



NORTHWEST OHIO ACCOUNTABLE CARE ORGANIZATION



Northwest Ohio ACO

NEWSLETTER

Welcome to the first edition of the Northwest Ohio ACO Newsletter. The Northwest Ohio ACO is a joint venture between the Toledo Clinic (TCI) and The University of Toledo Physicians (UTP). NW Ohio ACO services over 11,000 Medicare traditional patients in its contract with the Centers for Medicare and Medicaid Services (CMS). In these bi-monthly newsletters we'll provide information from the ACOs board of directors' meetings, a report from the Executive Director of the ACO, Greg Hawkins and other helpful information regarding the activities of the ACO.

Executive Director's Report

BENEFICIARY COMMUNICATION

Notifications to the approximately 2,000 new beneficiaries assigned to NW Ohio ACO in the first quarter were mailed on June 24, to UTP assigned beneficiaries and were mailed the following week to TCI beneficiaries. Each quarter, new beneficiaries must be notified of their physician's participation in the Medicare Shared Savings Program and of the ACO's intent to access beneficiary claims information. The first quarter mailing process was the same as that utilized in the initial beneficiary notification in February and includes a notification to ACO physicians.

ACO STAFFING

In late July, NW Ohio ACO formally offered the position of Lead Care Coordinator to Jessica Miller, RN. Thanks to Drs. Lynn and Jacob for their participation in the interview process. Jessica began in her position on August 12th. Jessica's initial priorities will be evaluating options to address emergency room utilization, monitoring the ACO's adherence to CMS quality measures and implementing the ACO's contract with Senior Independence.

CLAIMS DATA AND DATA ANALYTICS VENDOR

Implementation efforts for the Advisory Board's Population Risk Management (PRM) and Care Registry (CCR) products are progressing well. We anticipate initial access to both products in late August. In the meantime analysis and reporting on the claims information received in May and June continues. We have identified those skilled nursing facilities (SNFs) most frequently utilized by ACO beneficiaries. Meetings have been scheduled with the administration and medical leadership of the

top 8 utilized SNFs. The objective of these meetings is to discuss and gauge the leadership's willingness to collaborate with NW Ohio ACO in improving the quality for and eliminating unnecessary utilization of ACO beneficiaries.

Using claims information obtained from CMS, ACO beneficiaries with the highest use of emergency (ED) and inpatient services have been identified. Several options are being evaluating and implemented to address and inform ACO physicians of this data. These include, creating and distributing a list of high use beneficiaries by physician, which occurred in late July.

ACO Signs Care Management Agreement with Senior Independence

In late July, the Northwest Ohio ACO signed a formal care management agreement with Senior Independence. Under the terms of the agreement, Senior Independence will offer its "Home to Stay" program for all ACO patients discharged from a hospital. The Home to Stay program includes contact with patients within 24 hours of discharge, in home visits by RNs and follow up phone calls to patients. The program is expected to be implemented in September. Further communication regarding the program and the ACOs relationship with Senior Independence will be forthcoming.

Minutes of the May 28th Meeting of the Northwest Ohio ACO Board of Directors

Greg Hawkins provided the Executive Director's report.

- The beneficiary file for the 1st quarter of 2013 was received from CMS. The file provides beneficiaries attributed to Northwest Ohio ACO based on activity for the period April 1, 2012 – March 31, 2013. New beneficiaries must be notified of their physician's participation in the Medicare Shared Savings Program and of the ACO's intent to access beneficiary claims information.
- Implementation efforts continue for the Advisory Board's Population Risk Management (PRM) and Care Registry (CCR) products. The data use agreement allowing the Advisory Board to receive claims data from CMS was approved last week.

Dr. Brickman updated the Board on the processes for ACO patients presenting at the UTMC emergency department (ED). Since May 1, the UTMC ED has been contacting the primary care physicians of ACO patients presenting in the UTMC emergency department. To date 132 ACO patients have been seen in the UTMC ED.

Greg Hawkins presented the first quarter beneficiary update. The ACO had a net increase of 182 attributed beneficiaries; 1,995 new beneficiaries and 1,813 beneficiaries no longer attributed to the ACO. 18% of the beneficiaries were assigned via "step 2" methodology in that they are receiving primary care services from a non-primary care physician. The notification process for new beneficiaries is the same as for our original beneficiary count.

Greg Hawkins provided a report on the summary utilization data for the first quarter. The utilization rates for the 12 months ended March 31, 2013 are lower than the preliminary utilization, but still higher in most categories than the cohort of ACO's that started January 1, 2013.

Dr. Jacob reviewed a proposal from Senior Independence, to provide care management services for ACO beneficiaries. Senior Independence would meet with all ACO patients prior to and following hospital discharge. The goals of partnering with Senior Independence or another similar organization are: (1) to reduce avoidable hospitalizations and emergency department visits; (2) decrease the overall cost of providing services to patients through the use of evidence based patient centered practices; and (3) increase the overall well-being of patients through education on prevention and management of chronic diseases. Senior Independence's transition to home program would include:

- Fall risk assessment
- Medication reconciliation and education
- Education on disease process, signs, and symptoms
- Schedule all post discharge follow-up appointments
- Establishment of personal health record
- Establishment of personal emergency plan – when to call the doctor

The Board expressed interest in further evaluation of Senior Independence or other home health organizations that are able to provide the same services in order to develop a preferred relationship for ACO patients.