Enhance Clinical Research and Improve Outcomes with Analytics

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Conflict of Interest

Jeffry James, MBA, CPA

Has no real or apparent conflicts of interest to report.
Agenda

- Wilmington Health ACO background
- Why Clinical Research?
- Clinical Research and Population Health
  - Study #1: Diabetes results
  - Study #2: Cardio results
  - Studies #3-7: Various results
- Clinical Research: Next Steps
- Clinical Research as a Care Option
- Keys to Success
- Physician Engagement
Learning Objectives

• Evaluate implementation of a clinical research countermeasure to improve population health, patient engagement and cost
• Discuss the application of analytics to predict success of patient participation in clinical research studies
• Explain the benefits of clinical research participation in terms of lowering the cost of care and improving revenue
How Benefits Were Realized for the Value of Health IT

*Satisfaction*: Applying clinical research to ACO populations as a countermeasure increases patient satisfaction

*Treatment/Clinical*: Clinical research can help organizations improve patient outcomes.

*Electronic Information/Data*: Analytic technologies can help find the right cohort of patients that would work for the study.

*Patient Engagement*: Patients report that they are more engaged in their health when participating in clinical research.

*Savings*: Clinical research participation leads to costs being removed from the system.

http://www.himss.org/ValueSuite
Mission and Vision

Wilmington Health Mission Statement:

Wilmington Health is committed to using collaborative, evidence-based medicine in providing the highest quality of care to the patients we serve.

Wilmington Health Vision:

We aspire to be the most trusted partner in health care. We pledge to transform the delivery system. We will continually develop collaborative and innovative solutions that demonstrate quality, reduce the cost of care and improve the patient experience.
ACO Stats

• **FIRST** Commercial ACO contract in state with BCBSNC
• Ranked **2ND IN THE NATION** in MSSP Quality and 4th in cost for 2013 ACO Cohort
• ACO budget: ~$300,000 PER YEAR and it has been profitable since the first contract was signed. 3 FTEs.
• In 2014 increased its quality metrics to > 90%
• **5 Years** in a row of decreased cost per Medicare Beneficiary.
• ER visits **44%** and Admissions **25%** below the national average.
• PRAGMATIC
No thanks!
We are too busy

Population Health
Cost and Quality all 2013 MSSP

HIGH COST LOW QUALITY

HIGH COST HIGH QUALITY

LOW COST LOW QUALITY

LOW COST HIGH QUALITY

90th percentile on cost and quality

Wilmington Health
ER Visits leading to hospitalization
“Any intelligent fool can make things bigger and more complex… It takes a touch of genius—and a lot of courage to move in the opposite direction”
Wilmington Health Approach

Simplicity

PLAN

DO

CHECK

ACT
Clinical Research: Triple Aim
Why Clinical Research

• We were already engaged in research
  – Allowed us to retrospectively evaluate it as a countermeasure
• Data analytic capabilities already existed
• Identified as a unique opportunity countermeasure
  – Revenue producing with no added cost
Population Health
Study #1 Diabetes
Patient Satisfaction
Engagement

“Has participation in clinical research improved your interest/involvement in your overall healthcare?”

95.5% YES
Comments

• “PHENOMENAL experience. The financial advantage is a blessing. My ability to manage my condition has improved and my numbers are better and better.”

• “The program is a god send. It forces me to keep accurate records. I am not a detailed person and this **KEEPS ME ON TRACK.**”

• “The study has really made me much more involved in managing my condition. I had become indifferent. Feeling a **BIG IMPROVEMENT** in overall health and attitude.”
Comments

• 87.5% offered no suggestion for improvement (only positive feedback)
• 10% suggested improvements to the Facility
• 2.5% (1 patient) was frustrated with his personal results to date.
Mean A1C per Visit
Cost Per Month/Beneficiary to MSSP

$1,118 Per Month

$354 Per Month
Study #2
Cardio
Population Health
Population Health
Cost Per Month/Beneficiary to MSSP

$1,291 Per Month

$475 Per Month

Patients start of trial
Reducing the Cost of Provider Care: Hospital Services

$594 Per Month

Patients start of trial

$144 Per Month
Study #3-7
Various
Cost Per Month/Beneficiary to MSSP

$986 Per Month

$778 Per Month

Patients start of trial
Also Lowers Cost for Pharma

Wilmington Health monthly enrollment rate was in the top six or 3% of all US sites for the analyzed trial.
Clinical Research: Next Steps

• Care Option
• Integrated Research Network
Redefining the Clinical Research Site Model

**Legacy:** Disparate sites, varied models with limited integration

**Today:** Building bridges across models and increasing continuum of care

**Tomorrow:** Integrating research and health care within clinically integrated research network
What’s Next: Clinical Research as a Care Option

• 75% of public consider medical professionals to be most trusted source of medical information

• Less than 20% of patients learn about clinical research from their physician

• Less than 1% of U.S. population participates in clinical research

• 72% say they would likely participate if recommended by their physician
Keys to Success

• Competent site management partner (We use PMG Research)
  – Efficient and robust support function
  – Differentiation in patient experience (concierge)
• Physician champions
• Compensation incentive
• Integrated in clinical space
• Analytic platform to define research populations
Clinical Research

* Investigator compensation, rent and ancillaries
Physician Engagement

• Alternative revenue stream
• Appeals to the scientist in them
• Helps in recruitment
• Provides diversity in the routine of seeing patients
• Intellectually stimulating
• Rapid feedback on the impact of their work
What’s Next: Clinically Integrated Research Network
Overall Satisfaction Increased To 4.89 out of 5

**STEPS: Satisfaction** — Applying clinical research to ACO populations as a countermeasure increases patient satisfaction. This was driven by high touch and personalized service.
Increased Outcomes & Compliance

Decreased Hospital Visits and ER Visits

**STEPS: Treatment/Clinical** — Clinical research can help organizations improve patient outcomes. These benefits were driven by a number of factors, including: The therapeutic, the engagement of the patient and the frequency and consistency of the visits.
**STEPS: Electronic Secure Data** — Analytic technologies can help find the right cohort of patients that would work for the study.
**STEPS: Patient Engagement and Population Management**

- Patients are more engaged in their health and outcomes improve when participating in clinical research.
Dramatic Decrease in Health Costs to the Delivery System

Diversified Profitable Revenue Stream to Provider

**STEPS: Savings** — Clinical research participation leads to costs being removed from the system.
Questions & Comments

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