New Care Models to Support Value Based Population Health (and Volume)

Louis W. Ralofsky, MD President & CEO, Premier Physician Network



New Core Identity - An Adaptive Challenge



New Core Identity - An Adaptive Challenge

Legacy Identity

- Silos
 - Individual
 - Small partner group
 - Local entity
 - Hospital

System Identity

- Adaptable Comp Model
- Structure Form Meets
 Function
- Clear Expectations & Accountability
- Shared Vision



Unified Board

Charters & Service Line Alignment

- Primary Care
 - 6 submarkets
 - Dyadic leadership
- Specialty Care
 - Ortho, Cardiology
 - NeuroScience, Surgery
 - Medicine/Other

Committees

- Quality
- Compensation
- Practice Transformation
 - Develop and implement process, standards



Volume

- APP leverage ratio
 - Capacity & Growth
- Referral Management
 - Growth & INSUI
- Access
 - Capacity & Growth

Value

- Team based model
 - Decreased cost per encounter
 - Increased patient panel per office
 - Increased total population
- Care management
 - Hybrid model, Evolent



Increasing Primary Care Provider Capacity

Primary Care Growth > +23
Net Gain in Primary Care Providers last 18 mg

Third Available

> 2.7 → 1.9 Over entire network of Primary Care last 9 more

eVisits

400 Per month – 1/2017 rollout

Virtual Visits

30
In first month of rollout

Expanding Productivity thru Practice Transformation

New Patient Access

+68%
Increase in New Pat. Visits in Transformed Sites

Panel Growth



3.5x

Greater Patient Panel Growth Rate in Transformed Sites

Converting Performance to Financial Outcomes

Value-based Revenue 3.0x



Greater value-based revenue through transformed sites

Payer Mix



Favorable to budget



Investment/provider > Favorable to budget & prior YTD