Benchmarks in Population Health Management

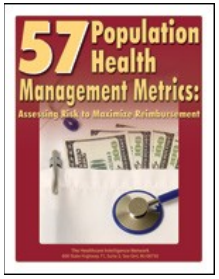
Brought to you by the

Healthcare Intelligence Network

www.hin.com

Population Health Management

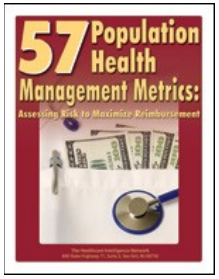
- Introduction
- 7 Features of a Population Health Management Program
- Measuring Population Health Management
- Population Health Management for the Dually Eligible
- Sources
- For More Information



Introduction

- The sweet spots in population health management (PHM) are activities that cover all Triple Aim bases — **enhancing health status and outcomes**, **increasing efficiency and quality**, and **reducing spend**.

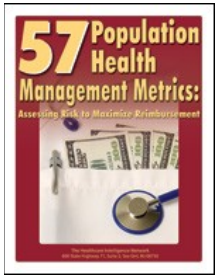
- A carefully curated PHM program that begins with risk stratification and fosters collaborations with stakeholders can do all that and more, including minimizing the need for ED visits and hospital readmissions.



7 Features of a PHM Program

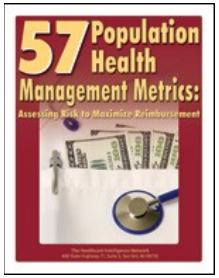
When presenting a PHM program, it is necessary to consider the **optimal outcomes**. You have to be able to ***measure*** these with the metrics that you set, and be able to ***monitor*** and ***evaluate*** your outcomes. Here are 7 features of a PHM program from Elizabeth Miller, Adventist Health:

1. To achieve **optimal outcomes**
2. Education
3. **Medication reconciliation**
4. Chronic disease management
5. **Self-management** decision support
6. **Coordination of care**
7. Evaluation of **participants' progress** and communication back to the healthcare team



Measuring PHM

If a **PHM program** can't demonstrate its value, funding could suffer, explains **Patricia Curran,** principal in Buck Consultants' National Clinical Practice. Here are **12 questions,** in **four key areas** — **attitudes, engagement, outcomes** and **performance** — that will **measure PHM performance.**



Measuring Population Health Management

1. Attitudes

1. Did we increase interest?
2. Did we *change* opinions?
3. Did we build confidence?

2. Engagement

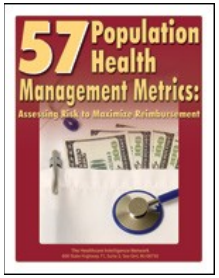
1. Did we ***motivate*** program participation?
2. Did we change lifestyle health habits?
3. Did we mobilize grass-roots efforts?

3. Outcomes

1. Did we enhance health status?
2. Did we improve health outcomes?
3. Did we **improve** treatment compliance?

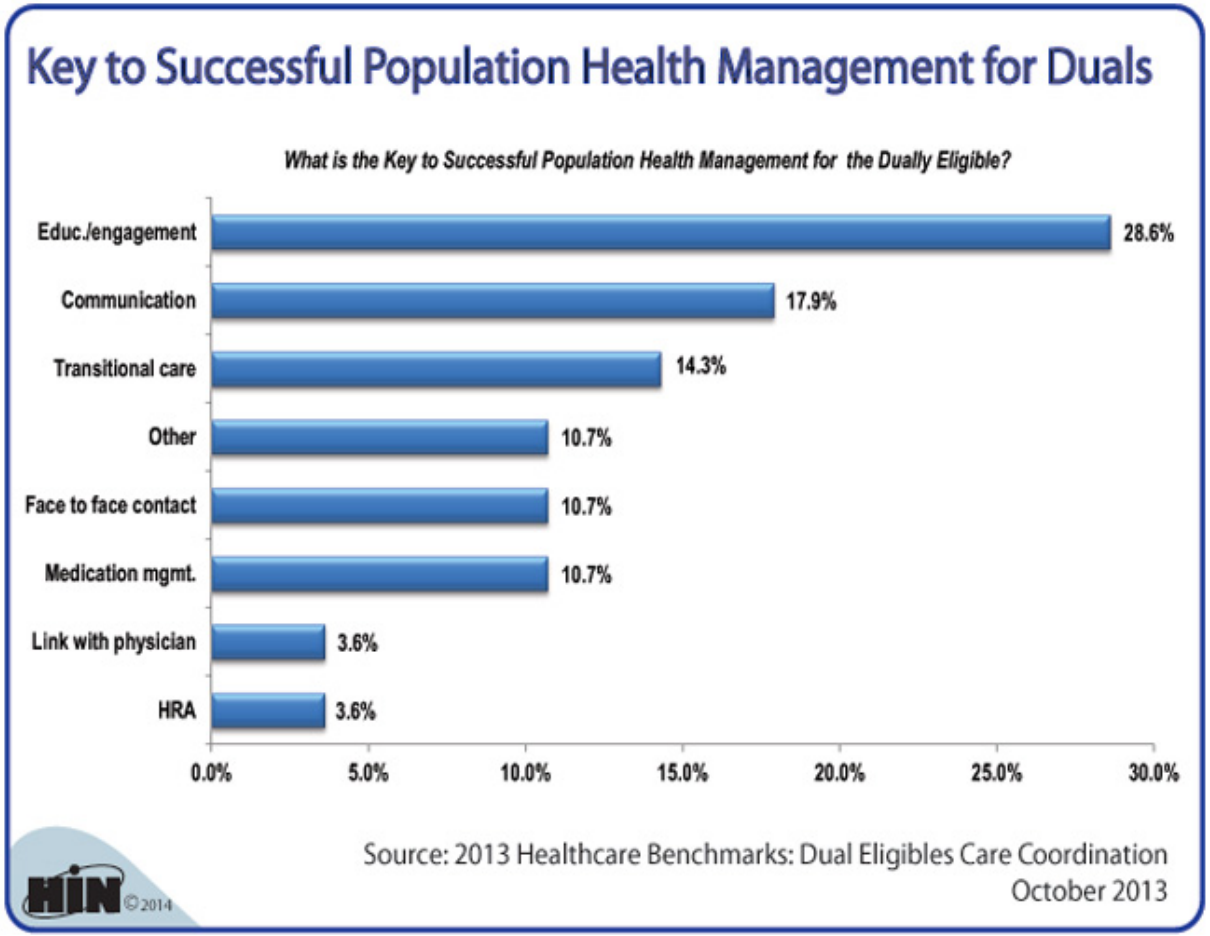
4. Performance

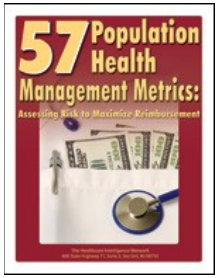
1. Did we **reduce** costs?
2. Did we increase efficiency?
3. Did we improve competitiveness?



PHM for the Dually Eligible

Education and engagement are the secrets to successful PHM for the dually eligible population, say nearly **29%** of healthcare companies who responded to HIN's e-survey on dual eligibles care coordination.



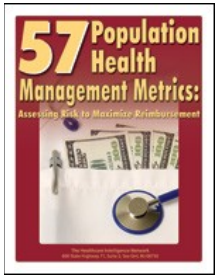


Sources

- *Population Health Framework: 27 Strategies to Drive Engagement, Access & Risk Stratification*

- *2012 Healthcare Benchmarks: Health & Wellness Incentives*

- *2013 Healthcare Benchmarks: Dual Eligibles Care Coordination*



For More Information

- Visit **www.hin.com**
- Call (888) 446-3530
- Follow **@H_I_N** on Twitter
- Like us on Facebook:
  www.facebook.com/TheHealthcareIntelligenceNetwork
- Connect with us on LinkedIn:
  www.linkedin.com/company/healthcare-intelligence-network
- See ***57 Population Health Management Metrics: Assessing Risk to Maximize Reimbursement,*** available at store.hin.com