Introduction

The Edifecs Value-Based Care Solution automates and scales three sets of capabilities required for success under risk-based, value-focused programs:

1. **Data Integration**
   Accept clinical data from multiple sources, along with administrative data (such as claims or eligibility checks) using **data management capabilities to ingest and aggregate** data in “near real time,” strengthening the combined data into a form that can be used to flexibly address business problems.

   a. This capability is the same technology in use by the majority of US payers to ingest and process data for claim processing and other administrative uses. The capability is highly scalable, addressing the difficulties inherent in consuming large volumes of data from multiple sources and maintaining it with little manual effort.

   b. The result of this Edifecs capability is the creation of high quality, semantically and contextually correct “Individual Patient Records” combining all the knowledge from clinical and financial data, that can then be fed into other systems (such as case management, disease registries, population health management, etc.).

2. **Contract Modeling and Administration**
   Administer risk-based agreements between payers and providers and among affiliated providers, providing the pre-contract and post-contract molding, design, monitoring, and workflow needed to support high-functioning partnerships among payers and providers.

   a. In the agreement design phase, the solution ingests historical claim and/or other utilization data to support targeting and design of value-based care programs, including budget calculation, what-if analysis showing the potential ROI of changes in care delivery, and experimentation with potential attribution methods, severity adjustment, quality measures and contract terms.

   b. Once under agreement, the software can ingest claims (or other utilization costs) along with quality performance measurements, to provide a constantly updated view of the performance of providers under the specific terms of each agreement. It can be used to identify trends and changes in cost or quality before it is too late to address. The software contains workflow for managing many ongoing activities, from the review of unexpected changes in quality and cost performance to the review and approval of gainsharing or other payments.

   c. A primary goal of the capability is to provide “near real time” visibility for providers into the projected and actual results of risk-based contracts, allowing them to alter performance and improve their gainsharing opportunity.
3. Population Health Management
Activate patient-level interventions through population monitoring that can be configured by business users to identify events while there is still time to act.

a. For example, one Blues payer will use it to review eligibility checks for ACO patients, to catch those that are made outside of the ACO. The plan can feed these immediately to the ACO, who may contact the member to potentially reroute care.

b. Using a combination of EMR output and claims data, a PCMH might identify undiagnosed COPD patients for early intervention and treatment to avoid an ER visit.

c. A critical population health management strategy is effectively preventing rising-risk patients from escalating into the high-risk category. The solution automates capabilities for early detection of changes to health risks, morbidity patterns, provider and patient behavior.

d. Another health plan will use real-time encounter and service use monitoring to identify in real time, referrals to out-of-network provider and frequent use of the emergency room and urgent care in order to re-channel utilization to the appropriate network provider and setting.

Why Edifecs?

- Solutions are modular and can be used individually, but also work together to deliver a powerful capability for both payers and providers.
- Edifecs software sits at the edge of your enterprise. It is the first thing that sees data on the way in and then last thing that sees the data on the way out. This allows "near real time" evaluation of the data before it is processed, then loaded into a warehouse, then extracted. Because it sees the data weeks or months sooner than other systems, it can allow you to act before it is too late to impact care delivery.
- Technology is designed to increase the value of existing software assets, not displace them, with software that "wraps around" systems, improving the quality of the information they ingest and augmenting functionality.
- All value-based care capabilities are focused on enabling more effective partnerships among payers and providers for the delivery of improved care under risk-based contracts.