



Science.
Applied to Life.™

3M Health Information Systems

3M's unique solution for value-based health care

Part 3: How 3M can help your organization at
any stage on the journey to value-based care

Calculating your route

	1 point	2 points	3 points	4 points	5 points
Do you have a data and analytics platform?	No data	Little data	Clinical data, HEDIS measures	Clinical data, some access to claims, lab	Integrated data with dashboards
Percent of your revenue today from risk-based payments?	0-15%	15-25%	25-35%	35-50%	+50%
Percent of your revenue from risk-based payments in three years?	0-15%	15-30%	30-50%	50-75%	+75%
Does your organization have the ability to manage populations?	No	Services are in our community	Relationships with community organizations	We conduct care management	Fully integrated care continuum
Are there enough providers and specialists in your service area?	No	Need more primary care providers; monitoring specialty referrals	Good supply of providers; some management of specialty referrals	Patient-centered medical home and MD leaders; tight specialty network	Fully formed MD organization is part of governance
Do you link clinical performance/ quality with financial incentives?	No	Measure quality	Measure and report quality	Modest reward for quality	Providers part or fully at risk

What's your location?

All organizations are somewhere on the journey to value-based health care. Whether you haven't started yet, are exploring your options, or are fully committed and well on your way, 3M can provide specific solutions tailored to your organization and current location.

After answering the previous questions and adding up your points, what is your organization's current location?

**5–10
points**



Planning
the journey

**10–15
points**



Mapping
the route

**15–20
points**



Gaining
speed

**20–25
points**



Cruising
to the
destination

**25+
points**



Approaching
the destination



Planning the journey



Many healthcare systems remain almost 100 percent fee-for-service and other systems struggle to serve a mix of fee-for-service and value-based care populations. 3M can help all organizations make the transition from fee-for-service through improved efficiency, productivity, case mix index, compliance and more.

3M can help with:

- Productivity
- Case mix index
- Compliance
- Benchmarking performance

Mapping the route



These organizations are surveying the landscape of value-based care and having in-depth discussions about when to start and how to get going. Because they remain predominantly fee-for-service, they can benefit from all the same solutions as those who have not yet started the journey. In addition, they could explore quality measurement and cost related to risk-based payments.

3M can help with:

- Documentation
- Efficiency
- Productivity
- Automating compliance

Gaining speed

Generally, the risk-sharing agreements with these organizations are with Medicare, Medicaid managed care plans or a commercial accountable care organization (ACO). They are living it and seeking to be successful with an at-risk payment population, but still have one foot securely planted in the fee-for-service world while they navigate the journey.

3M can help with:

- Documenting quality measures
- Improving efficiency
- Preventing readmissions and complications
- Automating compliance

Cruising to the destination



These organizations are proactive in pushing their model from volume-to value-based care, but still participate in and benefit from the fee-for-service world. They are shifting their mindset to “members” instead of “patients.” However, there is still fee-for-service incentive by providing care for patients outside of their health plans.

3M can help with:

- Managing population health
- Improving efficiency
- Preventing unnecessary events (admissions, etc.)
- Comparing quality measures

Approaching the destination



These organizations have adopted value-based health care and are fully committed to it. They are engaged in population health management and finding ways to implement it in all care settings.

3M can help with:

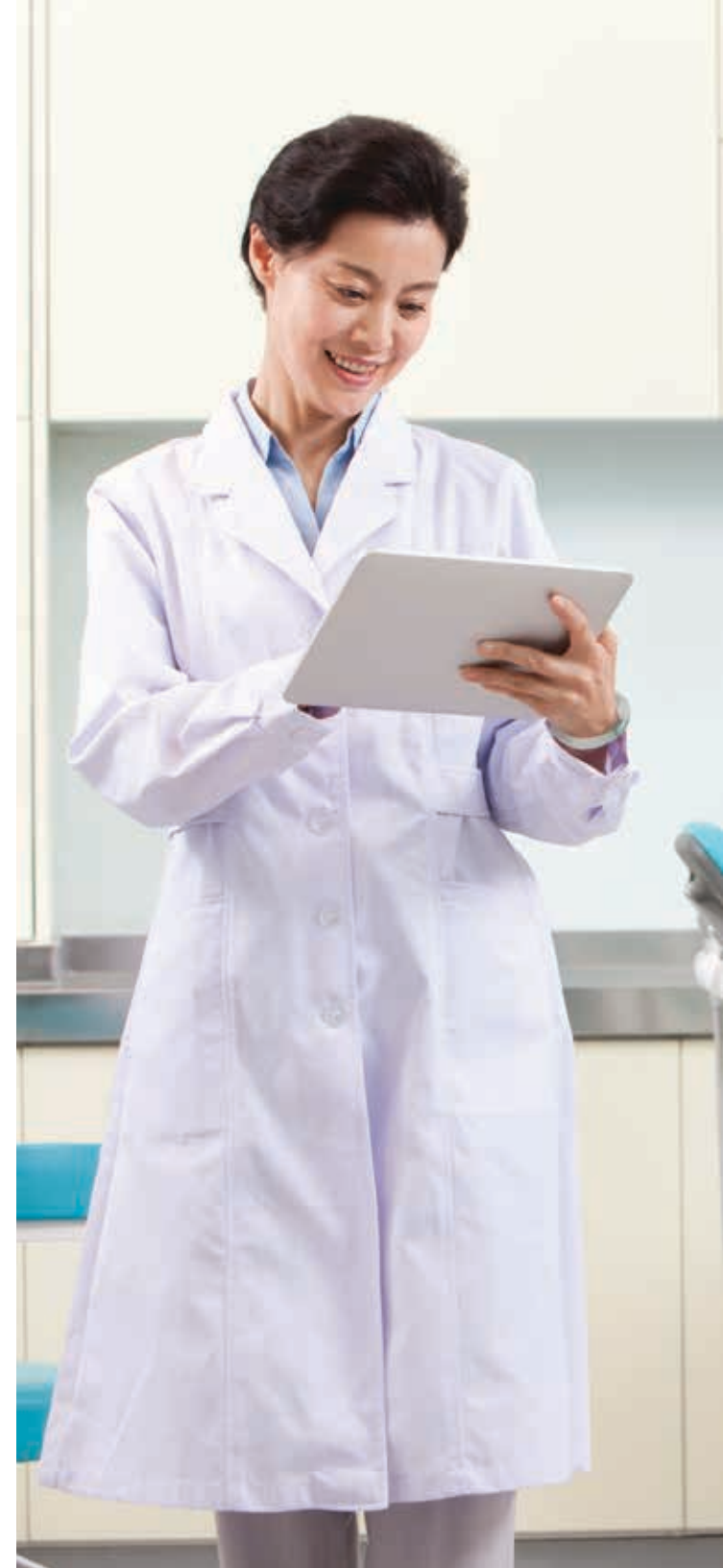
- Managing population health
- Improving efficiency
- Determining total cost of care
- Modeling risk scenarios

Putting it all together

Payers and providers want help in moving to value-based health care. The journey starts with using data to answer questions, gain insights and track performance. The journey ends when cost, quality and performance are fully integrated to deliver value. Wherever you are on the journey, 3M can help you navigate successfully.

So, why choose 3M?

- 3M can take data and help make it fit your purposes, integrating clinical and claims data and applying benchmarks at the person, population, provider and system levels
- 3M converts multi-source data to useful information with insights for users who seek system and payment transformation through natural language processing (NLP) and enhanced data models
- 3M has access to clinical data, coding details and expertise in ICD-10
- 3M's classification systems are categorical and segment the population by illness burden
- 3M's risk-adjustment solutions and metrics are the standard in the industry
- 3M's data model allows data and new information sources to be added incrementally
- 3M has deep relationships with EHR vendors
- 3M has scale and experience with large, multi-source data sets using clinical and claims data



Helping your organization navigate to its destination

The road to value-based health care may be bumpy at times, and the journey will take time and effort. But wherever your organization may be along the road, 3M can help you travel it successfully.

3M provides a start-to-finish solution that can be scaled and used to harness critical assets in key areas to deliver value-based success for the payer, provider and government sectors.

What makes 3M unique:

- Operates as an independent third party
- Multi-payer (commercial, Medicaid and Medicare) population experience
- Multi-source data experience and investments
- The **3M™ 360 Encompass™ System** provides clinical integration, experience and scale
- Incremental business model (per-member-per-month vs. all-in)
- Values the input and influence of its clients

3M's expertise and analytics solutions can help you manage the total cost of care and overall health of a population, while measuring provider performance and helping you achieve success under the value-based model. To learn more about our approach to value-based care and population analytics, contact your 3M representative today. You can also call **800-367-2447** or visit us online at **www.3m.com/his**.



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