

The Leadership Institute October 19, 2017

Our Mission...

Rebuilding Healthcare As It Should Be

Our Vision...

To Provide Measurably Better Health In All Communities

Oak Street care is **personal**, **equitable**, and **accountable** by design.

The Oak Street model is centered around driving value, not volume

Oak Street operates a network of primary care centers for adults on Medicare in underserved communities

Our centers are strategically located in high density areas that provide easy access for patients

We use grassroots marketing and community engagement to build patient panels from scratch

We integrate population health analytics, social support services, chronic care management and primary care into our care model to drive improved outcomes and lower downstream utilization

We enter into "risk-based" contracts with insurance plans to recoup the savings earned by keeping our patients healthy





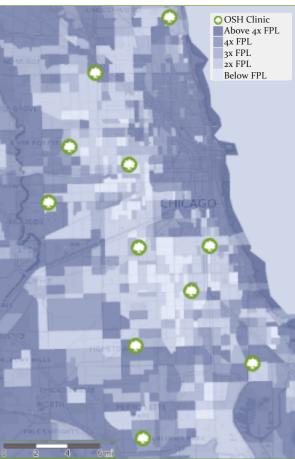




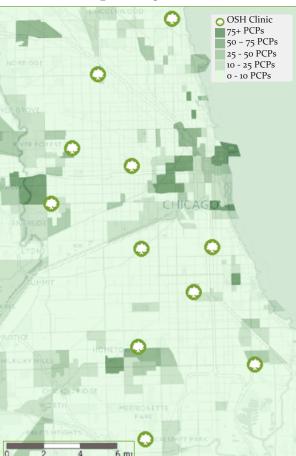
Oak Street's model was designed to drive value for patients, plans, and providers by keeping our patients healthy, happy, and out of the hospital

We create access where it is needed the most

Our neighborhoods face significant socioeconomic challenges...



... exacerbated by a demonstrable lack of primary care access



OSH Patient Demographics

Oak Street's centers are located in medically underserved communities where primary care access is limited

We open our centers "de novo", growing organically through community integration and patient education

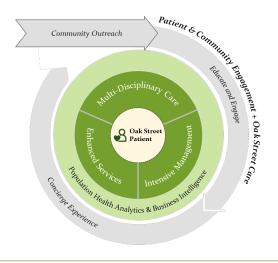
The neighborhoods we serve tend to be lower income, and in fact over 40% of our patients are dual eligible

Each center has capacity for 3,500 patients, the majority of whom live within the radius of our transportation service

Every Oak Street employee shares a common passion to have positive impact in the communities we serve

Our integrated care model aligns incentives to create shared value

We developed a model that elevates the level of care for Medicare patients...



... and deploy that model in medically underserved communities



PERSONAL

A care model tailored to each patient's physical, mental, and social needs



EQUITABLE

Every community should have access to care that delivers measurably better outcomes



ACCOUNTABLE

Create the right economic model where the lever for success is sustained patient health

Our model is bringing value to patients, providers, and insurance plans across the country

33,000+

Patients Currently
Cared for by an Oak
Street Care Team

100

Primary Care Providers delivering care in a value-focused model

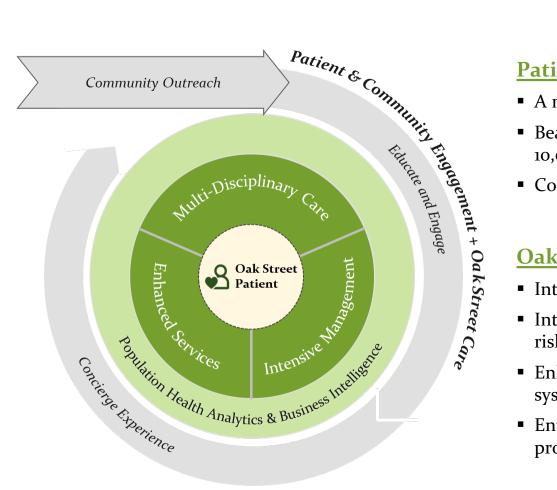
24

Oak Street centers, each with capacity for 3,500 patients

6

Markets entered, expanding every year

We cultivate a community of patients, one care plan at a time



Patient and Community Engagement

- A multifaceted engagement approach
- Beautiful community centers that host over 10,000 events a year
- Concierge experience

Oak Street Model of Care

- Integrated clinical teams
- Intensive management programs for highrisk/high-need patients
- Enhanced services to fill "traditional system" gaps
- Enterprise analytics platform to enable proactive population management

We strive to elevate the primary care experience for our patients

Each Oak Street center is built to create primary care access for the neighborhood...

...and is designed with a retail lookand-feel to bolster a differentiated patient experience... ...and staffed to provide each patient the unparalleled care and experience they deserve

Community Outreach

Educate and Engage

Concierge Experience

- ✓ Neighborhood Outreach and Integration
- ✓ Fully Staffed Community Center
- ✓ Complimentary Transportation
- ✓ Small Panel Sizes and Dedicated Care Team
- ✓ No Wait / Same Day Appointments
- ✓ Longer and More Frequent Care
- ✓ Multilingual Staff and Care Teams
- ✓ Onsite Patient Relations



New Patients Monthly

90%

Organic Growth





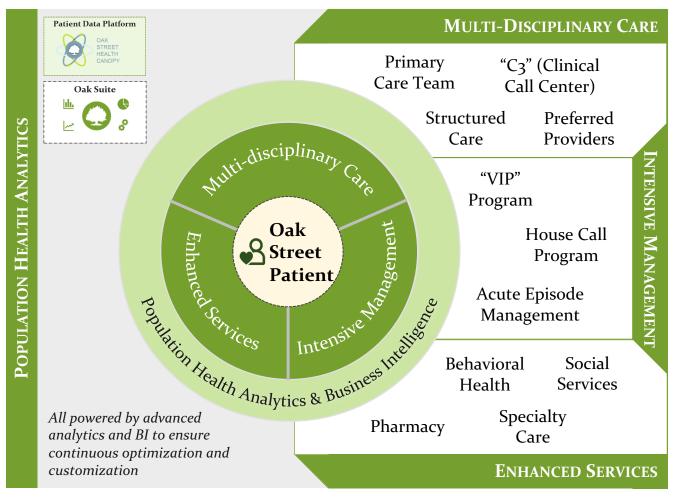
94%

Patient Retention

92%

Net Promoter Score

Our comprehensive model has proven results



Our approach has a track record of success...



44% reduction in hospital admissions

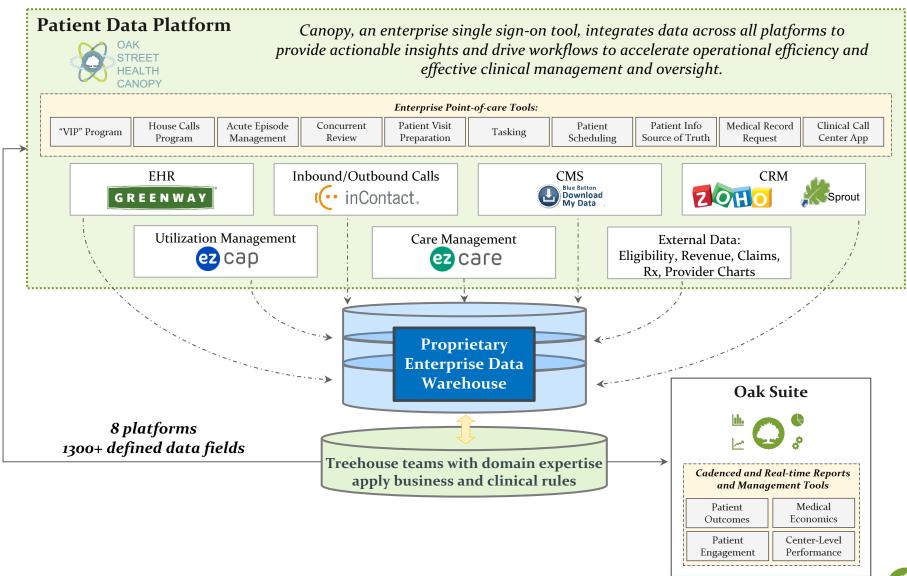


46% reduction in ED visits vs. Medicare FFS benchmark¹



1. Benchmark based on 2014 data sourced from CMS' Mapping Medicare Disparities Tool; weighted for OSH county-level enrollment and non-dual vs. dual population weights.

Our proprietary data platform structures and monitors every element of care



Patient health is the shared goal in a value-based ecosystem



Capitation = Alignment

Oak Street Health enters into globally capitated contracts; savings produced are reinvested into our care model



Insurance Plans

- Globally capitated arrangements shift "risk" to Oak Street Health
- Medicare-only focus ensures high level of engagement with MA plan
- Differentiated in-network independent primary care offering for members
- Results-oriented group: patient engagement, quality, and management

Primary Care Providers

- Rapid and visible positive impact on in-need patient population
- Care model focused on outcomes, not volume
- Tools, analytics, and resources to enable true population health
- Ongoing emphasis on provider engagement and development

Medicare Patients

- Curated and concierge-level experience
- Access to care that focuses on eliminating barriers
- Meaningful and lasting relationships with Care Team
- Community orientation with opportunities to socialize and learn

Medicare Advantage creates natural alignment between payers, providers, and patients to focus on quality and prevention

Capitated risk agreements align our incentives to outcomes

State	# Clinics	Payers	Lines of Business		
	15	Meridian Health Plan Community Care Alliance of Illinois Cigna HealthSpring	Original Medicare	FFS	
		WellCare WellCare Humana.	MA MMAI ICP	Full Risk	
	4	Humana. Anthem. BlueCross BlueShield	Original Medicare	FFS	
		HealthSpring.	MA	Full Risk	
	5	Humana.	Original Medicare	FFS	
			MA MMP	Full Risk	

Fundamental principles of our payer partnerships

Coordinated, transparent relationship Operations focused on closing care gaps and sharing data

Collaboration to integrate patient-fostered feedback on benefits/bid design

Shared responsibility to identify key markets

Medical Utilization

Results for All Medicare Advantage Lives (42% dual-eligible)	Inpatient Admissions Per Thousand	ED Visits Per Thousand		
Oak Street YTD Actual	227	456		
Benchmark (Dual-mix Adjusted¹)	406	827		
Impact	44% Decrease	45% Decrease		

Our care model uses a preventative approach to address the needs our patients, leading to a reduction in avoidable utilization



CMS Stars

PART C HEDIS Measures	2016 Performance					
BMI	*	*	*	*	*	
Breast Cancer Screening	*	*	*	*	*	
Colorectal Screening	*	*	*	*		
Controlling High Blood Pressure	*	*	*	*	*	
Functional Status Assessment	*	*	*	*	*	
Medication Review	*	*	*	*		
Pain Assessment	*	*	*	*	*	
Diabetic Retinal Eye Exam	*	*	*			
Medical Attention for Nephropathy	*	*	*	*		
Controlling Diabetes	*	*	*	*	*	
Osteoporosis Management in Women who had Fracture	*	*	*	*		
Rheumatoid Arthritis Management	*	*	*	*		
TOTAL – PART C MEASURES	*	*	*	*	*	

Patient Experience

2016 Net Promoter Score (NPS)



"I just love it, its almost like a second home to me. I come once a week to the computer classes." "I really enjoy seeing my doctor... she sits down with me and looks at me. She doesn't have her head in the computer."





