INCREASING VALUE IN HEALTH CARE – ANALYTICALLY SPEAKING

We're well on our way from fee-for-service to fee-for-value. And you know it all too well. A value-based system that is more accountable and risky. Greater demands for quality at a lower cost. No more waste. No room for error.

So how can you achieve better health care delivery and outcomes, all while managing rising costs? The answer is in a value-based model with analytics for episodes of care.

What's episode analytics?

To oversimplify, an episode is a comprehensive grouping of medical care that spans all services for a condition or procedure. Based on data, episode types are defined by which services in a given

SAS® Episode Analytics
Compare providers against total potentially avoidable and total typical costs for an episode.

time period are related to a clinical episode – for instance, knee replacement – and what care is unrelated, such as another episode occurring in the same time period. More and more frequently, payers and providers are working to establish set fees, or bundled payments for an episode of medical care, effectively establishing a financial incentive for

providers to work as a team to share responsibility for a patient's health. Episode analytics provides a way to understand the dollars it takes to deliver services in an episode, which portions are complications, and how an episode is related to another condition. The more data, the better, to confidently understand and manage outcomes, as well as the financial risks and rewards.
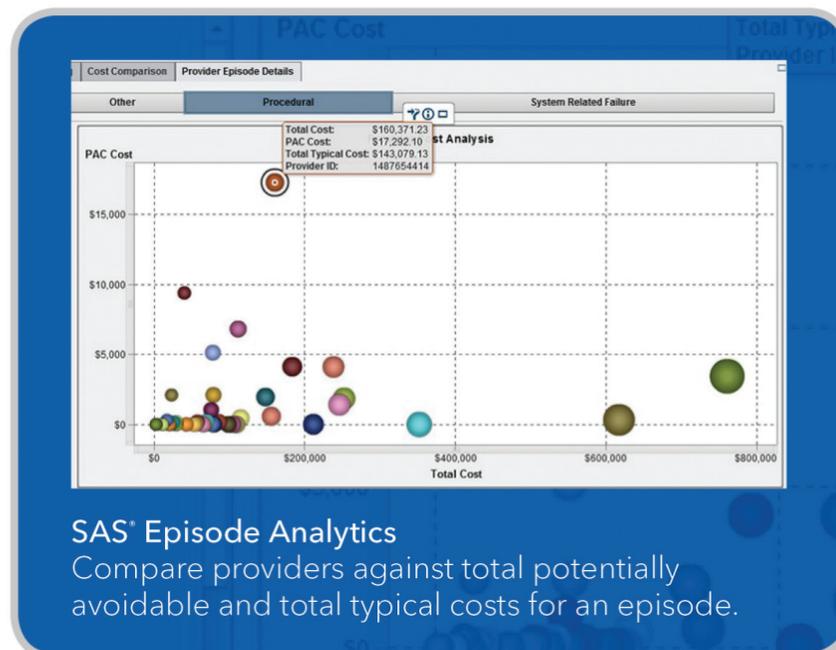
The challenges

Health data is invaluable. However, its complexity makes it challenging to manage and even more difficult to extract value from without the right tools and technologies. This is one of the leading reasons why some health care organizations are still struggling to find their footing in the value-based health care ecosystem. But some organizations have successfully piloted and adopted episode analytics into their care strategies – and they've improved because of it. They're gaining insights across the entire care continuum. And they're able to get data visualizations to see how all of the moving parts of care work together for any given care episode.

"Any health care organization, not just those participating in bundled payment or ACO arrangements, seeking to identify and understand cross-continuum care variation will find episode-based analysis an invaluable place to start on the journey of data-driven discovery and improvement," said Graham Hughes, MD, Chief Medical Officer of SAS.

Bringing value to the care continuum

Analytics for episodes of care allows providers and payers to confidently understand the services that go into medical outcomes and how they should be evaluated. They can understand the complexity of patient care in context of episodes and know what services are provided to individual patients – both on a granular level and in aggregate. There's no guessing. This data provides insights that can help reduce unwarranted admissions and readmissions, decrease length of stays, improve cost-effective prescribing, reduce variation in care and treat patients holistically.

"We know that treatment plans for patients with orthopedic, heart failure, pneumonia and other conditions have high variability in terms of cost, quality and outcomes," said Mark Caron, CEO of Geneia. "By using predictive and episode analytics, we enable physicians and hospitals in ACOs and other care delivery models to identify, analyze and improve the episodes of care provided to these patients."

Using analytics to analyze episodes and the cost of care at both the population and patient levels, provider organizations can determine if services delivered were well suited to a given condition and whether a given service is typical or indicative of a complication. Distinguishing between typical, complication-related and unnecessary services provides opportunities to identify and reduce preventable complications and improve care efficiencies.

The SAS® difference

SAS applies advanced analytics to complex clinical and financial data so providers can be more efficient in selecting and acting on opportunities and payers can limit risk.

With SAS, organizations can derive clinically relevant episodes of care from patient service and diagnosis information. Episodes such as a joint replacement, stroke or congestive heart failure are defined collections of services spanning the care continuum over a period of time. While services related to the patient's condition are differentiated from those that aren't, SAS Episode Analytics also identifies which

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are potentially avoidable – like infection, readmission or adverse medical event. This is invaluable to help providers bring the clinical team into the improvement process because it provides clinical evidence that can drive change.

Using analytics for episodes of care to enable value-based payment strategy, operations and improvement adds value for payers and providers alike. "Payment reform is a complex process, and we are very supportive of the efforts of the Ohio Governor's Office of Health Transformation," said Bob Gladden, Vice President, Center for Analytics at CareSource. "This includes incorporating highly individualized episodes of care that have been developed for this program and require flexibility beyond a standard episode definition set. The SAS Episode Analytics tool is a key component of our ongoing strategy, to not just satisfy these customized episodes, but allow us to develop other pay-for-performance and quality programs. A bonus is this allows us to incorporate these outputs with other quality metrics we have developed with the SAS Analytics foundation utilized by the Center for Analytics."

With the right tools, health care organizations can truly share in the reward of achieving a higher standard of care with a patient-centric focus – all made possible with analytics.

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