

RP NAVIGATOR

New Reporting Tools - Episodes of Care and CPT Based Procedures

CareAdvantage, Inc. (CAI) has developed over 50 Episodes of Care (EOCs) that are case mix and severity adjusted and provides a more detailed level of reporting by incorporating Clinical Risk Groups (CRGs) from 3M Health Information Systems. The episodes of care provide clients with the ability to look at both medically and surgically based episodes. The medical based EOCs include many chronic diseases as well as more common diagnoses such as pneumonia and pregnancy and delivery. The surgical based EOCs include inpatient and outpatient procedures such as total hip replacement, hysterectomy and cardiac procedures. All of the EOCs are uniquely defined with timeframes, coding (procedure and/or diagnoses), trigger events and lead providers.

The CPT based procedures look at many of the more common outpatient procedures such as x-rays, CT scans, colonoscopy and more. These procedures include the claims related to that procedure and data of service. These CPT based procedures provide a quick way of viewing the cost of the procedure at the facility and provider level.

These new reporting tools provide clients with a more complete picture of the true costs related to a single episode of care or procedure. The CRGs provide 9 statuses with up to 6 severity levels, with the chronic conditions above status 4, which provide more granularity for reporting. Not only can an episode of care be analyzed by cost, but by including the burden of illness, disease status of members, age, gender and/or other data elements, an episode of care may look very different. For example, a healthy member with pneumonia has different cost utilization patterns than a member with pneumonia and a chronic disease such as diabetes. The episodes and procedures may also be analyzed by different carriers/payers, geography, and provide the typical utilization metrics - ER visits/1000, admits/1000, physician visits and others.

Some of the exciting reports available using the episodes of care include the following:

- Cohort analysis of members with chronic diseases and comparing costs and utilization for members that receive the recommended preventive care services vs. those who did not receive the services
- Create cost/bundled payment for episodes of care for reimbursement of Accountable Care Organizations or Medical Homes
- Provide a comparison by facility or provider when evaluating costs and / or quality of care

The tables below provide an example of the pneumonia episode of care by status, which demonstrates the difference that status can play in an episode of care with cost and burden of illness.

Measures		Avg. BOI	Avg. Cost Per Episode	Measures		Avg. BOI	Avg. Cost Per Episode
Episode Groups	Status			Episode Groups	Status		
Pneumonia	1	.2033	\$1,553.28	Pneumonia	5	1.7228	\$2,933.05
	2	.6010	\$1,886.38		6	4.9941	\$10,811.86
	3	1.3282	\$2,327.40		7	13.5426	\$34,807.27
	4	1.8512	\$2,651.07				
Total		.7293	\$1,950.32	Total		4.8518	\$10,967.40

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About CareAdvantage, Inc

CareAdvantage, Inc. (CAI) provides healthcare management, information technology and consulting services to health plans, employers, national consulting firms, hospital systems, organized labor, state and local governments, providers and other purchaser groups. The management and consulting services include care management program enhancement services, operational assessments, executive and clinical management services, and training programs.

CAI's integrated solutions incorporate data warehousing, data mining and analytics, risk stratification and predictive modeling. CAI has been utilizing the Clinical Risk Group (CRG) classification methodology for nine years, contributing to its evolution and development. This experience has been leveraged to develop and advance CAI's predictive modeling and decision support tools, which include:

- RPNavigator - Population health and network management, including case mix and severity adjusted
- RPN³ - Advanced data mining using on-line analytics processing (OLAP) technology
- RPN APR-DRGs - Facility case mix and severity adjusted performance evaluation and quality benchmarking
- Profile Reports - Standardized, detailed reports providing many views of data by cost, utilization

These tools, in concert with underlying algorithms from 3M Health Information Systems, may be used on an enterprise wide basis to accomplish any or all of the following functions:

- Predictive Modeling to Facilitate Data Transparency and Actionable Intervention Strategies
- Implementation of Cost Containment and Quality Enhancing Initiatives
- Medical, Network, and Benefit Management Decision Support
- Evaluation of Care Management (CM) Programs and Identification of CM Opportunities
- Case Mix and Severity Adjusted Analysis of Provider and Vendor Performance
- Risk Stratification to Quantify Disease Burden and Trends in Cost and Care
- APRs Risk Stratification used to evaluate performance and profile quality of care within the

The CAI team consists of former health plan executives, senior medical directors and care management operations directors, as well as experts in clinical data analysis and information technology. Beginning with implementation and throughout the process, CAI assigns expert staff from each practice area to support your organization from a technical, clinical, and data analytical perspective.

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