Beyond Quality

How Azara Cost and Utilization Supports
Value-Based Care Success

PRESENTED BY:

Sara Weede
Product Manager
Azara Healthcare

Emily Holzman
Director, Clinical Transformation
Azara Healthcare

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

Agenda

AZARA COST AND UTILIZATION

UPCOMING FUNCTIONALITY

USING AN INTEGRATED DATA SYSTEM

Presenters

Sara Weede
Product Manager
Azara Healthcare

Emily Holzman
Director, Clinical Transformation
Azara Healthcare

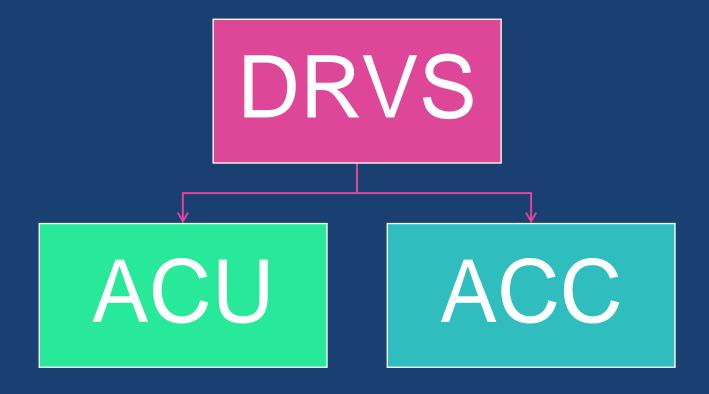# Azara Cost and Utilization

Powered with DRVS Plan Data

Azara Cost & Utilization (ACU) leverages payer data from DRVS to facilitate management of value-based care arrangements through analytics and visualizations.

ACU Enables Your Organization To:

azara 2024

Improve success in value-based care contracts by identifying high-cost/high-utilization members who can benefit from more cost-effective forms of care.

Analyze medical and Rx costs across the network while identifying opportunities for improvement at the network, practice, and provider levels

Track **utilization for primary care episodes outside of the members assigned practice** – identify where members are going both in & out network for primary care for outreach and reassignment efforts

Monitor **avoidable inpatient and emergency department (ED) utilization** to implement remediation plans

Plan Performance

azara 2024

1 **Summary**

Total Claims Paid	Member Months	PMPM	Avg RUB
$428.1m ▼ $76.5m	**901.1k** ▼ 132.6k	**$475** ▼ $25	**3** ▲ 2

2 **Top Cost Members**
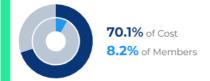
70.1% of Cost
8.2% of Members
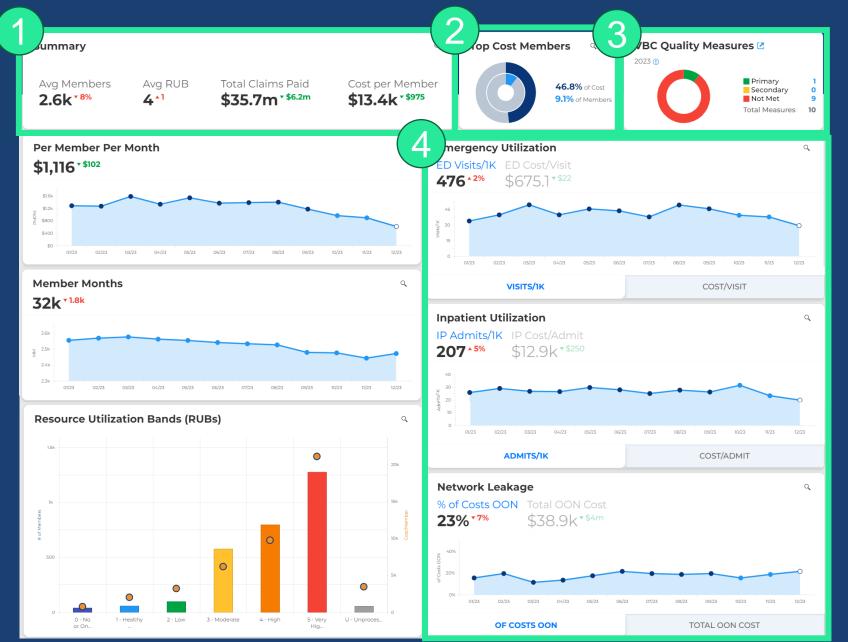
$300.1m
Total Cost Top Members

70.1% of total cost ($253.2m) is attributed to 8.2% of top cost members (population of **6,150** members)

3 **Plan and Line of Business Summary**

Plan & LOB	Total Cost ↓	MMs	PMPM	Resource Utilization Band	U	0	1	2	3	4	5	Quality	Primary	Secondary	Not Met
Health Plan 2 - Commercial	$126,128,124	327,569	$385	4,494 / 14,332 / 6,235									5	1	2
Health Plan 1 - Commercial	$112,688,289	225,123	$500	2,428 / 7,294 / 3,206									1		4
Health Plan 2 - Medicare	$38,407,479	31,739	$1,210	1,480 / 3,157 / 1,048 / 803 / 1,065										1	5
Health Plan 3 - Medicare	$35,722,124	32,000	$1,116	502 / 775 / 1,234									2		6
Health Plan 3 - Medicaid	$32,116,280	71,848	$447	3,246 / 1,344 / 2,814 / 1,165									3		2
Health Plan 1 - Medicaid	$29,142,800	38,095	$765	2,400 / 1,002 / 2,001 / 4,225 / 1,900									1	1	3

Executive

azara 2024

1 Summary

Avg Members	Avg RUB	Total Claims Paid	Cost per Member
2.6k ▼ 8%	**4** ▲ 1	**$35.7m** ▼ $6.2m	**$13.4k** ▼ $975

2 Top Cost Members

46.8% of Cost
9.1% of Members

3 WBC Quality Measures

2023

■ Primary	1
■ Secondary	0
■ Not Met	9
Total Measures	10

4

Per Member Per Month
$1,116 ▼ $102

Member Months
32k ▼ 1.8k

Resource Utilization Bands (RUBs)

Emergency Utilization
ED Visits/1K   ED Cost/Visit
476 ▲ 2%   **$675.1** ▼ $22

VISITS/1K | COST/VISIT

Inpatient Utilization
IP Admits/1K   IP Cost/Admit
207 ▲ 5%   **$12.9k** ▼ $250

ADMITS/1K | COST/ADMIT

Network Leakage
% of Costs OON   Total OON Cost
23% ▼ 7%   **$38.9k** ▼ $4m

OF COSTS OON | TOTAL OON COST

Emergency Utilization

azara 2024

1 Summary

209
▼ 14%
ED Visits/1k

$1.2k
▲ $12
ED Cost/Visit

40%
▼ 12%
Avoidable ED Visits

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

2 Top ED Cost Members

2.2% of Cost
1% of Members

$7.8m
ED Total Cost Top Members

2.2% of total cost ($7.8m) is attributed to 1% of top cost members (population of **775 members**)

3 Avoidable ED Visits [# OF VISITS] [PER 1K]

Crist LLC, Swaniawski..., Nitzsche and..., Altenwerth..., Legros, Rey, Stracke, Eli..., Bergnaum, Ta..., Jones, Ondri..., Mohr, Casper, Hansen, Ursu..., Dach, Mozell, Schinner, Ha...

4 Avoidable ED Visits by Clinical Class

Clinical Class	Total Cost ↓	# of Visits	Cost/Visit
Unclassified Symptoms	$2,015,029	1,483	$1,359
Digestive system diseases			$1,096
Circulatory Diseases			$1,114
Respiratory system diseases			$821

Investigate data to uncover trends for avoidable visits

Drill Down Modal – Default Path

Click on any bar to drill into data using the Azara default path

Drill Down Modal – Default Path

Drill Down Modal – Choose your Path

Drill Down Modal – Data Views

View drill down data in grid format

View drill down data at the member level

Inpatient Utilization

(1) Summary

95 ▼ 5% — IP Admits/1k

$15.7k ▲ $192.3 — IP Cost/Admit

17% ▲ 4% — 30 Day Readmit Rate

24% ▼ 4% — Avoidable IP Admits

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

(2) Top IP Cost Members

8.4% of Cost
0.4% of Members

$30.2m — IP Total Cost Top Members

8.4% of total cost ($30.2m) is attributed to 0.4% of top cost members (population of **304 members**)

(3) Avoidable IP Admits # OF ADMITS PER 1K

Swaniawski - … , Koepp, Cruic… , Greenfelder … , Fritsch LLC , VonRueden Gr… , McKenzie - L… , Lesch LLC , Schoen, Cart… , Bednar - Zul… , Streich, Klo… , O'Conner - S… , Nitzsche - K…

(4) Avoidable IP Admits by Clinical Class

Clinical Class	Total Cost ↓	# of Admits	Cost/Admit
Circulatory Diseases	$2,650,207	172	$15,408
Respiratory system diseases	$948,168	96	$9,877
Digestive system diseases	$917,775	89	$10,312
Metabolic Diseases	$874,364	82	$10,663
Neoplasms	$841,002	23	$36,565
Pregnancy	$703,714	53	$13,278
Infectious Diseases	$598,401	54	$11,081
Nervous system diseases	$552,332	39	$14,162

Inpatient Readmissions

(1) Summary

95
▼ 5%
IP Admits/1k

$15.7k
▲ $192.3
IP Cost/Admit

17%
▲ 4%
30 Day Readmit Rate

24%
▼ 4%
Avoidable IP Admits

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

(2) Top IP Cost Members

8.4% of Cost
0.4% of Members

$30.2m
IP Total Cost Top Members

8.4% of total cost ($30.2m) is attributed to 0.4% of top cost members (population of **304 members**)

(3) IP Readmissions   [# OF READMISSIONS] PER 1K

Azara Health... Family Health Main Street... Pediatric Pri... Local Health... Medical Assoc... Health Partners

(4) Readmissions by Clinical Class

Clinical Class ↑	Total Cost	# of Readmissions	Cost/Readmit
Behavioral Disorders	$101,623	33	$3,079
Blood Diseases	$130,699	9	$14,522
Circulatory Diseases	$1,003,179	81	$12,385
Congenital Abnormalities	$12,592	3	$4,197
Digestive system diseases	$454,717	39	$11,659
Factors Influencing Health Status	$587,922	28	$20,997
Genitourinary Diseases	$242,669	26	$9,333
Infectious Diseases	$592,407	39	$15,190

Rx Utilization

azara 2024

1

Total Rx Cost

$59.4m ▼ $5.6m

Rx PMPM

$78.4 ▼ $22.1

2

Costs by Generic vs Name Brand

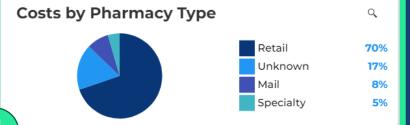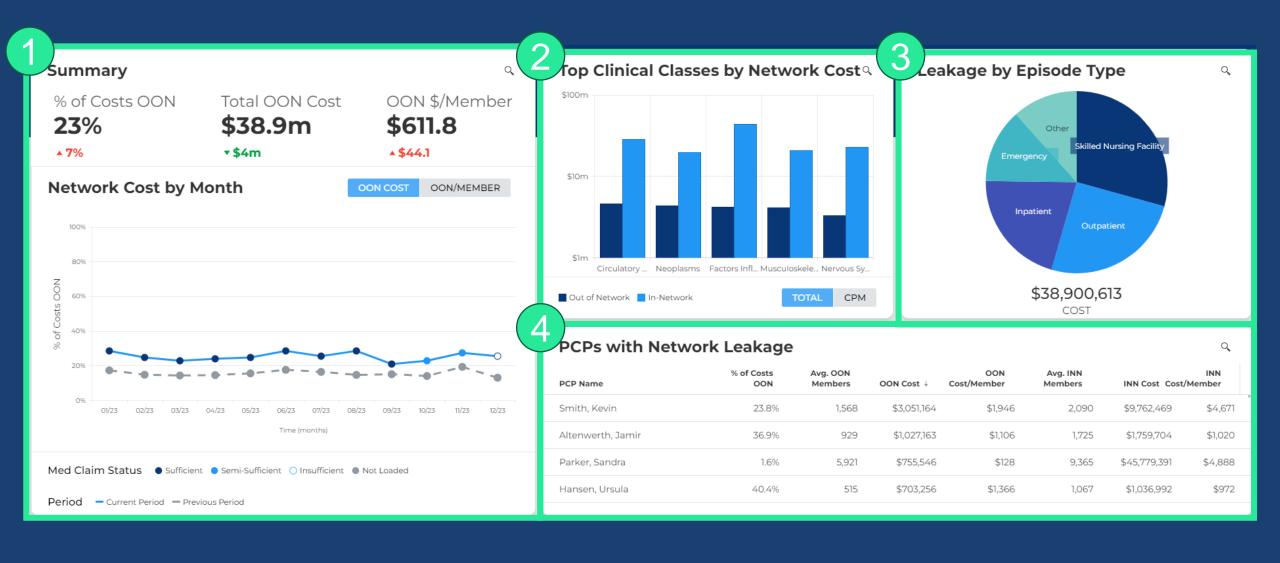|	
■ Name Brand	**58%**
■ Generic	**40.1%**
■ Unknown	**1.9%**

3

Costs by Anatomical Therapeutic Chemical (ATC) Classification

ATC Classification	Total Cost ↓	% of Generic Dispenses by Total Cost	# of Members	Cost/Member
ANTINEOPLASTIC AND IMMU...	$15,918,349.62	24.7%	10,163	$1,566.30
ALIMENTARY TRACT AND MET...	$12,754,481.34	14.13%	2,196	$5,808.05
RESPIRATORY SYSTEM	$10,394,830.76	59.85%	8,810	$1,179.89
CARDIOVASCULAR SYSTEM	$9,873,981.72	79.99%	12,142	$813.2
NERVOUS SYSTEM	$4,175,059.36	38.66%	7,262	$574.92
BLOOD AND BLOOD FORMIN...	$4,073,831.30	9.21%	1,882	$2,164.63
GENITO URINARY SYSTEM AN...	$2,336,838.91	9.75%	70,645	$33.08
ANTIINFECTIVES FOR SYSTEM...	$1,733,064.57	38.55%	8,367	$207.13

Costs by Pharmacy Type

■ Retail	**70%**
■ Unknown	**17%**
■ Mail	**8%**
■ Specialty	**5%**

4

Costs by Fill Location

Location Name	Total Cost ↓	# of Members	Cost/Member
Local Pharmacy	$11,023,914.54	10,532	$1,047
Specialty Pharmacy	$4,142,020.12	95	$43,600
Main Street Pharmacy	$2,243,201.67	820	$2,736

Network Leakage

1 — Summary

% of Costs OON
23% ▲7%

Total OON Cost
$38.9m ▼$4m

OON $/Member
$611.8 ▲$44.1

Network Cost by Month — OON COST / OON/MEMBER

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

Period: — Current Period -- Previous Period

2 — Top Clinical Classes by Network Cost

Circulatory ... | Neoplasms | Factors Infl... | Musculoskele... | Nervous Sy...

■ Out of Network ■ In-Network   TOTAL | CPM

3 — Leakage by Episode Type

Skilled Nursing Facility · Other · Emergency · Inpatient · Outpatient

$38,900,613 COST

4 — PCPs with Network Leakage

PCP Name	% of Costs OON	Avg. OON Members	OON Cost ↓	OON Cost/Member	Avg. INN Members	INN Cost	INN Cost/Member
Smith, Kevin	23.8%	1,568	$3,051,164	$1,946	2,090	$9,762,469	$4,671
Altenwerth, Jamir	36.9%	929	$1,027,163	$1,106	1,725	$1,759,704	$1,020
Parker, Sandra	1.6%	5,921	$755,546	$128	9,365	$45,779,391	$4,888
Hansen, Ursula	40.4%	515	$703,256	$1,366	1,067	$1,036,992	$972

Primary Care Leakage

1 In-Network Leakage

78.2k
▼ 25.4k
# of Visits

$12.7m
▼ $2.6m
Total Costs

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

2 In-Network Leakage by Episode Location

Location Name	Total Costs ↓	# of Members	# of Visits	Cost/Visit
Harvey, Abshire and Robel	$10,396,080	27,013	55,803	$186
Koepp, Cruickshank and …	$1,738,236	5,180	9,987	$174
Prohaska, Fadel and Abe…	$352,607	1,722	3,559	$99
Dietrich - Schuster	$330,070	1,260	2,143	$154
Johnston Inc	$181,909	205	325	$559
Russel - Kohler	$169,491	360	979	$173

3 Out-of-Network Leakage

32.7k
▼ 5.7k
# of Visits

$4.1m
▼ $125.8k
Total Costs

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

4 Out-of-Network Leakage by Episode Location

Location Name	Total Costs ↓	# of Members	# of Visits	Cost/Visit
Goldner Group	$107,014	339	710	$151
Weimann, Watsica and …	$87,909	720	1,221	$72
Kihn LLC	$87,641	783	1,308	$67
Boehm - Bins	$82,636	151	330	$250
Hand - Bartell	$46,896	226	353	$133
Muller, Fritsch and Haley	$38,207	89	171	$223

Claim Completeness

azara 2024

1 Medical Claim Completeness

Health Plan	01/23	02/23	03/23	04/23	05/23	06/23	07/23	08/23	09/23	10/23	11/23	12/23
Health Plan 1										84%	73%	68%
Health Plan 2												
Health Plan 3									66%	74%	60%	16%

Claim Status — **Threshold**

- ● Sufficient — >85%
- ● Semi-Sufficient — 70-85%
- ○ Insufficient — <70%
- ● Not Loaded

Disclaimer: Claim status uses averages and historical data to estimate when a sufficient amount of data has been received for cost and utilization analysis. Claim volumes outside of historical averages will continue to be processed and will impact cost and utilization measure performance even after a month if deemed sufficient

2 Rx Claim Completeness

Health Plan	01/23	02/23	03/23	04/23	05/23	06/23	07/23	08/23	09/23	10/23	11/23	12/23
Health Plan 1											84%	61%
Health Plan 2												
Health Plan 3												61%

Upcoming Functionality

Track costs and utilization to **identify members who could benefit from a Care Management program**

Send members from ACU to Azara Care Coordination (ACC) for triage in a Care Management program
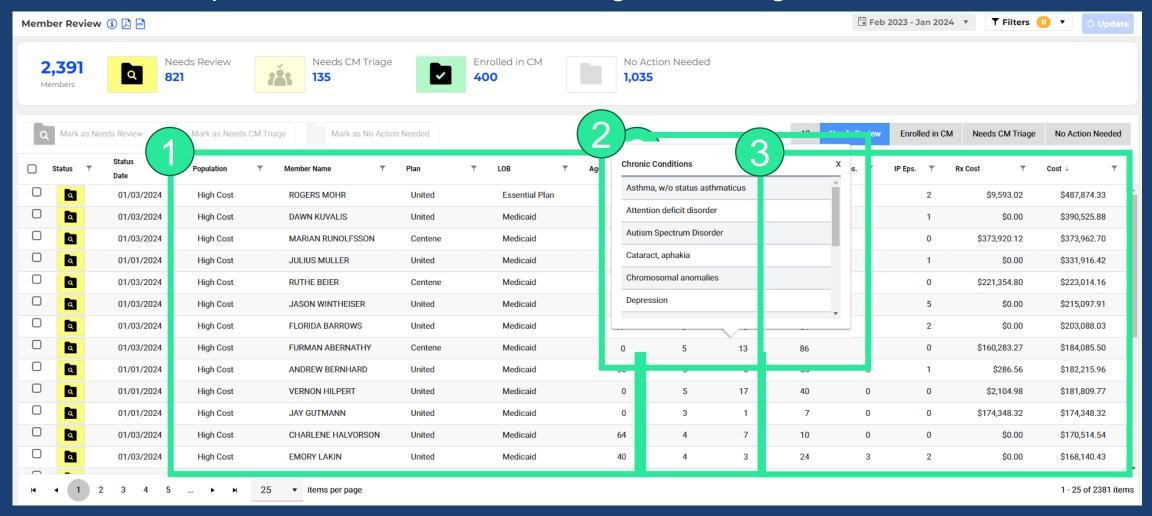
Track costs and utilization for members enrolled in Care Management programs

ACU Integration with ACC

Via the Member Review Queue, recommended members can be evaluated for promotion to the Care Management triage list

Essential Elements
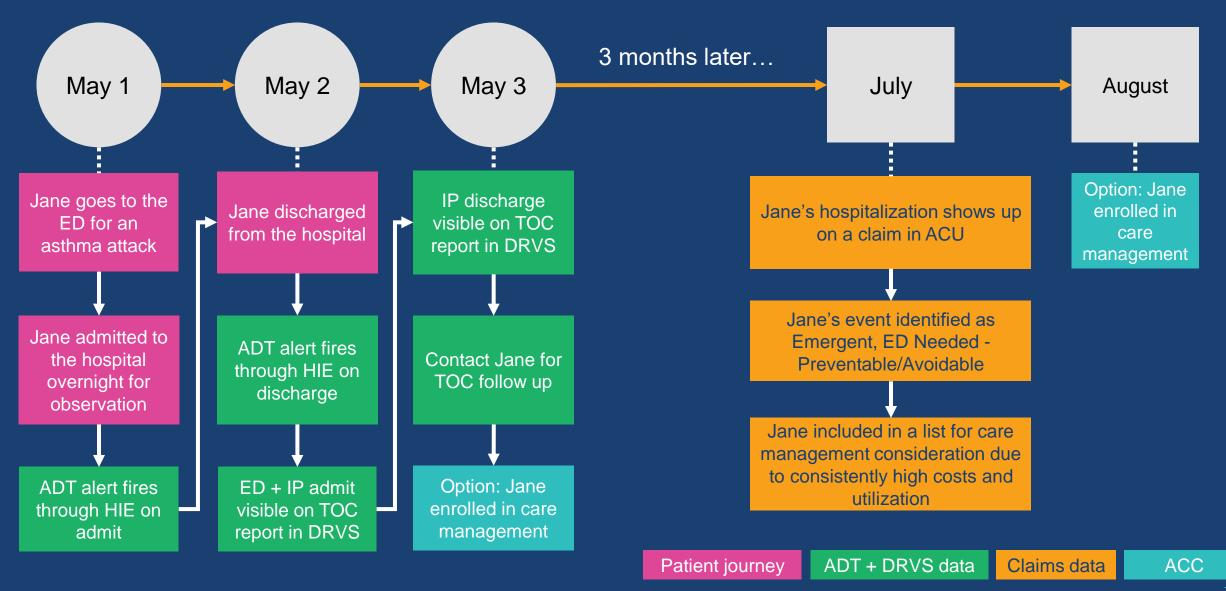
Azara Data Integration

Data Type	Source	Use Cases	Opportunity

DRVS TOC Report

azara 2024

Transitions of Care (TOC) - ED/IP ⓘ
REPORT

FILTER 2 ⌄

FILTERS: 03/29/2024-04/04/2024   Discharge

Search ... 🔍   NEXT APPT | All | No Appt | Upcoming Appt | Reset Columns   SAVED COLUMNS

ADMISSION EVENT						DISCHARGE		DIAGNOSIS	
TYPE	ADMISSION	DISCHARGE	ED VISITS LAST 6 MONTHS	IP VISITS LAST 6 MONTHS	IP READMIT	STATUS	STATUS CODE	CODE	DESCRIPTION ▽
ER Visit	3/31/24 10:42 pm	3/31/24 11:47 pm	2	0	N/A	Unknown or Blank	Home (Self-Care Only)	J45.21	MILD INTERMITTENT ASTHMA WITH (ACUTE) EXACERBATION
ER Visit	3/31/24 7:38 pm	4/1/24 3:17 am	1	0	N/A	Unknown or Blank	Home (Self-Care Only)	J45.901	UNSPECIFIED ASTHMA WITH (ACUTE) EXACERBATION
Inpatient Stay	3/27/24 9:11 am	3/30/24 10:36 am	1	1	N	Home	Home or Self Care Home ...	J45.909	UNSPECIFIED ASTHMA, UNCOMPLICATED
ER Visit	3/29/24 12:58 am	3/29/24 4:18 am	7	1	N/A	Home	01	J45.20	MILD INTERMITTENT ASTHMA, UNCOMPLICATED
Inpatient Stay	3/29/24 6:55 am	4/3/24 2:32 pm	1	1	N	Home	01	J45.901	UNSPECIFIED ASTHMA WITH (ACUTE) EXACERBATION
ER Visit	4/2/24 8:00 pm	4/2/24 10:42 pm	3	0	N/A	Home	01	J45.901	UNSPECIFIED ASTHMA WITH (ACUTE) EXACERBATION
ER Visit	3/31/24 1:04 am	3/31/24 3:42 am	5	0	N/A	Home	01	J45.909	UNSPECIFIED ASTHMA, UNCOMPLICATED

DRVS TOC Dashboard

ACU | Avoidable ED Visits

Avoidable ED Visits by Clinical Class

Clinical Class	Total Cost ↓	# of Visits	Cost/Visit
Unclassified Symptoms	$79,342	181	$438
Respiratory system diseases	$45,742	130	$352
Musculoskeletal Diseases	$29,373	83	$354
Genitourinary Diseases	$27,321	50	$546
Infectious Diseases	$25,760	74	$348
Digestive system diseases	$25,550	42	$608
Circulatory Diseases	$25,432	45	$565

ACU | Member Review
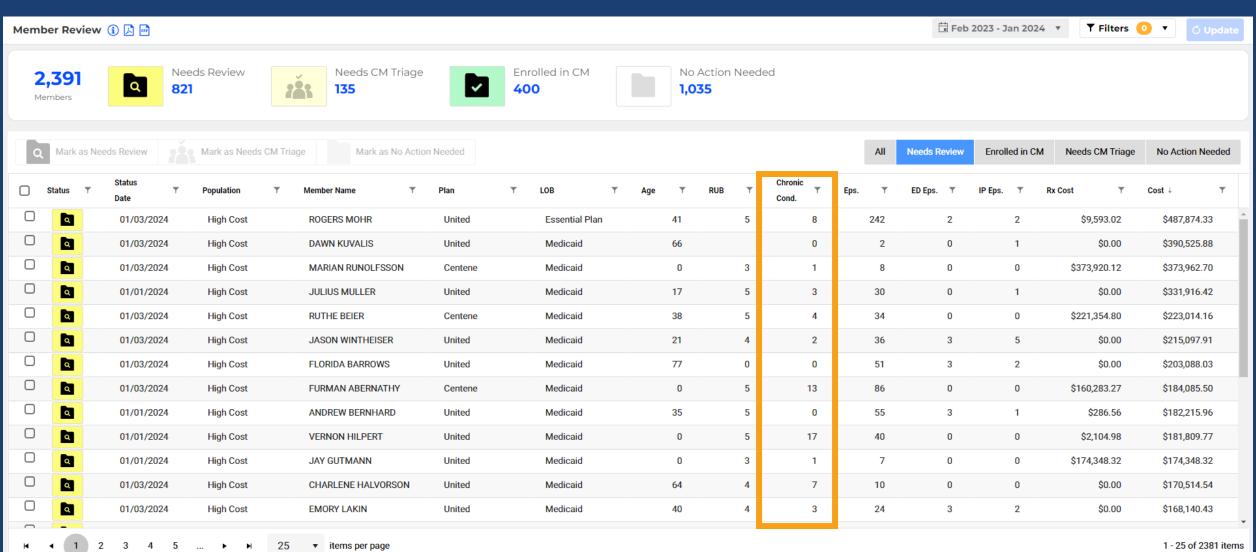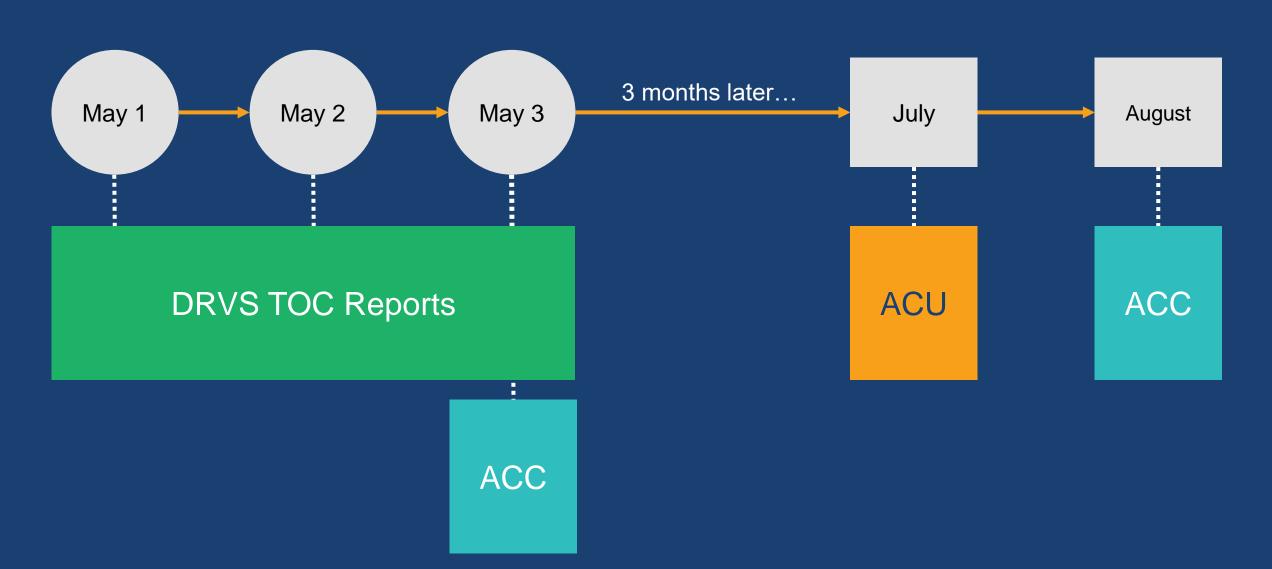
Measurement: Improving Care v. Compliance

Tool	Timing	Purpose	Data Sources		Population		
			EHR	Claims/ Enrollment Care Gaps	Patients in the EHR	Matched Members*	Unmatched Members

Metrics about this population reflect **care provided at the practice**

Metrics about this population reflect **documentation of care for enrolled populations**

*Matched members are a subset of patients in the EHR

What Does a Plan-Calc Measure Tell You?

Completeness of plan data, through claims or supplemental feeds.

Progress toward plan-contracted targets.

How well members enrolled in a specific plan are doing on a measure.
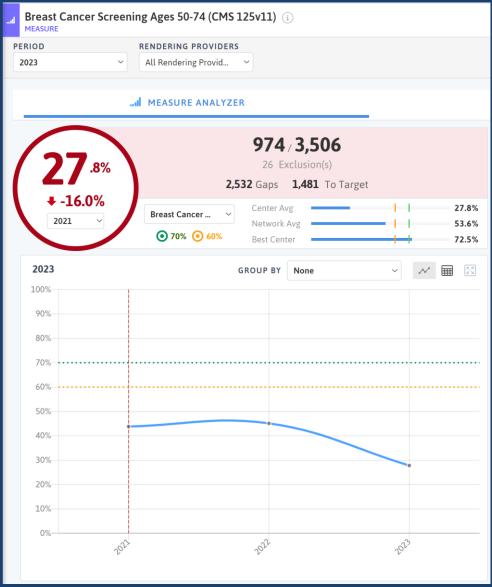
What Does a CQM Tell You?

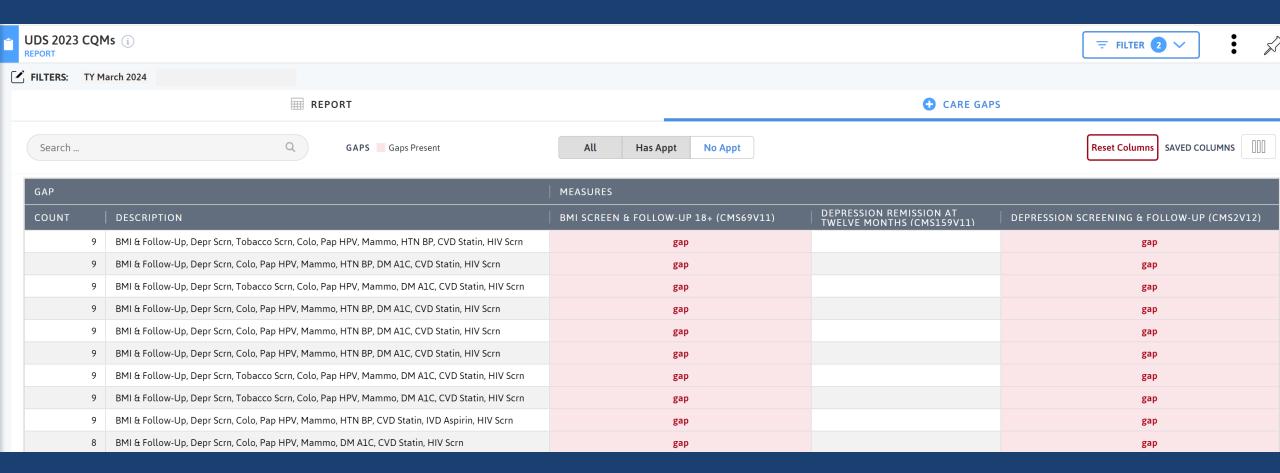If established workflows are generally followed around the measure-specified care.

If measure-related data is entered consistently in the EHR.

How well the practice provides the measure-specified care to the whole population, not just enrolled/insured members.
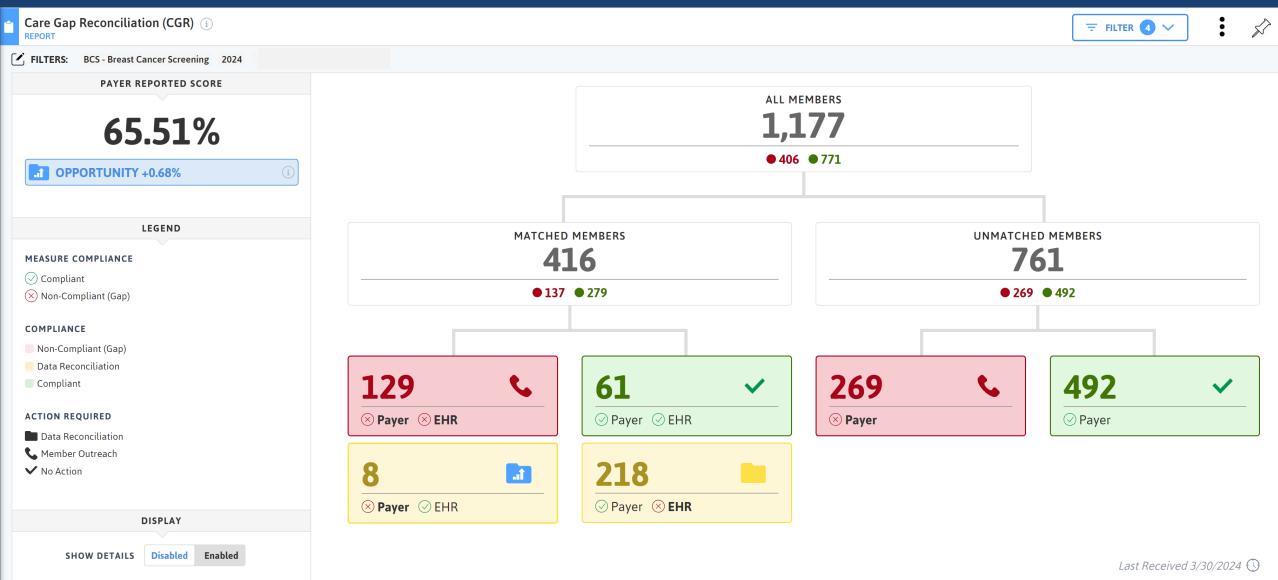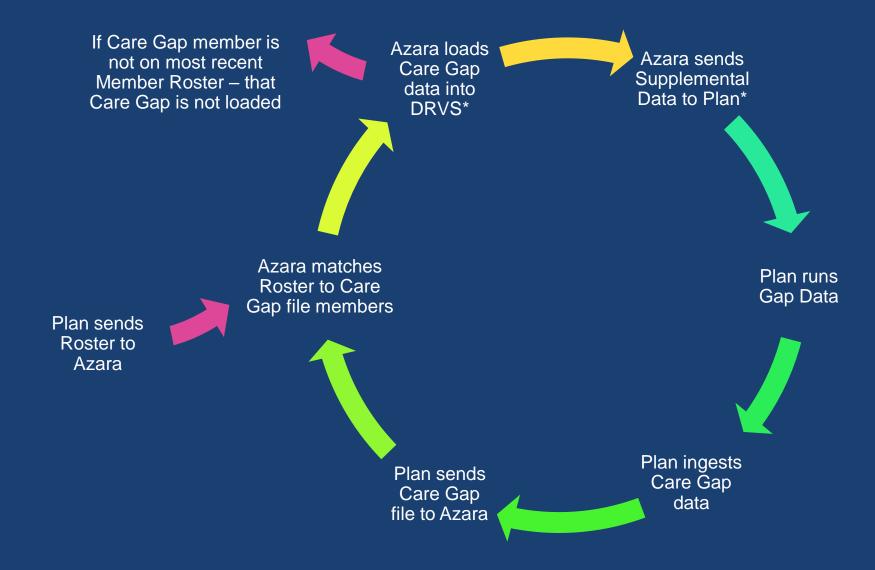
CQM Gaps

azara 2024

UDS 2023 CQMs ⓘ
REPORT

FILTER 2 ⌄

FILTERS: TY March 2024

⊞ REPORT | ⊕ CARE GAPS

Search ... 🔍 | GAPS ▢ Gaps Present | [All | Has Appt | No Appt] | Reset Columns | SAVED COLUMNS

GAP		MEASURES		
COUNT	DESCRIPTION	BMI SCREEN & FOLLOW-UP 18+ (CMS69V11)	DEPRESSION REMISSION AT TWELVE MONTHS (CMS159V11)	DEPRESSION SCREENING & FOLLOW-UP (CMS2V12)
9	BMI & Follow-Up, Depr Scrn, Tobacco Scrn, Colo, Pap HPV, Mammo, HTN BP, CVD Statin, HIV Scrn	gap		gap
9	BMI & Follow-Up, Depr Scrn, Colo, Pap HPV, Mammo, HTN BP, DM A1C, CVD Statin, HIV Scrn	gap		gap
9	BMI & Follow-Up, Depr Scrn, Tobacco Scrn, Colo, Pap HPV, Mammo, DM A1C, CVD Statin, HIV Scrn	gap		gap
9	BMI & Follow-Up, Depr Scrn, Colo, Pap HPV, Mammo, HTN BP, DM A1C, CVD Statin, HIV Scrn	gap		gap
9	BMI & Follow-Up, Depr Scrn, Colo, Pap HPV, Mammo, HTN BP, DM A1C, CVD Statin, HIV Scrn	gap		gap
9	BMI & Follow-Up, Depr Scrn, Colo, Pap HPV, Mammo, HTN BP, DM A1C, CVD Statin, HIV Scrn	gap		gap
9	BMI & Follow-Up, Depr Scrn, Tobacco Scrn, Colo, Pap HPV, Mammo, DM A1C, CVD Statin, HIV Scrn	gap		gap
9	BMI & Follow-Up, Depr Scrn, Tobacco Scrn, Colo, Pap HPV, Mammo, DM A1C, CVD Statin, HIV Scrn	gap		gap
9	BMI & Follow-Up, Depr Scrn, Colo, Pap HPV, Mammo, HTN BP, CVD Statin, IVD Aspirin, HIV Scrn	gap		gap
8	BMI & Follow-Up, Depr Scrn, Colo, Pap HPV, Mammo, DM A1C, CVD Statin, HIV Scrn	gap		gap

Plan Gaps

Supplemental + Care Gap Data Cycle

- If Care Gap member is not on most recent Member Roster – that Care Gap is not loaded
- Azara loads Care Gap data into DRVS*
- Azara sends Supplemental Data to Plan*
- Plan runs Gap Data
- Plan ingests Care Gap data
- Plan sends Care Gap file to Azara
- Azara matches Roster to Care Gap file members
- Plan sends Roster to Azara
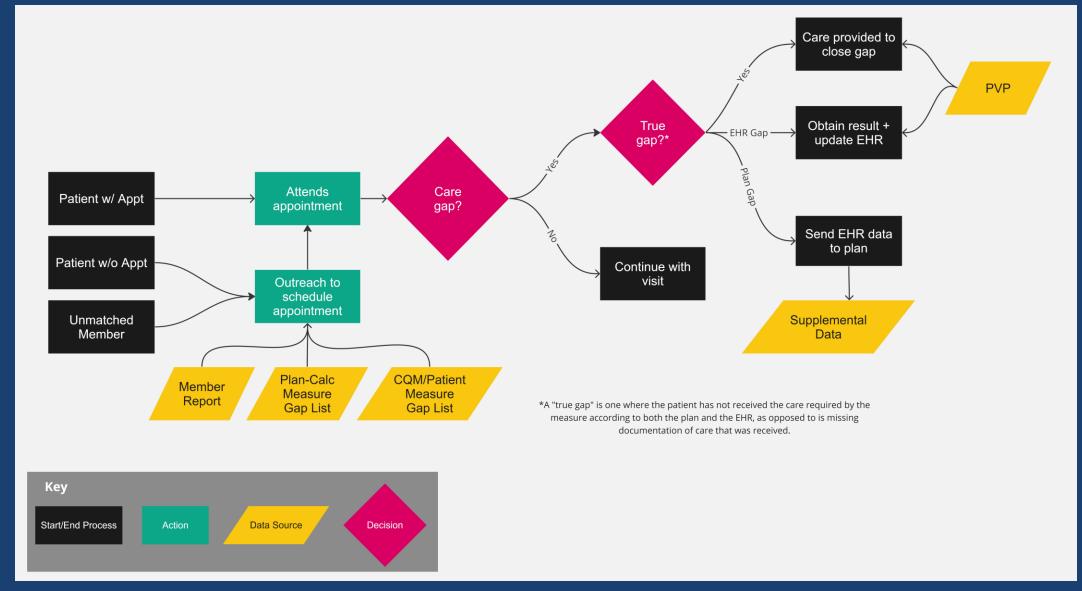
Path to Measure Improvement

*A "true gap" is one where the patient has not received the care required by the measure according to both the plan and the EHR, as opposed to is missing documentation of care that was received.

Key

Start/End Process · Action · Data Source · Decision
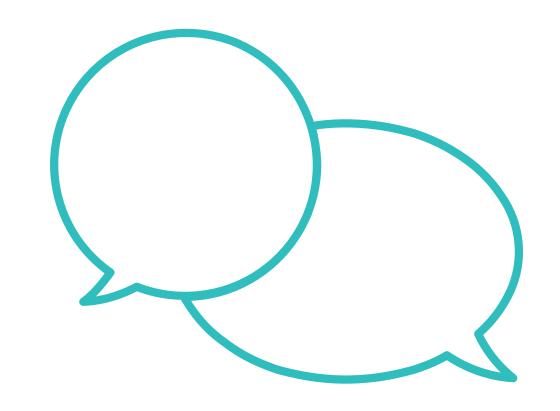
Leveraging Data Across the Elements

6 Essential Elements for **Value-Based Care Success**

- Attribution
- Risk Adjustment & Stratification
- Managing Cost & Utilization
- Care Management & Coordination
- Close Care Gaps & Improve Quality
- Patient Engagement
- Data
- Health Equity

Questions?
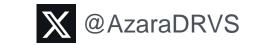
Azara healthcare   X @AzaraDRVS

Achieve, Celebrate, Engage!
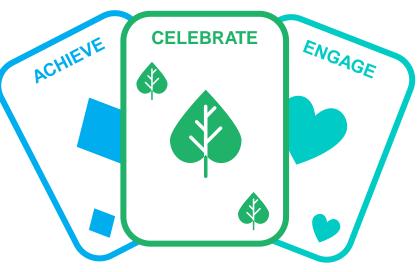
ACE'd it? Share your DRVS success story and become an Azara ACE!

Show your organization has used DRVS to **A**chieve measurable results, **C**elebrate improvement in patient health outcomes, and effectively **E**ngage care teams and/or patients. Stories should showcase how DRVS helped your organization overcome a challenge, the tools and solutions used to drive improvement and details of the successes that resulted from your initiatives. ACEs should be able to provide examples that quantify quality improvement, cost savings, operational efficiency or patient health improvement.

Benefits:
- Azara will help tell your story and provide a client-branded version for your use
- Potential to create a 2-4 minute video or hour-long Azara-hosted webinar
- Win Azara swag!

Submit your success story by completing the form <u>at this link</u> or scan our QR code:
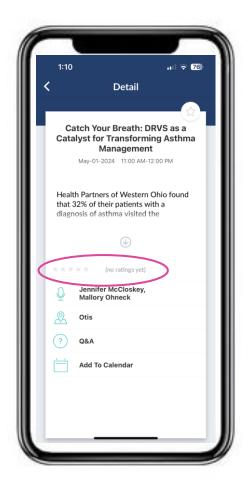
See this year's ACE posters in the Ballroom Foyer!
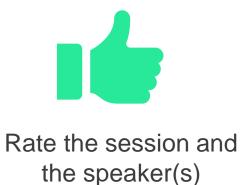
We Want to Hear From You!

Click on the session from your agenda in the conference app.
Click the stars in the center of your screen to rate and provide feedback.

Quick and Easy

Provide brief feedback or ideas

Rate the session and the speaker(s)

Help us continue to improve

Thanks for attending!

azara
USER CONFERENCE
2024