- Achieving alignment through the integration of legacy physician practices and leveraging the combined strength of evolving physician complement by specialty to begin addressing "systemness" and physician market placement.

- Developing "seamless coordination" between employed and affiliated physician groups who operate under aligned care delivery processes.

- Providing insights on individual and group performance against the proposed MACRA MIPS scoring criteria to determine interventions with primary care practitioners and specialists that ensure maximum reimbursement for quality, outcomes-centered, cost-appropriate care.

- Identifying the optimal complement for the network with the right physicians, in the right location, with the right performance to address the quality and cost value proposition of accountable care models.

Contacts

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