Case Studies in **EXCELLENCE** 2023

AMERICA'S PHYSICIAN GROUPS

Taking Responsibility for America's Health

Table of Contents

Welcome to the 2023 edition of America's Physician Groups' *Case Studies in Excellence*!

We are delighted to showcase 10 profiles of patient-centered, coordinated, and accountable care that exemplify how APG's physician-led organizations are "taking responsibility for America's health."

APG's approximately 360 member organizations span 47 states, the District of Columbia, and Puerto Rico. Their roughly 170,000 physicians care for nearly 90 million Americans. They strive to improve patients' care experiences and health outcomes while also being accountable for costs.

In this volume, 10 of these organizations have shared their best practices, insights, and lessons learned in adopting new approaches to providing care. Their case studies comprise innovations in four major areas:

- **Team-based care** (embedded pharmacists, integrated behavioral health, engaged and empowered office staff)
- **Patient engagement and activation** (falls prevention program, financial incentives to bridge health and social needs)
- **Advanced primary care and beyond** (Lean practice transformation, nurse-driven population health clinics, outpatient extensivist centers)
- **Specialty care integration** (evidence-based orthopedic back and joint care, medical home model for chronic kidney disease)

Sharing the hard-won expertise of our members is a primary way that APG not only supports other organizations seeking to learn about value-based care but also fuels the broader movement away from volume to value. We hope that readers will find the case studies to be an important resource that can inform health care organizations, policymakers, payers and purchasers, and even patients about the multiple strategies that organizations can undertake in pursuit of value-based care.

We congratulate and thank the APG member organizations that contributed to the 2023 edition of *Case Studies in Excellence*.

Susan Dentzer, MS, President & Chief Executive Officer
America's Physician Groups

Susan M. Huang, MD, MS, Chief Medical Officer
America's Physician Groups

DESERT OASIS HEALTHCARE
Your Health. Your Life. Our Passion.
ALTURA

Desert Oasis Healthcare
Value-Based Approach Prevents Falls While Improving Financial Performance

Introduction

Every year, more than 1 in 4 adults ages 65 or older fall—an event that can be life-changing and can lead to long-term disability.[1] At Desert Oasis Healthcare (DOHC), 10,412 of our members had at least one fall in 2021, with nearly half experiencing two or more falls. These incidents resulted in nearly 16,000 utilizations—with costs for ED visits alone estimated at over $14 million. In response, we teamed with Altura to implement a value-based program aimed at not only preventing repeat falls—but also a first fall.

Challenge

Like many provider organizations, DOHC faced challenges with preventing older patient falls, including inconsistent screening—especially when patient encounters cover multiple chronic conditions—as well as difficulty reaching members and a lack of tools to engage those at risk. While our prior focus had been on avoiding repeat falls, the literature suggests that preventing a first fall is critical. Falling once doubles the chances of falling again.[2]

DOHC has many disease management and population health programs, but education and resources related to strength, balance, and mobility were limited to passive referrals to in-person and online "Matter of Balance"™ classes—which had low participation. STAR and other quality measures address asking patients about falls, but this does not engage and activate the patient to improve strength and mobility.

Intervention

In September 2021, DOHC partnered with Altura, which provides specialized patient activation services. Altura's UpRight™ program is a home-based, virtual, and bilingual (English and Spanish) intervention that improves strength and mobility for older adults while reducing fall risk.

The program was white-labeled for DOHC and named Stable Steps™. DOHC identifies and refers patients to Altura via the electronic health record (EHR). These include not only patients who have already fallen, but also new senior members deemed at high risk, those with conditions such as Parkinson's disease, patients referred by a provider, and patients discharged from a skilled nursing facility.

For the core high-touch portion of the program, participants receive:

- Telephone coaching sessions. An Altura patient activation specialist calls the member at least once a month to provide medically approved strength and balance exercises and tips. These are targeted to the patient's needs and mobility level.
- A checklist of household fall hazards
- Home installation of grab bars, bed rails, etc.
- A medication review to assess medications that cause dizziness or sleepiness
- Access to a hotline to reach a patient activation specialist

Altura triages specific issues back to DOHC team members and includes important notes in the EHR for PCP visibility. The company also provides a DOHC-branded patient webpage and point-of-care provider tool. In addition, Altura conducts longitudinal risk assessments and patient-reported outcome surveys regarding physical activity status, strength score, stratified fall risk score, stated medical needs, program satisfaction, and mobility and fall frequency self-assessments. This has resulted in a comprehensive database that enables Altura staff to better educate patients about incidents that often lead to falls (e.g., "I was rushing to the toilet").

After six months, patients are moved into a maintenance program, where they receive monthly DOHC-branded emails featuring fall prevention resources and can access the Stable Steps hotline. Patients can reenter the high-risk program if they fall or are referred by a provider.

Desert Oasis Healthcare (DOHC) serves more than 60,000 members, including over 30,000 Medicare Advantage patients, in the Coachella Valley and surrounding desert communities of Riverside and San Bernardino counties in California. DOHC is a full-risk staff model medical group with a wraparound independent physician association (IPA), including 150 primary care providers and more than 300 specialists. Altura provides value-based health systems with configurable and interoperable services and technology, as well as a team of patient activation specialists, to help produce positive financial results and quality scores across strategic initiatives.

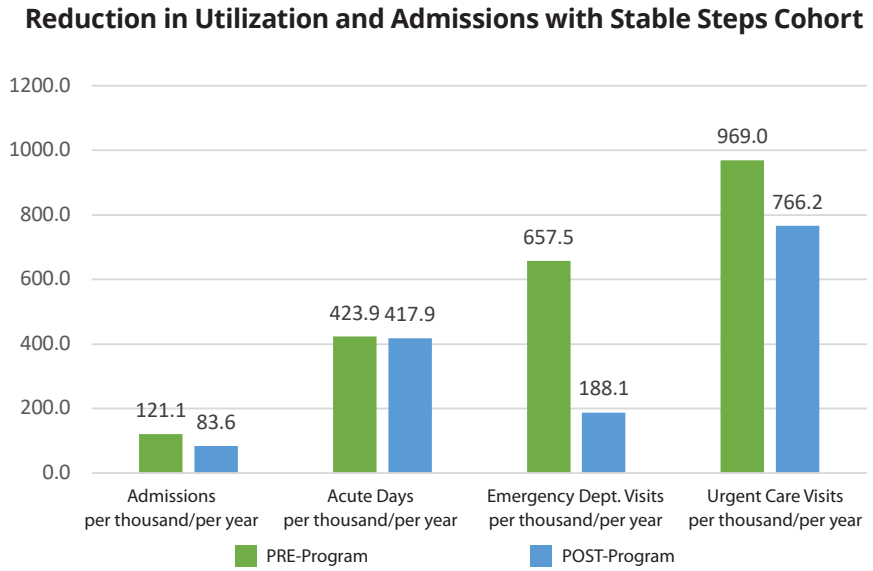

Fig. 1. In an analysis of 146 patients in Stable Steps, acute hospital admissions declined 31%, while ED visits dropped 71%. Patients in the cohort had an average age of 80 years, with an average of 11 conditions.

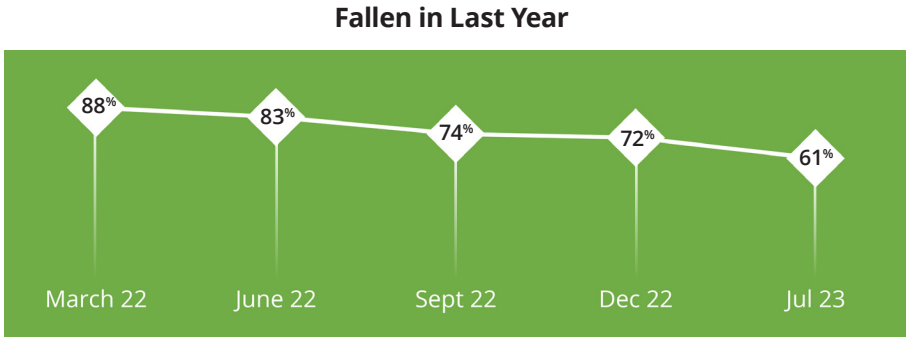

Fig. 2. The percentage of patients in the Stable Steps program who reported a fall in the last year has declined by 30%.

Results

The results of this collaboration have exceeded expectations. DOHC and Altura analyzed urgent care, ED, and inpatient claims data for 146 patients who actively participated in Stable Steps after receiving medical care due to a fall.

The analysis found a 71% reduction in ED visits after referral to the program *(See Figure 1)*. In addition, a patient-reported survey with 129 responses from the same population found that 81% felt the program helped prevent a subsequent fall, while a semiannual fall assessment showed a steady decline in falls *(See Figure 2)*.

Patient satisfaction has also exceeded expectations:

- Stable Steps has regularly garnered a net promoter score (NPS) in the mid- to high-70s.
- DOHC's fall-related Consumer Assessment of Healthcare Providers and Systems (CAHPS) score has risen significantly since the collaboration began.
- The CAHPS score for the Stable Steps cohort has exceeded the overall DOHC score by over 50%—helping DOHC to consistently exceed its target since the first quarter of 2022.

Finally, the program is sensitive to social determinants that may impact mobility and falls. For example, assessment data indicates our Hispanic patients are more concerned about falling, are open to more resources, and have fall-related medical conditions that vary from our general population.

Given the preliminary cost savings and positive patient satisfaction/NPS scores that lead to retention, Stable Steps has a positive return on investment—allowing for a sustainable program with room for expansion.

> "Prior to Stable Steps I rarely walked, and now I'm up to 30 minutes a day. The seated leg exercises really help."
>
> *— Stable Steps patient*

REFERENCES:
[1] Falls and fractures in older adults: causes and prevention. National Institute on Aging. Reviewed September 12, 2022. Accessed September 19, 2023. https://www.nia.nih.gov/health/falls-and-fractures-older-adults-causes-and-prevention
[2] Older adult fall prevention: facts about falls. Centers for Disease Control and Prevention. Reviewed May 12, 2023. Accessed September 19, 2023. https://www.cdc.gov/falls/facts.html

AMERICA'S
PHYSICIAN
GROUPS

apg.org