

**Background**

Our client is an integrated delivery system located in the State of New York and uses Analytics for Risk Contracting (ARC) as its primary managed care analytics platform. The health system uses ARC to identify specific opportunities and interventions to improve financial performance through a combination of medical and network management strategies.

**The Challenge**

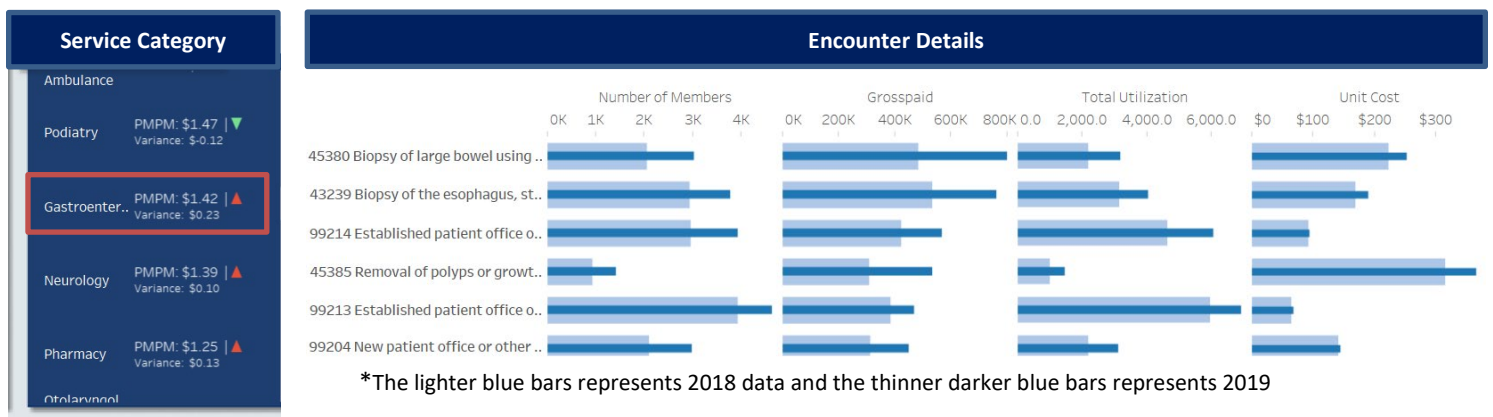
The client wanted to better understand leading indicators of Out-of-Network (OON) utilization in order to maintain a greater proportion of procedure volume within the network and ensure adequate in network access.

**The Solution**

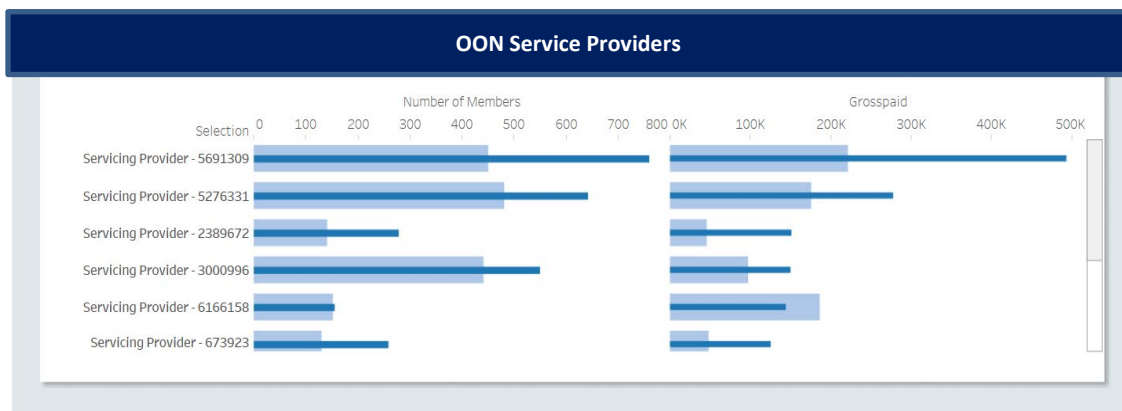
The client primarily uses the Cost & Use dashboard and High Cost view to identify preliminary specialties and primary care providers of interest based on associated high OON utilization, which is illustrated in more detail below. Subsequent analysis focuses on analyzing claims data across the primary care panels using the Specialty views to determine the rate and breadth of specialist consults with OON providers, which enables the team to prioritize practices and services for engagement.

**PCPs Referring to OON Specialists – Ongoing Use and Service Line Evaluation**

The Cost & Use dashboard is used to analyze OON utilization by specific service, servicing providers (specialists), members utilizing the services, and referring PCPs. For example, by selecting the Gastroenterology service, the client can readily analyze the service line’s encounter details by member volume, utilization and paid amounts.



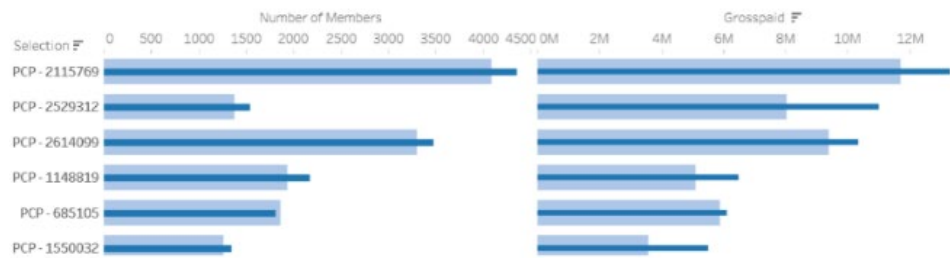
The client is also able to rank service providers by overall OON volume, allowing a focus on the highest volume OON specialty practices, and then drilling down to the members utilizing these services and associated PCPs referring to these service providers. These services are then compared to In-network service offerings to ensure comparable access with a preferred specialist.



### Member Details

MemberID	Member Name	DOB	Risk Score	Grosspaid			
				0M	1M	2M	3M
MemberID - 182136	Member Name - 182136	7/9/2015	46.79	[Bar chart showing grosspaid values]			
MemberID - 55762	Member Name - 55762	5/31/2003	8.58	[Bar chart showing grosspaid values]			
MemberID - 47247	Member Name - 47247	12/14/1955	40.32	[Bar chart showing grosspaid values]			
MemberID - 45186	Member Name - 45186	11/20/1964	0.65	[Bar chart showing grosspaid values]			
MemberID - 25460	Member Name - 25460	3/29/1973	25.38	[Bar chart showing grosspaid values]			

### Referring PCPs



### Members with Highest OON Utilization

The *High Cost* view is used to identify members with the largest OON utilization by setting of care, e.g. ambulatory, ED and inpatient. This view enables the client to readily identify high cost (utilizing) members by care setting, focusing on the most impactful types of OON utilization: Evaluation and Medical (E&M) visits (specialty consults) and inpatient (IP) admissions. Further views within the platform enabled the client to detail utilization for these members by procedure and elective vs. emergent cases.

					# of Records Displayed	All Records				
membername	dob	Practice	PCPName	Last Admit Date	E&M Visits OON	ED Visits In Network	ED Visits OON	IP Visits In Network	IP Visits OON	
Member Name - 236928	11/17/1941	Practice - 190	PCP - 2866686	9/30/2019	208	0	0	0	10	
Member Name - 71419	5/1/1926	Practice - 198	PCP - 5415987	Null	169	1	0	0	0	
Member Name - 29161	10/21/1941	Practice - 175	PCP - 2550523	12/31/2019	165	0	0	0	13	
Member Name - 204224	3/11/1982	Practice - 218	PCP - 4966255	12/31/2019	153	0	0	0	13	
Member Name - 309973	8/17/1972	Practice - 89	PCP - 688023	12/31/2019	146	0	1	0	20	
Member Name - 92993	6/8/1952	Practice - 214	PCP - 4732260	8/16/2019	142	0	0	0	6	

### Current State

The client continues to target OON utilization focusing on outreach to PCPs identified to have members with high OON utilization, working with the PCP's practice management to refresh referral guidelines, evaluating reasons for OON referrals to address member and provider experience, and orient staff and PCPs to high performing In-network specialists.<sup>1</sup>

The client is also working to identify additional opportunities to leverage ARC, including service line reconfiguration, with initial focuses on bariatric surgery and a program to improve outcomes for members with liver disease.

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<sup>1</sup> Specialists are evaluated for a series of factors, including risk-adjusted utilization and proportion of in vs. out-of-network procedures.