Persivia

Personalized Care for All®

How care management maximizes the benefit of analytics to achieve outstanding outcomes in cost, equity and risk.

NAACOS Bootcamp 2022

Peter Drucker famously said
"What gets measured, gets managed"

Measurement itself, while a great starting point, is no guarantee of management.

Data Visualization is very important – but what's next?

Let's take a moment to answer these questions

- Do we have an effective care management model?

- Or more granular questions
  - How do we identify patients who need a colorectal cancer screening and coordinate follow up to ensure gap closure?
  - What if a heart failure patient has sudden weight gain but does not have an appointment with their doctor for another 4 weeks?
  - How do we manage patients with relatively low risk but a high cost of care?

Now Imagine a patient with ==Type-2 diabetes== and ==high blood pressure== for the past 2 years

Pre-visit Encounter Prep

- Care Manager reviews analytics based on all patient data
- Care Manager reaches out to the patient and performs scheduling

At the Point of Care

- Either face-to-face or virtual; the provider accesses patient specific, AI-driven clinical insights and closes gaps in care in a couple clicks – every interaction of the provider with patient insights is recorded in the EHR in real-time.
- Almost all the time, let's say a 15-min appointment, is spent in dealing with the patient, providing the best care

So, what's the Magic Pill

A system that turns insights into actions and actions into outcomes

From Insights to Actions
What's needed

A Consolidated Patient Record

- Single longitudinal record for every care coordination program all in one place
- A smooth workflow that includes patient creation, enrollment, care plan creation, and billing

Advanced Care Coordination

- Strong coordination between the physician, the care manager and the patient
- Seamless access & information sharing, ensuring continuity of care
- Clinical Decision Support to help make informed decisions

Seamless Patient Engagement

- Patient Centric care model – two-way communication
- Help Patients more effectively manage health conditions

From Actions to Outcomes
What's Needed

Improved Efficiency
- By automating processes
- Automating billing
- Improving Staff Productivity

Improved Accuracy
- Accurately reflecting patient's health status
- Patient eligibility and enrollment, time logging/proper billing, and documentation of care.

Improve Quality of Care
- Identify Gaps in Care in real-time
- Point of Care Integration – Actionable insights delivered through EHR

Reduce Costs & Increase Revenue
- Coding, care and service opportunities to increase revenue
- Tie Care plans to Medicare reimbursement programs like CCM, AWV, TCM , BHI and RPM

Why not just your EHR

- Many EHRs lack the tools, features, and workflows necessary to properly manage patient care.

- Some EHRs do offer their own care coordination software solution, but they're usually limited in functionality and features. These limitations can increase staff time needed to manage patient care, potentially open your practice up to audits, and worsen the coordination of care provided to patients.

- EHRs collect and store patient data, while care coordination software is used to actively utilize that data to manage a patient's care.

- Most EHRs do not create or manage a single consolidated patient record across multiple data sources

- Most EHRs cannot manage patient care across the continuum of care

What Persivia brings to the table

A single integrated AI-driven platform CareSpace® that delivers 3rd Generation Care Management Capabilities

- Bringing **Quality**, **Care**, **Risk** and **Cost** analytics together
  - Care management, care coordination, cost and utilization analytics, quality management and reporting, data warehouse and EHR – bringing all together

- Making data meaningful with the power of AI

- Use Artificial Intelligence to deliver concrete benefits
  - Operational efficiencies
  - Revenue enhancement
  - Organizational resilience

A Sophisticated System
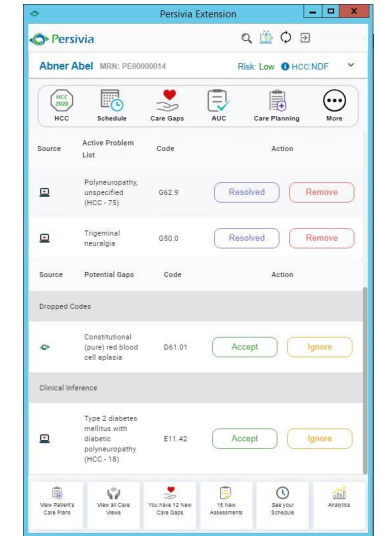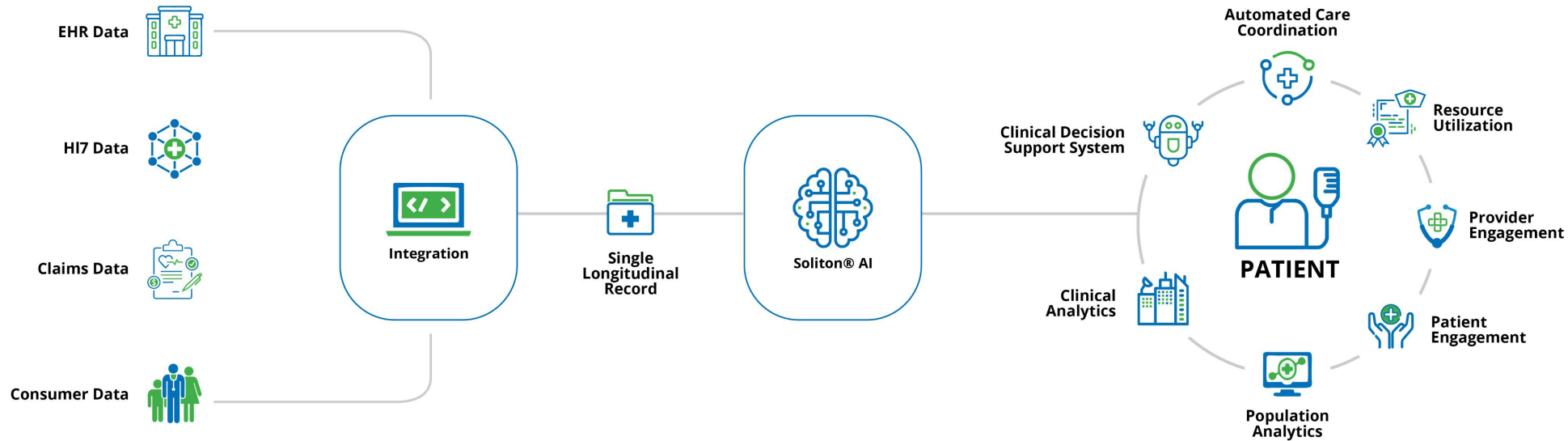
Improves quality scores and supports All payment transformation initiatives including:

- ACOs
- Medicare Adv.
- Commercial risk
- Medicaid risk
- Bundled Payments
- ACO Reach

Everything with the power of AI

DATA INTEGRATION

Incorporate all patient data (clinical, claims, patient reported, device and socio-economic data) into a single longitudinal patient record.

PESONALIZED CARE PLANS

Capture information from disparate sources and auto generates patient specific, configurable Care Plans.

CARE GAPS

AI-driven identification of clinical and service care gaps specific to each value-based care program.

RISK STRATIFICATION

3rd generation Risk Stratification capabilities that bring claims, clinical and social determinants of health data together.

BILLING MADE EASY

Time tracking with appropriate billing codes and billing reports to bill for various services like CCM, RPM, TCM, AWV, BHI etc.

IMPROVE COST & UTILIZATION

Reduce Total Cost of Care, overall utilization, ED visits, referral outside the system.

POINT OF CARE INTEGRATION

Present patient specific evidence based clinical interventions at the point of care.

PATIENT OUTREACH

Facilitate patient Engagement using the portal and Apps. AI guided interactions, assessments and communication.

REVENUE ENHANCEMENT

Identify outstanding care and service gaps in every patient encounter. Enable activation of billable services.

WORKFLOW INTEGRATION

Incorporates seamlessly with your existing operational workflows with minimal disruption.

WORKFLOW OPTIMIZATION

Streamlined workflows for efficiency in managing Care Management resources.

TELEHEALTH

Telehealth integration within the platform facilitates non face-to-face patient encounters with video calls and billing.

Success that speaks for itself

Summary Examples		
	Operational Efficiencies – IDN	90% reduction in time/effort for nurses performing risk stratification
	Operational Efficiencies – Payer	Up to 50% reduction in encounter time for virtual HRA visits
	Revenue Enhancement – IDN	$11,000,000 in avoided penalties
	Revenue Enhancement – IDN	6th best performing ACO in the country
		$34,000,000 in 2019 savings
	Revenue Enhancement – IDN	BPCIA savings of $2,000 per episode
		Total NPRA Savings of $8,000,000 in 2020
	Revenue Enhancement – Payer	Improved pass rate from 85% to 100% for HCC Risk Adjustment
	Organizational Resilience – IDN	Move from ACO to BPCIA
		COVID recall program

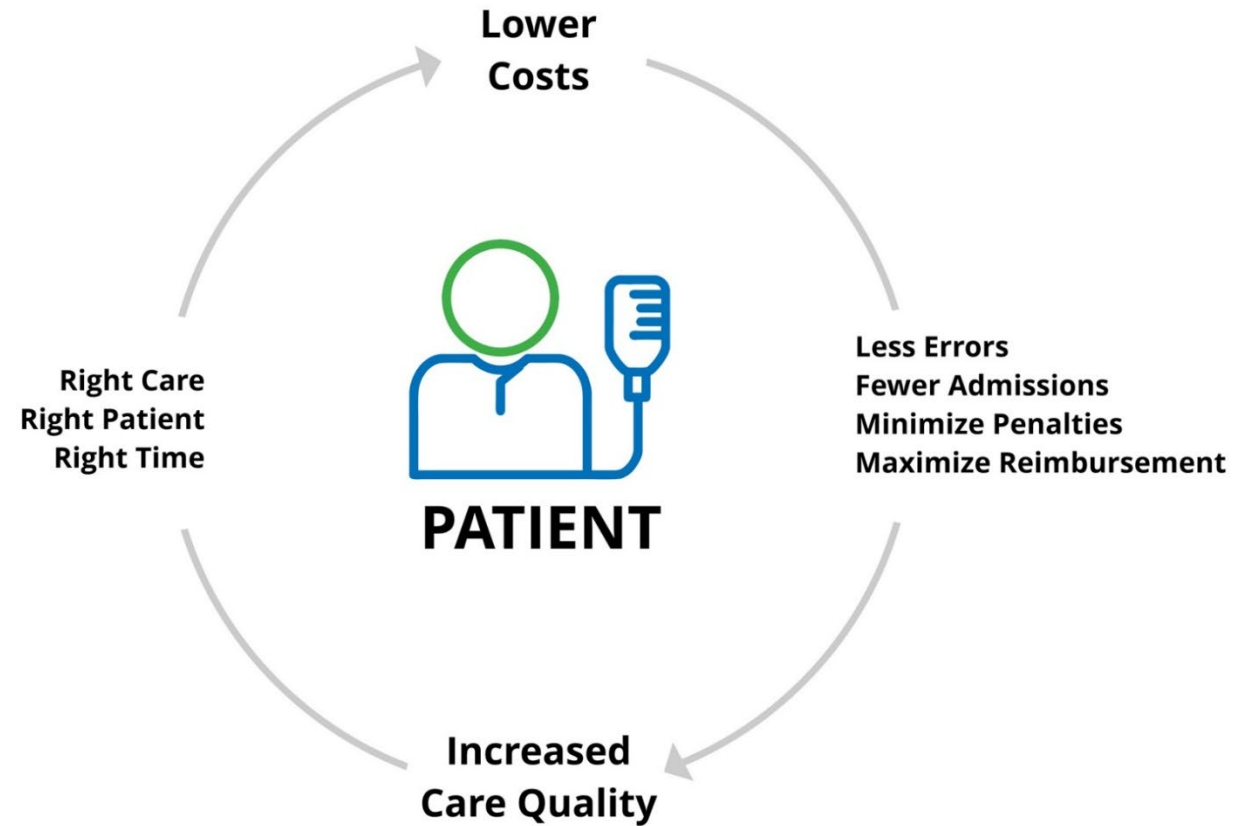# See it in Action

QUALITY

COST & UTILIZATION

INBOUND CARE MANAGEMENT

Better For You, Best For Patients

Thank you

Questions please..