



## ACO's Priority Patient Custom Logic in Members

### Background

An Accountable Care Organization, in partnership with a clinically integrated network, manages patient populations of eight different Medicare Advantage and Commercial plans. Strategically, they drive a joint mission to empower practices and providers to collectively improve the health of individuals and populations by ensuring quality, access, and efficiency using data-driven and patient-centered models of care.

### Situation

They sought an innovative solution to unify critical contract performance areas of focus and provide a single source for the list of "priority" patients based on defined eligibility criteria and a custom in-house scoring system for 69 practices overseeing 65,000 lives. Their administrators had to manually aggregate multiple operational goals and KPIs, have central staff members run monthly reports, and send individual reports to each practice. The Garage was asked to build a consolidated dashboard that can timely generate patient work lists that took into account the performance metrics from payor contracts and a stratified priority logic to ensure the right patients were seen at the right time.

### Solution

The Garage and the customer spent a few months building the algorithm, which ascribes various point value(s) for every ED visit, open care gap for priority vs. nonpriority measures, and multiple other elements. The total is then calculated to become an "in-house risk score," and patients are sorted from highest to lowest in the Priority Patient List in the **Members application** as a work list initiative.

The targets of focus selected were:

- AWW capture of 100% by the end of the year. This is tied to revenue optimization.
- Outstanding coding opportunities capture a target of 85% by the end of year. This is tied to better clinical outcomes and revenue.
- Closing potential / identified care gaps in specified quality measures at 90% by end of the year. This is tied to benchmarked goals to achieve performance success for savings.
- A custom consent collection for the customer called "Form Completion" at 100% by the end of the year. This is tied to a major revenue bonus.
- History of ER/IP visits in the last rolling 12 months. This is tied to potential medical literacy deficits and social determinants of health issues, and utilization management.

This work initiative, combined with other clinical statistics such as patient cost and PCP utilization, allows users to take a more informed course of action. The Members Priority Patient List empowers users to evaluate patients from various data inputs and ultimately drives interventions based on the customer's population stratification design and focus.



## Outcomes

Implementing the Priority Patient list in the Members application **provides practices in risk arrangements and easy and centralized access to a focused target list regardless of clinical user and situation.** The Priority Patient implementation **saves the customer's team the manual effort and time of doing this by the payor, line of business, and practice each month, allowing the staff to focus on what they do best - empower practices to grow and succeed.** We are looking to revisit later in 2023 to evaluate the success of performance against benchmarks across all categories.

*“The Priority Patient algorithm provides our network physicians a well-defined, targeted patient population to address given limited resources and allows us to focus our business efforts on other areas since this has been in place.”*

- Associate VP, Healthcare Finance Division

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