

#### NAACOS Affinity Group Meeting on ACO Operations

October 31, 2023 from 3 pm – 4 pm ET

#### Introductions





Tori Bratcher

Director of APM Operations Trinity Health



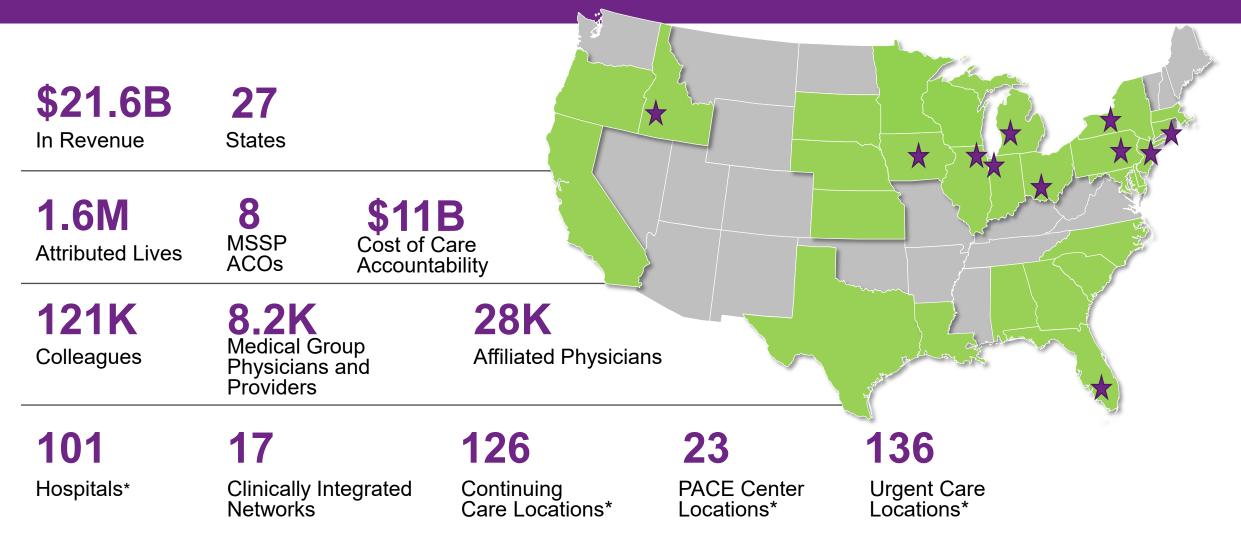
**CarolAnn Hudson** AVP, Clinical & Quality Operations, Population Health Lifepoint Health



Matt Duckworth, DHA, JD, MS

Director, Network Operations Vanderbilt Health Affiliated Network

#### One of the Largest Catholic Health Care Systems in the Nation



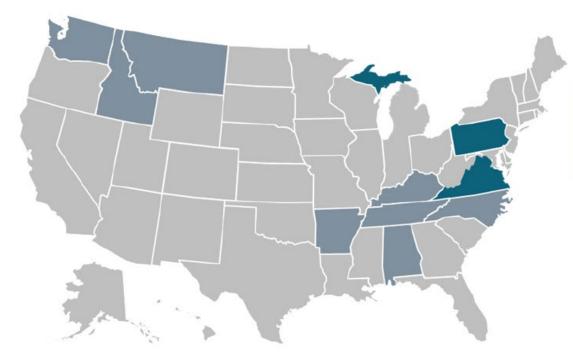
FY23 data unless noted, \*Owned, managed or in JOAs or JVs.





#### OUR FOOTPRINT





#### 8 Regional Networks

3 Legacy Networks Blue Ridge - Virginia Great Lakes - Michigan Laurel Highlands - Pennsylvania

5 New Networks (2021/2022) Commonwealth - Kentucky Hot Springs - Arkansas Northwest – Idaho, Montana, Washington Tennessee Valley – Alabama, Tennessee Western North Carolina

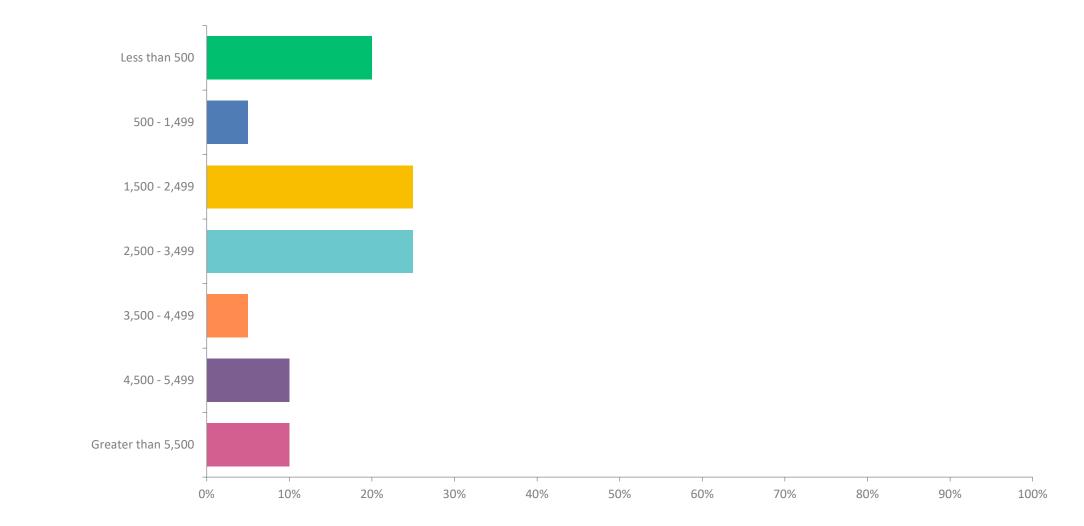
#### NAACOS Membership CIN Structure Survey (conducted by Matt Duckworth, Director, Network Operations, VHAN)

• October 31, 2023



#### Q4: How many providers are in your network?

#### • Answered: 20 Skipped: 0



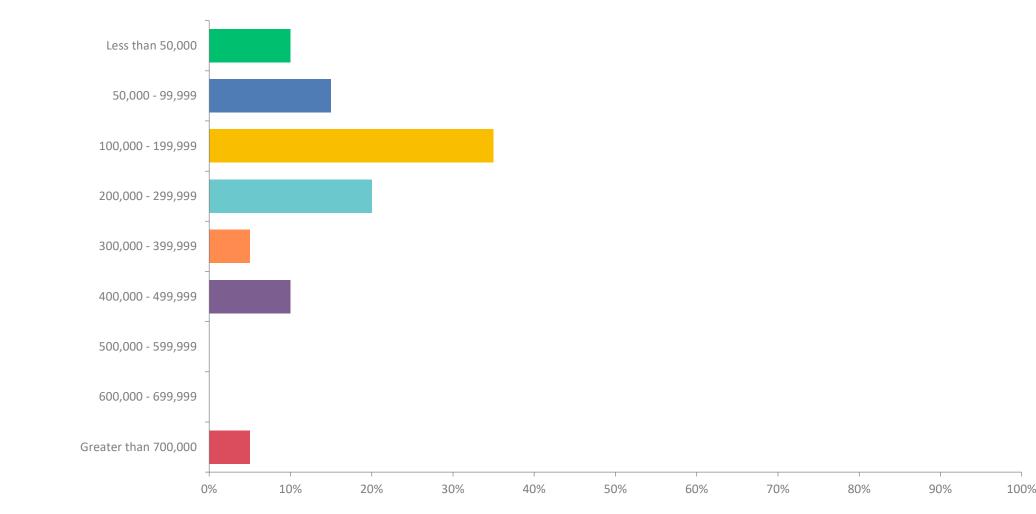
#### Q4: How many providers are in your network?

ANSWER CHOICES	RESPONSES	
Less than 500	20.0%	4
500 - 1,499	5.00%	1
1,500 - 2,499	25.00%	5
2,500 - 3,499	25.00%	5
3,500 - 4,499	5.00%	1
4,500 - 5,499	10.0%	2
Greater than 5,500	10.0%	2
TOTAL		20



## Q5: How many lives do you have under management (across all contracts)?

• Answered: 20 Skipped: 0



# Q5: How many lives do you have under management (across all contracts)?

ANSWER CHOICES	RESPONSES	
Less than 50,000	10.0%	2
50,000 - 99,999	15.00%	3
100,000 - 199,999	35.00%	7
200,000 - 299,999	20.0%	4
300,000 - 399,999	5.00%	1
400,000 - 499,999	10.0%	2
500,000 - 599,999	0%	0
600,000 - 699,999	0%	0
Greater than 700,000	5.00%	1
TOTAL		20

Q6: How many value-based contracts do you manage across all payer types (Commercial, Medicaid, Medicare, MA, etc...)?

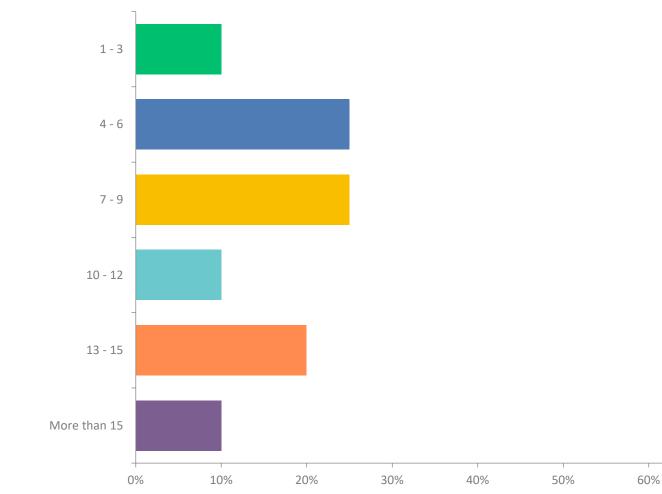
70%

80%

90%

100%

• Answered: 20 Skipped: 0



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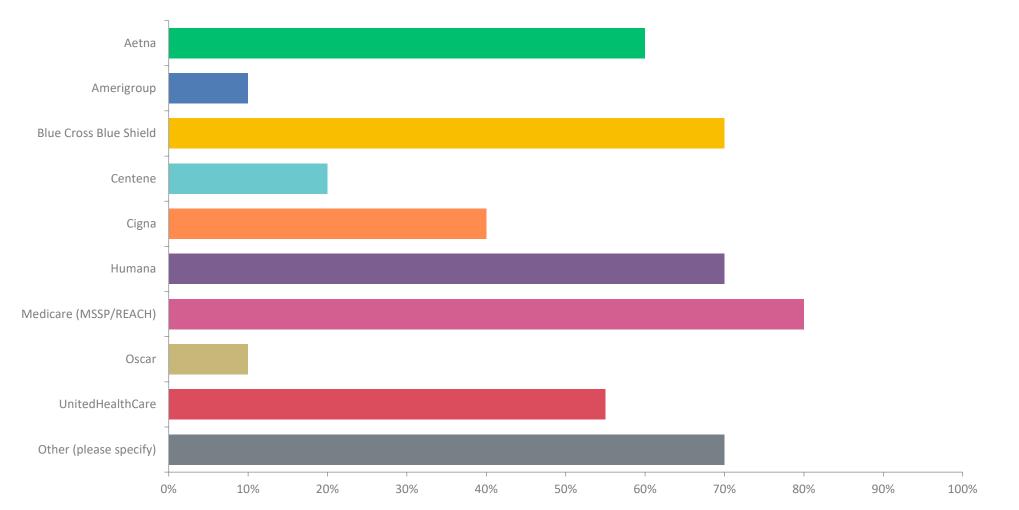
Q6: How many value-based contracts do you manage across all payer types (Commercial, Medicaid, Medicare, MA, etc...)?

ANSWER CHOICES	RESPONSES	
1 - 3	10.0%	2
4 - 6	25.00%	5
7 - 9	25.00%	5
10 - 12	10.0%	2
13 - 15	20.0%	4
More than 15	10.0%	2
TOTAL		20



## Q7: Which Payers do you currently have value-based contracts with?

• Answered: 20 Skipped: 0



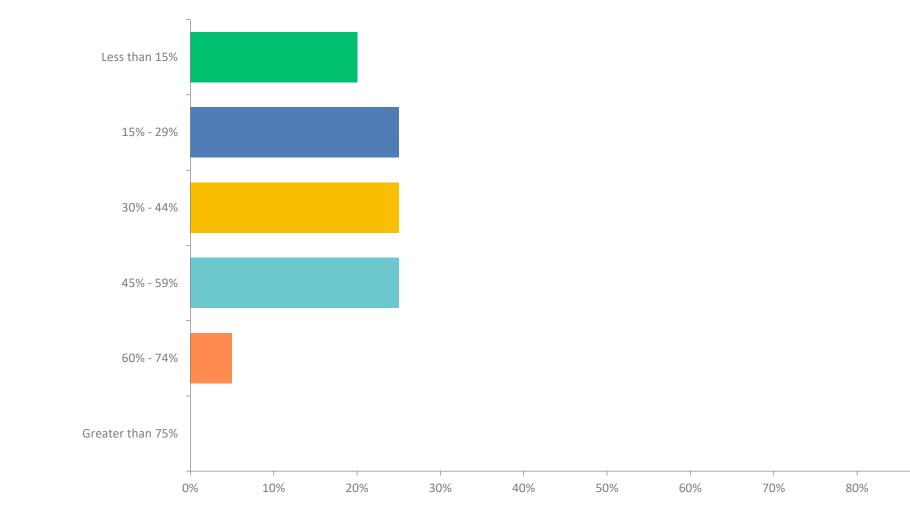
# Q7: Which Payers do you currently have value-based contracts with?

• Answered: 20 Skipped: 0

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ANSWER CHOICES	RESPONSES	
Aetna	60.0%	12
Amerigroup	10.0%	2
Blue Cross Blue Shield	70.0%	14
Centene	20.0%	4
Cigna	40.0%	8
Humana	70.0%	14
Medicare (MSSP/REACH)	80.0%	16
Oscar	10.0%	2
UnitedHealthCare	55.00%	11
Other (please specify)	70.0%	14
TOTAL		97

#### Q8: Approximately what percentage of your total lives under management are Commercial? • Answered: 20 Skipped: 0



90%

100%

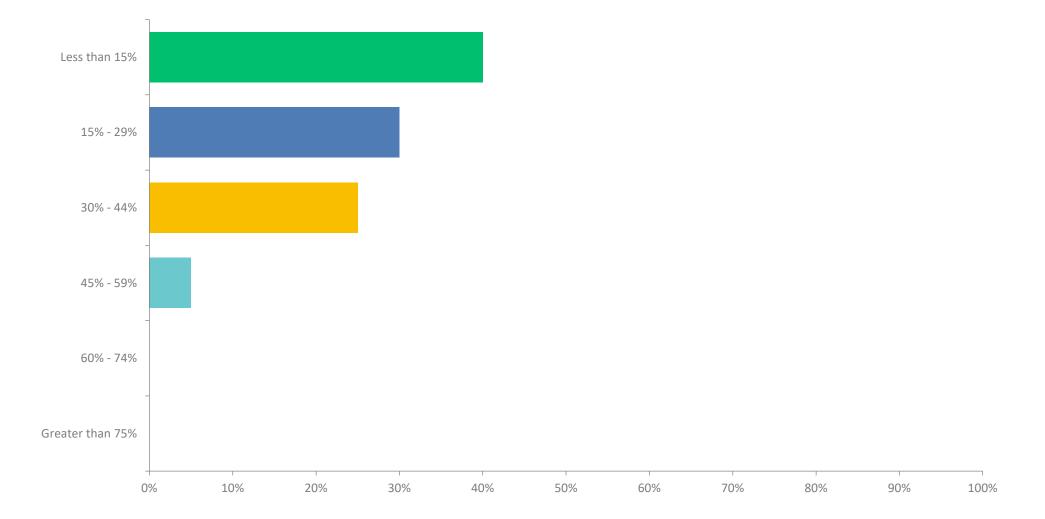
## Q8: Approximately what percentage of your total lives under management are Commercial?

ANSWER CHOICES	RESPONSES	
Less than 15%	20.0%	4
15% - 29%	25.00%	5
30% - 44%	25.00%	5
45% - 59%	25.00%	5
60% - 74%	5.00%	1
Greater than 75%	0%	0
TOTAL		20



# Q9: Approximately what percentage of your total lives under management are Medicare Advantage?

• Answered: 20 Skipped: 0



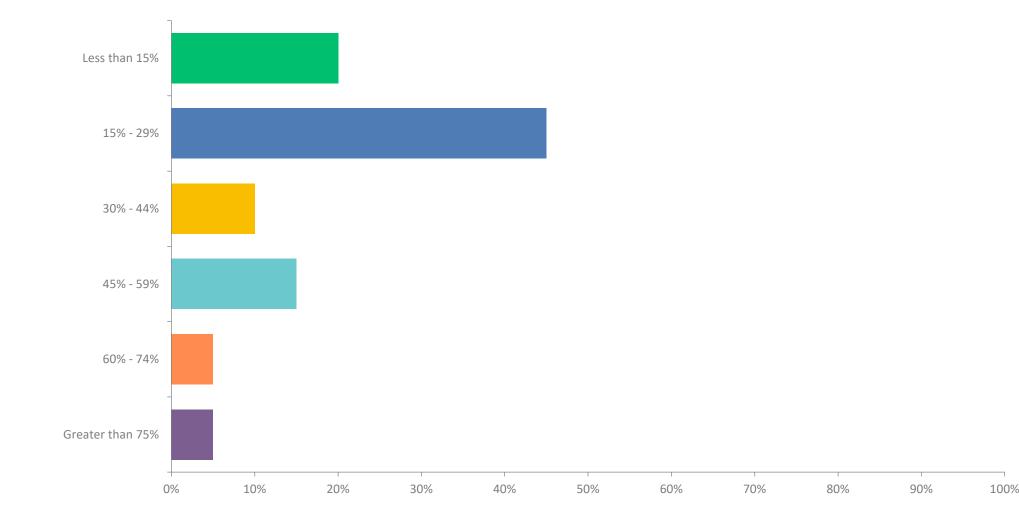
#### Q9: Approximately what percentage of your total lives under management are Medicare Advantage? • Answered: 20 Skipped: 0

ANSWER CHOICES	RESPONSES	
Less than 15%	40.0%	8
15% - 29%	30.0%	6
30% - 44%	25.00%	5
45% - 59%	5.00%	1
60% - 74%	0%	0
Greater than 75%	0%	0
TOTAL		20



Q10: Approximately what percentage of your total lives under management are Traditional Medicare (MSSP/REACH/Other CMS/CMMI Program)?

• Answered: 20 Skipped: 0



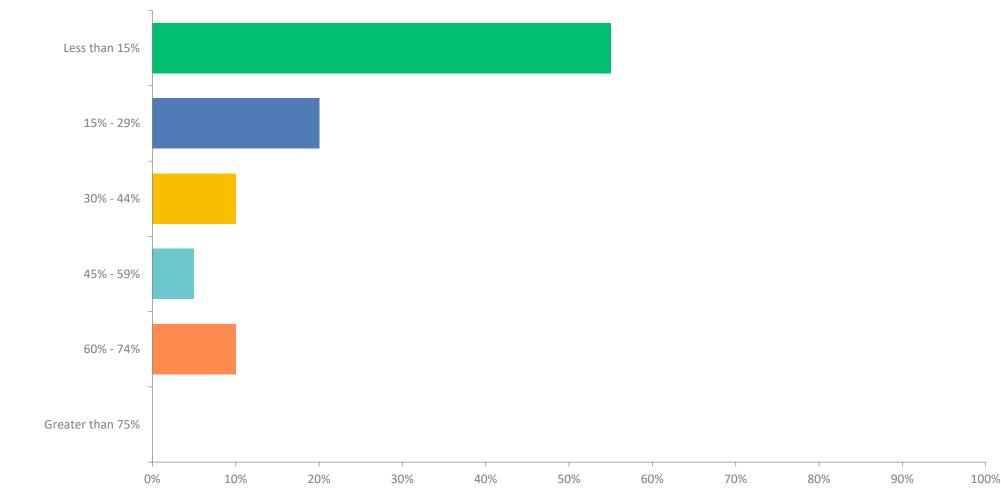
Q10: Approximately what percentage of your total lives under management are Traditional Medicare (MSSP/REACH/Other CMS/CMMI Program)?

ANSWER CHOICES	RESPONSES	
Less than 15%	20.0%	4
15% - 29%	45.00%	9
30% - 44%	10.0%	2
45% - 59%	15.00%	3
60% - 74%	5.00%	1
Greater than 75%	5.00%	1
TOTAL		20



## Q11: Approximately what percentage of your total lives under management are Medicaid?

• Answered: 20 Skipped: 0



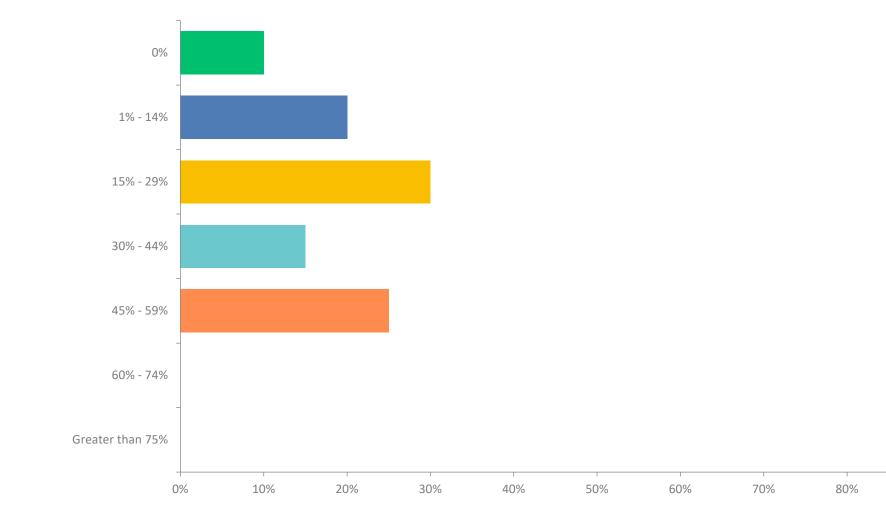
## Q11: Approximately what percentage of your total lives under management are Medicaid?

ANSWER CHOICES	RESPONSES	
Less than 15%	55.00%	11
15% - 29%	20.0%	4
30% - 44%	10.0%	2
45% - 59%	5.00%	1
60% - 74%	10.0%	2
Greater than 75%	0%	0
TOTAL		20



## Q12: What percentage of your contracts are in a downside risk model?

• Answered: 20 Skipped: 0



90%

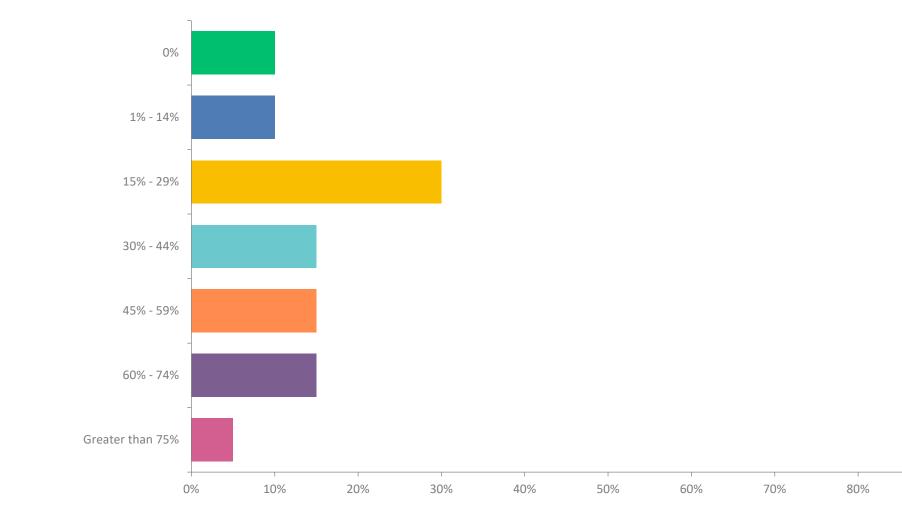
100%

## Q12: What percentage of your contracts are in a downside risk model?

ANSWER CHOICES	RESPONSES	
0%	10.0%	2
1% - 14%	20.0%	4
15% - 29%	30.0%	6
30% - 44%	15.00%	3
45% - 59%	25.00%	5
60% - 74%	0%	0
Greater than 75%	0%	0
TOTAL		20

# Q13: What percentage of your lives under management are in a downside risk contract?

• Answered: 20 Skipped: 0



100%

90%

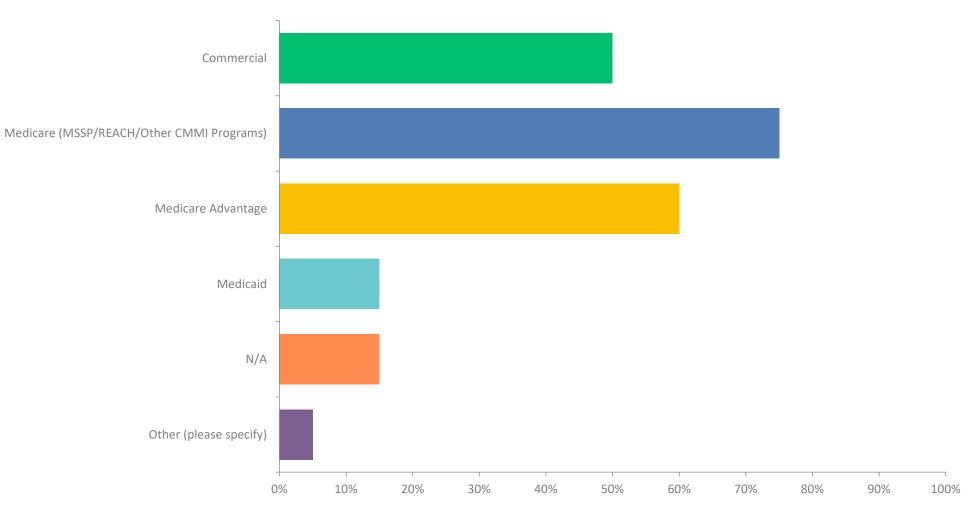
# Q13: What percentage of your lives under management are in a downside risk contract?

ANSWER CHOICES	RESPONSES	
0%	10.0%	2
1% - 14%	10.0%	2
15% - 29%	30.0%	6
30% - 44%	15.00%	3
45% - 59%	15.00%	3
60% - 74%	15.00%	3
Greater than 75%	5.00%	1
TOTAL		20



## Q14: Which Payer types do you have downside risk contracts with?

• Answered: 20 Skipped: 0



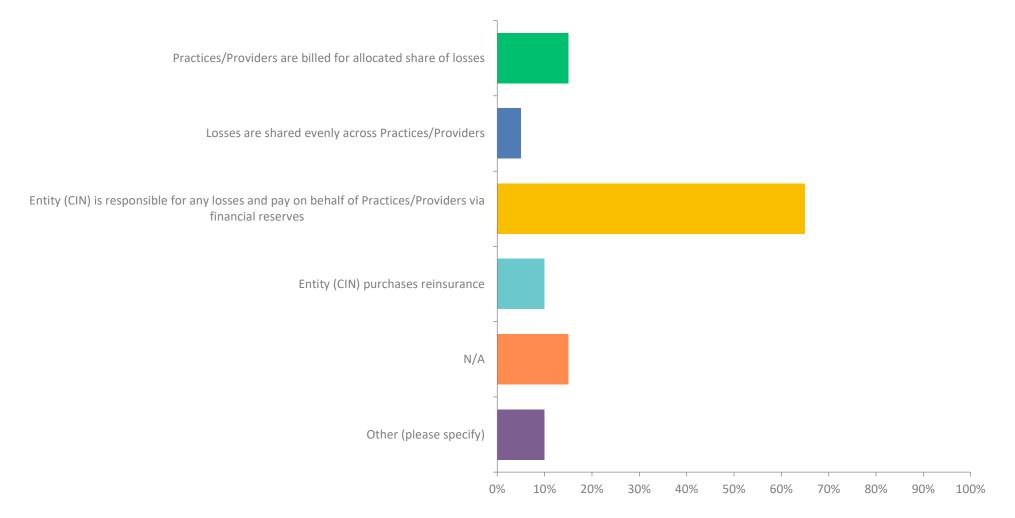
## Q14: Which Payer types do you have downside risk contracts with?

ANSWER CHOICES	RESPONSES	
Commercial	50.0%	10
Medicare (MSSP/REACH/Other CMMI Programs)	75.00%	15
Medicare Advantage	60.0%	12
Medicaid	15.00%	3
N/A	15.00%	3
Other (please specify)	5.00%	1
TOTAL		44



## Q15: How do you manage/fund risk for downside contracts?

• Answered: 20 Skipped: 0



# Q15: How do you manage/fund risk for downside contracts?

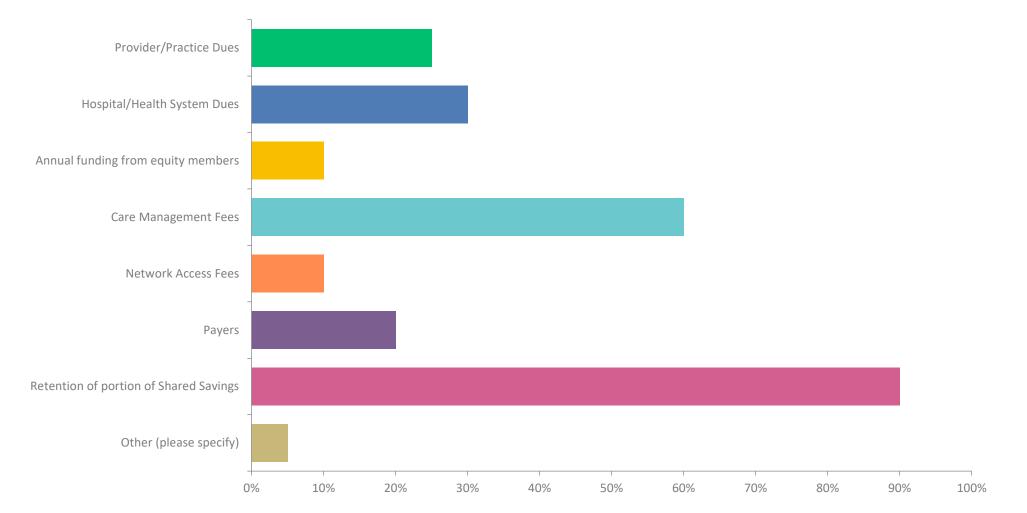
• Answered: 20 Skipped: 0

ANSWER CHOICES	RESPONSES	
Practices/Providers are billed for allocated share of losses	15.00%	3
Losses are shared evenly across Practices/Providers	5.00%	1
Entity (CIN) is responsible for any losses and pay on behalf of Practices/Providers via financial reserves	65.00%	13
Entity (CIN) purchases reinsurance	10.0%	2
N/A	15.00%	3
Other (please specify)	10.0%	2
TOTAL		24

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#### Q16: How is your CIN funded?

• Answered: 20 Skipped: 0



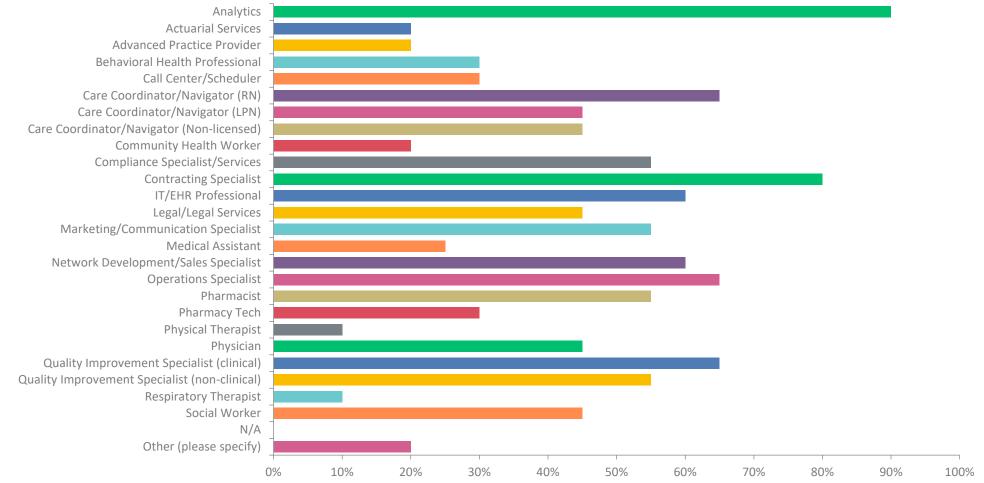
#### Q16: How is your CIN funded?

#### • Answered: 20 Skipped: 0

ANSWER CHOICES	RESPONSES	
Provider/Practice Dues	25.00%	5
Hospital/Health System Dues	30.0%	6
Annual funding from equity members	10.0%	2
Care Management Fees	60.0%	12
Network Access Fees	10.0%	2
Payers	20.0%	4
Retention of portion of Shared Savings	90.0%	18
Other (please specify)	5.00%	1
TOTAL		50

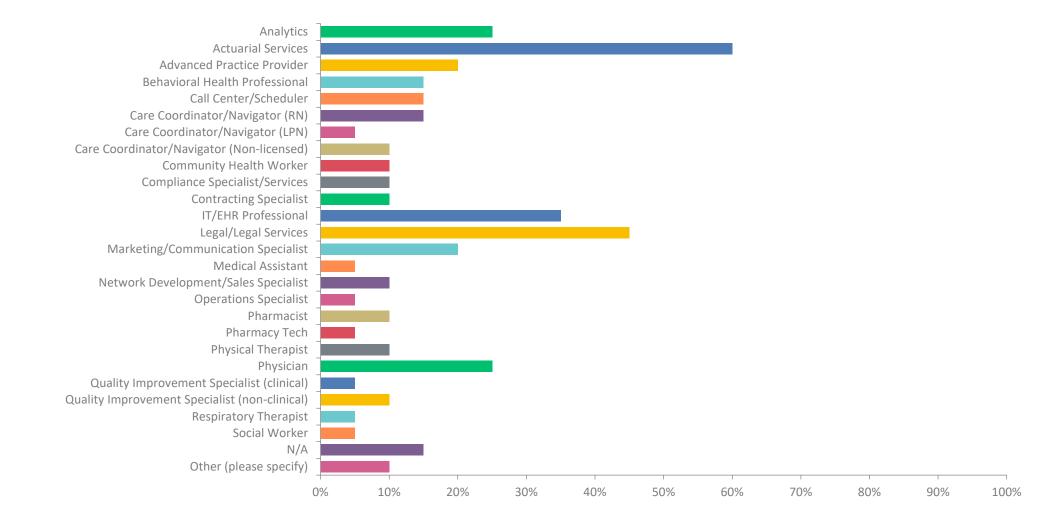
# Q17: What teams/services does your CIN employee in-house?

• Answered: 20 Skipped: 0



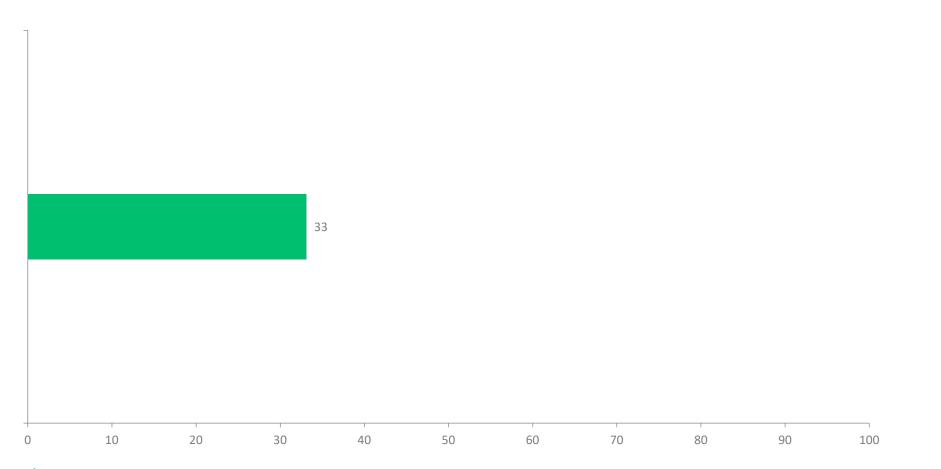
#### Q18: What teams/services does your CIN outsource?

#### • Answered: 20 Skipped: 0



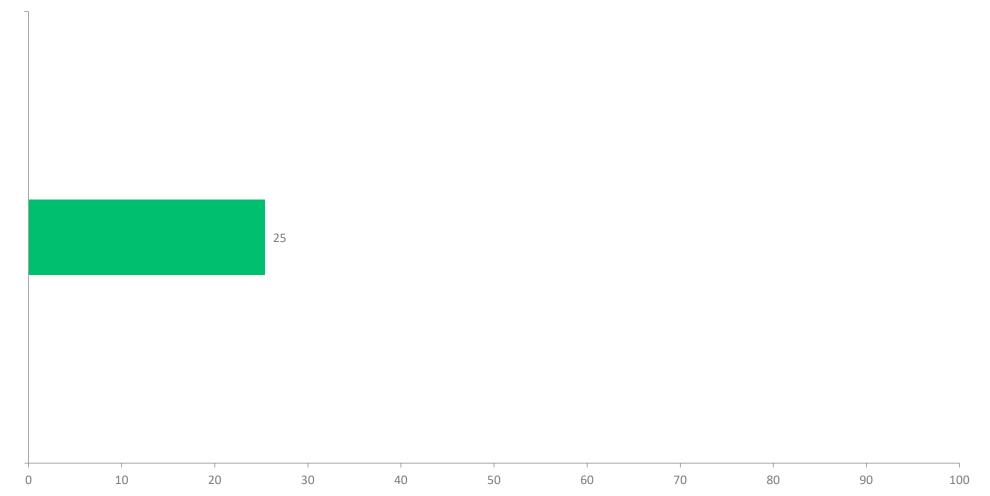
Q19: What percentage of your CIN Operating Budget is spent on Clinical Operations (Care Coord, Pharmacy, Social Work, Behavioral Health, APP/Physician services, etc...)?

• Answered: 20 Skipped: 0



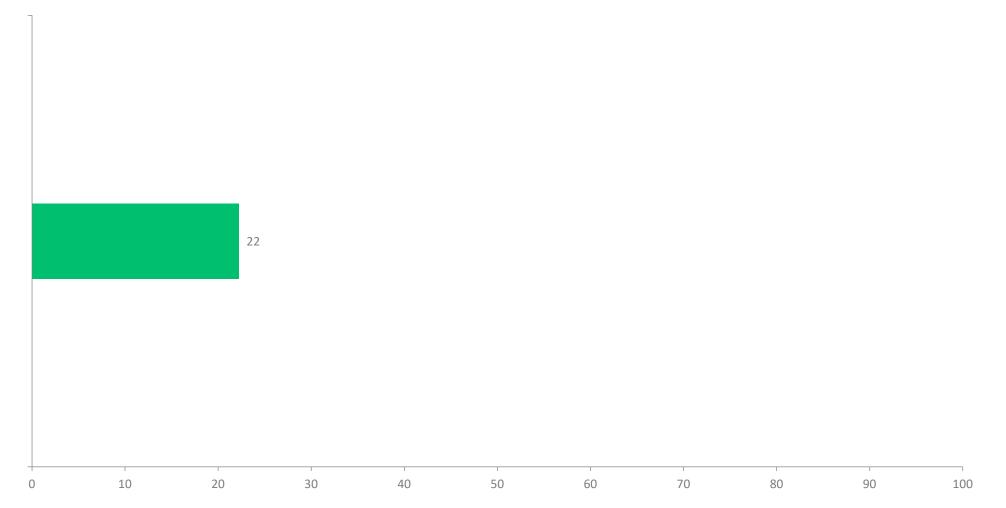
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#### Q20: What percentage of your CIN Operating Budget is spent on Analytics/IT? • Answered: 20 Skipped: 0



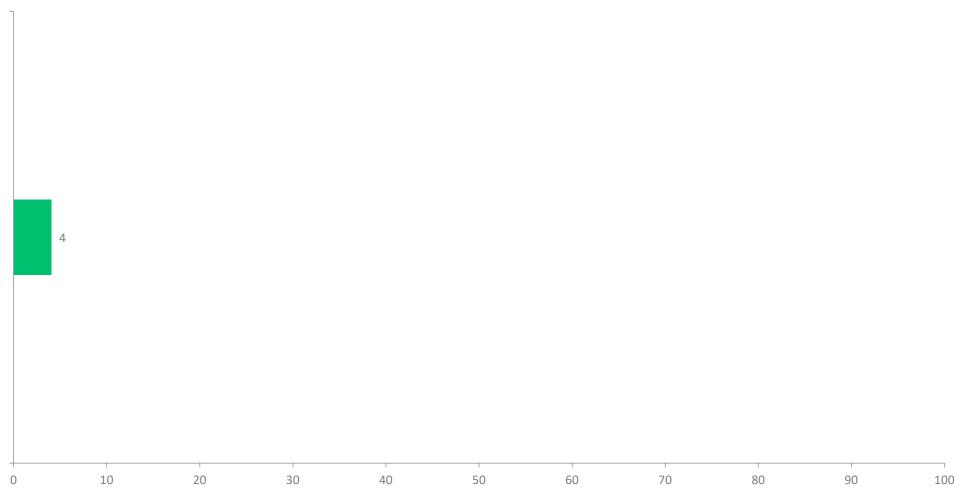


Q21: What percentage of your CIN Operating Budget is spent on Non-Clinical Operations (Contracting, Network Development, Ops Specialist, Actuarial/Finance, etc...)?



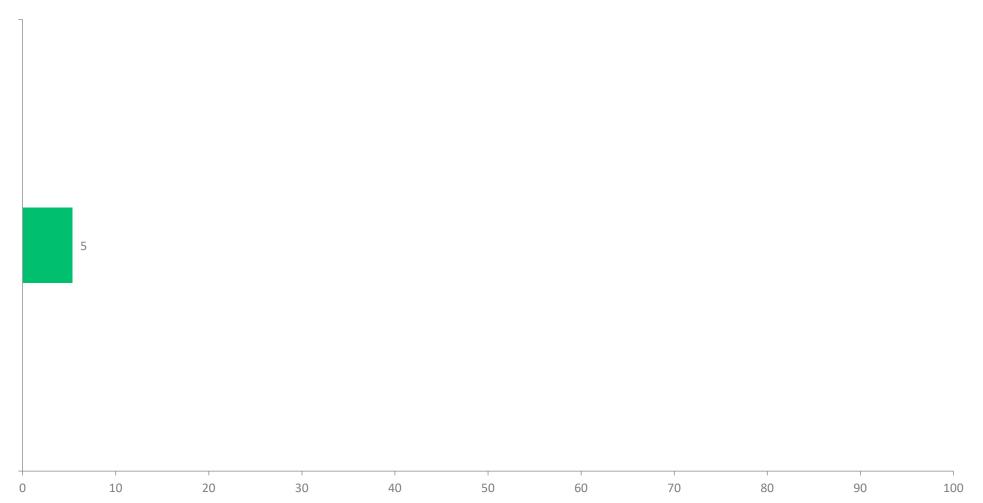


### Q22: What percentage of your CIN Operating Budget is spent on Marketing/Communications?





#### Q23: What percentage of your CIN Operating Budget is spent on Legal/Compliance?





#### **Other Topics of Discussion**



1) Playbooks for clinical improvement (readmissions, avoidable ED visits, preventable hospitalizations)

2) Prospective vs retrospective attribution approaches for operations

3) Moving specialists out of the ACO (criteria, rationale, etc.)

4) Training resources to onboard staff



### Discussion





Affinity Group Leaders to provide information on future topics of interest.

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