CONFIDENTIAL

azara 2024

azara
USER CONFERENCE
APR 30–MAY 2
BOSTON, MA
2024

Azara Product Update

Wednesday, May 1, 2024

Greg Augustine

Chief Product & Technology Officer

2024 Agenda

Azara Solutions and Vision

UDS and UDS+ for 2024

HEDIS 2024

EHR Plug-In

Azara Care Connect (ACC)

Azara Cost & Utilization (ACU)

Azara Patient Outreach (APO)

Landing Page & Live Chat

A Few Measure Enhancements

- eCQM Certification
- Chronic Kidney Disease
- Numerator Only Filtering

More Fun Stuff

- Dashboard Enhancements
- Export to CSV
- Dynamic Baselines

New Bulk Admin Functions

2024 & Beyond

Product & Engineering Leadership

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PATRICK CROWLEY
EVP of Engineering

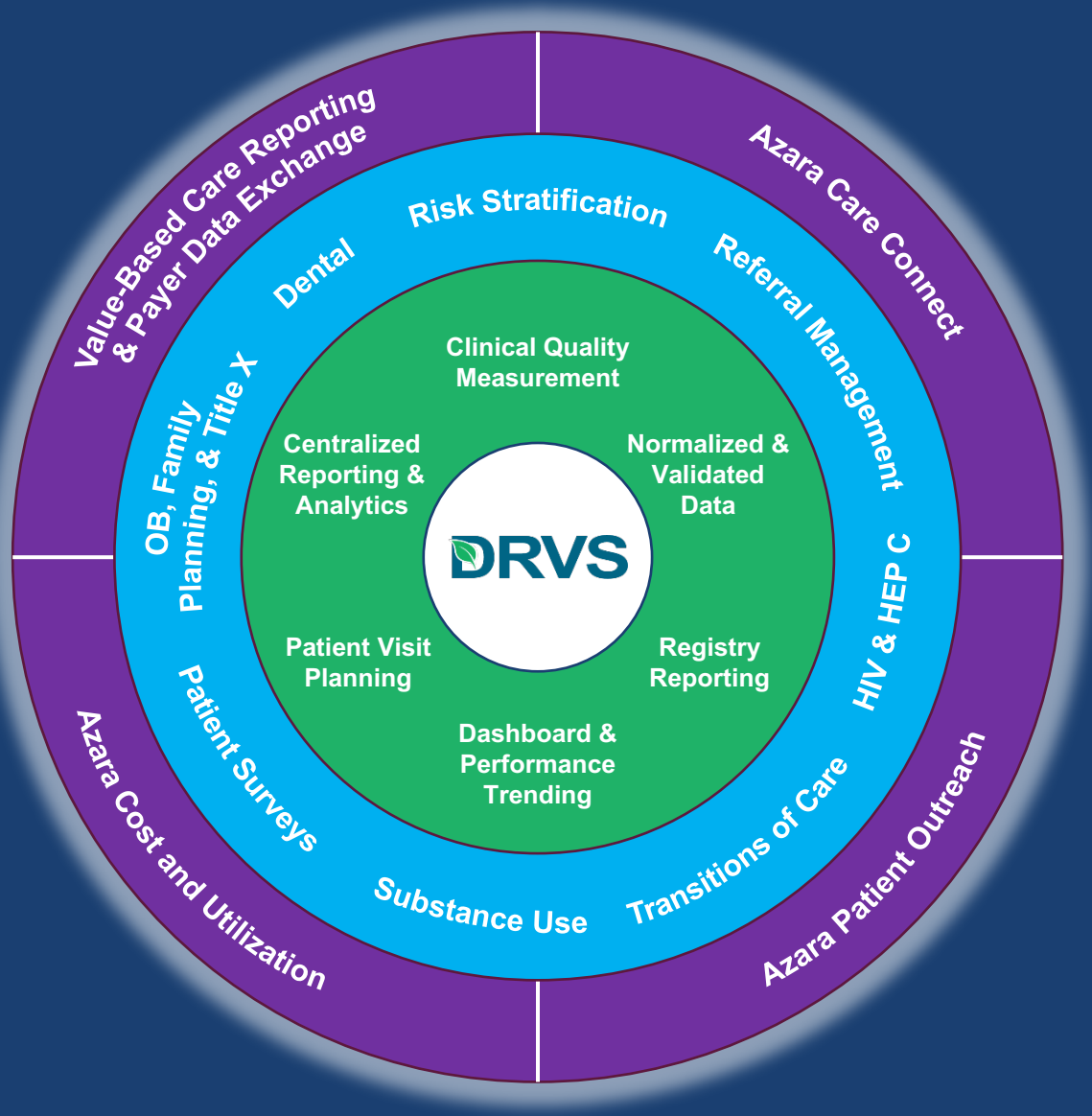
GREG WATSON VP of Engineering

PHIL PARKER
SVP Client Analytics

MATT FUSAN
SVP, Product & Strategy

MIKE RAPAWY
VP, Product Management

Azara Solution Suite



The Patient Care Continuum

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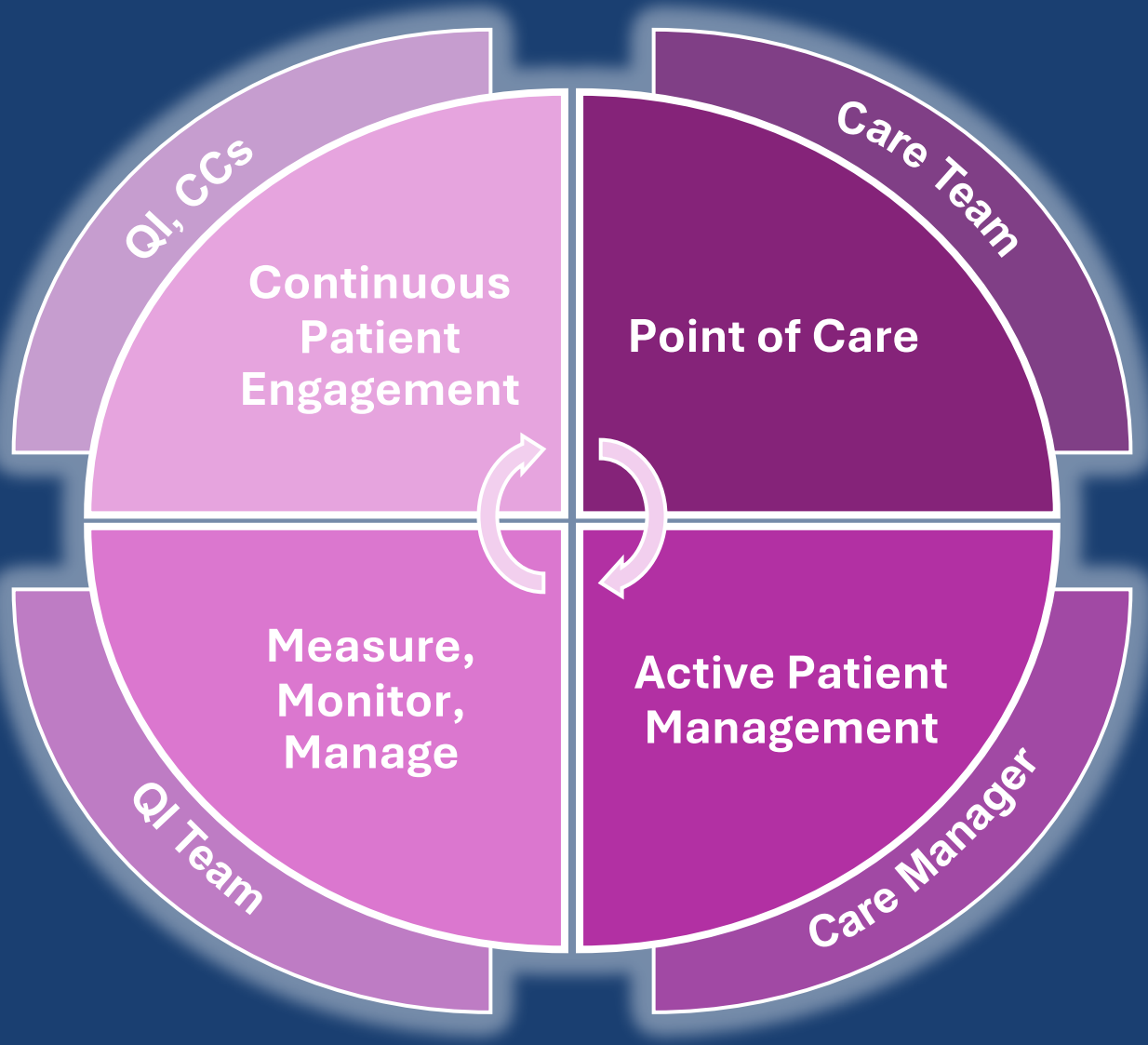

Tools for Every Team

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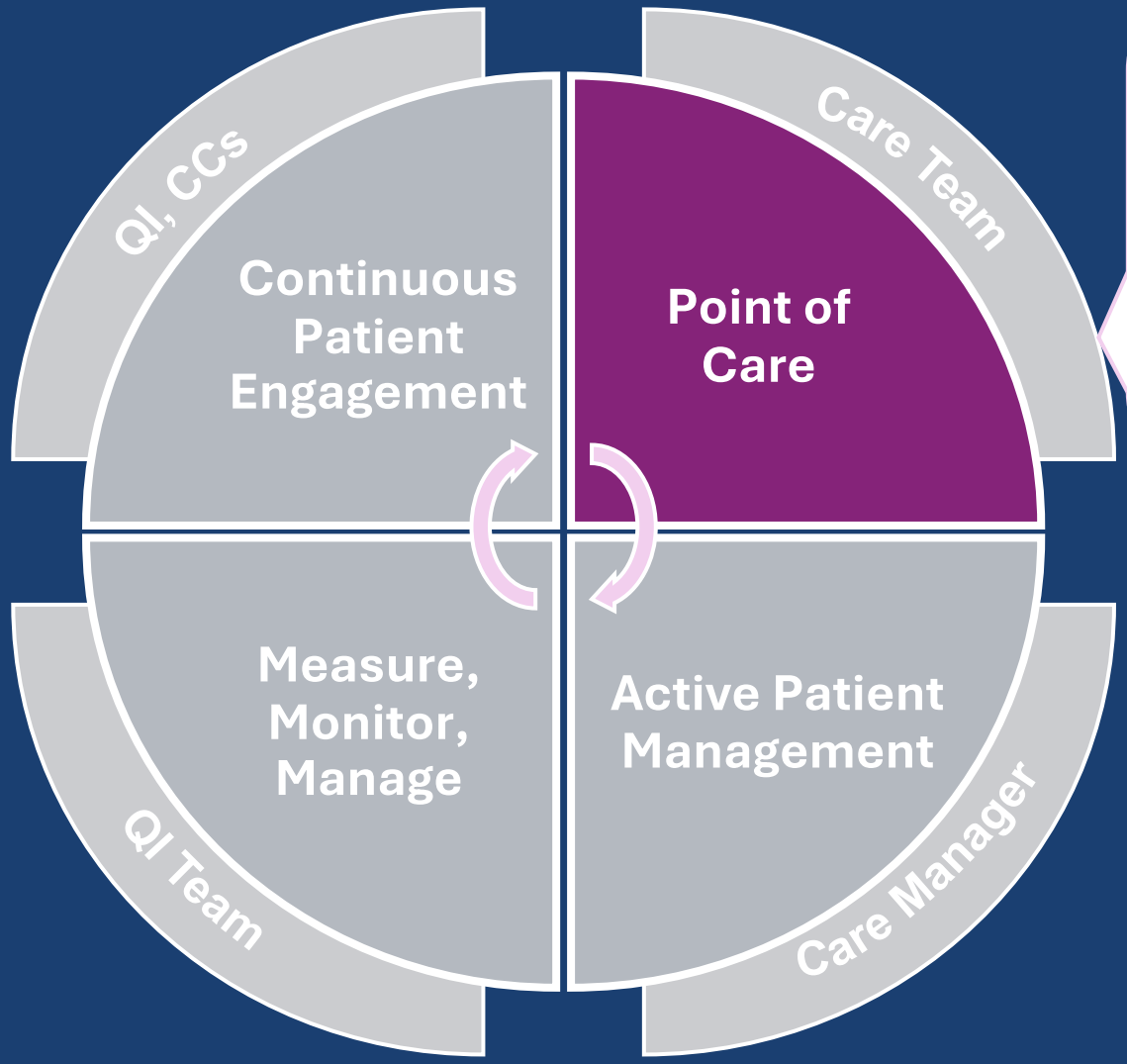

DRVS
Alerts for overdue or abnormal labs / screenings on the PVP

EHR Plug In
Quick access at the point of care from within your EHR

Tools for Every Team

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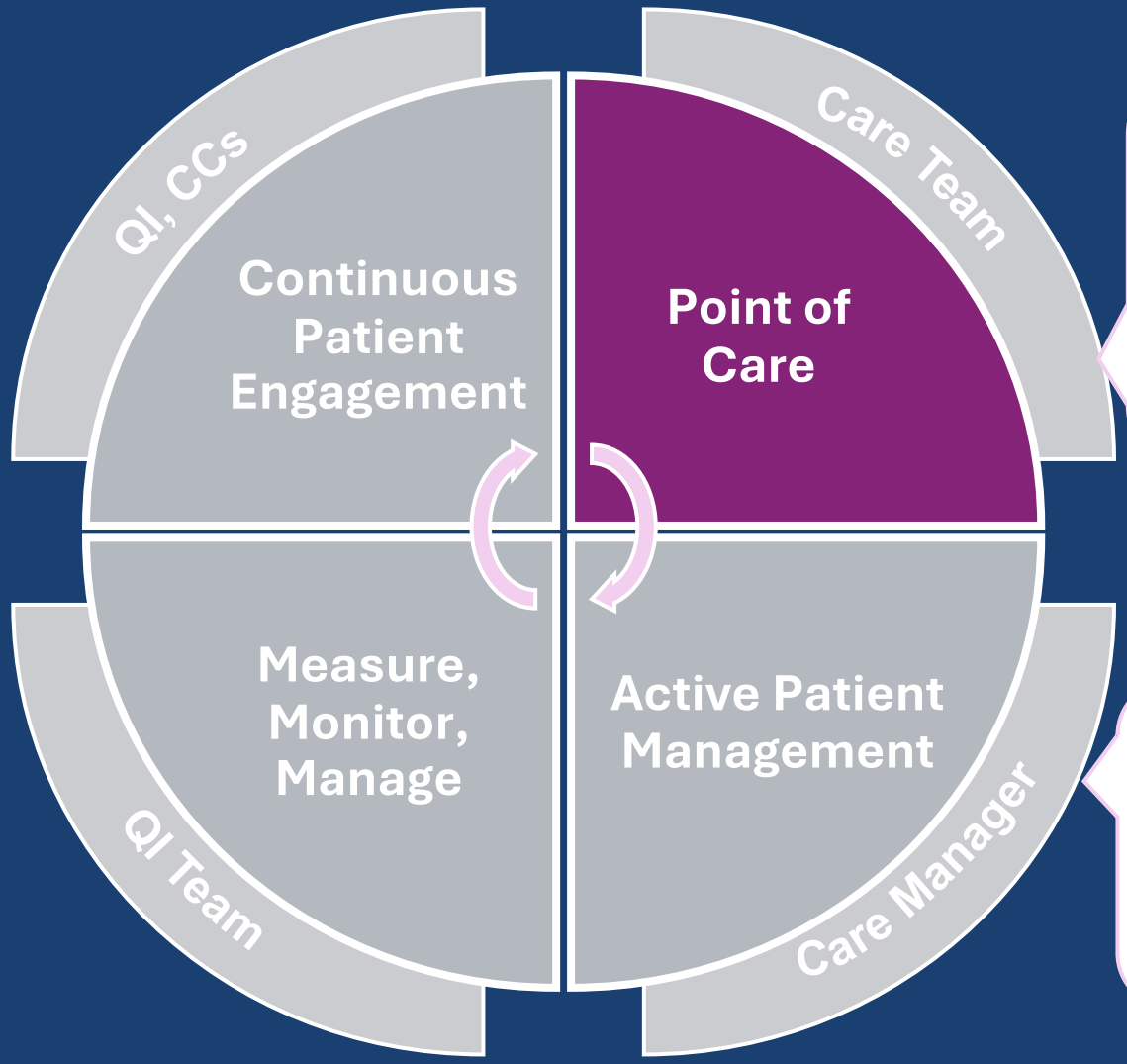

DRVS

Alerts for overdue or abnormal labs / screenings on the PVP

EHR Plug In

Quick access at the point of care from within your EHR

ACC-CM

Identify and actively manage high-risk patients and coordinate services

Tools for Every Team

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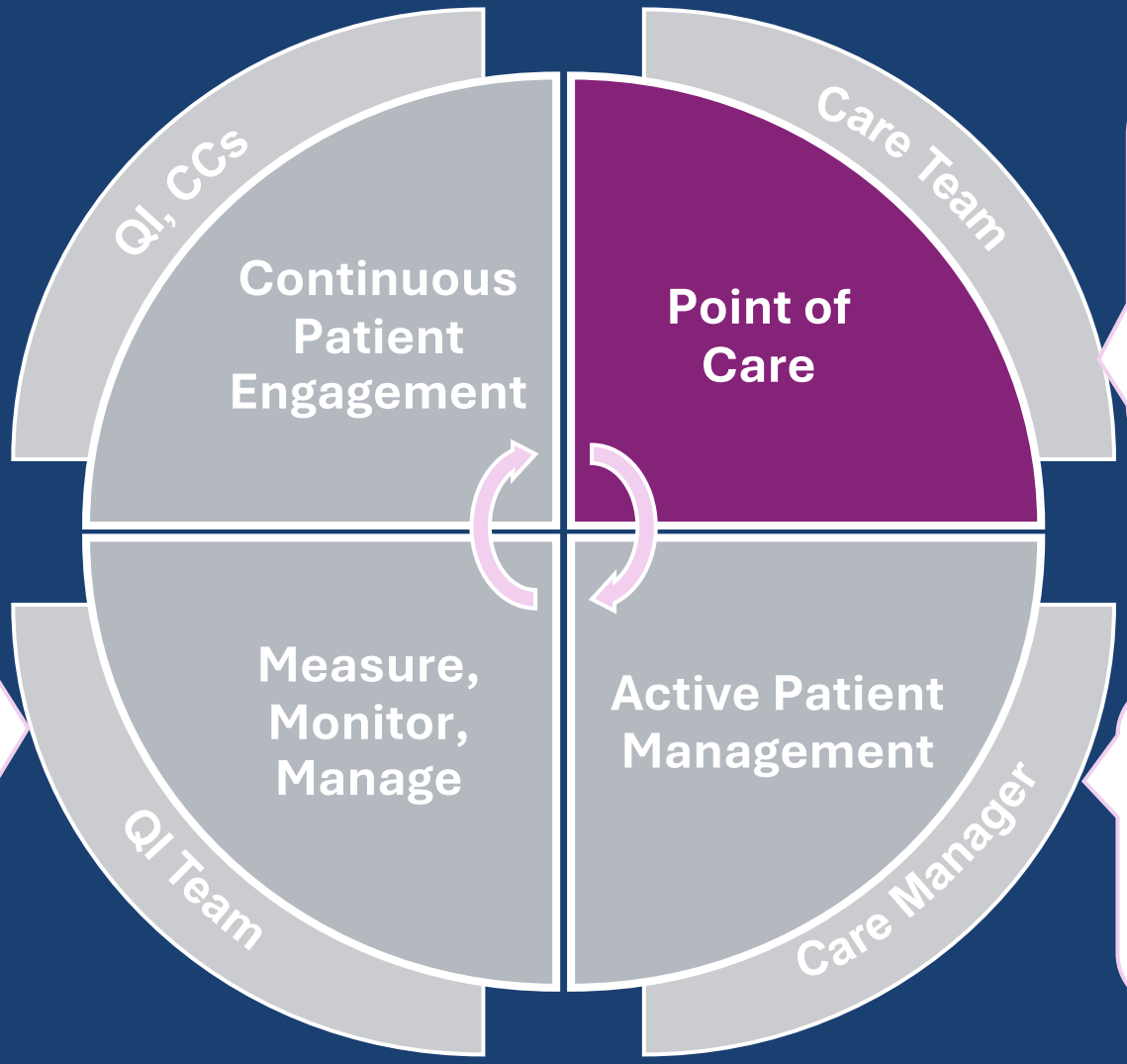

DRVS

Alerts for overdue or abnormal labs / screenings on the PVP

EHR Plug In

Quick access at the point of care from within your EHR

DRVS

Proactively identify care gaps across your entire panel of patients

Provide feedback to team on quality of care

ACC-CM

Identify and actively manage high-risk patients and coordinate services

Tools for Every Team

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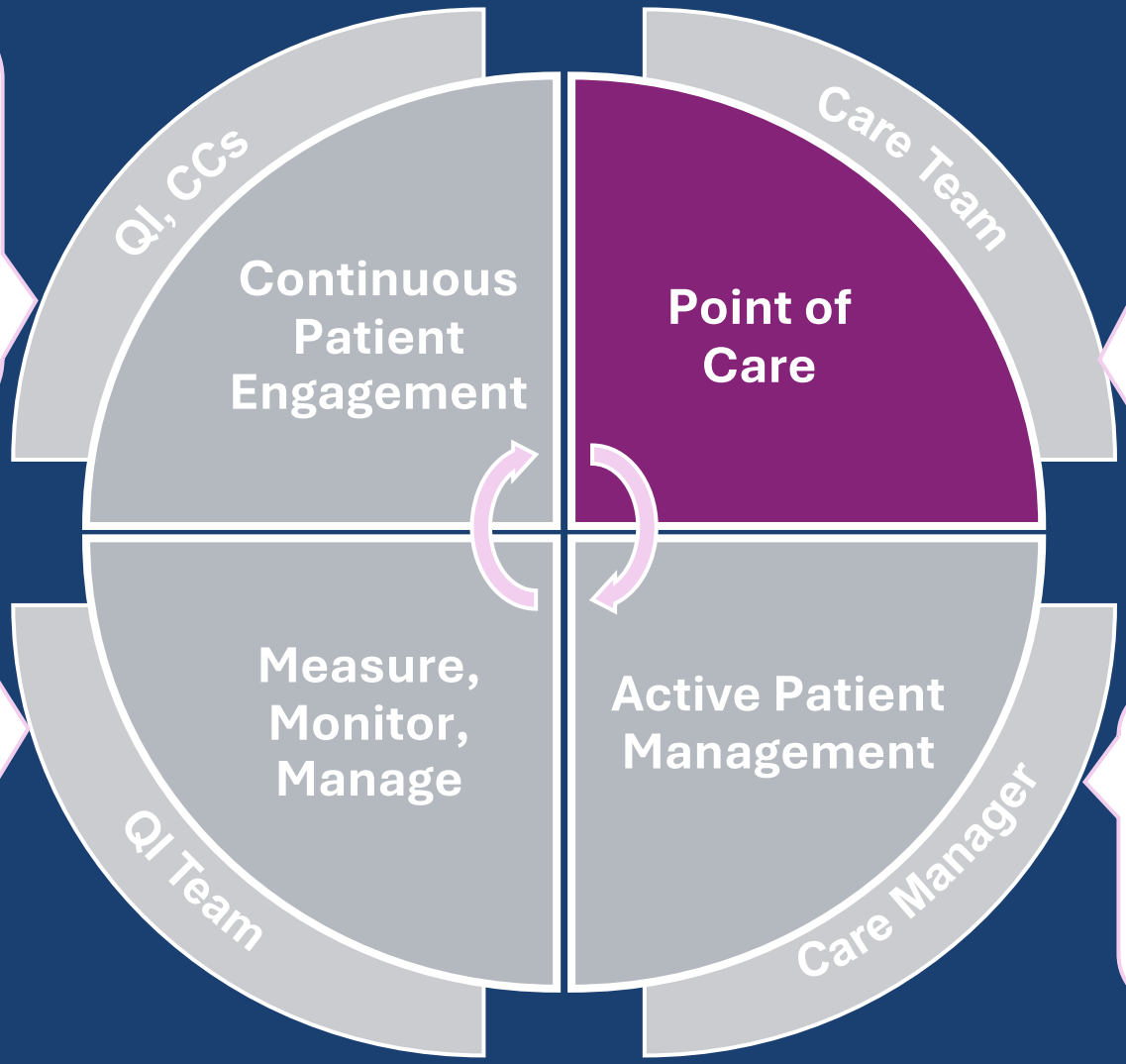
ACC

Track manual outreach attempts to specific patients

APO

"Set It and Forget It" automated outreach to patients with care gaps



DRVS

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UDS 2024

UDS 2024 Measures Are Out !!

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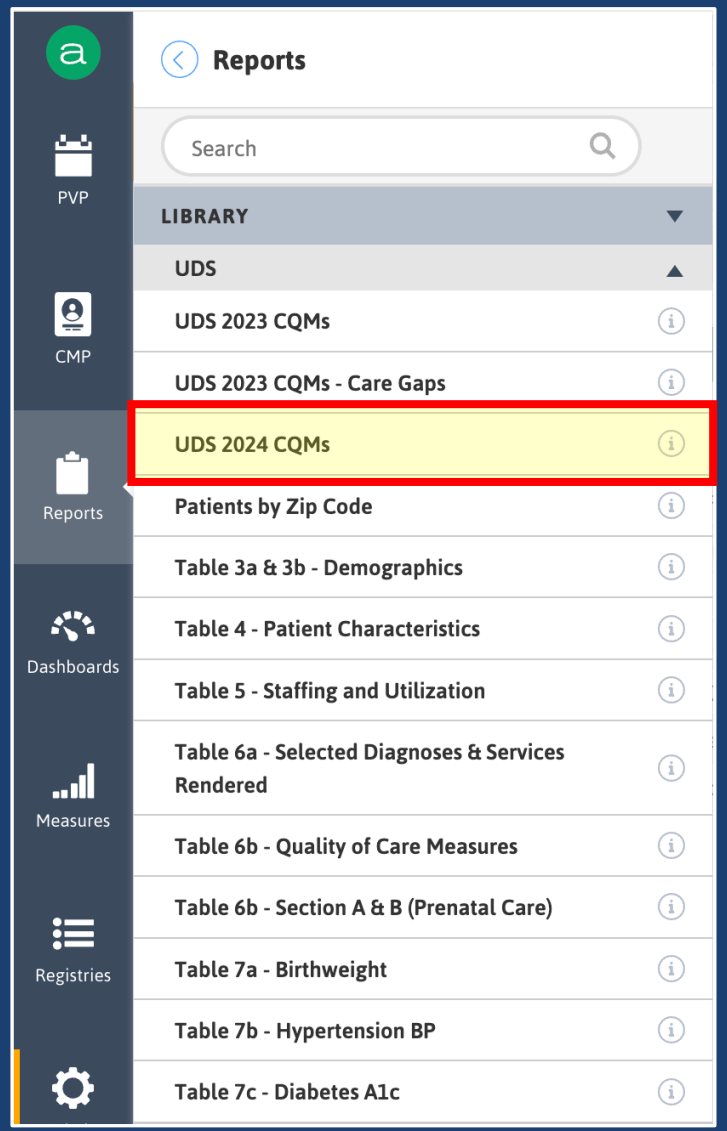

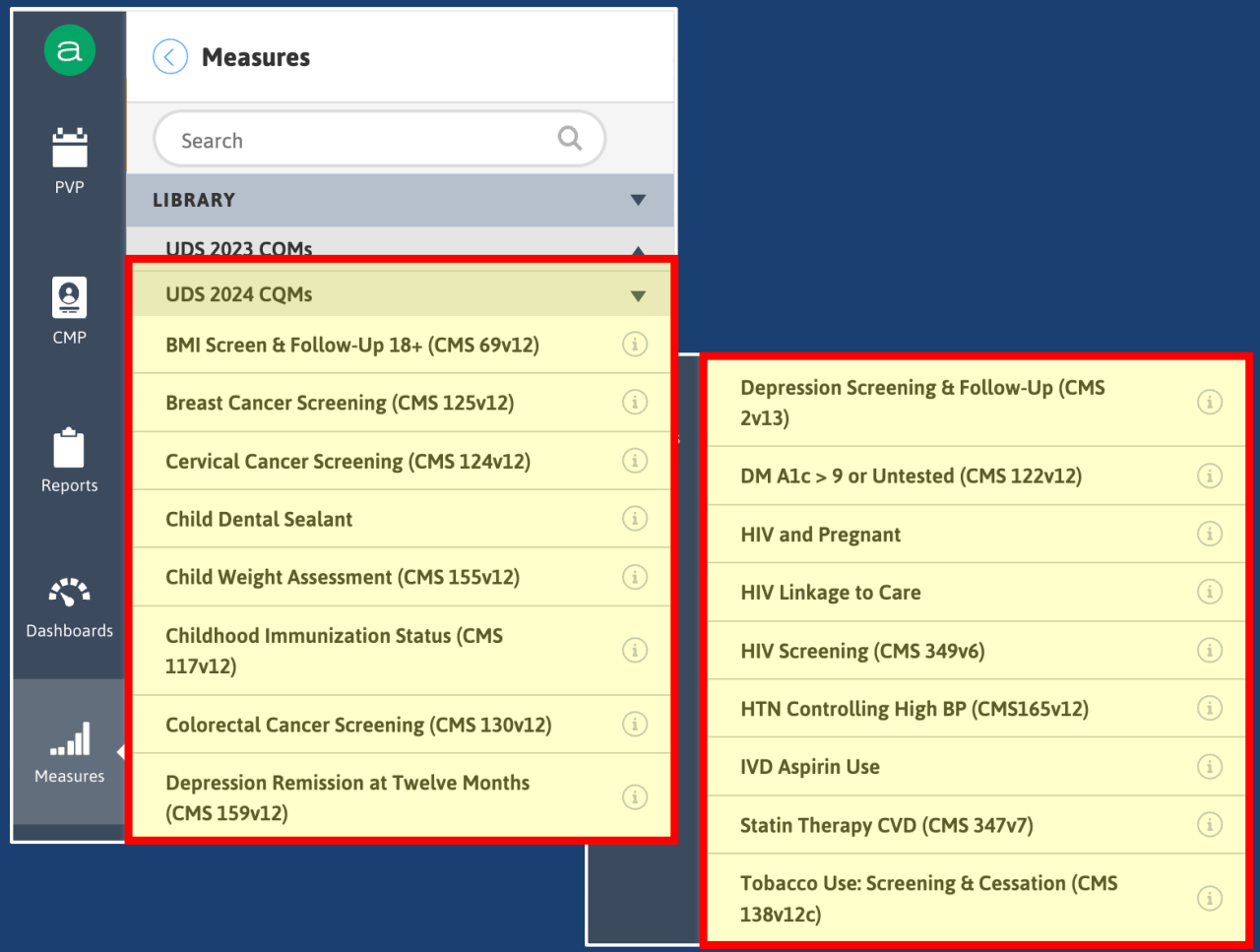

Notable Changes and Impacts

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- Screening for Depression and Follow-Up Plan
  - Depression exclusion was removed
- Tobacco Use: Screening and Cessation
  - Age range change from 18+ to 12+
- Statin Therapy for the Prevention and Treatment of Cardiovascular Disease
  - New ASCVD risk score

New Appendix E Question

- Beginning in 2024, BPHC is asking centers to provide the number of health center patients screened for family planning needs, including contraceptive methods, using a standardized screener during the calendar year
- Azara's Plan
  - Anticipate further detail to be provided when manual is released
  - Next steps, decisions and timelines will be dependent on what we learn at that time
  - Health centers that are partners with Upstream USA or have the Upstream Family Planning module will be well positioned to report on this

YTD or Current Year Progression

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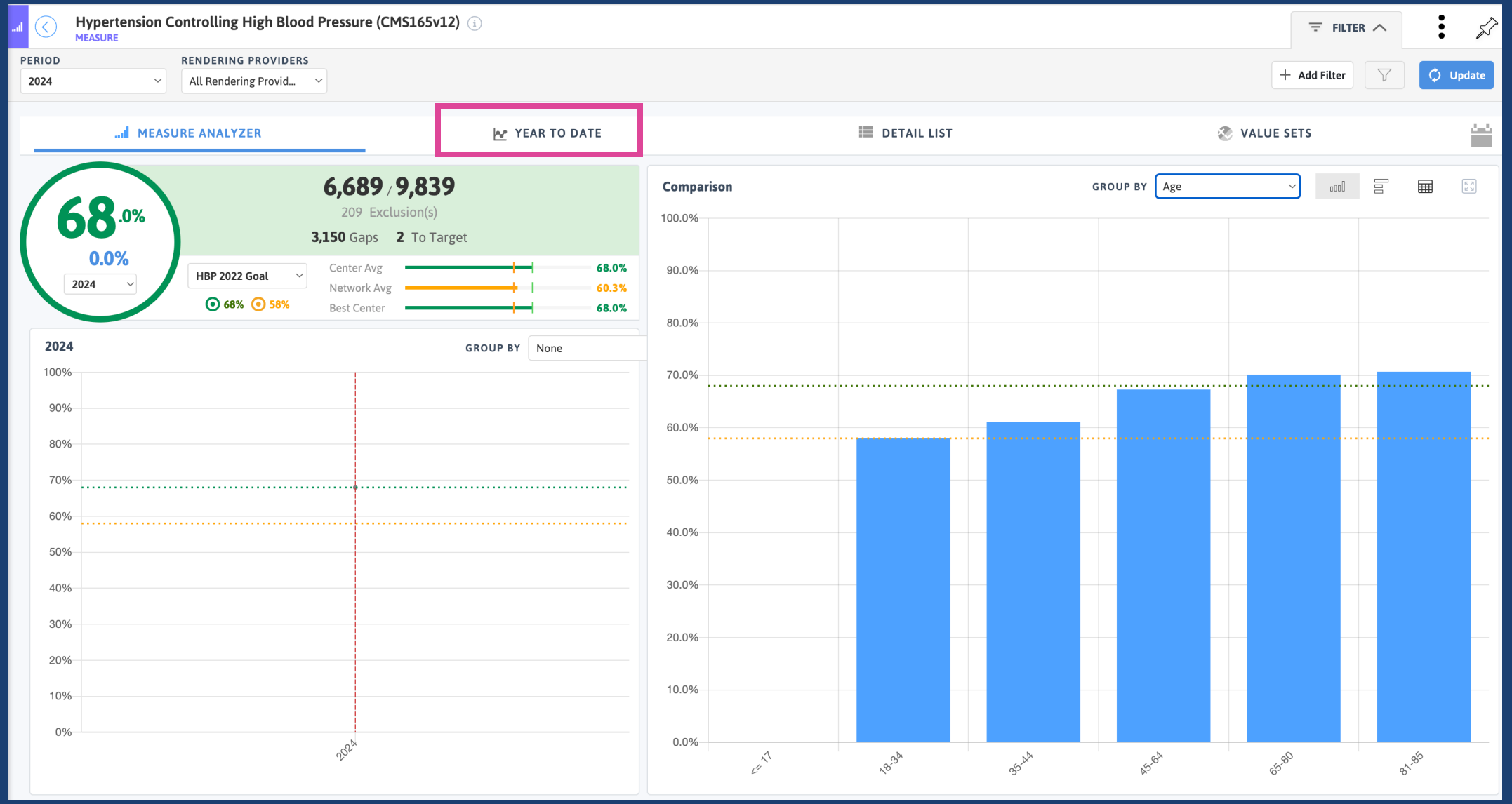

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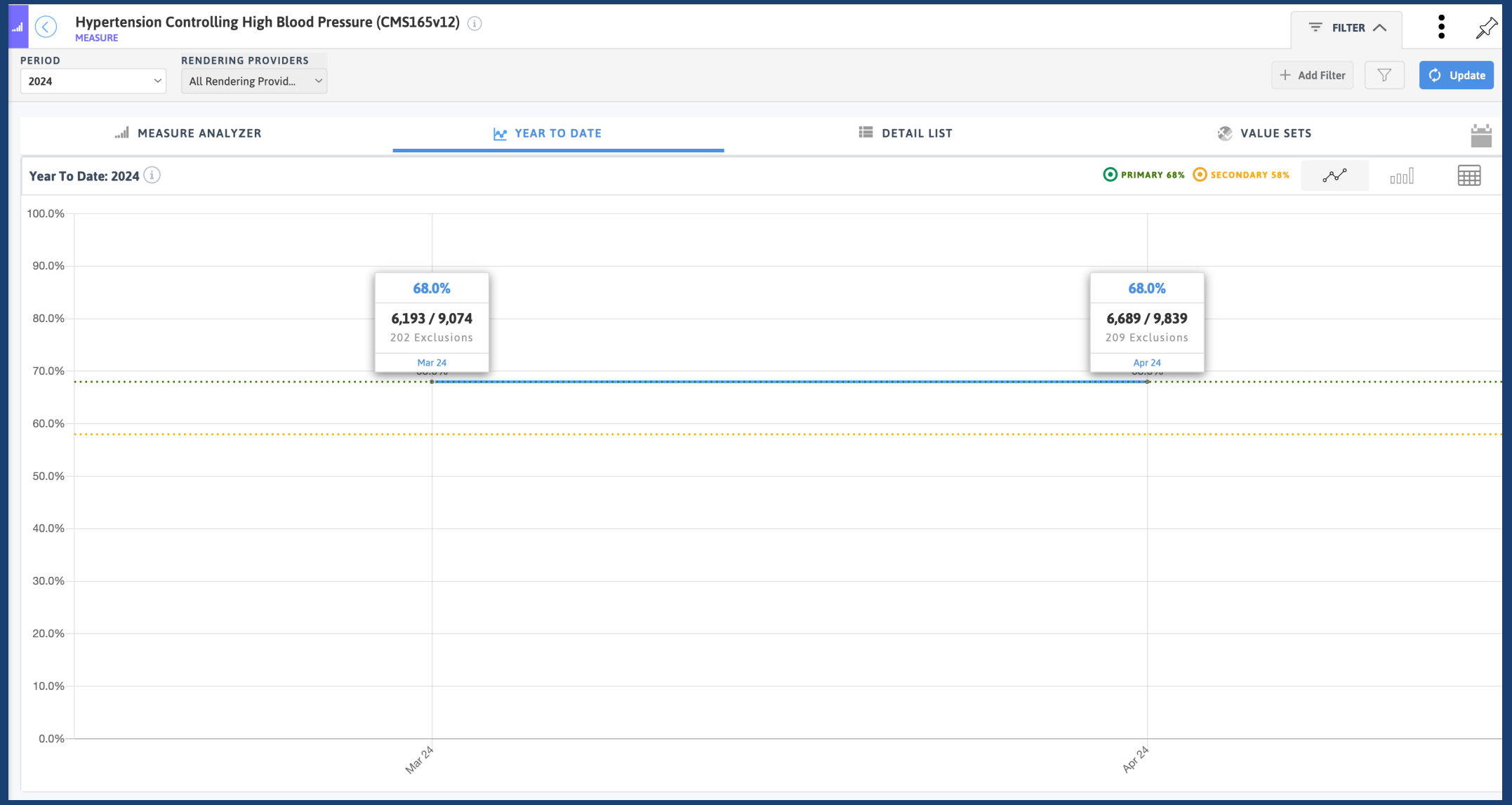

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UDS+

What is UDS+

- UDS+ is the submission of (de-identified) patient level data via Bulk FHIR
- The scope of UDS+ for 2023 includes
  - The entire universe of patients (unduplicated and not a subset)
  - Demographic Tables
    - Patients by Zip Code (PbZC) Table
    - Table 3a: Patients by Age and by Sex Assigned at Birth
    - Table 3b: Demographic Characteristics
    - Table 4: Selected Patient Characteristics
  - Clinical Tables
    - Table 6a: Selected Diagnoses and Services Rendered
    - A subset of the Clinical Quality Measures on Tables 6b and 7
      - Cervical Cancer Screening, Colorectal Cancer Screening, Controlling High Blood Pressure, Diabetes A1c > 9 or Untested)

Azara's Involvement with UDS+

- Azara is a part of the UDS Test Cooperative (UTC) and has been actively working on the Bulk FHIR infrastructure required since late 2022
- We actively meet - both virtually and in person - with project leadership from HRSA, the ONC and their consultants
- We attended and actively participated in HRSA's first HL7 FHIR Connectathon last Spring
- We were the first vendor to complete synthetic testing last October
- We piloted the first test submission into the UDS+ production environment
- Most recently we were the first vendor to complete successful 'production' UDS+ data submssions

The Lastest from HRSA / BPHC

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- Submission of calendar year 2023 data was / is ***voluntary***
  - Aggregated data submitted via the EHB was the report of record
- Submissions of 2023 data are being complete in three (3) cohorts
  - The first cohort of data was submitted to HRSA in March/April
  - The second cohort is slated for completion in June
- For 2024
  - Aggregated data submitted via the EHB will *continue* to be the report of record
  - There will be a *required* UDS+ submission but that requirement has not yet been defined and is not expected to be announced until the Fall

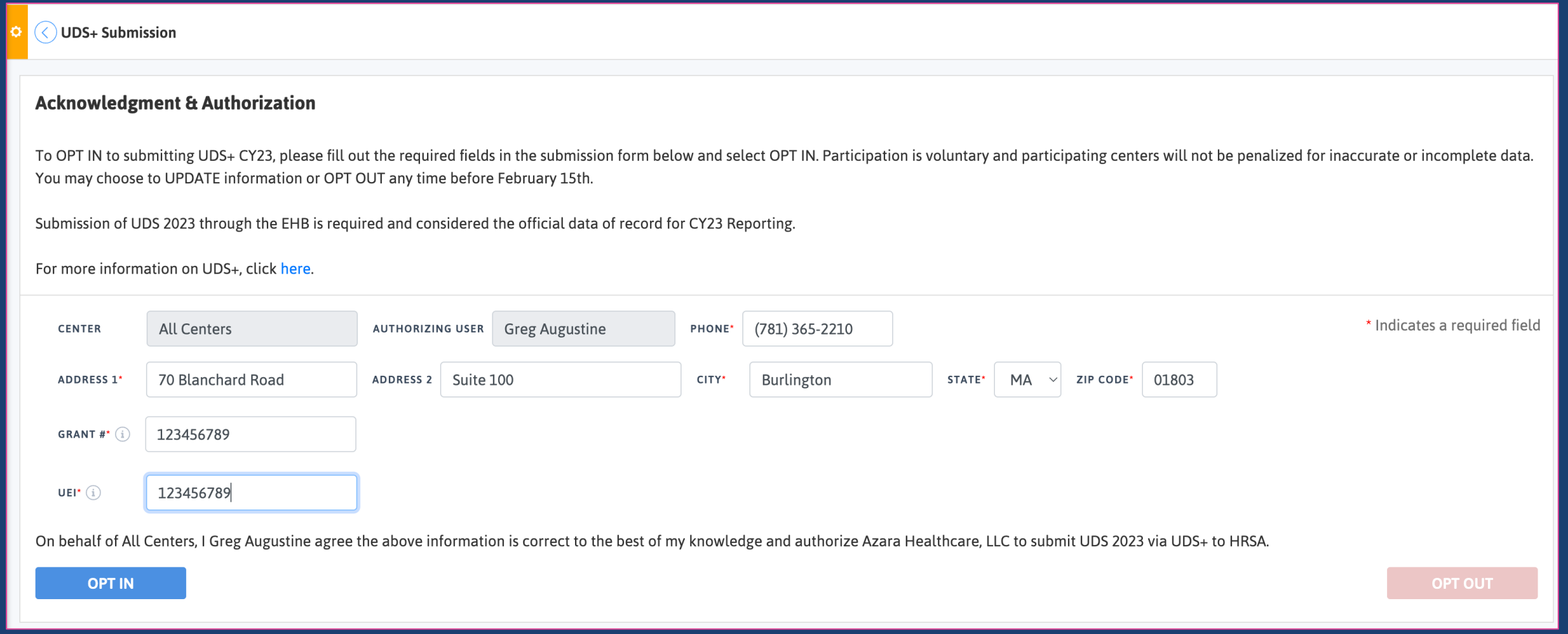
HRSA UDS+ Stats

- The first wave or cohort of UDS+ submissions was completed April 5th
- Five (5) vendors successfully passed HRSA's testing milestones and were allowed to participate in Cohort 1 submissions
  - Three (3) of these vendors submitted data
- Data was submitted for 79 FQHCs and 5 Look-Alikes
  - Azara submitted data for 55 of these organizations

Voluntary Submission of 2023 Data

- A UDS+ Administration screen has been developed to capture whether or not your center wants to participate in 2023 voluntary submission
  - This screen will be repurposed in 2024 to identify that your center wants to use Azara DRVS for submission and to indicate when your center is ready for submission
- UDS+ Administration will be secured to a single authorized resource from your center
- All centers submitting voluntary data need to:
  - Sign an Authorization Form with Azara that allows us to send data on your behalf

Admin: UDS+ Submission Form



UDS+ Help in DRVS

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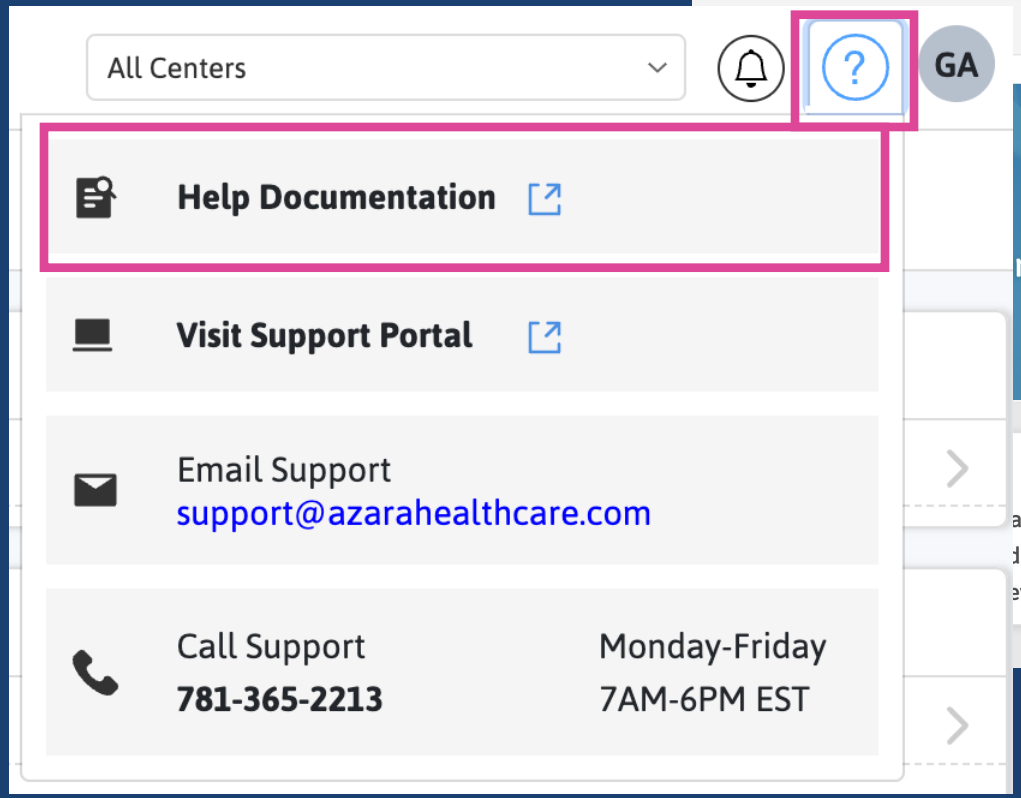

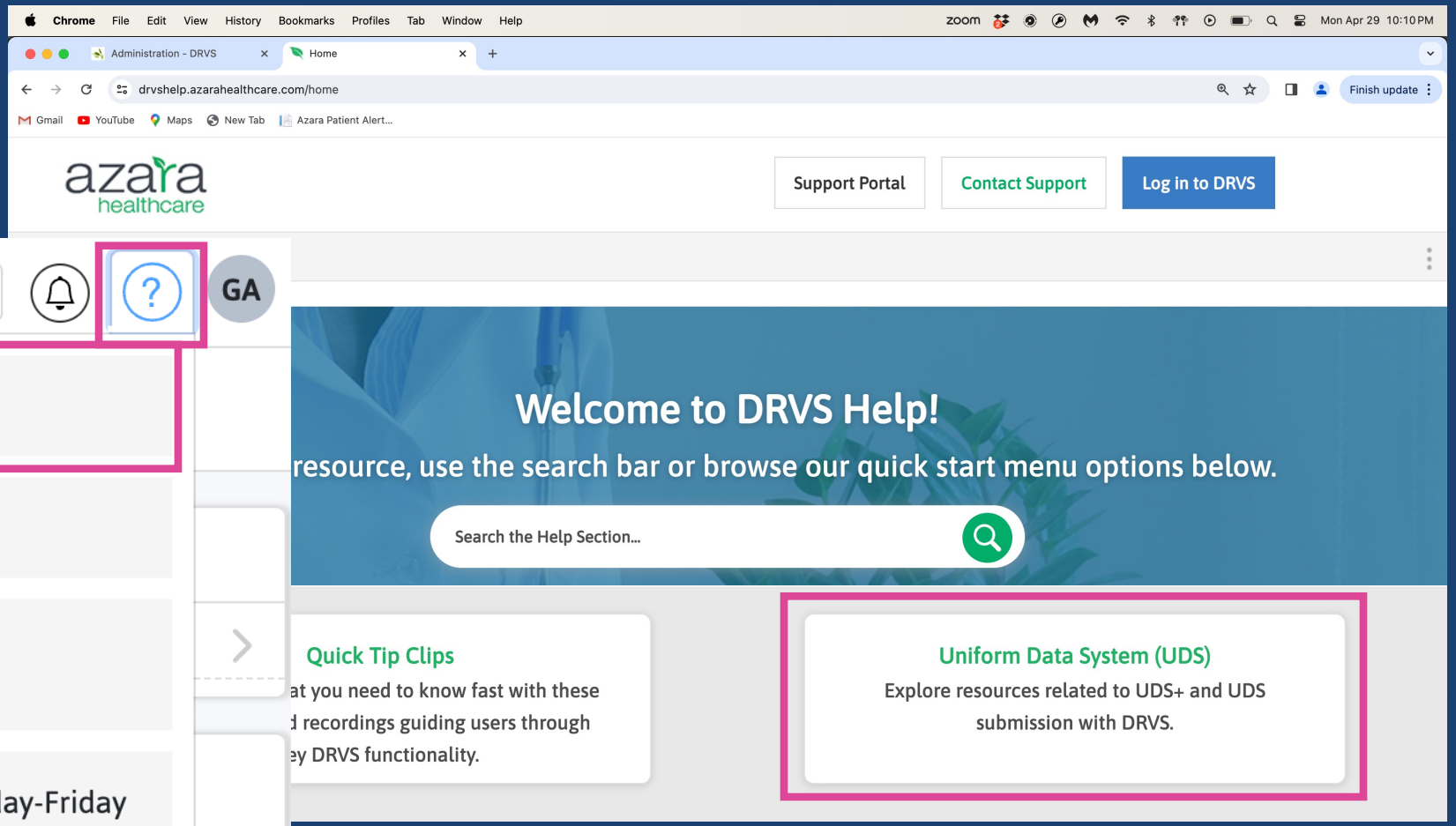

Challenges and Outstanding Issues

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- HRSA / BPHC informed us engagement (time & effort) spent post submission assisting with review and validation of your submitted data with their calculated results is ***voluntary***
- Currently HRSA / ONC is preparing to share aggregated results; they do not have a solution for sharing patient level behind their calculations
- How much clinical data does HRSA / ONC expect to get ?
  - Azara will be supplying data that is necessary to support the reports and quality measures identified in the UDS Manual
- HRSA / BPHC has initiated the development of systems and capabilities to calculate the UDS demographic reports and quality measure calculations
  - The first testing with ‘real world’ data will begin following receipt of CY ‘23 data that is part of the voluntary submission process

Challenges and Outstanding Issues

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- Handling situations where centers have multiple systems - e.g., separate systems for dental vs primary care
  - This is really more for centers who are not sending data from both systems to Azara
- The process, technically and otherwise, for sub-recipients is undefined
  - Centers who have sub-recipients as well as centers who are sub-recipients will not be candidates to participate in this round of voluntary UDS+ submission
- UDS+ submission of data for Grant Reports to support 330 grants under multiple funding authorities is optional for CY ’23
  - These are essentially the Grant Reports for 330g, 330h and 330i recipients
  - Azara is not supplying data to enable this reporting in CY ‘23

UDS+ Unique ID to MRN Crosswalk

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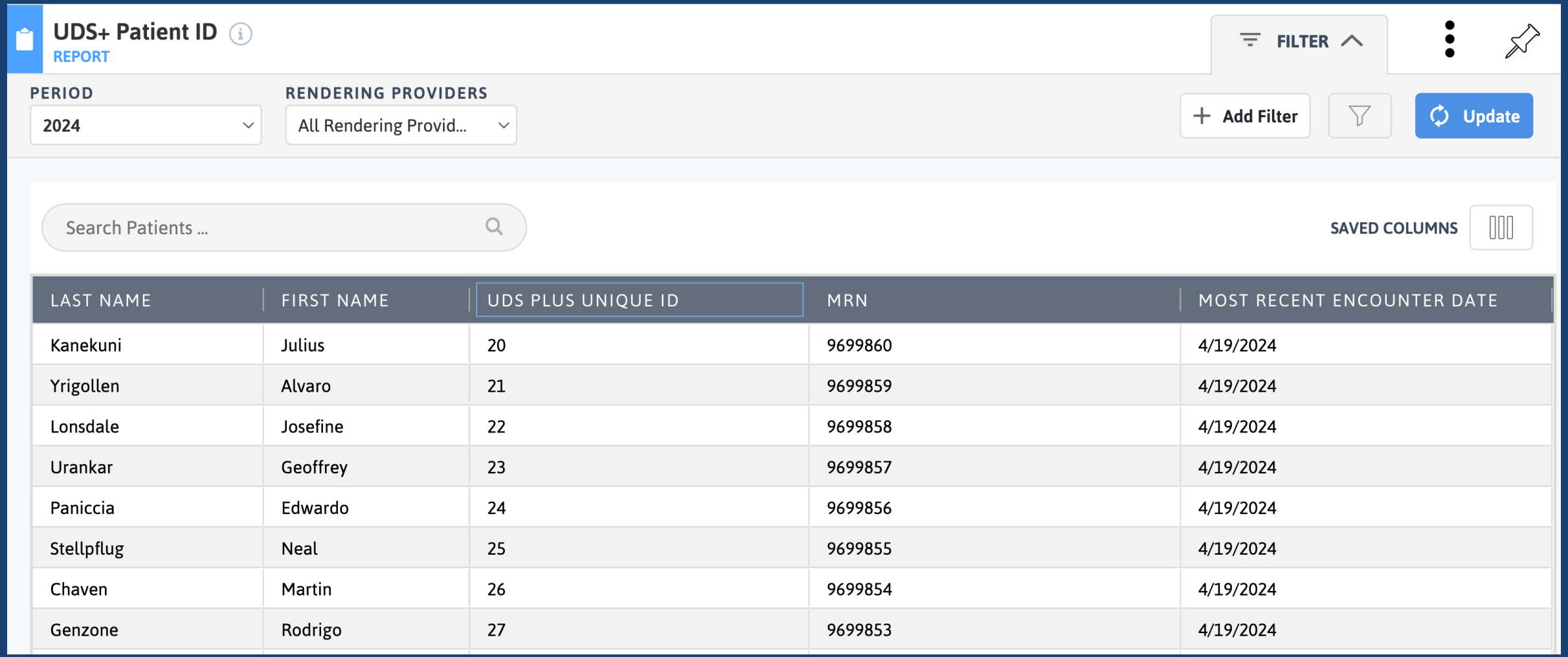

LAST NAME	FIRST NAME	UDS PLUS UNIQUE ID	MRN	MOST RECENT ENCOUNTER DATE
Kanekuni	Julius	20	9699860	4/19/2024
Yrigollen	Alvaro	21	9699859	4/19/2024
Lonsdale	Josefine	22	9699858	4/19/2024
Urankar	Geoffrey	23	9699857	4/19/2024
Paniccia	Edwardo	24	9699856	4/19/2024
Stellpflug	Neal	25	9699855	4/19/2024
Chaven	Martin	26	9699854	4/19/2024
Genzone	Rodrigo	27	9699853	4/19/2024

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HEDIS MY2024

HEDIS MY 2024

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- MY 2024 Recertification will be complete by the end of June
- We will have a total of 56 certified measures
- New measures added include:
  - AMR: Asthma Medication Ratio
  - APP: Use of First-Line Psychosocial Care for Children and Adolescents on Antipsychotics
  - FMC: Follow-Up After Emergency Department Visit for People With Multiple High-Risk Chronic Conditions
  - PDS-E: Postpartum Depression Screening and Follow-Up
  - PND-E: Prenatal Depression Screening and Follow-Up
  - PRS-E: Prenatal Immunization Status

HEDIS MY 2024

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- NCQA Changes for MY 2024 include
  - Retired: SPR, Spirometry Testing in the Assessment and Diagnosis of COPD
  - Replaced: HBD was replaced by GSD
    - HBD: Hemoglobin A1c (HbA1c) Control for Patients With Diabetes
    - GSD: Glycemic Status Assessment for Patients With Diabetes
- We are considering / investigating Allowable Adjustment measures to support CCBHC needs

HEDIS: Remember

azara 2024

- Health Plans / Payers
- Calculate and finalize prior year results into Q2
- Are just starting to provide gaps for CY 2024
- Typically upgrade and begin using new MY specs in the fall
  - CY ‘24 gaps provided are likely following MY ‘23 specs
- Often use retired measures in their contracts

Care Gap Reconciliation

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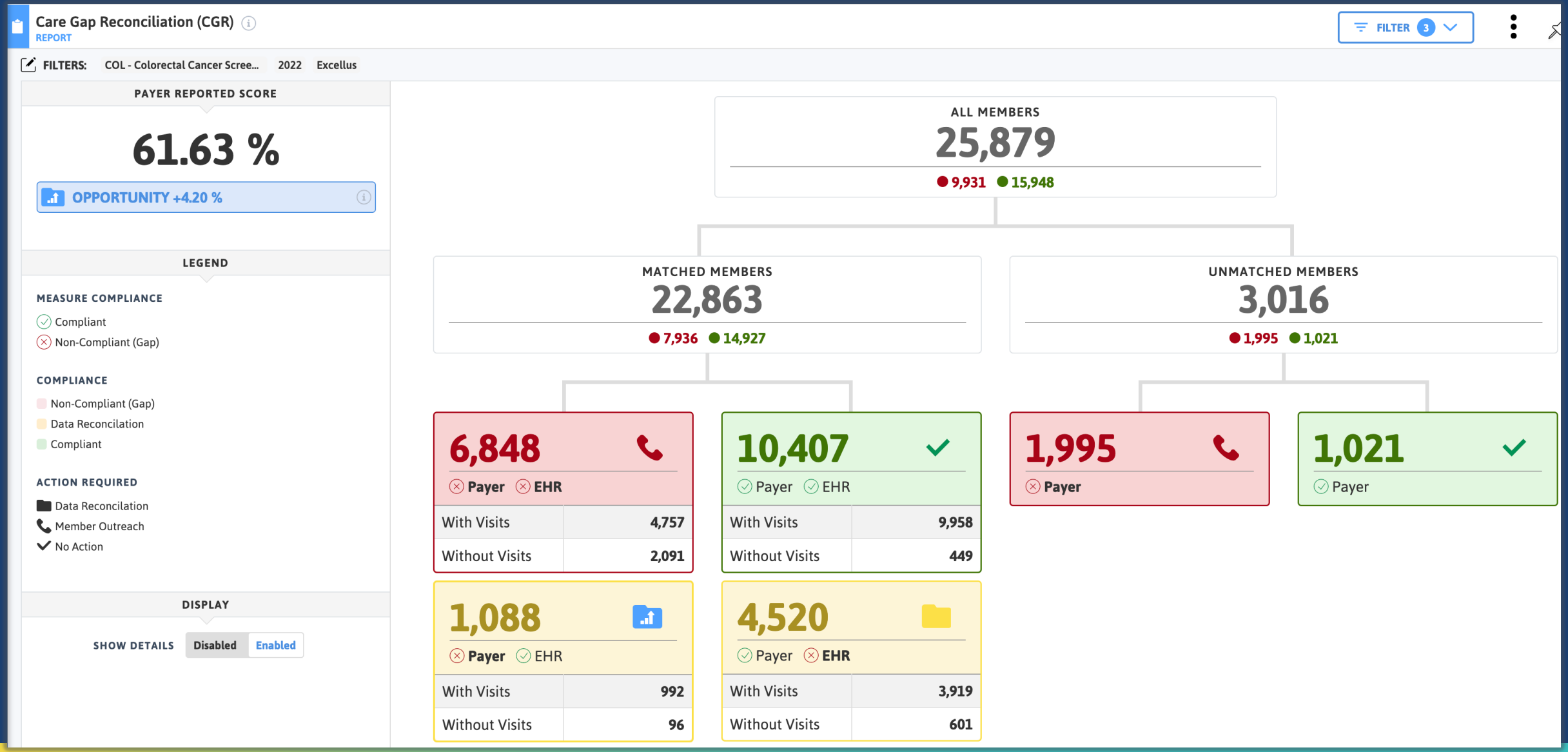

Attributed but Inactive Members

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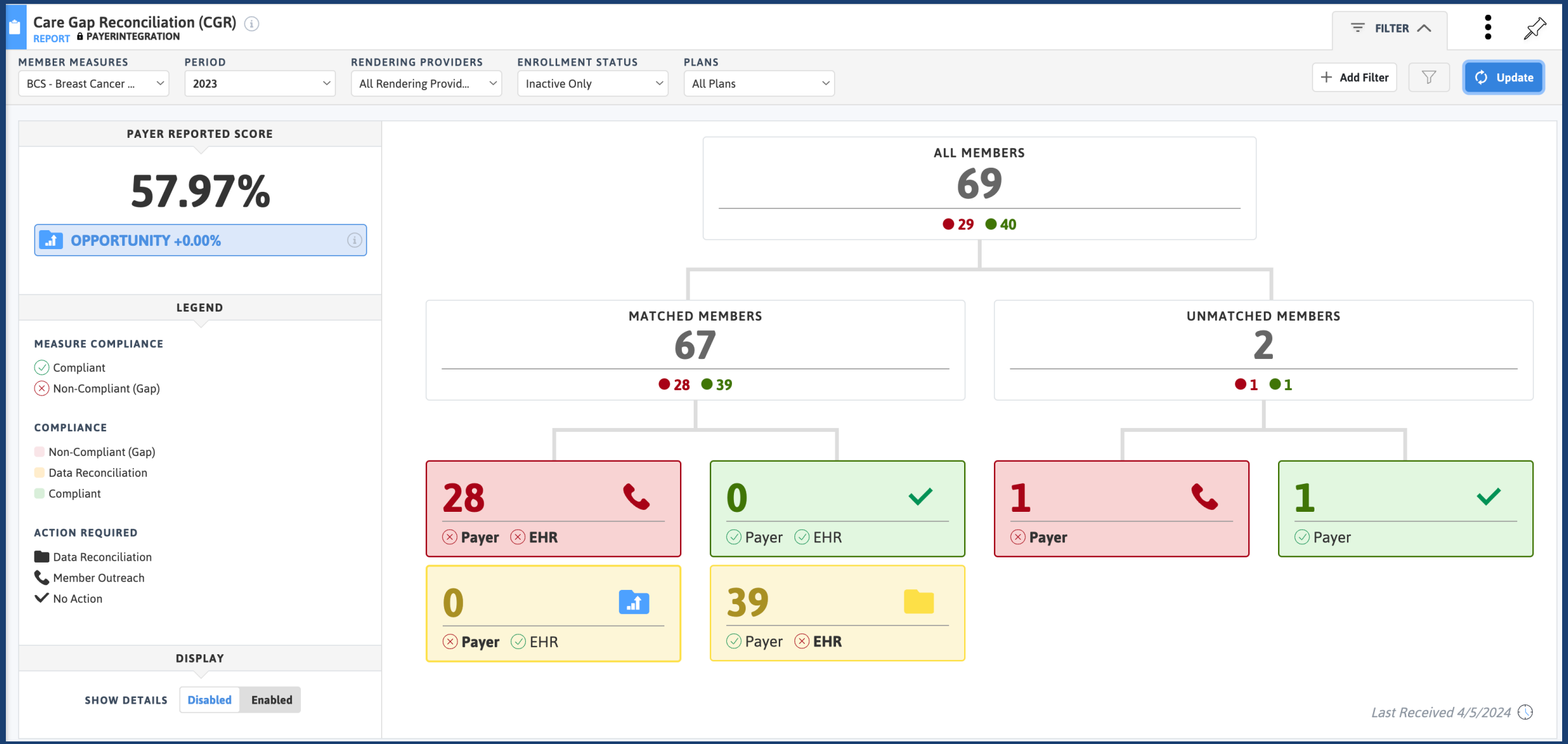

PVP Notification of Plan Closed Gaps

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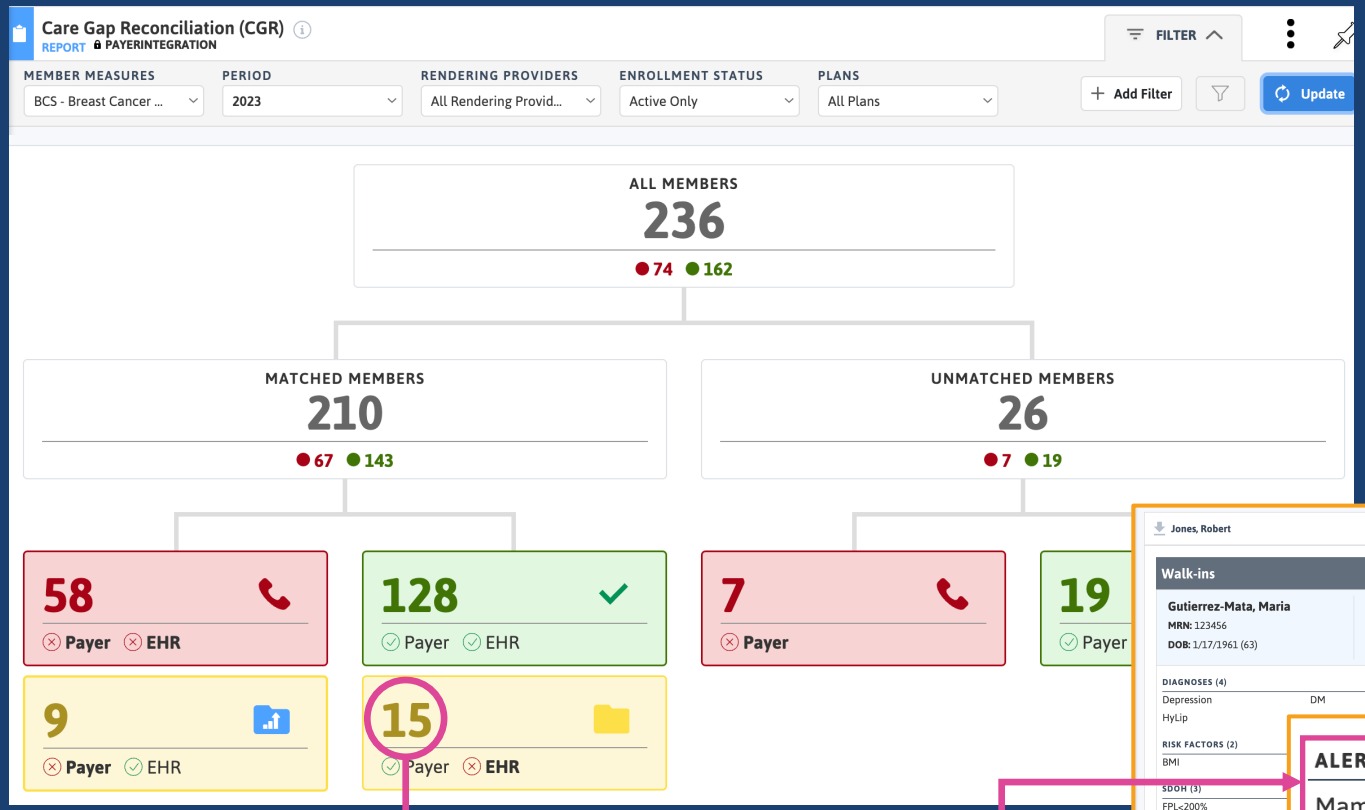

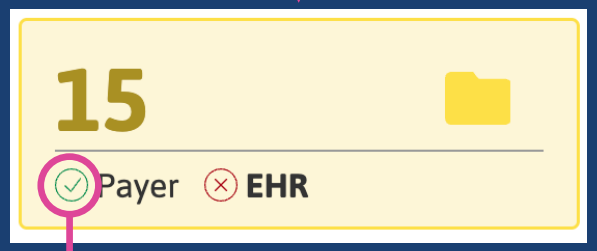

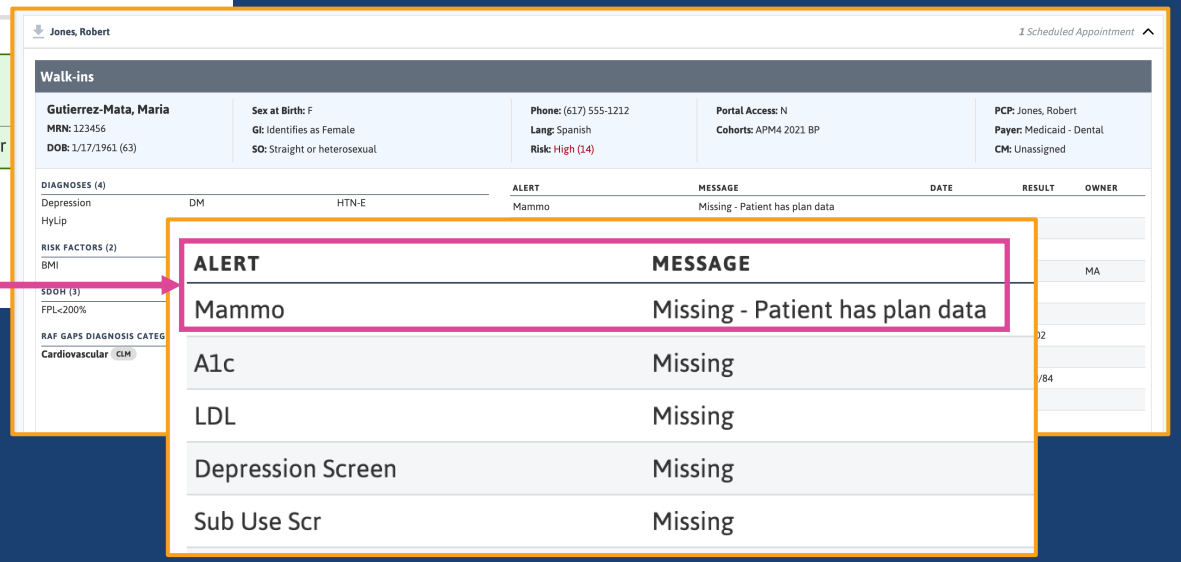

ALERT	MESSAGE
Mammo	Missing - Patient has plan data
A1c	Missing
LDL	Missing
Depression Screen	Missing
Sub Use Scr	Missing

PVP Notification of Plan Closed Gaps

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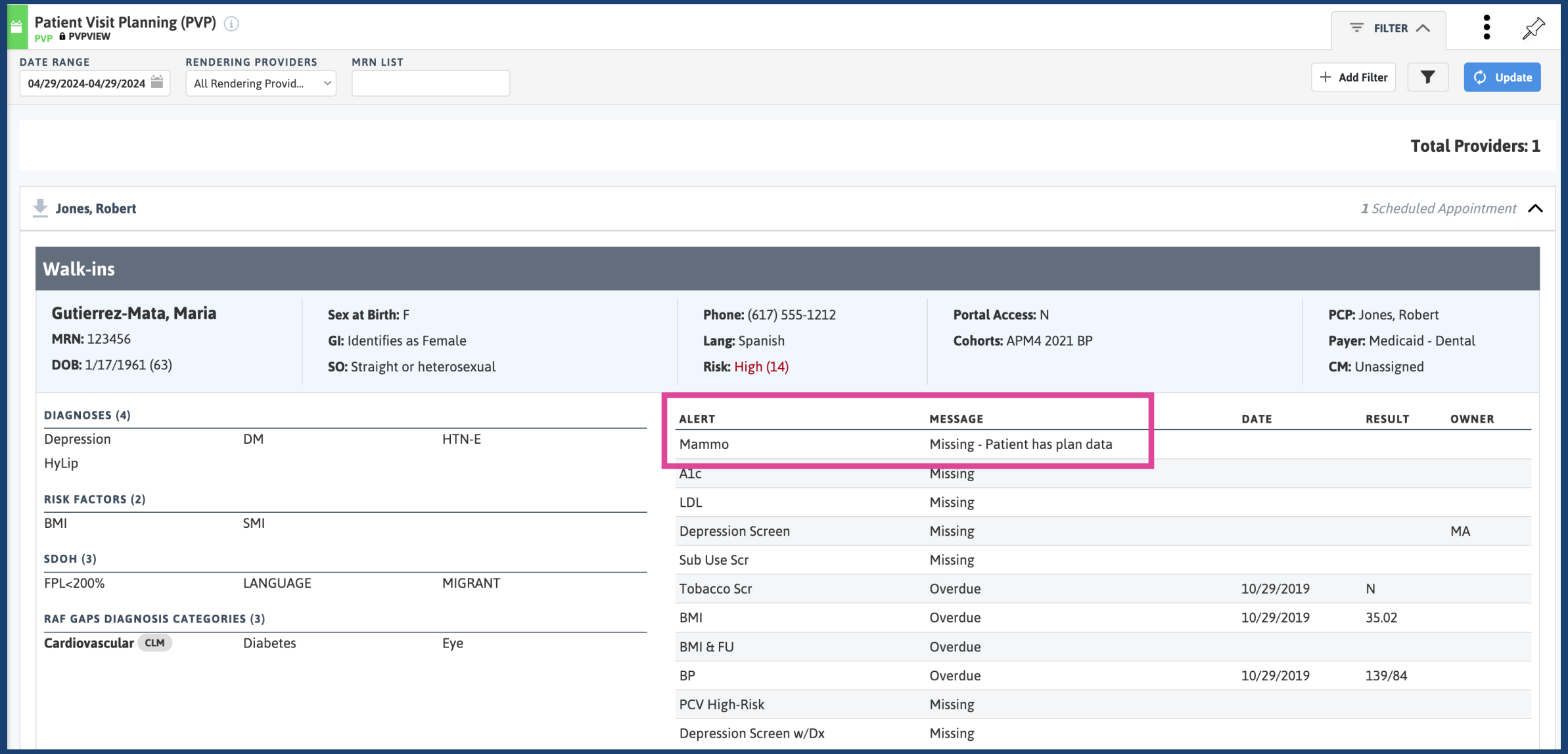

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EHR Plug-In

The Azara EHR Plug-In

- The EHR Plug-In enables health center care team members to access DRVS data/results from within their EHR at the point of care including:
  - Alerts / Care Gaps
  - Open Referrals
  - Risk Adjustment Factor (RAF) Gaps / Coding Gaps
  - Azara Care Management (ACM) Notes and Tasks
- We currently have integrations with athenaOne, athena Practice, NextGen and Epic/OCHIN
  - There has been a number of improvements with athenaOne
  - The NextGen Plug-In is being re-architected to use SMART on FHIR
- We are piloting a SMART on FHIR interface with eCW

DRVS EHR Plug-In: Alerts

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Abernathy, Colby

MRN: 000279887564 **Risk:** Moderate (12) **DOB:** 12/18/1996 (27 yrs)

ALERTS | RAF GAPS | OPEN REFERRALS | ACM DATA

Alert	Message	Most Recent Date	Most Recent Result
A1c	Overdue	3/27/23	5.4
LDL	Overdue	8/28/22	190
Eye	Overdue	6/22/22	normal
Foot	Overdue	7/24/22	Y
Dental	Missing		
BP High Stage 1 or 2 No Dx	Missing	6/21/23	Stage 1

DRVS EHR Plug-In: RAF

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ALERTS | RAF GAPS | OPEN REFERRALS | ACM DATA

Total RAF Risk Score

Max Total Score	Gap Score	Actual Score
17.732	17.733	-0.001

RAF Gaps (7)

Diagnosis Category	Context	Billed CY	Unbilled CY	Actions To Consider
Cardiovascular	More Complex Dx in EHR	I10 (4/4/2023)	EHR: 142.6 (3/25/2023)	Evaluate Unbilled Codes
Diabetes	More Complex Dx in EHR	E11.9 (7/6/2022)	EHR: E11.649 (6/14/2021)	Evaluate Unbilled Codes
Morbid Obesity	Dx Not Billed		EHR: E66.01 (5/25/2021)	Add to Chg Next Visit
Other Significant Endocrine and Metabolic Disorders	Dx Not Billed		CLM: E21.3 (5/6/2021)	Add to Chg Next Visit
Pulmonary	Dx not billed		EHR: J45.20 (3/25/2023)	Add to Chg Next Visit
Seizure Disorders and Convulsions	Dx Not Billed		CHG: R56.9 (5/25/2021)	Add to Chg Next Visit
Vascular Disease	More Complex Dx in Billing	I82.A13 (7/12/2022)	CHG: I26.99 (3/1/2021)	Evaluate Unbilled Codes

DRVS EHR Plug-In: RAF

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MRN: 000279887564 **Risk:** Moderate (12) **DOB:** 12/18/1996 (27 yrs)

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Seizure Disorders and Convulsions	Dx Not Billed		CHG: R56.9 (5/25/2021)	Add to Chg Next Visit
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ACM and the PNP from the Plug-In

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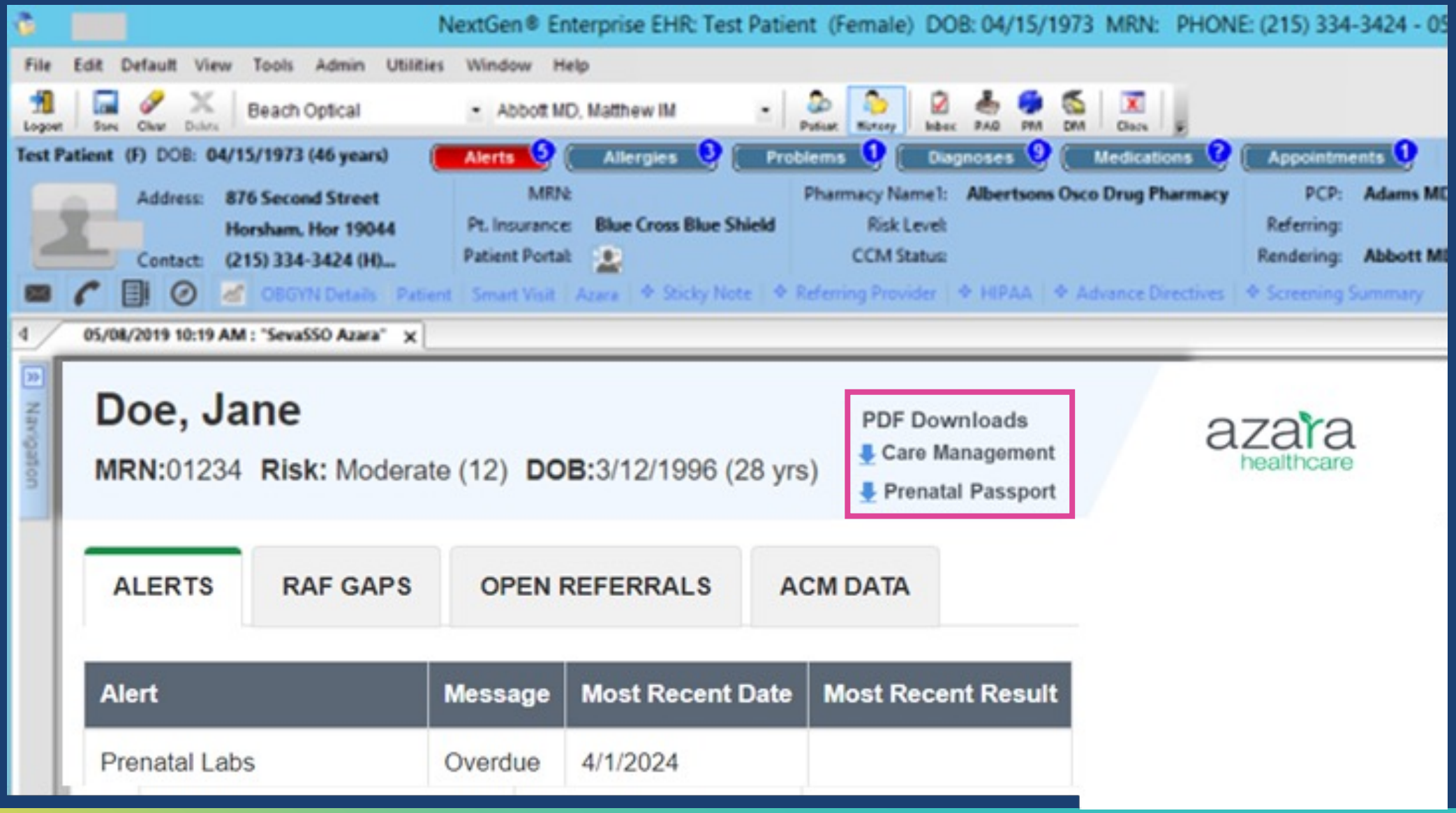
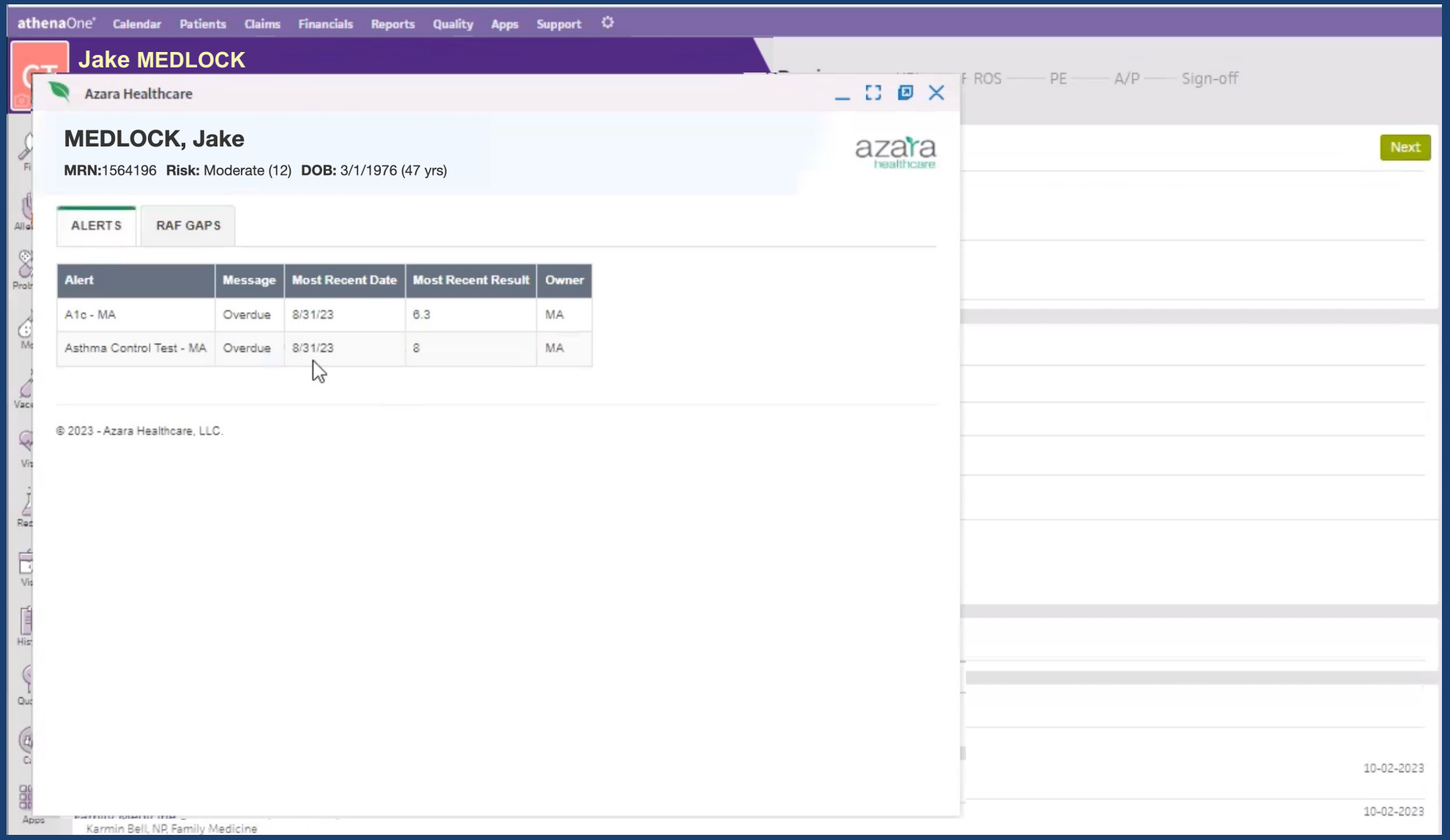


athenaOne


athenaOne
Calendar
Patients
Claims
Financials
Reports
Quality
Apps
Support
Jake MEDLOCK
ROS
PE
A/P
Sign-off
Next
Azara Healthcare
MEDLOCK, Jake
MRN:1564196 Risk: Moderate (12) DOB: 3/1/1976 (47 yrs)
azara healthcare
ALERTS
RAF GAPS
Alert
Message
Most Recent Date
Most Recent Result
Owner
A1c - MA
Overdue
8/31/23
6.3
MA
Asthma Control Test - MA
Overdue
8/31/23
8
MA
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Karmin Bell, NP Family Medicine

athenaOne

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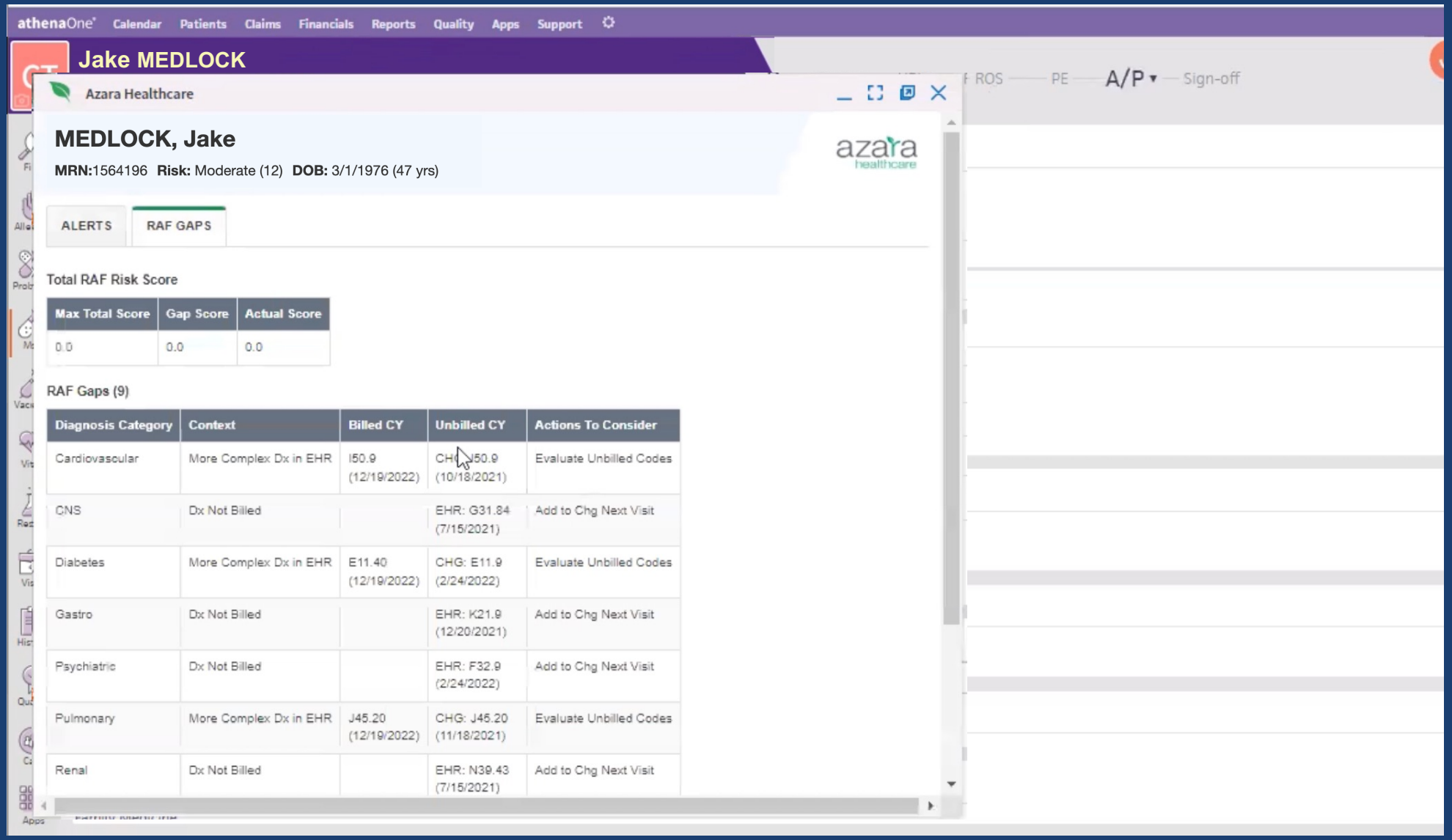

Quote from Deputy Medical Director

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It's just right there in front of me so I didn't have to go to a 3rd party and then wait for it to load and everything else. …

I would just click it and it was 'whoop' right there in real time. And I actually like having in the front (Reason for Visit) and the back end (Assessment & Plan) cause when I am prepping I use the front one but during my visit I used the one on the back page alot. So it was really nice for to have it both places. …

So it's great. I am super happy. You've made me happy so that's good.

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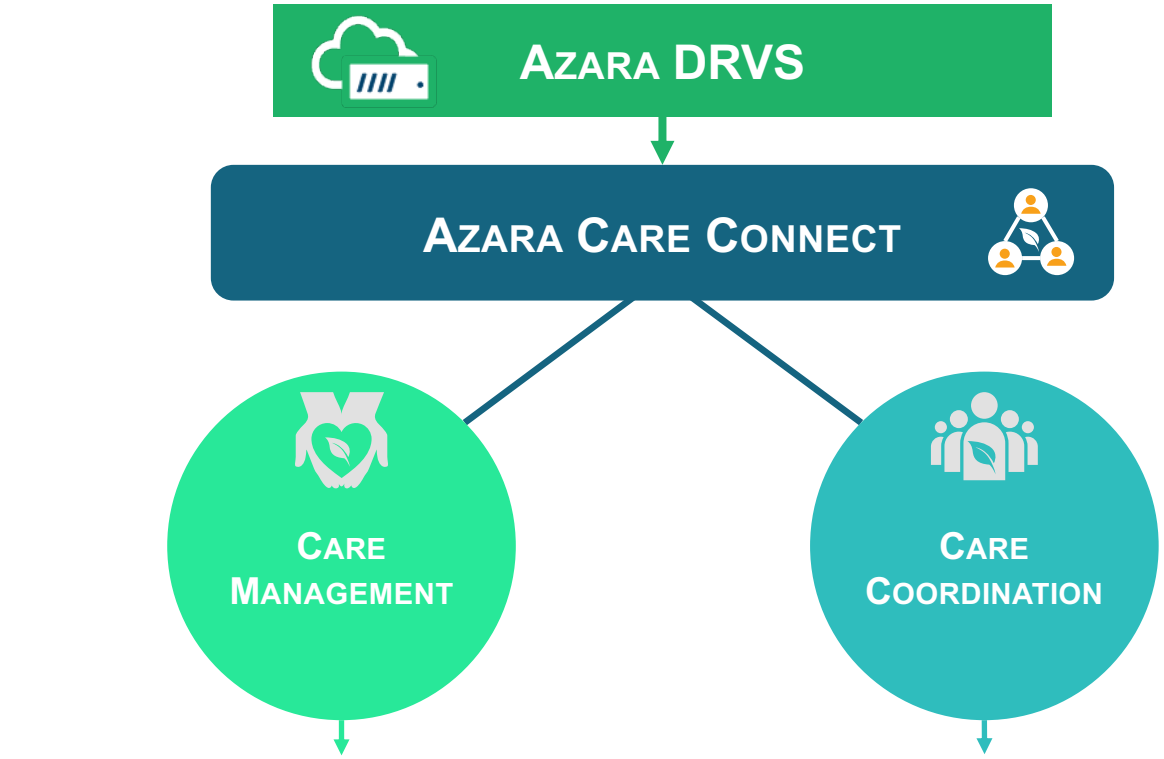
Azara Care Connect (ACC)

Azara Care Connect (ACC)



- Manage & monitor high-cost/high-risk patients & special populations
- Track day-to-day tasks and follow-up activities
- Document care plans and goals

- Document outreach activities
- Prioritize patients
- Close care gaps
- Monitor and track outreach activities

Azare Care Management

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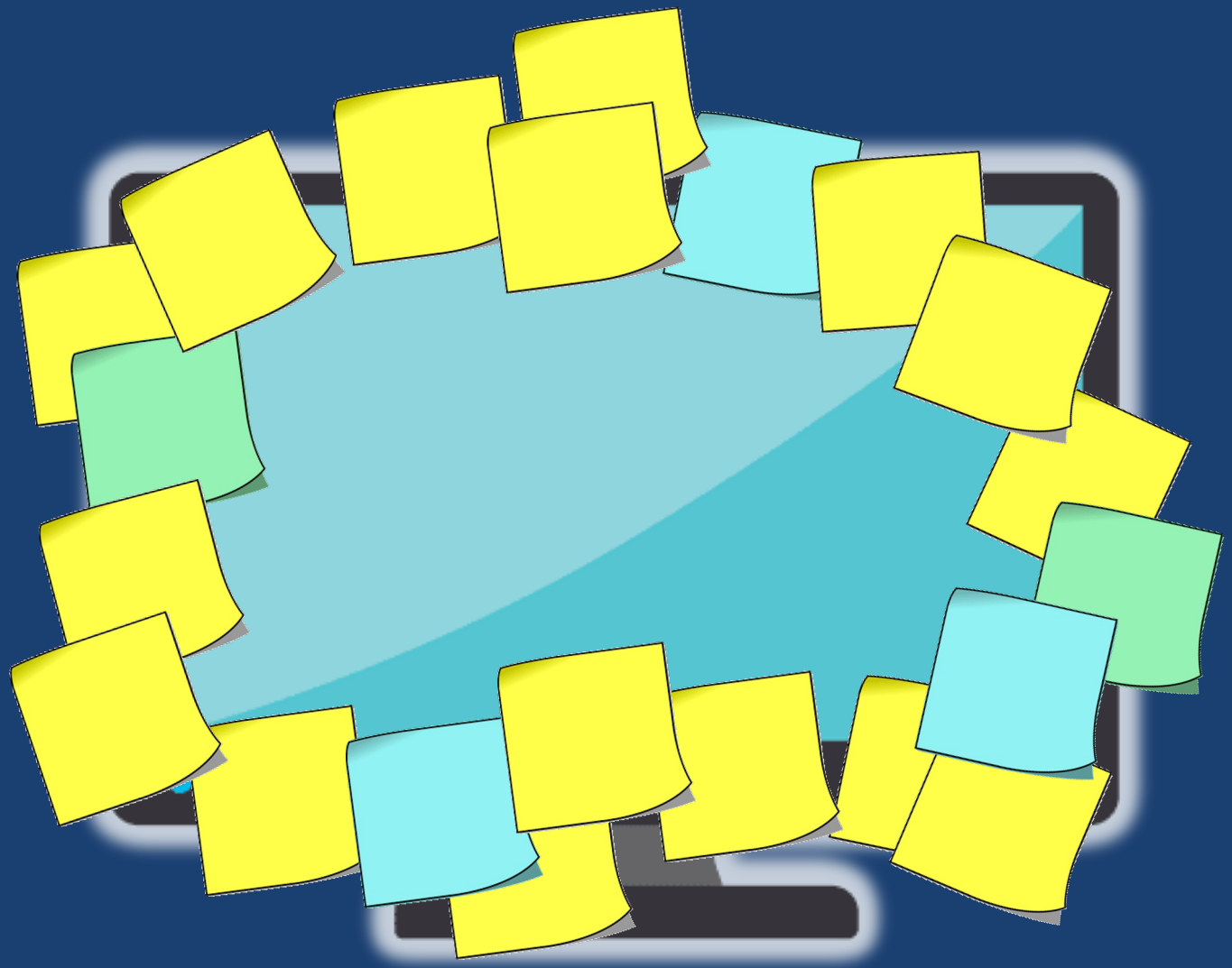

ACC 1.0 - Care Management

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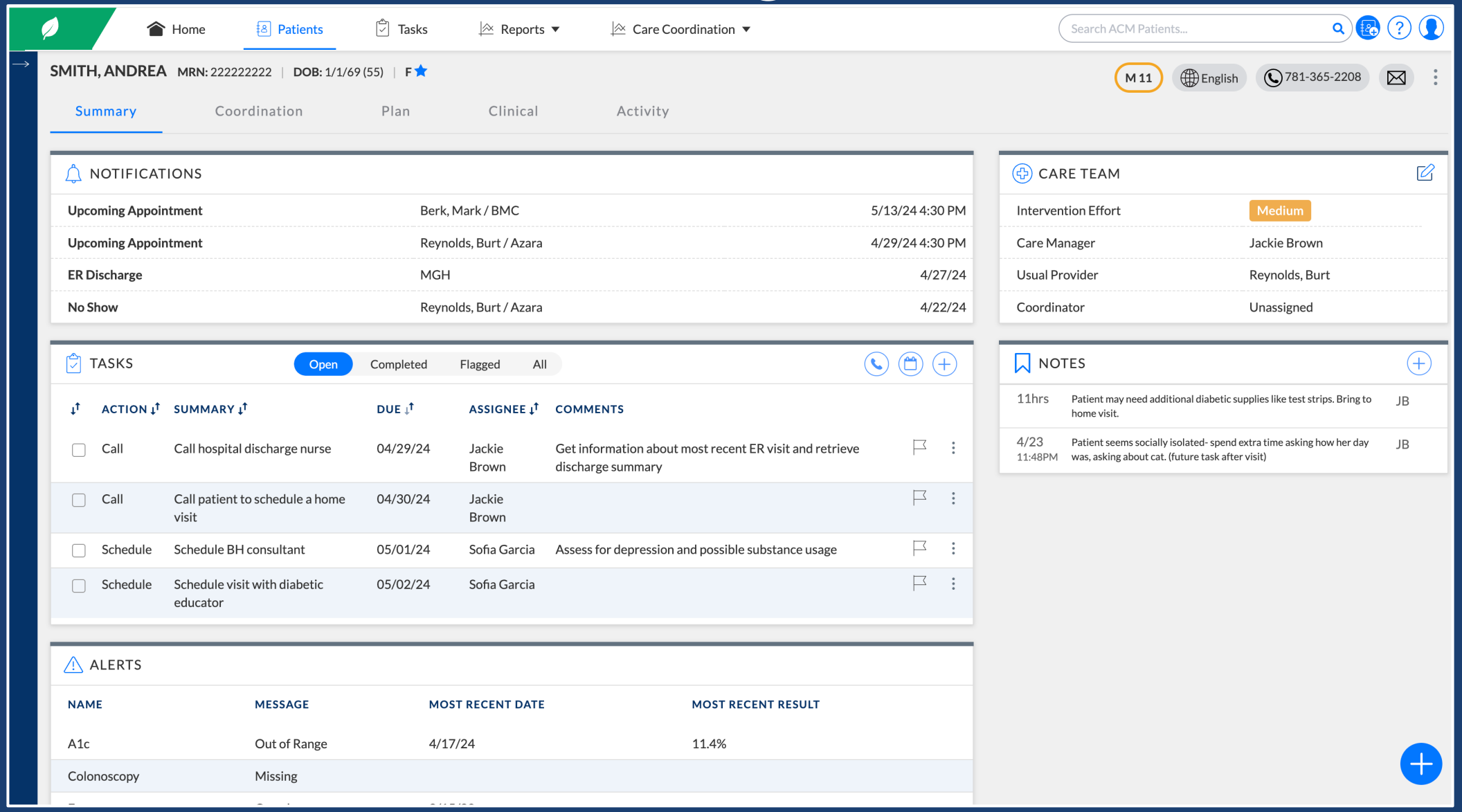

ACC 1.0 - Care Management

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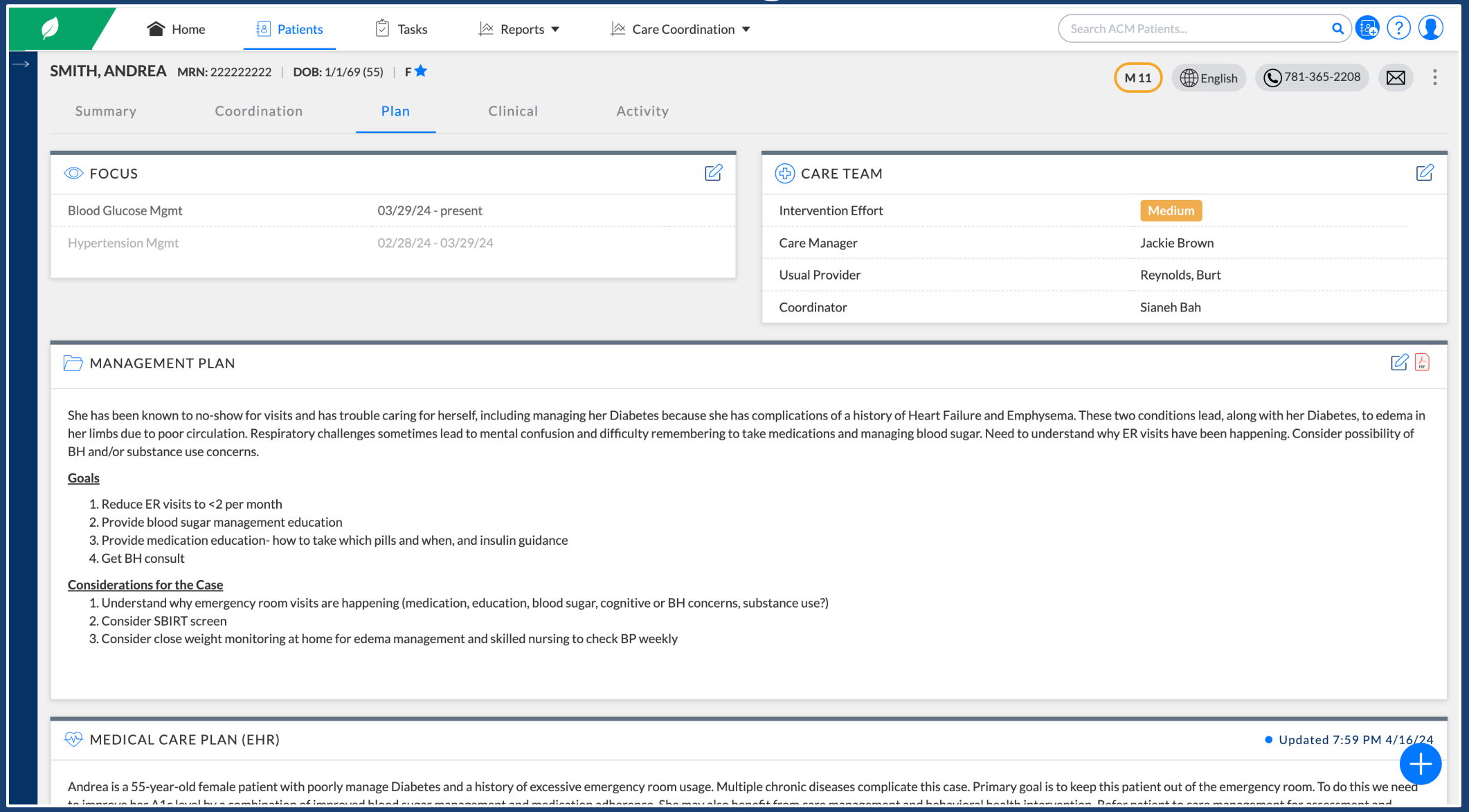
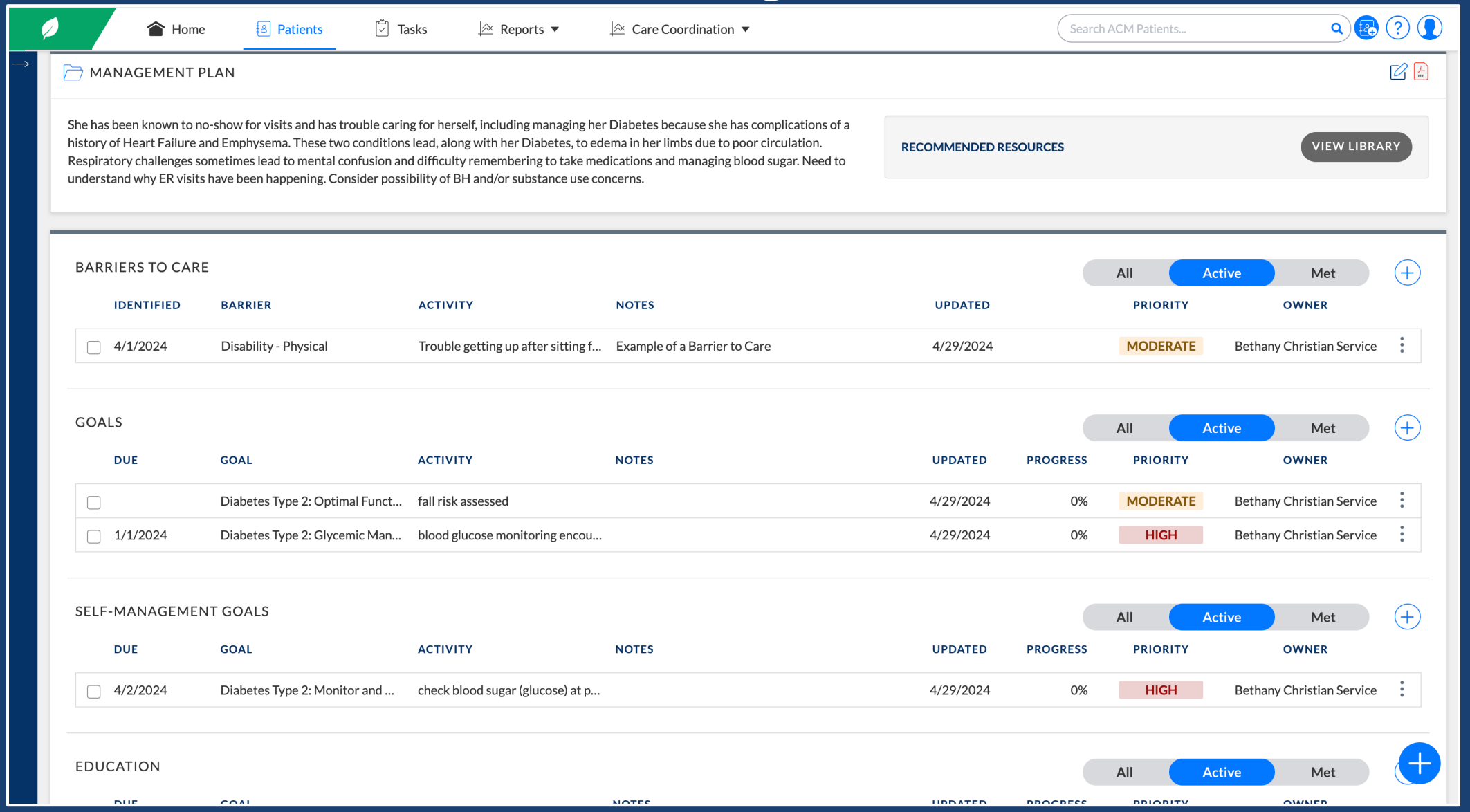


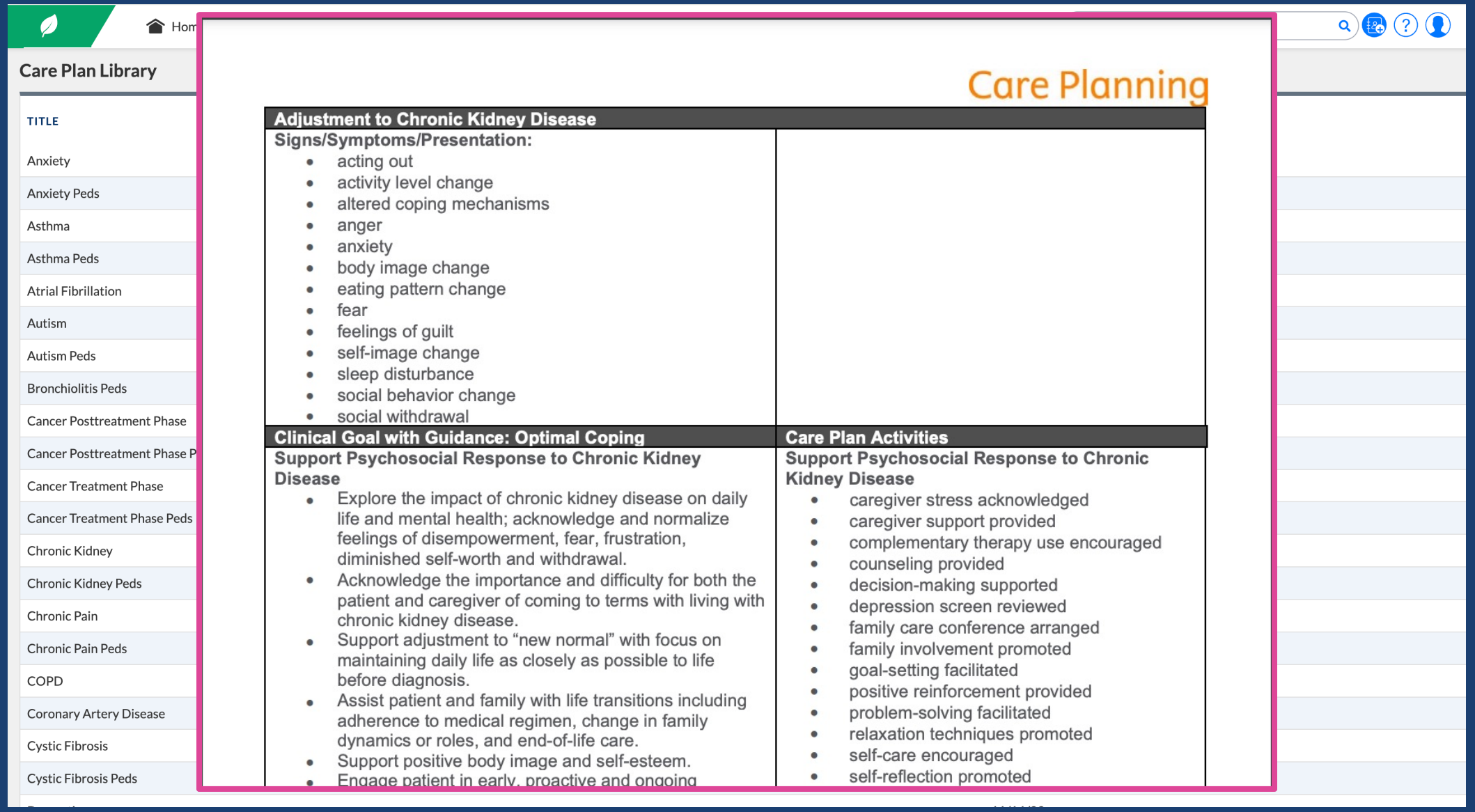
ACC 2.0 - Care Management

azara 2024



Care Guidelines from Elsevier

azara 2024



BARRIERS TO CARE

All | Active | Met

IDENTIFIED	BARRIER	ACTIVITY	NOTES	UPDATED	PRIORITY	OWNER
No Barriers To Care to Display						

GOALS

All | Active | Met

DUE	GOAL	ACTIVITY	NOTES	UPDATED	PROGRESS	PRIORITY	OWNER
No Goals to Display							

SELF-MANAGEMENT GOALS

All | Active | Met

DUE	GOAL	ACTIVITY	NOTES	UPDATED	PROGRESS	PRIORITY	OWNER
No Self-Management Goals to Display							

EDUCATION

All | Active | Met

DUE	GOAL	NOTES	UPDATED	PROGRESS	PRIORITY	OWNER
No Education to Display						

ACC Care Coordination Screenings

azara 2024

Coordination | Screenings | Clinical

Data Received: 19 January

SUBMIT | SAVE DRAFT

Comprehensive Risk Assessment

Please review the ACC Clinical tab and/or EMR for last PCP visit, lab results and transitions of care information prior to completing the assessment.

Date *

Assessment Declined *

- ◯ Yes
- ◯ No

General Health History

1. Have you been hospitalized in the last 12 months? *

- ◯ Yes
- ◯ No
- ◯ Chose not to answer

2. Have you been to the emergency room in the last 12 months? *

- ◯ Yes
- ◯ No

ACC Care Coordination Screenings

azara 2024

Doe, Jane MRN: 000000123456 | Member Number: 8943241341 (UHC) | DOB: 8/23/83 (40) | F

L 1 | English | (616) 555-1212 | No email

Coordination | Screenings | Clinical

Data Received: 19 January

FOLLOW UP 12/20 OVERDUE — Appt kept. Labs completed. Unsure about HRA completion. Not uploaded into Document Management yet.

CONTACT REASONS (1)

All | Open | Complete

NOT REACHED

TYPE	DETAIL	REPORTED	STATUS	OUTREACHES	LAST OUTREACH	LAST OUTREACH BY
HRA (1)	Gap	03/24/22	open	14	12/06/22	Parker, Nelle

Showing 1 to 1 of 1 entries

Previous 1 Next

TASKS (0)

Open | Completed | Flagged | All

ACTION	SUMMARY	DUE	ASSIGNEE	COMMENTS

No Tasks to Display

OUTREACH LOG (0)

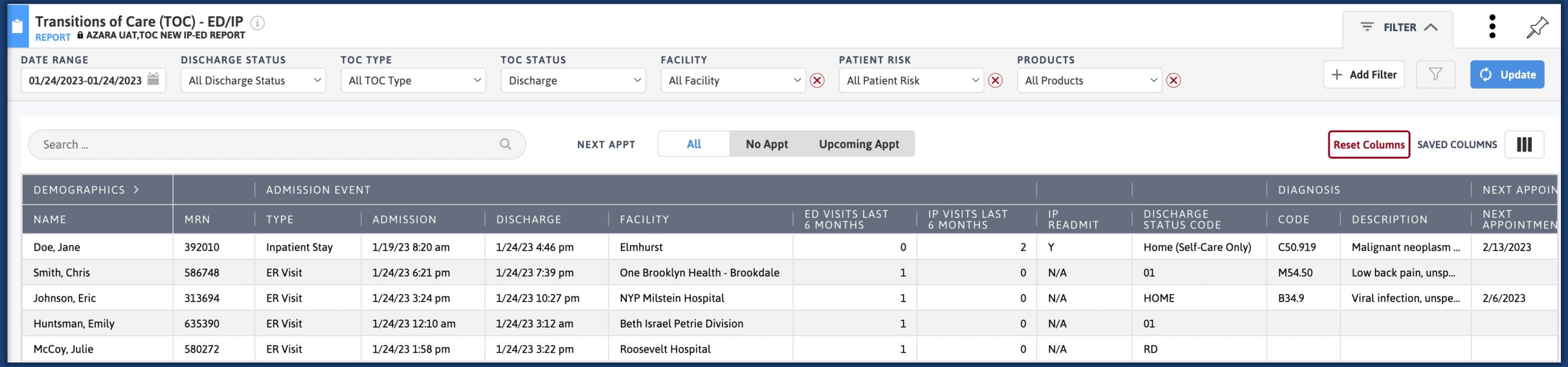
Last 30 Days | All

DATE	REASON	NOTES	INTERVENTIONS	PERFORMED BY

No Activities to Display

ToC in DRVS

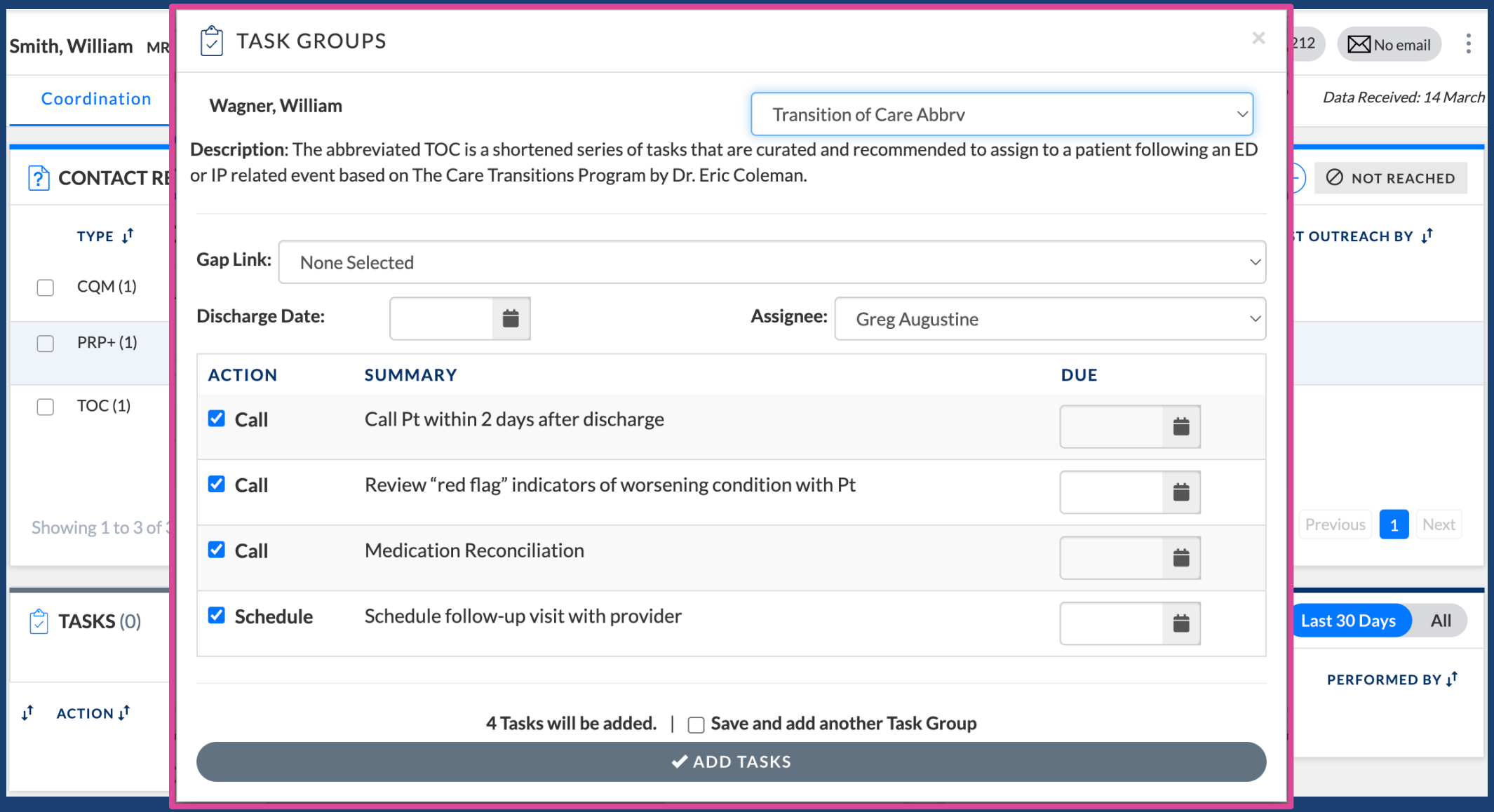
azara 2024



DEMOGRAPHICS		ADMISSION EVENT							DIAGNOSIS		NEXT APPOIN
NAME	MRN	TYPE	ADMISSION	DISCHARGE	FACILITY	ED VISITS LAST 6 MONTHS	IP VISITS LAST 6 MONTHS	IP READMIT	DISCHARGE STATUS CODE	CODE	DESCRIPTION	NEXT APPOINTMEN
Doe, Jane	392010	Inpatient Stay	1/19/23 8:20 am	1/24/23 4:46 pm	Elmhurst	0	2	Y	Home (Self-Care Only)	C50.919	Malignant neoplasm ...	2/13/2023
Smith, Chris	586748	ER Visit	1/24/23 6:21 pm	1/24/23 7:39 pm	One Brooklyn Health - Brookdale	1	0	N/A	01	M54.50	Low back pain, unsp...	
Johnson, Eric	313694	ER Visit	1/24/23 3:24 pm	1/24/23 10:27 pm	NYP Milstein Hospital	1	0	N/A	HOME	B34.9	Viral infection, unspe...	2/6/2023
Huntsman, Emily	635390	ER Visit	1/24/23 12:10 am	1/24/23 3:12 am	Beth Israel Petrie Division	1	0	N/A	01			
McCoy, Julie	580272	ER Visit	1/24/23 1:58 pm	1/24/23 3:22 pm	Roosevelt Hospital	1	0	N/A	RD			

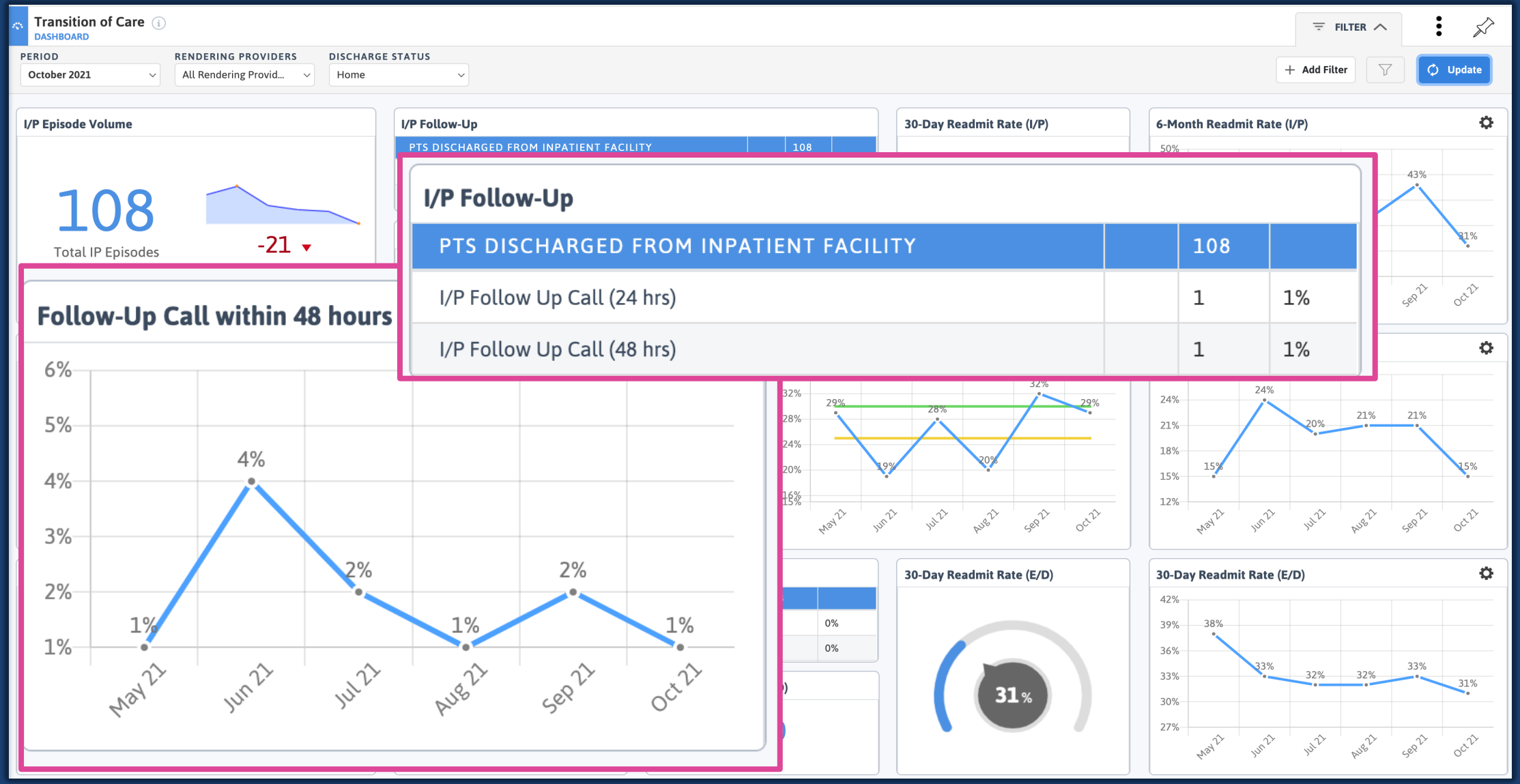
ToC in ACC

azara 2024



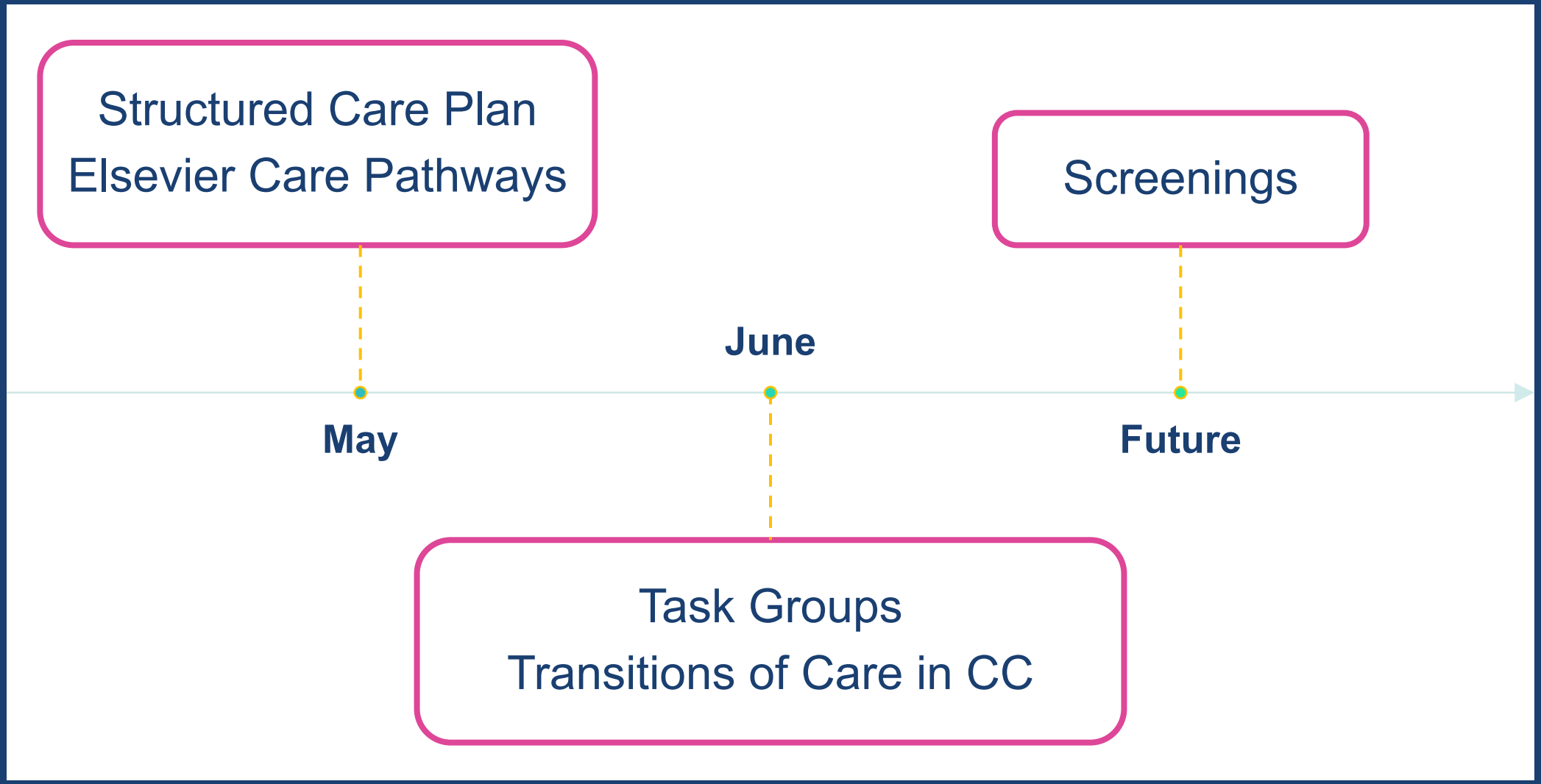
ToC Reporting in DRVS

azara 2024



ACC 2.0 GA Roadmap

azara 2024

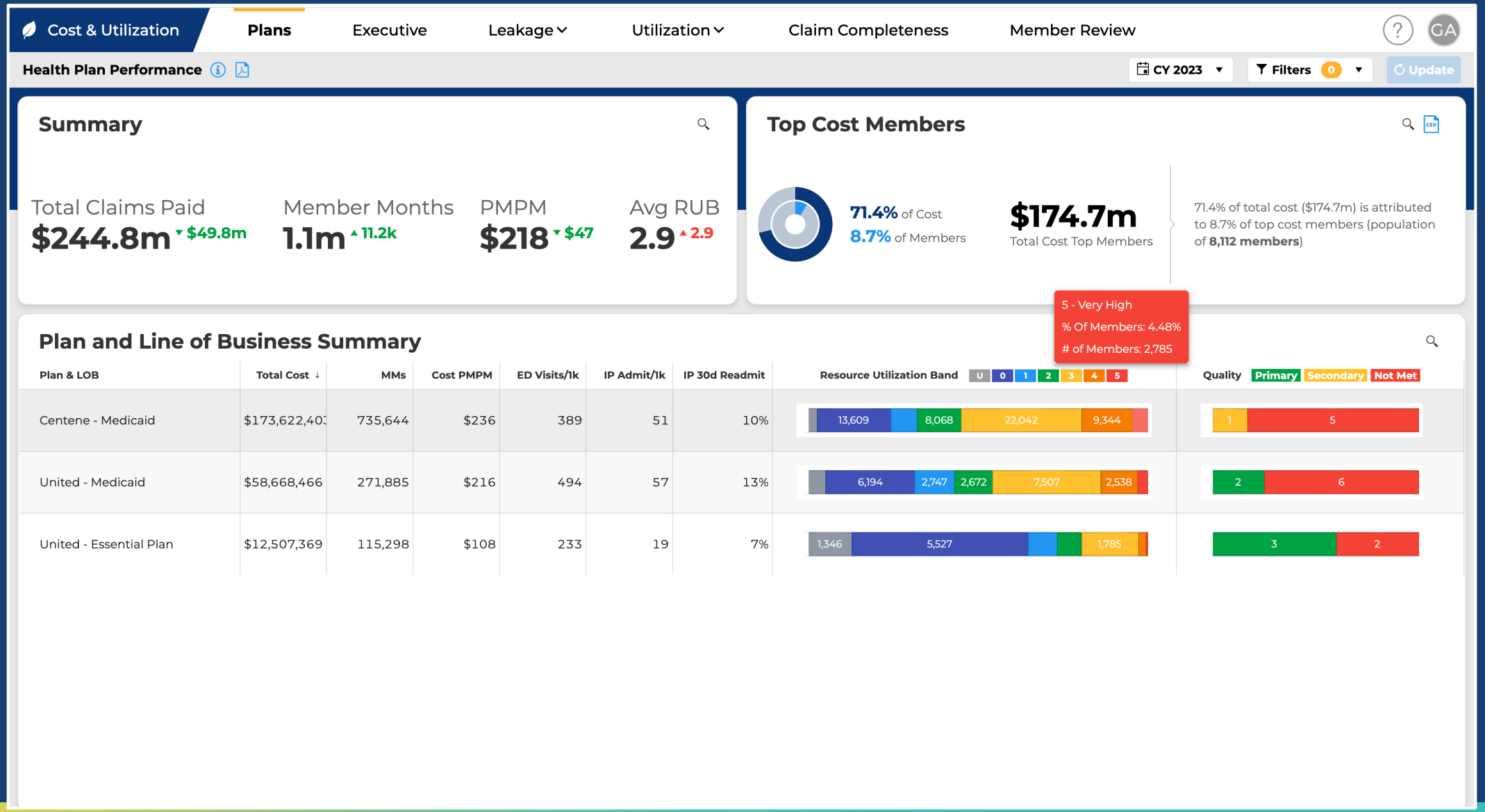


azara 2024

Azara Cost & Utilization (ACU)

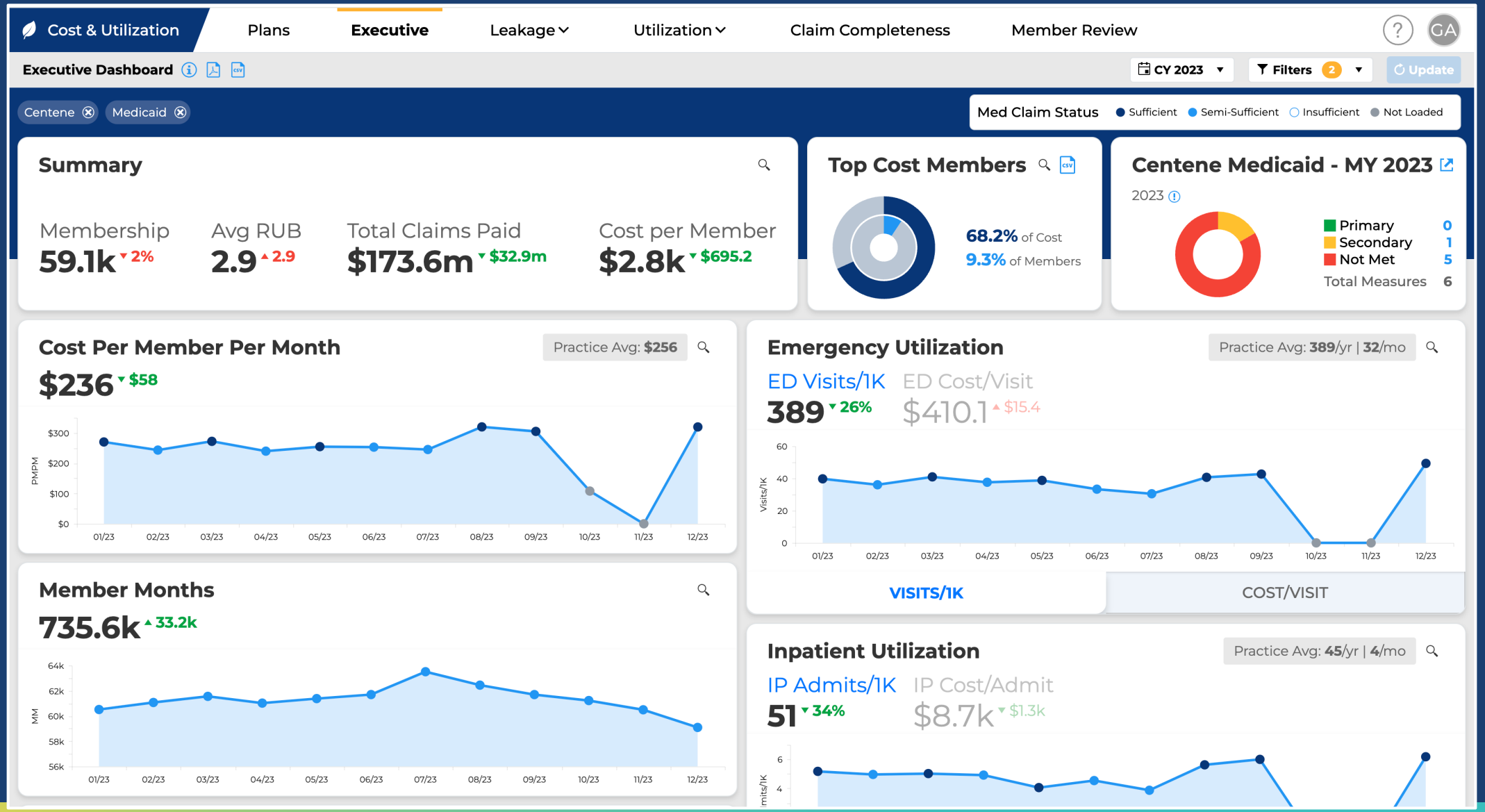
Plan Summary

azara 2024



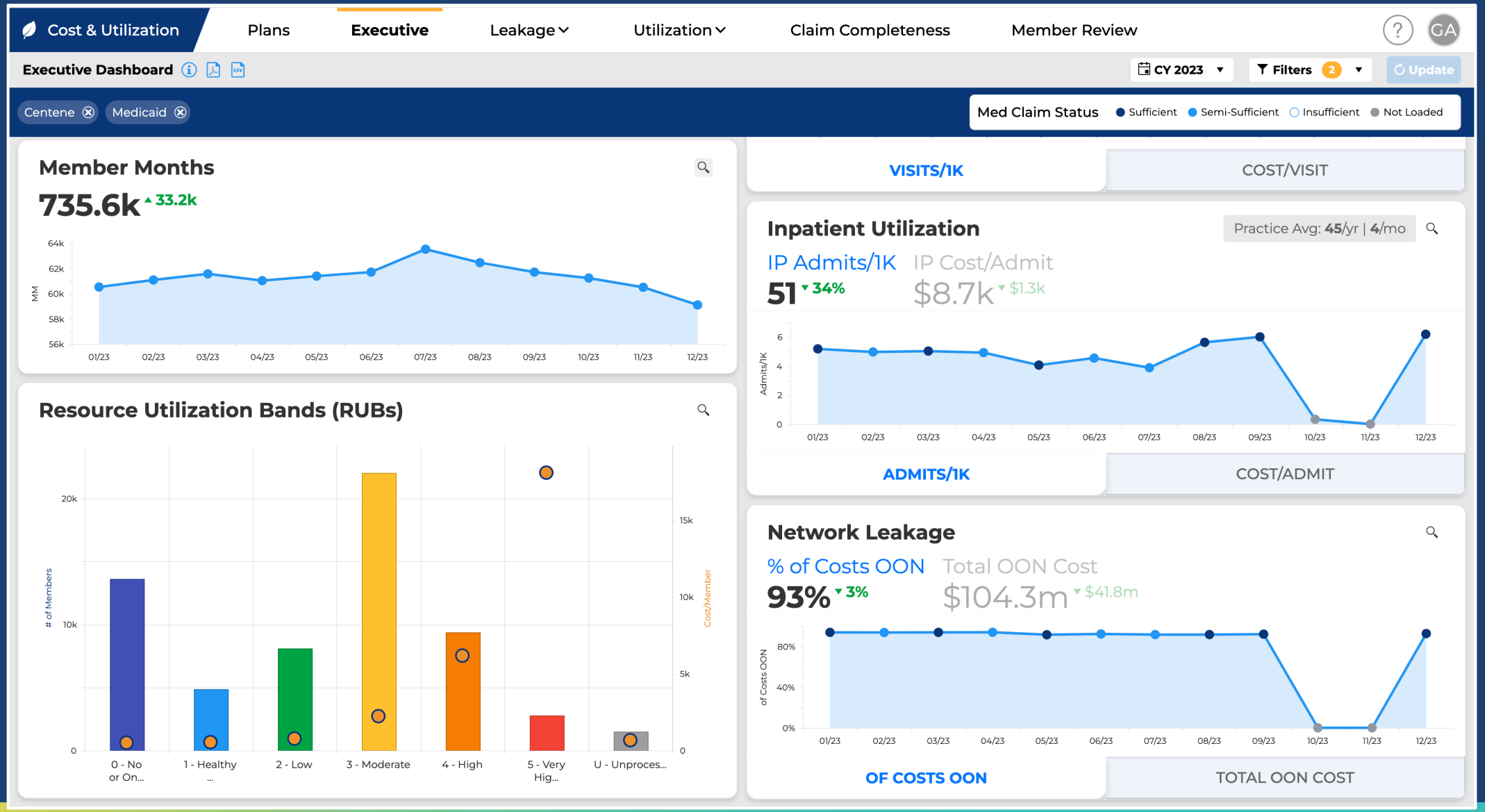
Executive Dashboard

azara 2024



Executive Dashboard (cont.)

azara 2024



Network Leakage

azara 2024

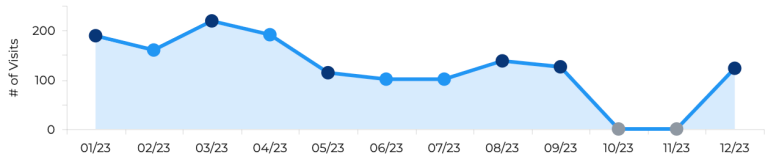
Cost & Utilization | Plans | Executive | Leakage | Utilization | Claim Completeness | Member Review

Primary Care Leakage | CY 2023 | Filters 2 | Update

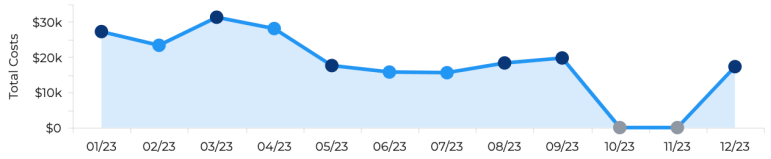
Centene | Medicaid

In-Network Leakage

1.5k
▼ 462
# of Visits



$214.3k
▼ $18.2k
Total Costs



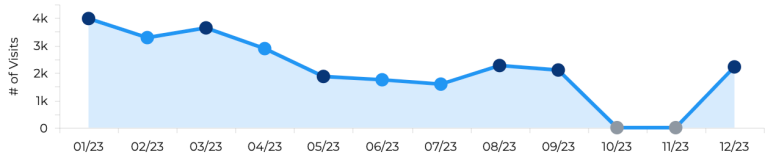
Med Claim Status ● Sufficient ● Semi-Sufficient ○ Insufficient ● Not Loaded

In-Network Leakage by Episode Location

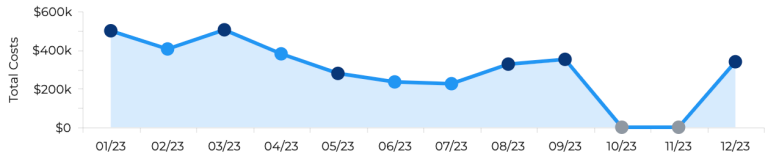
Location Name	Total Costs ↓	# of Members	# of Visits	Cost/Visit
Brown, Schimmel and ...	$57,295	36	220	$260
Schuppe and Sons	$20,817	135	170	$122
Weimann Inc	$20,746	24	104	$199
Boyer - Wuckert	$9,061	49	72	$126
Mitchell - Botsford	$8,999	5	65	$138
Prosacco - Bauch	$8,248	60	78	$106
Lang LLC	$7,117	61	72	$99
Deckow and Sons	$4,525	27	36	$126

Out-of-Network Leakage

25.6k
▼ 33.3k
# of Visits



$3.5m
▼ $4.2m
Total Costs



Med Claim Status ● Sufficient ● Semi-Sufficient ○ Insufficient ● Not Loaded

Out-of-Network Leakage by Episode Location

Location Name	Total Costs ↓	# of Members	# of Visits	Cost/Visit
Nicolas - Cruickshank	$136,901	171	792	$173
Wehner, Wallace	$62,352	2	16	$3,897
Hane, Little and Spinka	$54,514	172	276	$198
Kihn, Mayert and Sanf...	$46,241	208	282	$164
Veum - Macejkovic	$44,924	279	377	$119
Emmerich Group	$43,209	242	318	$136
Padberg - Rempel	$40,982	207	269	$152
Willms, Darby	$38,284	206	281	$136

Inpatient Utilization - Admits

azara 2024

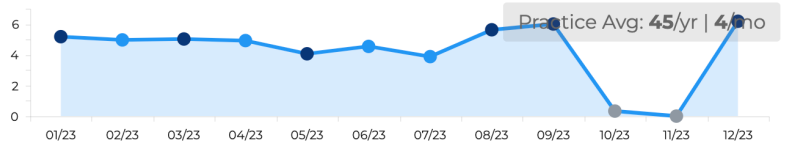
Cost & Utilization | Plans | Executive | Leakage | Utilization | Claim Completeness | Member Review

Inpatient Utilization | CY 2023 | Filters 2 | Update

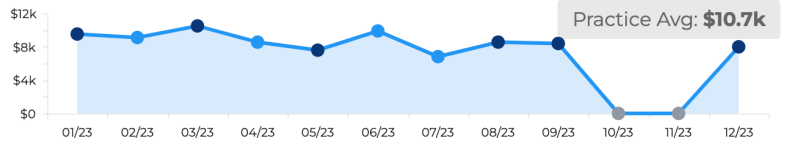
Centene | Medicaid

Summary

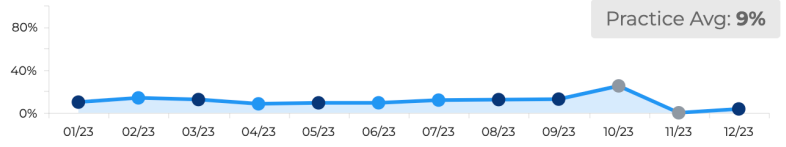
51 ▼ 34% IP Admits/1k



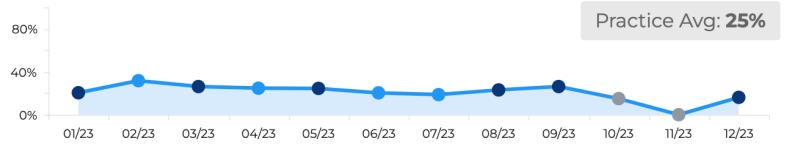
$8.7k ▼ $1.3k IP Cost/Admit



10% ▼ 2% 30 Day Readmit Rate



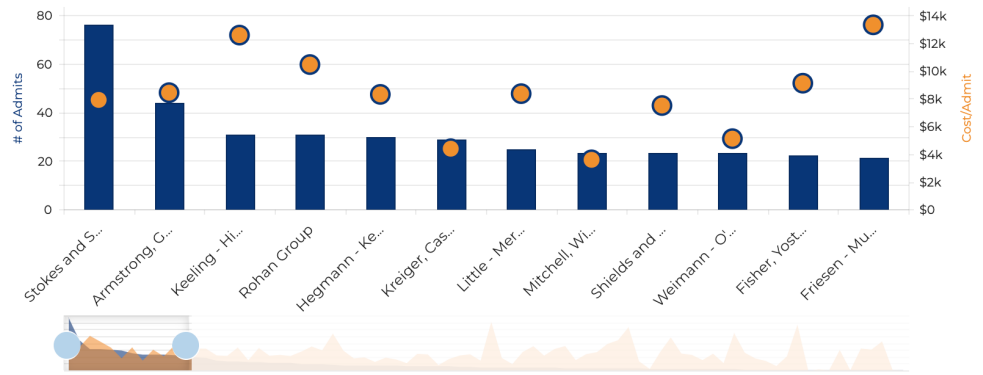
23% ▼ 1% Avoidable IP Admits



Med Claim Status ● Sufficient ● Semi-Sufficient ○ Insufficient ● Not Loaded

Avoidable IP Admits

OF ADMITS | PER 1K



Avoidable IP Admits by Clinical Class

Clinical Class	Total Cost ↓	# of Admits	Cost/Admit
Circulatory Diseases	$1,061,155	105	$10,106
Metabolic Diseases	$707,724	102	$6,938
Respiratory system diseases	$630,430	103	$6,121
Digestive system diseases	$511,808	76	$6,734
Pregnancy	$386,205	61	$6,331
Nervous system diseases	$377,013	47	$8,022
Neoplasms	$365,924	27	$13,553
Genitourinary Diseases	$276,240	54	$5,116

Top IP Cost Members

6.2% of Cost
0.4% of Members

$10.8m IP Total Cost Top Members

6.2% of total cost ($10.8m) is attributed to 0.4% of top cost members (population of **246 members**)

Inpatient Utilization - Readmits

azara 2024

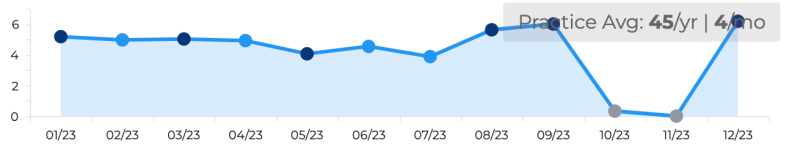
Cost & Utilization | Plans | Executive | Leakage | Utilization | Claim Completeness | Member Review

Inpatient Readmissions | CY 2023 | Filters 2 | Update

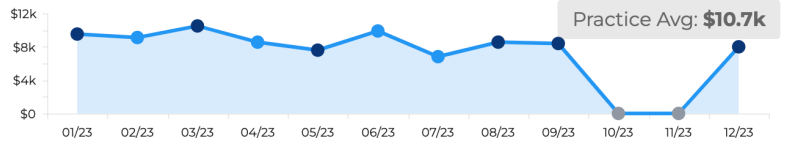
Centene | Medicaid

Summary

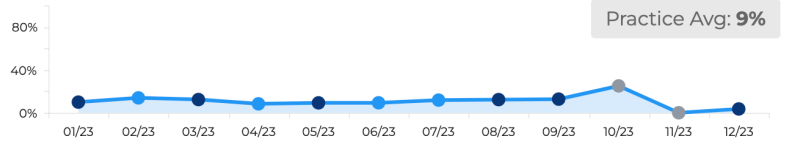
51 ▼ 34% IP Admits/1k



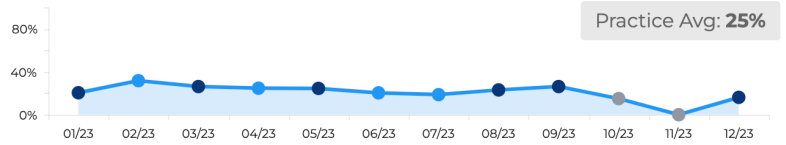
$8.7k ▼ $1.3k IP Cost/Admit



10% ▼ 2% 30 Day Readmit Rate



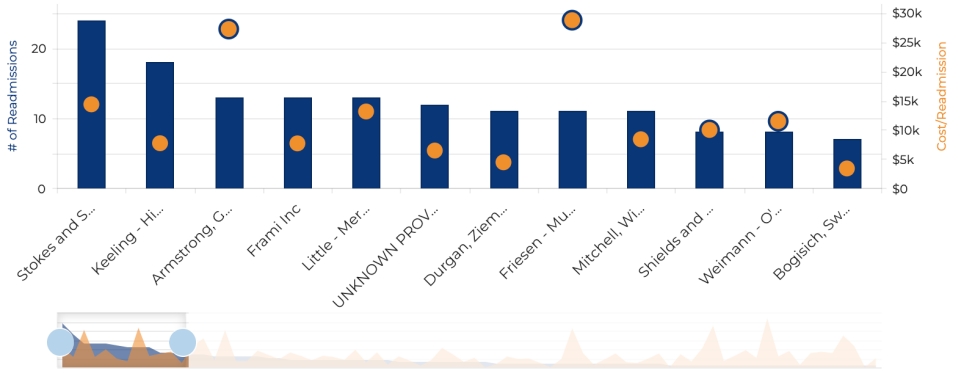
23% ▼ 1% Avoidable IP Admits



Med Claim Status ● Sufficient ● Semi-Sufficient ○ Insufficient ● Not Loaded

IP Readmissions

OF READMISSIONS | PER 1K



IP Readmissions by Clinical Class

Clinical Class	Total Cost ↓	# of Readmissions	Cost/Readmit
Behavioral Disorders	$541,582	95	$5,701
Circulatory Diseases	$504,866	42	$12,021
Factors Influencing Health Status	$432,353	17	$25,433
Infectious Diseases	$302,485	21	$14,404
Injury	$302,097	17	$17,770
Metabolic Diseases	$265,644	16	$16,603
Pregnancy	$239,641	34	$7,048
Digestive system diseases	$201,940	26	$7,767

Top IP Cost Members

6.2% of Cost
0.4% of Members

$10.8m IP Total Cost Top Members

6.2% of total cost ($10.8m) is attributed to 0.4% of top cost members (population of **246 members**)

Rx Utilization

azara 2024

Cost & Utilization | Plans | Executive | Leakage | Utilization | Claim Completeness | Member Review

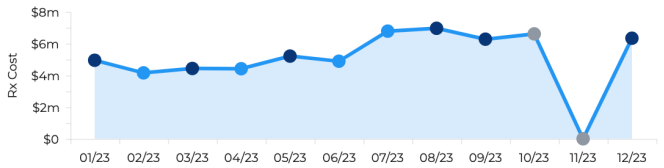
Rx Utilization | CY 2023 | Filters 2 | Update

Centene | Medicaid

Rx Claim Status: Sufficient | Semi-Sufficient | Insufficient | Not Loaded

Total Rx Cost

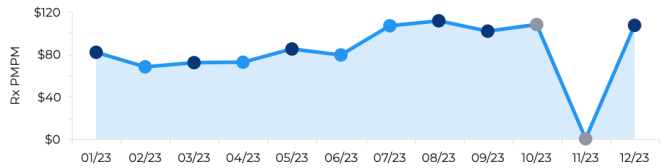
$61m ▲ $8m



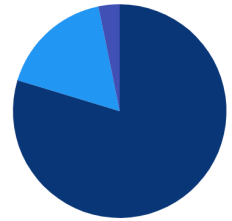
Rx PMPM

Practice Avg: **$102.8**

$82.9 ▲ $7.5



Costs by Generic vs Name Brand

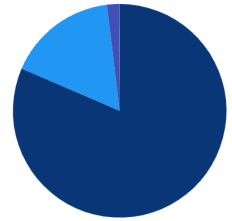


Name Brand	79.7%
Generic	17.1%
Unknown	3.2%

Costs by Anatomical Therapeutic Chemical (ATC) Classification

ATC Classification	Total Cost ↓	% of Generic Dispenses by Total Cost	# of Members	Cost/Member
ANTIINFECTIVES FOR SYSTEMIC USE	$15,037,363.86	7.31%	14,502	$1,036.92
ALIMENTARY TRACT AND METABOLISM	$13,814,005.85	17.52%	19,275	$716.68
ANTINEOPLASTIC AND IMMUNOMODULATING AGENTS	$10,475,683.28	5.06%	4,162	$2,516.98
RESPIRATORY SYSTEM	$5,092,479.49	36.8%	16,146	$315.40
NERVOUS SYSTEM	$4,880,458.54	29.7%	13,444	$363.02
OTHER	$3,172,914.95	4.76%	55,259	$57.42
CARDIOVASCULAR SYSTEM	$2,470,543.15	58.82%	20,944	$117.96
BLOOD AND BLOOD FORMING ORGANS	$1,988,065.26	4.3%	2,604	$763.47
DERMATOLOGICALS	$1,555,224.11	14.29%	3,064	$507.58
SYSTEMIC HORMONAL PREPARATIONS, EXCL. SEX HO...	$719,031.52	13.49%	2,317	$310.33
SENSORY ORGANS	$569,111.49	26.48%	5,044	$112.83

Costs by Pharmacy Type



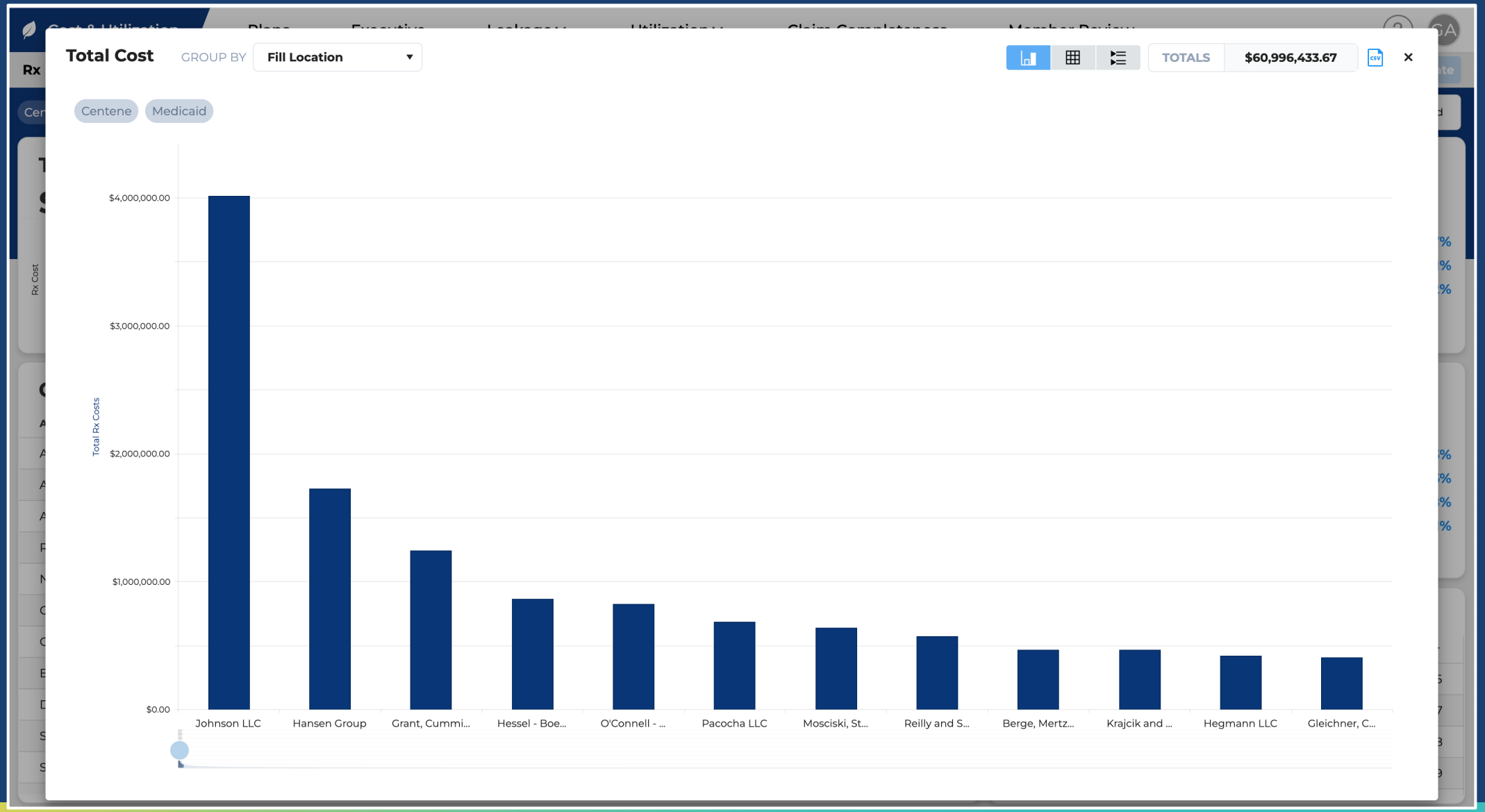
Retail	81.5%
Specialty	16.6%
Unknown	1.8%
Mail	0.1%

Costs by Fill Location

Location Name	Total Cost ↓	# of Members	Cost/Member
Johnson LLC	$4,017,227.27	189	$21,255
Hansen Group	$1,723,488.57	72	$23,937
Grant, Cummings an...	$1,238,270.60	60	$20,638
Hessel - Boehm	$860,603.46	46	$18,709

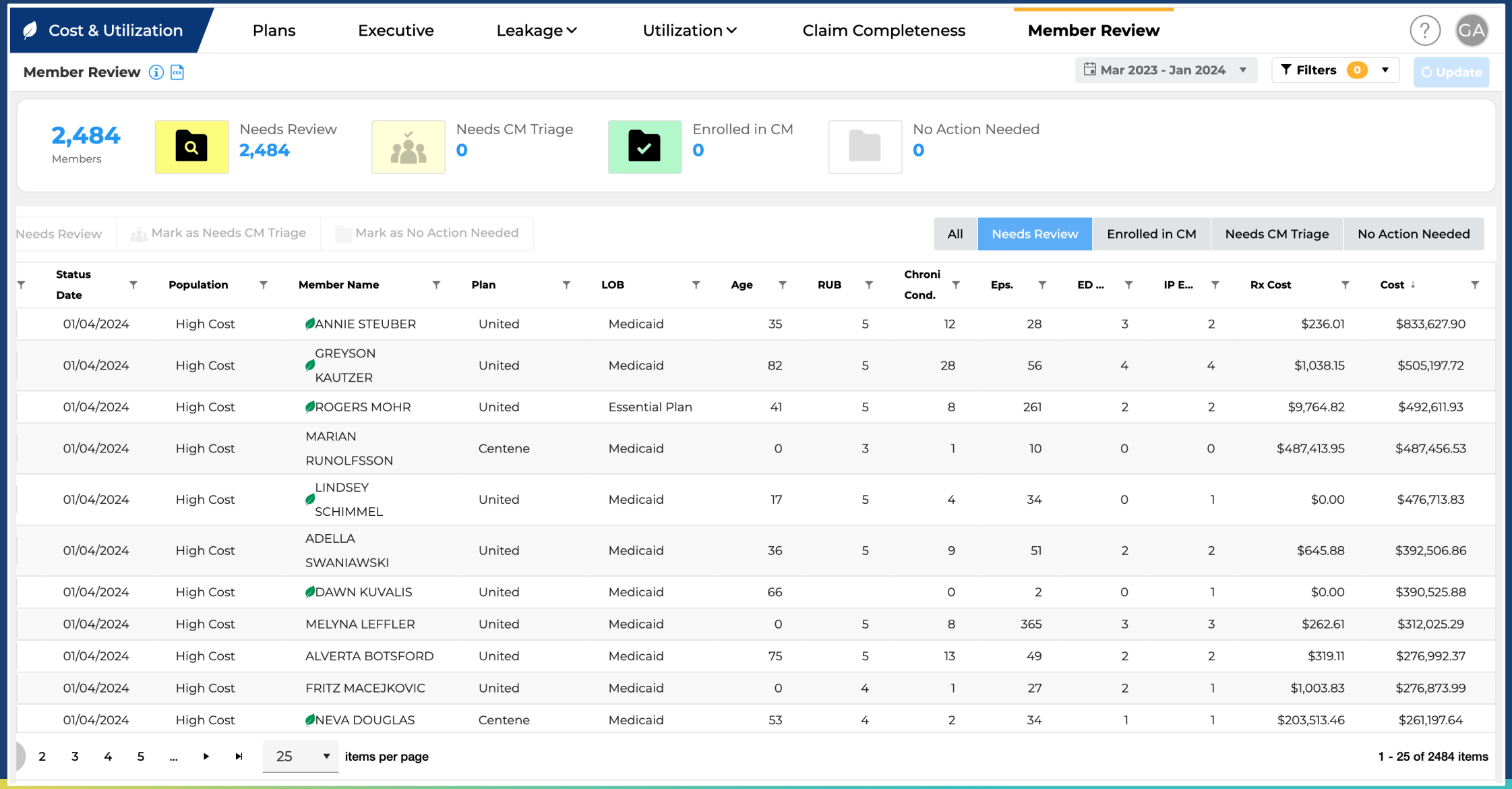
Rx Utilization - Fill Location

azara 2024



Member Review Queue

azara 2024



Status Date	Population	Member Name	Plan	LOB	Age	RUB	Chroni Cond.	Eps.	ED ...	IP E...	Rx Cost	Cost
01/04/2024	High Cost	ANNIE STEUBER	United	Medicaid	35	5	12	28	3	2	$236.01	$833,627.90
01/04/2024	High Cost	GREYSON KAUTZER	United	Medicaid	82	5	28	56	4	4	$1,038.15	$505,197.72
01/04/2024	High Cost	ROGERS MOHR	United	Essential Plan	41	5	8	261	2	2	$9,764.82	$492,611.93
01/04/2024	High Cost	MARIAN RUNOLFSSON	Centene	Medicaid	0	3	1	10	0	0	$487,413.95	$487,456.53
01/04/2024	High Cost	LINDSEY SCHIMMEL	United	Medicaid	17	5	4	34	0	1	$0.00	$476,713.83
01/04/2024	High Cost	ADELLA SWANIAWSKI	United	Medicaid	36	5	9	51	2	2	$645.88	$392,506.86
01/04/2024	High Cost	DAWN KUVALIS	United	Medicaid	66		0	2	0	1	$0.00	$390,525.88
01/04/2024	High Cost	MELYNA LEFFLER	United	Medicaid	0	5	8	365	3	3	$262.61	$312,025.29
01/04/2024	High Cost	ALVERTA BOTSFORD	United	Medicaid	75	5	13	49	2	2	$319.11	$276,992.37
01/04/2024	High Cost	FRITZ MACEJKOVIC	United	Medicaid	0	4	1	27	2	1	$1,003.83	$276,873.99
01/04/2024	High Cost	NEVA DOUGLAS	Centene	Medicaid	53	4	2	34	1	1	$203,513.46	$261,197.64

Member Review

Mar 2023 - Jan 2024 | Filters 0 | Update

2,484 Members

Needs Review	Needs CM Triage	Enrolled in CM	No Action Needed
2,484	0	0	0

Mark as Needs Review | Mark as Needs CM Triage | Mark as No Action Needed

All | Needs Review | Enrolled in CM | Needs CM Triage | No Act

Stat...	Status Date	Population	Member Name	Plan	LOB	Age	RUB	Chroni Cond.	Eps.	ED ...	IP E...	Rx Cost	Cos
	01/04/2024	High Cost	ART SPORER	Centene	Medicaid	32		0	6	0	0	$15,733.42	
	01/04/2024	High Cost	ODIE VOLKMAN	Centene	Medicaid	26		0	1	0	1	$0.00	
	01/04/2024	High Cost	AMELIA BOGAN	Centene	Medicaid	33		0	6	1	1	$490.65	
	01/04/2024	High Cost	AVA DICKINSON	Centene	Medicaid	69		0	21	1	1	$205.41	
	01/04/2024	High Cost	ESTELL KEMMER	Centene	Medicaid	18		0	2	0	1	$364.38	
	01/04/2024	High Cost	STERLING SCHMELER	Centene	Medicaid	28		0	9	3	1	$0.00	
	01/04/2024	High Cost	GRETA STROSIN	Centene	Medicaid	24		0	35	3	2	$1,534.35	
	01/04/2024	High Cost	FREDERIK GLOVER	Centene	Medicaid	41		0	7	0	1	$11.99	
	01/04/2024	High Cost	DARRIN MURRAY	Centene	Medicaid	25		0	9	0	1	$105.74	
	01/04/2024	High Cost	CLETUS ROHAN	Centene	Medicaid	1		0	51	0	0	$0.00	
	01/04/2024	High Cost	ETHEL SMITH	United	Medicaid	59	0	0	12	2	2	$0.00	
	01/04/2024	High Cost	ELADIO QUITZON	United	Medicaid	28		0	3	0	1	$0.00	
	01/04/2024	High Cost	DAWN KUVALIS	United	Medicaid	66		0	2	0	1	$0.00	

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Azara Patient Outreach (APO)

Benefits of Azara Patient Outreach

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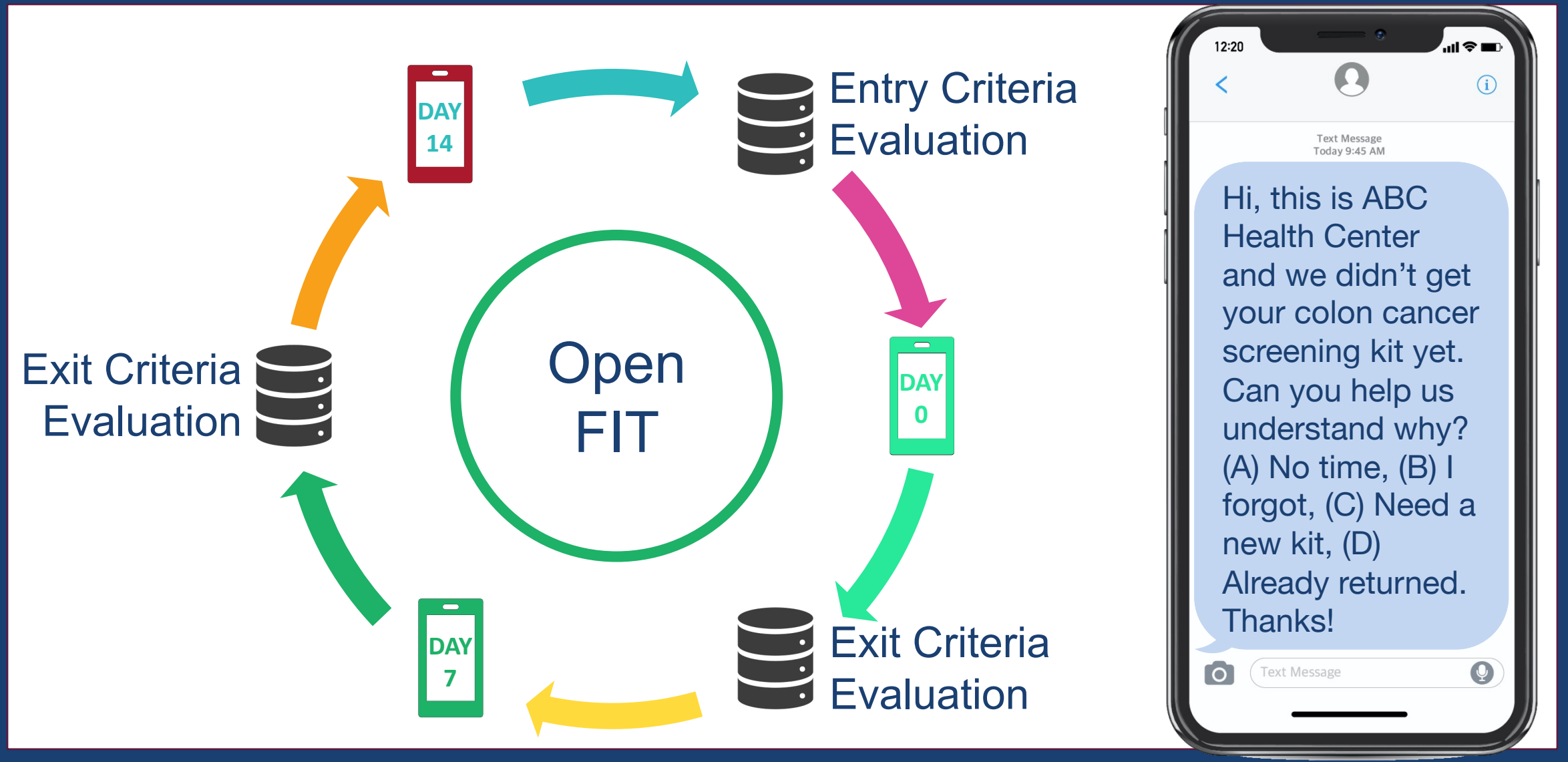
- Utilize existing trusted data within DRVS
- Faster and less resource heavy than traditional methods
- Administer Outreach Campaigns from within Azara DRVS
- Pre-Configured "*Set It and Forget It*" (SIFI) Campaigns designed to address common Care Gaps
- Review and track results and efficacy within Azara DRVS

> *"To have messages flow automatically to patients who need them and not to those who don't, enables us to focus on higher priority outreach."*
>
> - Azara APO Client

Patient Text Journey



APO Campaign Performance

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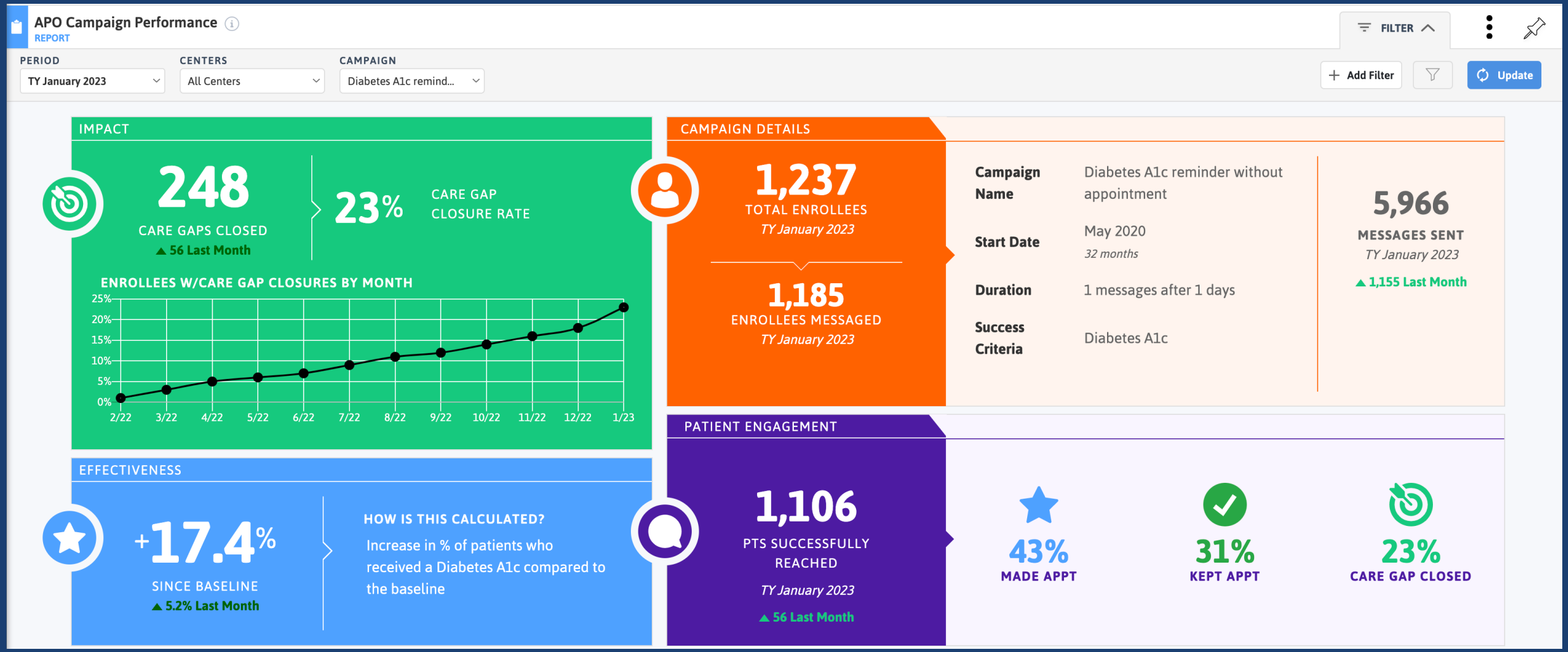

Azara APO Campaigns

“*Set It and Forget It*” (SIFI) outreach campaigns exist for:

- Cancer Screening: Breast, Cervical and Colorectal
- Colonoscopy Referrals
- Childhood Immunizations
- Well Child Visits
- Patient and /or Members without Visits
- Chlamydia Screening
- Diabetes Care
- Hypertension Care
- Transitions of Care
- Flu Vaccine Reminders
- COVID Vaccine Awareness, 2nd Dose and Booster Reminders
- Medicaid Redetermination
- Chronic Kidney

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Landing Page & Live Chat

New Login / Landing Page

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Live Chat

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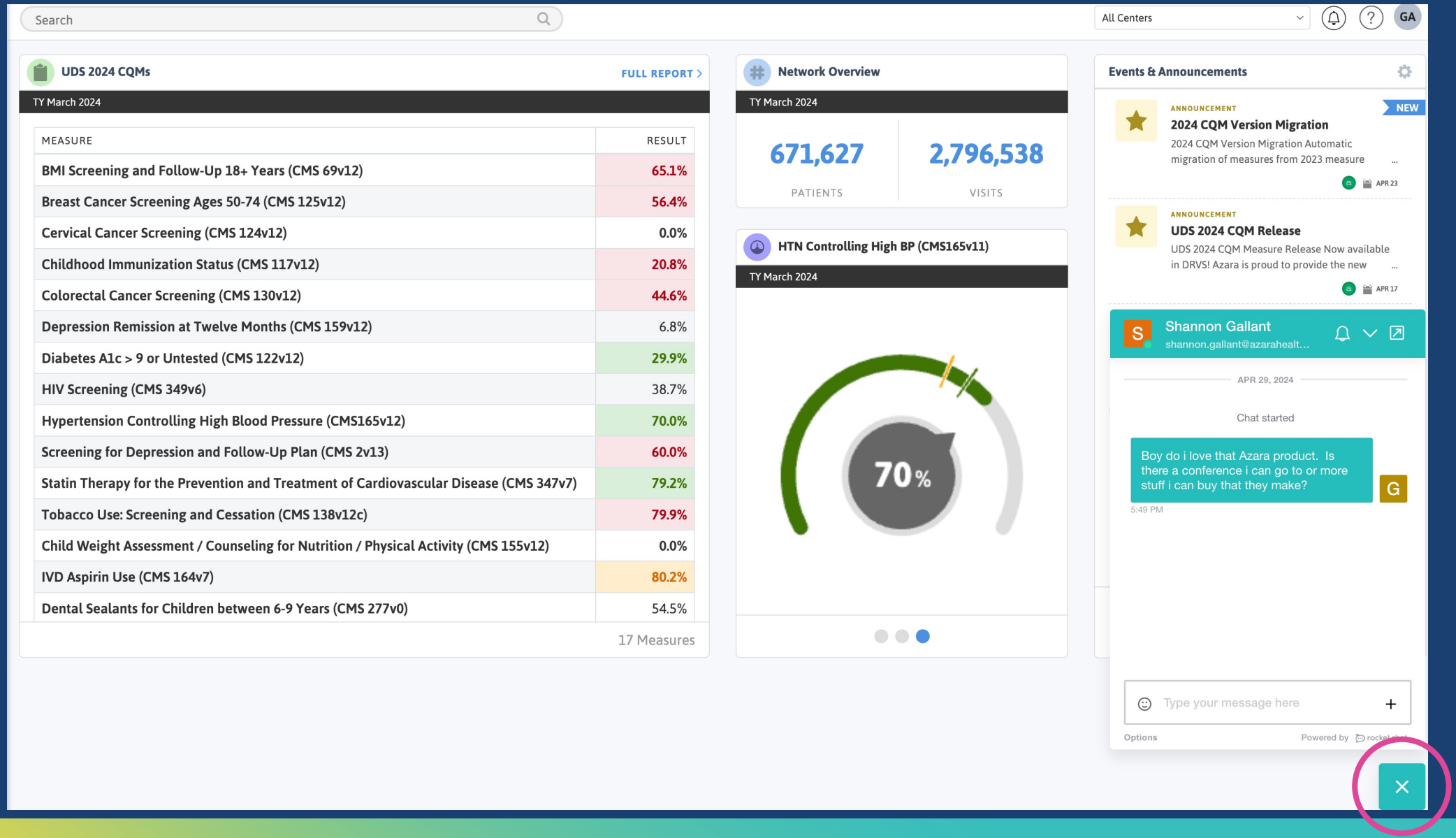

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A Few Measure Enhancements

Chronic Kidney Disease

- Recognized non-dialysis CKD patients account for 18.2% of total Medicare expenditures, which is approximately $45.5 B
- CKD patients incur approximately $22.4 K / pts / yr in medical expenditures, which is almost 3x as much as non-CKD patients
- What is Azara doing ?

Chronic Kidney Disease

- CKD patients incur approximately $22.4 K / pts / yr in medical expenditures,
- Updated existing measures
- Added RDEs for ‘Consecutive GFRs’ for use in Registries
  - Will be creating a new CKD Registry with these RDEs
- Added dynamic CKD cohort options based on GFR labs
  - For use with CERs and ACC Care Management
- Created new APO campaigns
- Referrals to Nephrologists

Typical Filtering

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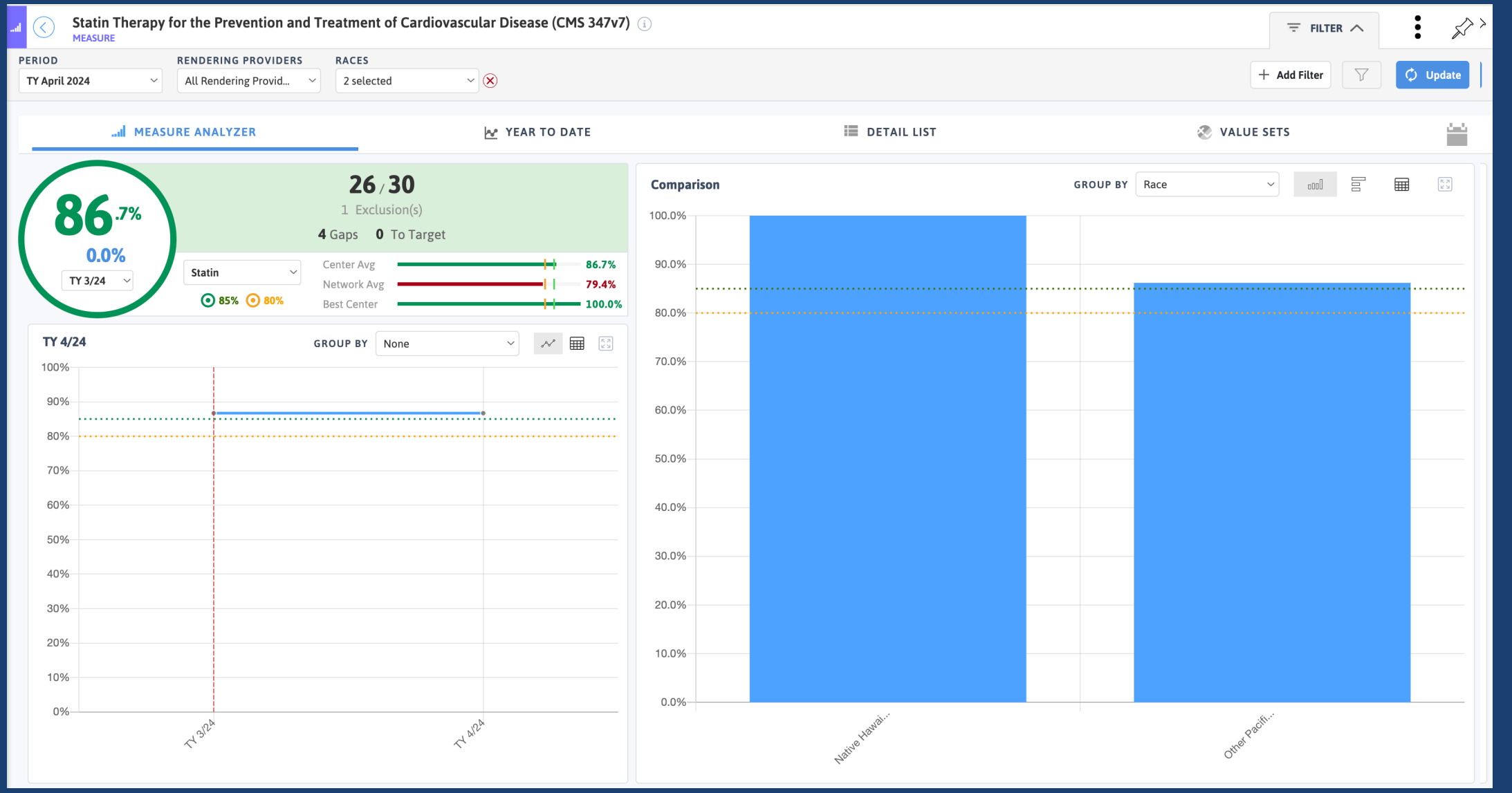


Search

All Centers

GA

PVP

CMP

Reports

Dashboards

Measures

Registries

Admin

I/P Follow Up Visit

MEASURE

FILTER

PERIOD: March 2024

CENTERS: All Centers

RENDERING PROVIDERS: All Rendering Provid...

FOLLOW UP VISIT: 9 selected

Add Filter

Update

MEASURE ANALYZER | DETAIL LIST | VALUE SETS

43%

-2%

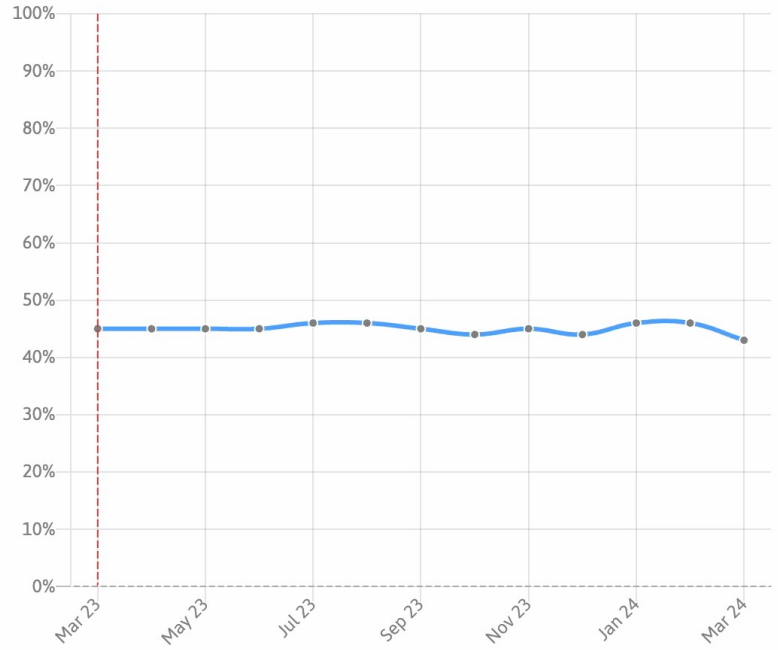
Mar 23

2,240 / 5,193

Create Target

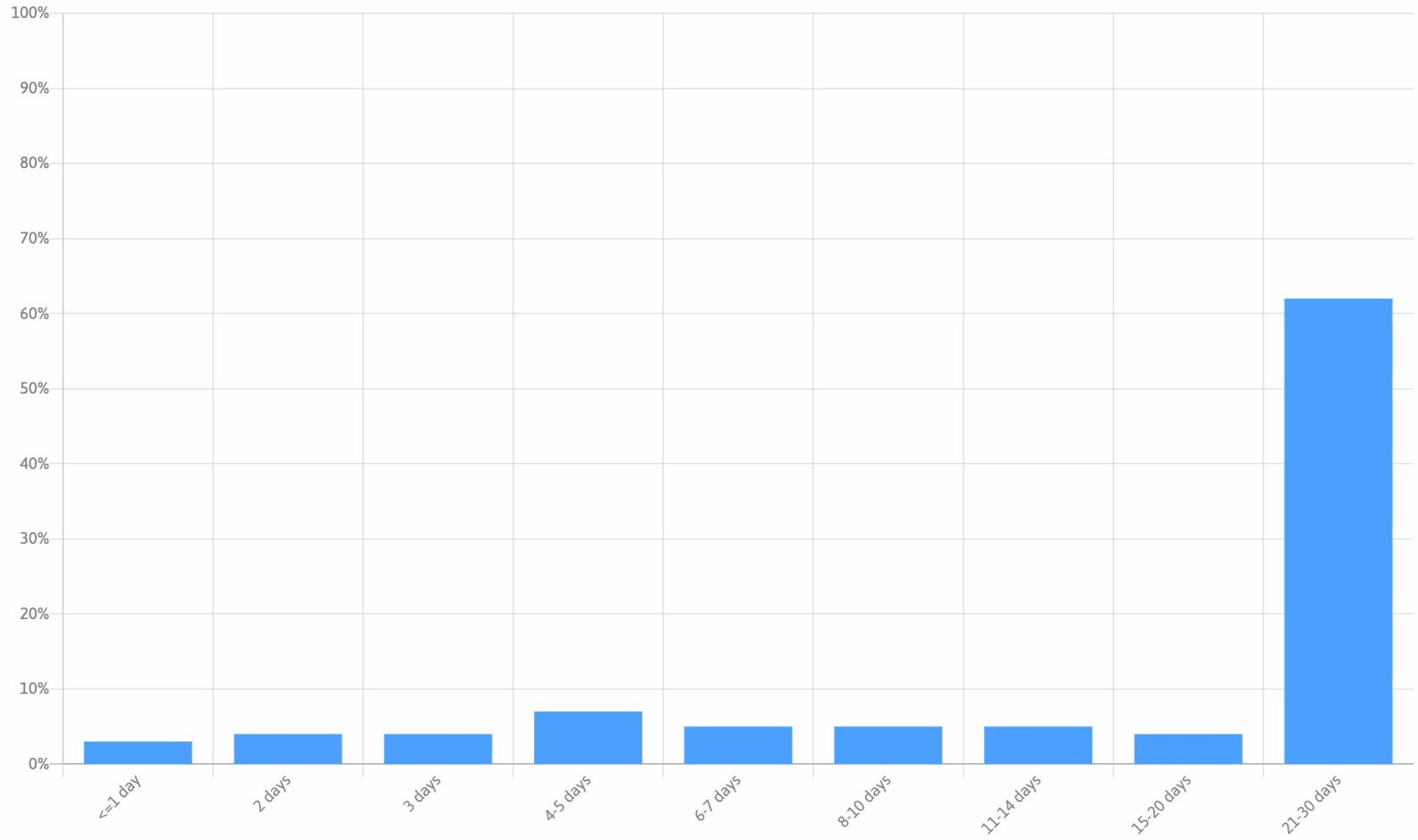
Mar 24

GROUP BY None



Comparison

GROUP BY Follow Up Visit



eCQM Certification

- HRSA / BPHC relies on the eCQMs for most of the UDS measures
  - Azara adheres to the eCQM specifications for these measures
  - In fact, Azara updates the UDS eCQMs per the PAL and new specifications
- Certain programs (e.g., CMS MSSP) require not only specification adherence, but also formal certification of measures and QRDA output
- To provide greater support for such programs, Azara is expanding our eCQM certification. Certified measures will now include:
  - Diabetes: Hemoglobin A1c Poor Control (CMS122v11)
  - Cervical Cancer Screening (CMS124v11)
  - Breast Cancer Screening (CMS125v11)
  - Colorectal Cancer Screening (CMS130v11)
  - Controlling High Blood Pressure (CMS165v11)
  - Preventive Care and Screening: Screening for Depression and Follow-Up Plan (CMS2v12)
  - Depression Remission at Twelve Months (CMS159v11)

Export to QRDA

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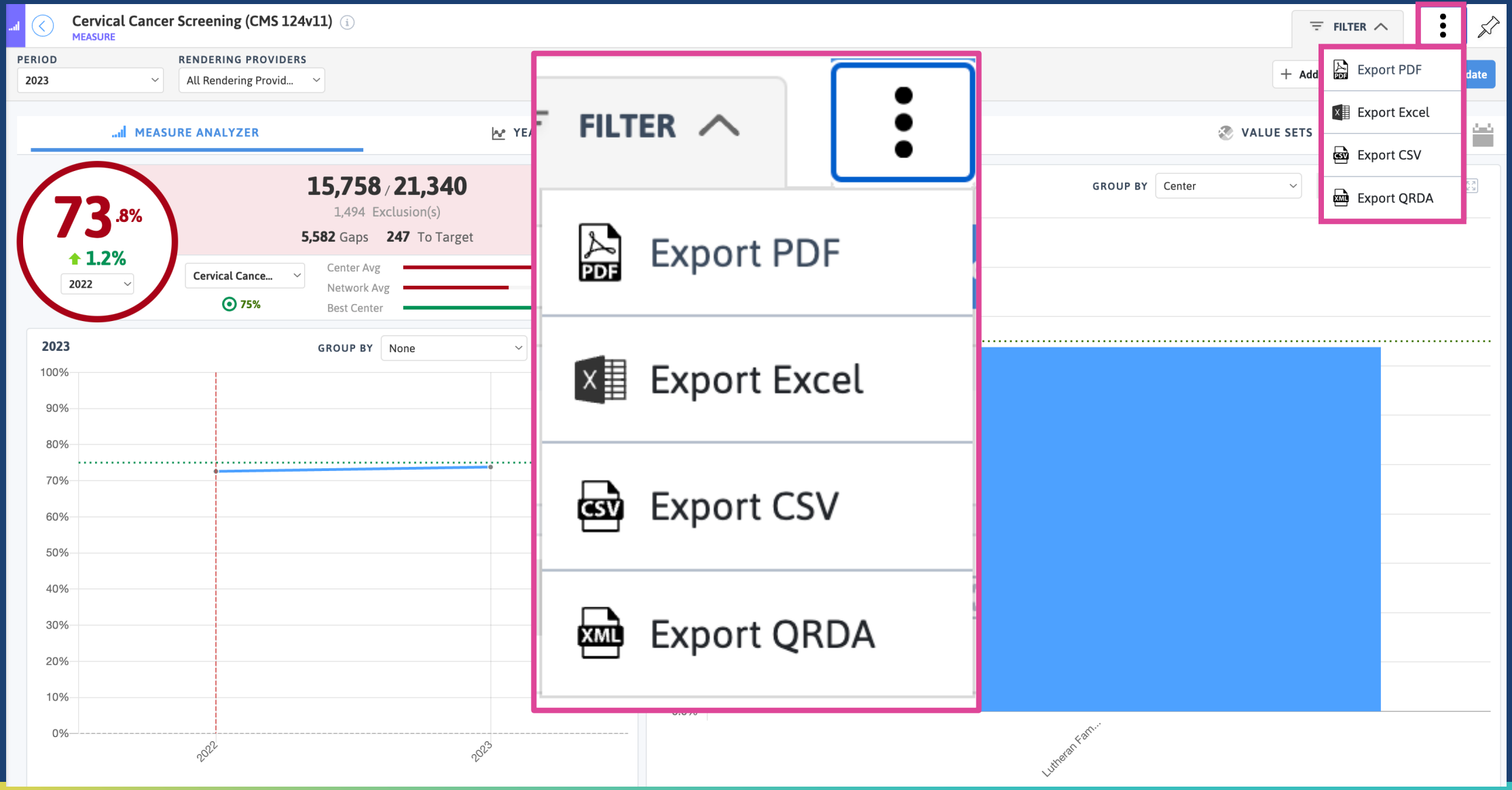

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More Fun Stuff

Dashboard Enhancements

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- You can copy a widget on a dashboard
- All the widgets on a dashboard no long reload when you add a new widget ... Only the widget added reloads
- There is now ’spacer’ widget available on dashboards
- The colors align across widgets when grouping by provider or location
- We have enhanced the percent of total widget (pie chart) to show the top 9 value and then “Everything Else”

Dashboard Enhancement Examples

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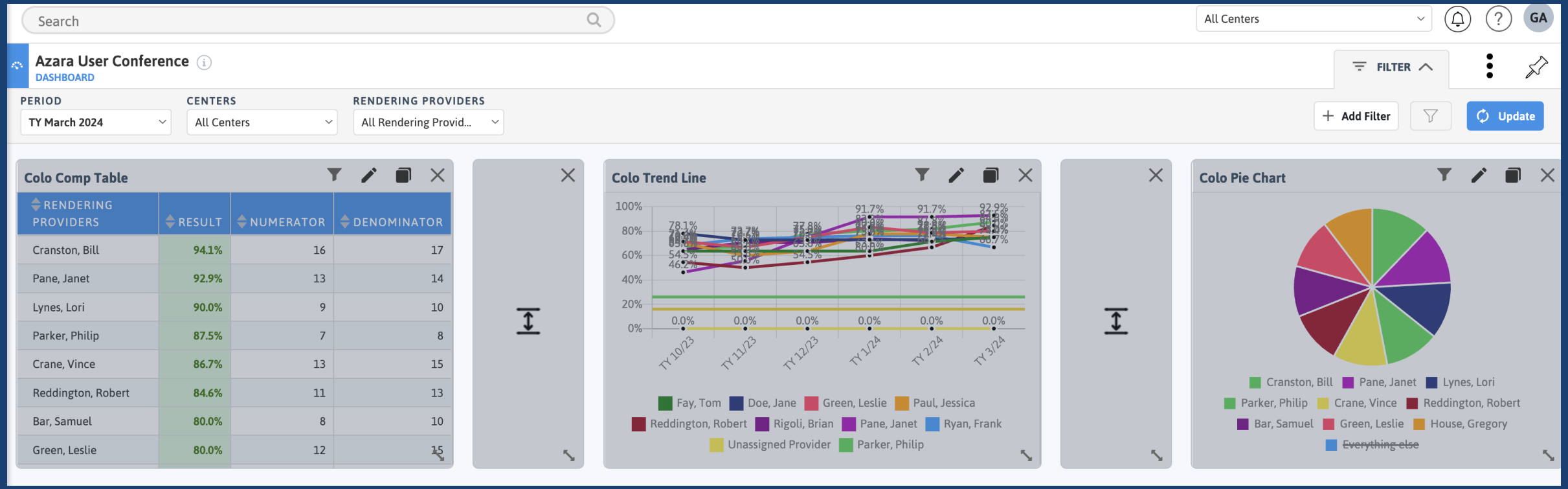
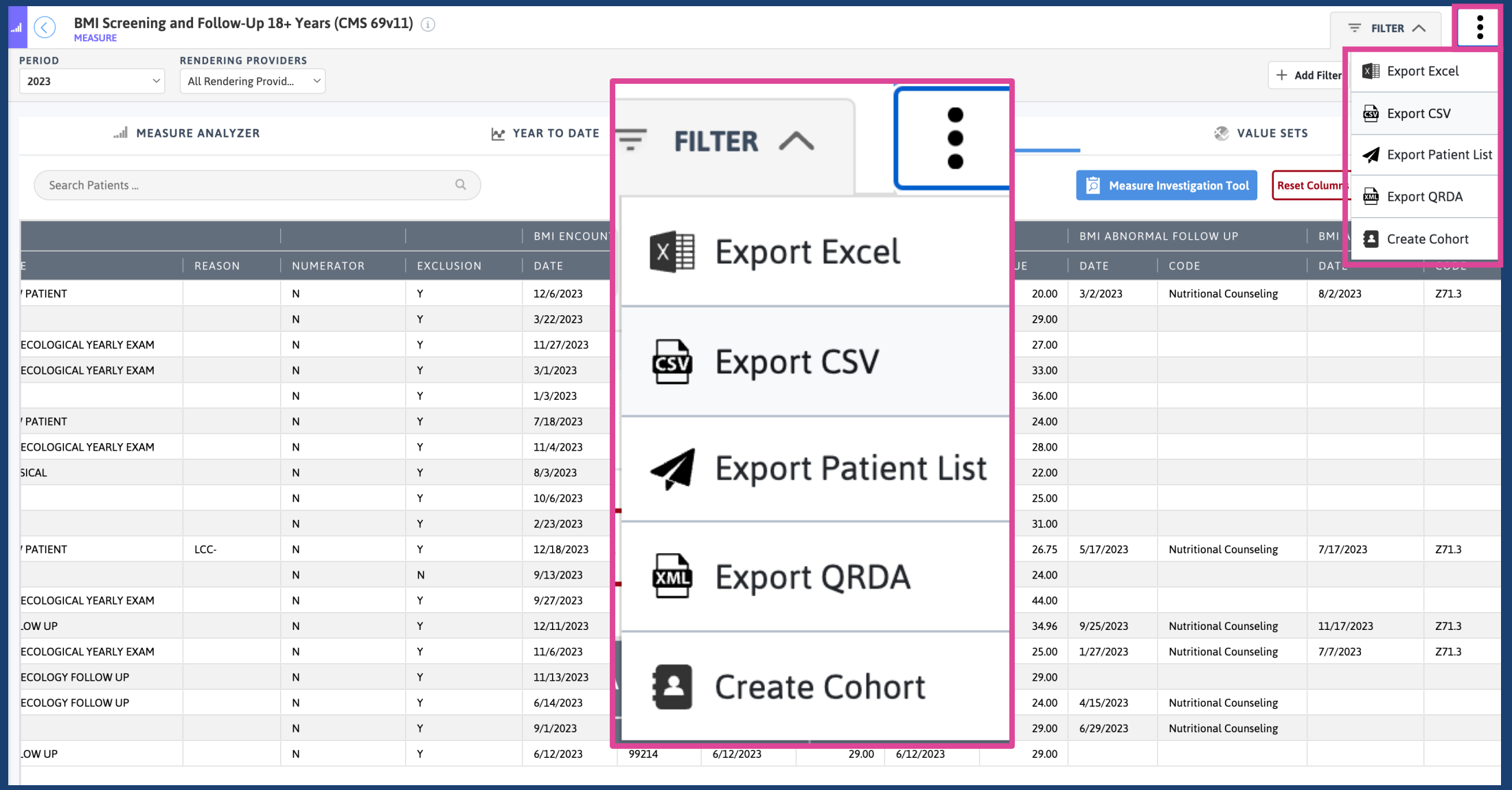


Export to CSV

azara 2024



Dynamic Baselines

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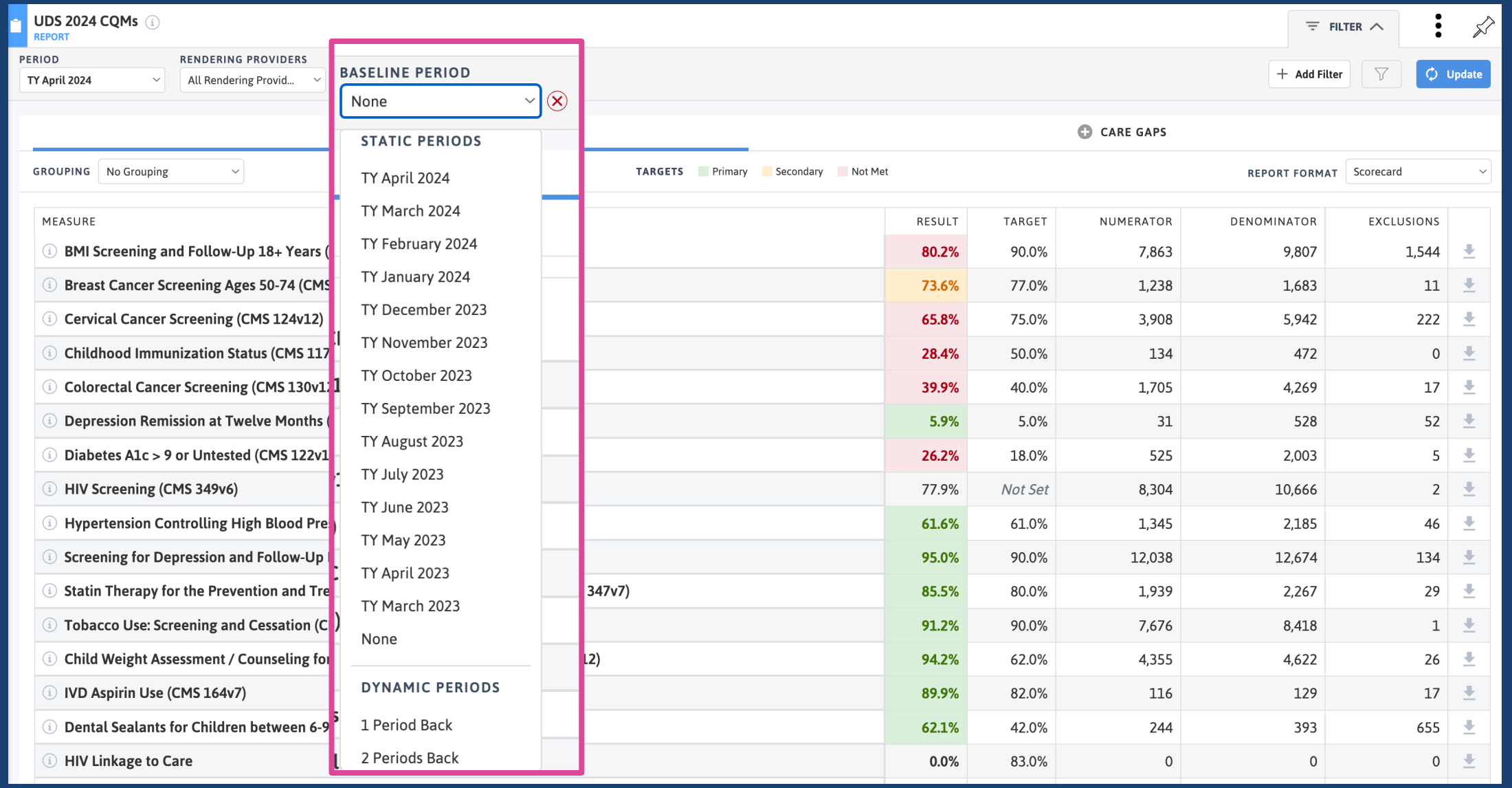

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Admin Functions

New Admin Functions

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- Functionality for the administration of your centers' providers, and locations in DRVS is being improved
  - Column Picker makes it easier to review columns you prioritize
  - Bulk selection makes it more efficient to manage large numbers of providers and locations
    - Edit and maintain custom groups
    - Edit and maintain provider and location attributes
- Following that we will
  - Migrate the maintenance of UDS Service Categorization for Table 5
  - Create a Payer Admin for managing many EHR payer records in your system

Provider Administration

Create Provider Group

PROVIDERS 1117 | PROVIDER GROUPS 27

Note that changes made to 4-Cut providers will not be reflected immediately. The measure must be re-processed and will be made available on the following Monday.

1117 providers selected | Actions | All | Active | Deleted | Search Providers...

PROVIDER NAME	NPI	EHR SERVICE CATEGORY	UDS SERVICE CATEGORY	PANEL SIZE	EHR STATUS	QUAL ENC PAST YEAR	INCLUDE IN FILTER	INCLUDED IN 4
Hopper, Jennifer		NULL	Ignore	0	Active	False		
Brown, Tammy	1245669266	NULL	Ignore	0	Active	False		
Rich, Joseph	1952666919	OD | Ophthalmology	Ophthalmologists	0	Active	True	☑	
Wiredu, Akua	1811132244	NULL	Ignore	0	Active	False		
Balmer, Thomas	1285854232	DMD | Dentist	Dentists	1	Deleted	False		
Taylor, Jill		NULL	Ignore	0	Active	False		
Koehler, Elizabeth		NULL	Ignore	1	Active	False		
Randell, Mary	1760020234	FNP | Family Practice	Nurse Practitioners	285	Deleted	True		
Mallipeddi, Ambica	1467045518	DDS | Dental	Dentists	1	Deleted	True		
Alakkassery Kumaran, Suraj Kumar	1568698306	NULL	Ignore	48	Active	False		
McBrayer, Jessica		NULL	Ignore	0	Active	False		
Dr. Amanda Phan Op1		NULL	Ignore	0	Deleted	False		
RN Wentzville		NULL	Ignore	0	Deleted	False		
Schulte, Abigail	1528392024	NULL	Ignore	0	Active	False		
Cleaveland, Kristen		NULL	Ignore	0	Active	False		
Campbell, Christian	1245669266	RDH | Dental Hygienists	Dental Hygienists	0	Deleted	False		
Dr. Leah Norvell Op2		NULL	Ignore	0	Deleted	False		☑
Jameson, Laura		NULL	Ignore	0	Active	False		
Hygiene-Mckensi		NULL	Ignore	0	Deleted	False		
Wilson MD, Elizabeth	1750381141	NULL	Ignore	0	Active	False		
HoweLambert, Nancy	1366477291	NULL	Ignore	0	Active	False		
Griebel, Chris		NULL	Ignore	0	Active	False		

Columns

1 to 22 of 1,117

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Provider Administration

Create Provider Group

PROVIDERS 1117 | PROVIDER GROUPS 27

Note that changes made to 4-Cut providers will not be reflected immediately. The measure must be re-processed and will be made available on the following Monday.

0 providers selected | Actions | All | Active | Deleted | Search Providers...

PROVIDER NAME	EHR SERVICE CATEGORY	UDS SERVICE CATEGORY	PANEL SIZE	EHR STATUS	QUAL ENC PAST YEAR	INCLUDE IN FILTER	INCLUDED IN 4-CUT CALC
Hopper, Jennifer	NULL	Ignore	0	Active	False	☑	☐
Brown, Tammy	NULL	Ignore	0	Active	False	☑	☐
Rich, Joseph	OD | Ophthalmology	Ophthalmologists	0	Active	True	☑	☐
Wiredu, Akua	NULL	Ignore	0	Active	False	☑	☐
Balmer, Thomas	DMD | Dentist	Dentists	1	Deleted	False	☑	☐
Taylor, Jill	NULL	Ignore	0	Active	False	☑	☐
Koehler, Elizabeth	NULL	Ignore	1	Active	False	☑	☐
Randell, Mary	FNP | Family Practice	Nurse Practitioners	285	Deleted	True	☑	☐
Mallipeddi, Ambica	DDS | Dental	Dentists	1	Deleted	True	☑	☐
Alakkassery Kumaran, Suraj Kumar	NULL	Ignore	48	Active	False	☑	☐
McBrayer, Jessica	NULL	Ignore	0	Active	False	☑	☐
Dr. Amanda Phan Op1	NULL	Ignore	0	Deleted	False	☑	☐
RN Wentzville	NULL	Ignore	0	Deleted	False	☑	☐
Schulte, Abigail	NULL	Ignore	0	Active	False	☑	☐
Cleaveland, Kristen	NULL	Ignore	0	Active	False	☑	☐
Campbell, Christian	RDH | Dental Hygienists	Dental Hygienists	0	Deleted	False	☑	☐
Dr. Leah Norvell Op2	NULL	Ignore	0	Deleted	False	☑	☐
Jameson, Laura	NULL	Ignore	0	Active	False	☑	☐
Hygiene-Mckensi	NULL	Ignore	0	Deleted	False	☑	☐
Wilson MD, Elizabeth	NULL	Ignore	0	Active	False	☑	☐
HoweLambert, Nancy	NULL	Ignore	0	Active	False	☑	☐
Griebel, Chris	NULL	Ignore	0	Active	False	☑	☐

Columns

1 to 22 of 1,117

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Provider Administration

Create Provider Group

PROVIDERS 1117 | PROVIDER GROUPS 27

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0 providers selected | Actions | All | Active | Deleted | Search Providers...

PROVIDER NAME	NPI	EMAIL	EHR SERVICE CATEGORY	UDS SERVICE CATEGORY	PANEL SIZE	EHR STATUS	QUAL ENC PAST YEAR	INCLUDE IN FILTER	INCLUDED IN 4-CUT CALC
Hopper, Jennifer		Jhopper@cridercenter.o	NULL	Ignore	0	Active	False	☑	☐
Brown, Tammy	1245669266	Tbrown@compasshn.org	NULL	Ignore	0	Active	False	☑	☐
Rich, Joseph	1952666919		OD | Ophthalmology	Ophthalmologists	0	Active	True	☑	☐
Wiredu, Akua	1811132244	Awiredu@fhcmo.org	NULL	Ignore	0	Active	False	☑	☐
Balmer, Thomas	1285854232	Tbalmer@pbhc.org	DMD | Dentist	Dentists	1	Deleted	False	☑	☐
Taylor, Jill		Jtaylor@cridercenter.org	NULL	Ignore	0	Active	False	☑	☐
Koehler, Elizabeth		Ekoehler@cridercenter.c	NULL	Ignore	1	Active	False	☑	☐
Randell, Mary	1760020234	Mrandell@compasshn.o	FNP | Family Practice	Nurse Practitioners	285	Deleted	True	☑	☐
Mallipeddi, Ambica	1467045518	am22833@compasshn.o	DDS | Dental	Dentists	1	Deleted	True	☑	☐
Alakkassery Kumaran, Suraj Kumar	1568698306	DralakkasseryKumaran@	NULL	Ignore	48	Active	False	☑	☐
McBrayer, Jessica		Jmcbrayer@cridercente	NULL	Ignore	0	Active	False	☑	☐
Dr. Amanda Phan Op1			NULL	Ignore	0	Deleted	False	☑	☐
RN Wentzville			NULL	Ignore	0	Deleted	False	☑	☐
Schulte, Abigail	1528392024	Aschulte@fhcmo.org	NULL	Ignore	0	Active	False	☑	☐
Cleaveland, Kristen			NULL	Ignore	0	Active	False	☑	☐
Campbell, Christian	1245669266	Ccampbell@compasshn	RDH | Dental Hygienists	Dental Hygienists	0	Deleted	False	☑	☐
Dr. Leah Norvell Op2			NULL	Ignore	0	Deleted	False	☑	☐
Jameson, Laura		Ljameson@cridercenter.	NULL	Ignore	0	Active	False	☑	☐
Hygiene-Mckensi			NULL	Ignore	0	Deleted	False	☑	☐
Wilson MD, Elizabeth	1750381141		NULL	Ignore	0	Active	False	☑	☐
HoweLambert, Nancy	1366477291	Nhowelambert@compa	NULL	Ignore	0	Active	False	☑	☐
Griebel, Chris		Cgriebel@cridercenter.c	NULL	Ignore	0	Active	False	☑	☐

Columns

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Payer Admin

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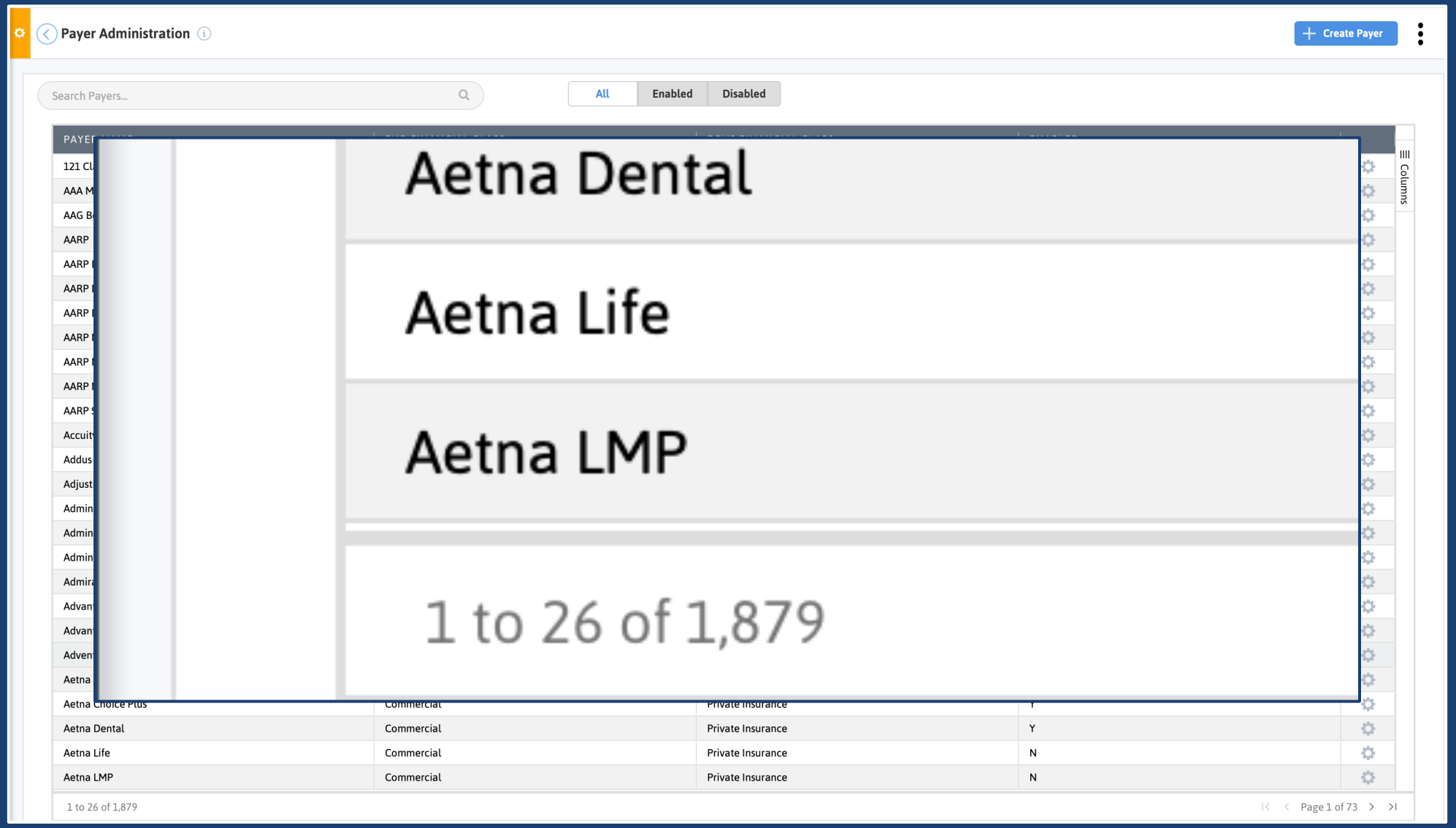

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The Rest of 2024 and Beyond

Azara Themes

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Care Connect

- GA of ACC 2.0
- Develop Triage Workflow
  - Closed loop ACU > CC > CM > ACU
- Enable ability to create and manage ad-hoc care navigation activities
- Improve in-product reporting
- Incorporate ACC activities into DRVS for rpts

Expand Value Thru Partnerships

- Support VBC Enablers
- Expand & Grow New
  - MH / BH Emerging Market
  - Rx: SureScripts
  - RPM, Surveys
- Enhance Existing
  - SDOH - FindHelp/UniteUs bidirectional referrals

Scalability & Maintenance

- UX/UI enhancements, new features
- Annual updates for HEDIS, UDS, CQMs
- UDS+ 2024 submission
  - Support for all CQMs
  - Operationalize execution
  - Sharing of results / 'decoder' with clients
- Enhance HIE usage - leverage procedure & lab data

EHR Integration

- Push PDF content into EHR
- Pass discreet data back into EHR structured fields and PDF
- Implement / Improve Plug-In for top 5 EHRs in client base
  - SMART on FHIR
- Data collection via forms in ACC to be pushed back to EHR

Patient Engagement

- Interface with Artera
- Leverage actionable data from ACU and ACC for APO campaigns
- Enhance curation of patient population for APO SiFi Campaigns
  - Plan
  - Location
  - Self created groups of providers

Cost & Utilization

- Surface and operationalize actionable insights
  - ACC and APO integration
  - High Cost Patients, Avoidable IP/ED Episodes, Rx Adherence
  - Member Review Queue
- Enhance tracking of VBC performance
  - Targets & Benchmarks
  - Stop Loss Limits
  - Premium and MLR analytics
- Refresh User Interface
- Incorporate Premium and MLR analytics

WiFi Details

NETWORK

Westin_Conference

PASSWORD

azaraConf01

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USER CONFERENCE