

Clearly visualize how to drive more value into patient care



Optimize risk-based payment capture with Value-Based Care Analytics

Providers work hard every day to deliver high quality care. But in the evolving world of healthcare, reactive, episodic care is no longer sufficient. To thrive, primary care providers and specialists need to deliver high value care across their shared patients' entire healthcare journey and then prove that value to payers.

How can a practice whose talent, processes, and technology were optimized for fee-for-service succeed in this new environment? Fortunately, the Value-Based Care Analytics component within Centricity Practice Solution helps you visualize opportunities to enhance care quality, reduce total medical expense, and more accurately document patient risk so you can improve performance under risk-based contracts.

The strength of the comprehensive and sophisticated Value-Based Care Analytics module comes from its surprisingly simple, intuitive and easy to interpret user interface. When data is visualized with graphs, charts and statistics, it's easy to glean useful insights from the tool to identify patients who need care, providers who may need help, and business areas in need of intervention.

The solution **fully integrates** quality data, claims data, care coordination, and the care plan so providers can see important patient information without searching through disparate systems. With greater clarity and focus, you can more easily deliver the quality care patients have come to expect while reducing the cost of care and improving the profitability of your business.

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Analytics Features

Provider performance area provides insight on HEDIS, PCMH and ACO to help ensure you earn incentives

Cost and utilization area synthesizes claims data, highlights variances, and helps you identify how they are contributing to total medical expense

Unified patient registry lets you identify high risk patients so you can close care gaps and focus on preventative care

Pre-visit planner helps the care team see care gaps before the patient appointment and facilitate the visit

Open risk indicator visualizes suspected documentation gaps, helping you accurately convey patient risk to payers

Available optimization services track EMR usage and signal where workflow adjustments are needed

Transform to Value-Based Care

More easily achieve incentives – Set quality goals consistent with incentive payments, visualize progress to goals and easily report on key metrics.

Better manage risk-based contracts – Leverage historical quality and cost performance information when negotiating terms.

Reduce avoidable cost and utilization – Easily spot variability so you can investigate the causes and deliver high quality, low cost care across your business.

Increase accuracy of risk-adjusted premiums – Infer uncoded conditions from EMR data so you can fulfill documentation requirements for appropriate payments.

Strengthen Financial Performance

Ensure patients receive needed service – Easily identify patients with care gaps for outreach to drive up care quality and fee-for-service revenue

Keep inside revenue inside your organization – Understand which services patients utilize out of network and take steps to reduce leakage.

Simplify performance coaching – Easily drill into quality metrics by patient, provider, or site to determine how you can better reach your targets.

Increase Provider Efficiency

Save providers time – Reduce time spent searching for information. Access data from previous patient visits, claims, and other care settings in one view.

Troubleshoot workflows – Optional optimization services help you visualize patient flow through providers and support staff so you can identify those in need of administrative, workflow, or training assistance.

Anticipate patient scheduling needs – Pre-visit planner offers information about the complexity of each patient visit so you can adjust the schedule and staff assignments to reduce time overruns.

Improve provider effectiveness and retention – Provider performance area lets you track who is doing well and identify those in need of feedback to help make sure your practice earns incentives.

Enhance Care Quality

Prioritize care and accelerate gap closure – Easily identify high-risk patients and gaps in care to better serve your patients and support financials.

Prepare for patient visits – Pre-visit planner allows a view into patient needs before they arrive so time can be spent on critical elements during the visit.

Access more complete data for clinical decision-making – System integration synthesizes data from previous patient visits and other care settings into one view to get a more complete picture of the patient's health.

Address gaps and post visit – A missed opportunities dashboard indicates post-visit care gaps, alerting staff to needed patient follow-up.



Increased
accuracy of
risk-adjusted
premiums

\$12
pmpm¹

Join us for the journey

Our new IT solution is just the beginning of our commitment to you. It is the first step in an evolution into a comprehensive, fully integrated, interoperable and intelligent cloudbased software solution that will combine decades of healthcare expertise with cutting-edge capabilities and a modern user experience. One that puts patients where they belong – at the center of care. One that only Virence Health can deliver.