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# 3M's approach to providing payer solutions across the continuum of health care



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3M AM-PPC Product Owner



Jessie Murphy, MHA  
3M Methodology Consultant

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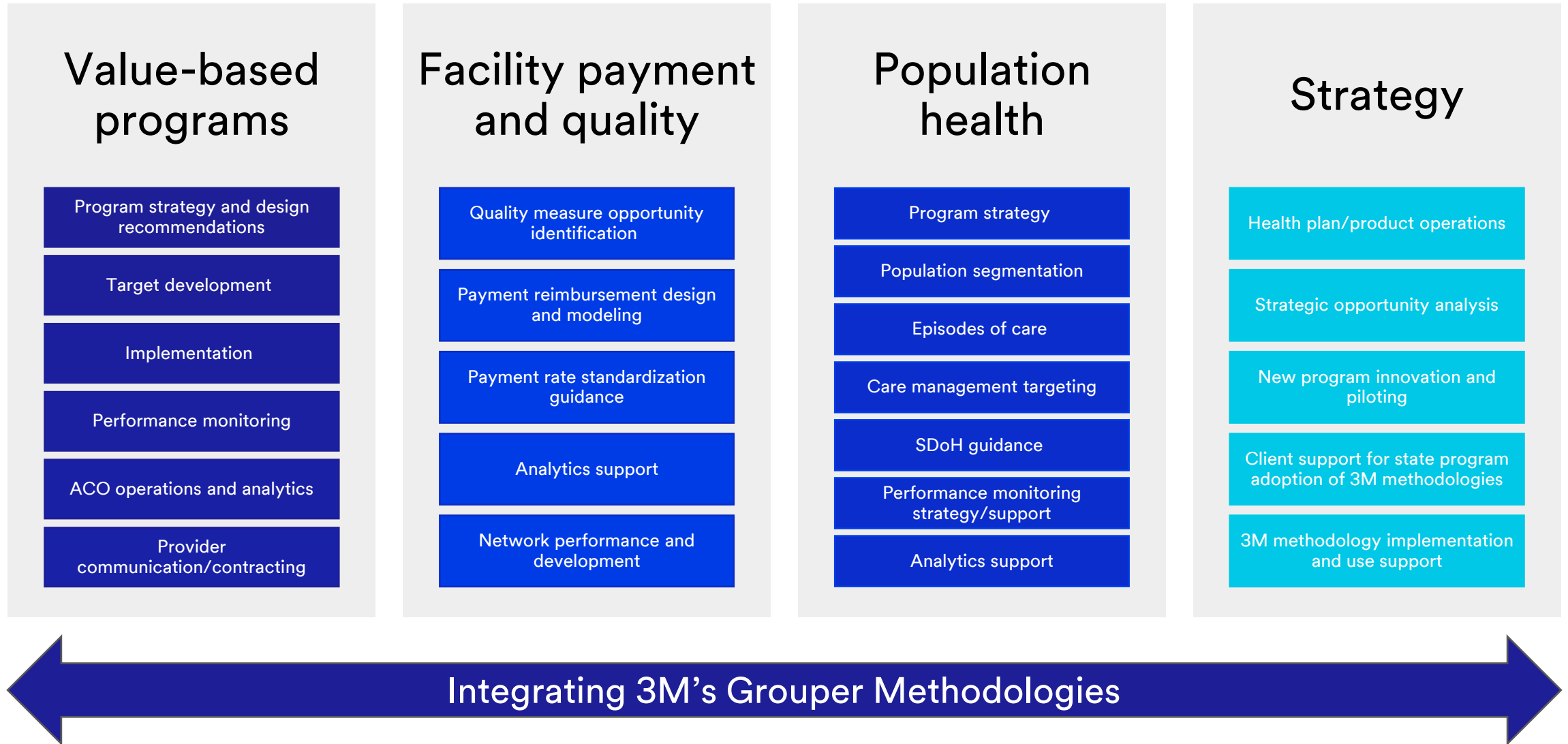
# 3M team introductions and agenda

1. Overview of 3M client experience
2. Facility payment and quality grouper application
3. Population health grouper application in value-based care
4. Bundled program analytics
5. NEW 3M™ Ambulatory Potentially Preventable Complications

# The 3M client experience



# Methodology consulting: areas of expertise



# 3M clinical classification methodologies

3M patient classification methodologies			
Health care for insight, risk adjustment and payment		Applicability	Notes
	<b>3M™ All Patient Refined Diagnosis Related Groups (APR DRGs)</b>	Inpatient admission	Includes four severity of illness subclasses
	<b>3M™ Enhanced Ambulatory Patient Groups (EAPGs)</b>	Ambulatory visit	Hospital outpatient, ambulatory surgical center and other clinics
	<b>3M™ Clinical Risk Groups (CRGs)</b>	Population health	Person health status
	<b>3M™ Patient-focused Episodes (PFEs)</b>	Episode of care	Includes hospital, professional, pharmacy and other
	<b>3M™ International Refined DRG (IR-DRGs)</b>	Inpatient admission, ambulatory visit	Applicable outside U.S.
	<b>Functional Status Groups (FSGs)</b>	Population health	Included within 3M CRGs
Public reporting, payment adjustment and quality improvement		Applicability	Notes
	<b>3M™ Potentially Preventable Complications (PPCs)*</b>	Inpatient hospital care	Complications and adverse events during inpatient admissions.
	<b>3M™ Ambulatory Potentially Preventable Complications (AM-PPCs)*</b>	Elective outpatient procedures	Complications and adverse events following elective outpatient procedures
	<b>3M™ Potentially Preventable Readmissions (PPRs)*</b>	Inpatient hospital care, population health	Includes PPR ED: Potentially Preventable Revisits to the ED
	<b>3M™ Potentially Preventable Admissions (PPAs)*</b>	Population health	Included as part of 3M PFEs
	<b>3M™ Potentially Preventable Emergency Department Visits (PPVs)*</b>	Population health	Included as part of 3M PFEs
	<b>3M™ Potentially Preventable Services (PPSs)*</b>	Population health	Included as part of 3M PFEs
	<b>Risk of Mortality (ROM)</b>	Inpatient hospital care	Included within 3M APR DRGs and 3M IR-DRGs
*3M PPCs, AM-PPC, PPRs, PPAs, PPVs, PPSs are the 3M Potentially Preventable Events (PPEs)			

# Facility payment and quality grouper application



# 3M APR DRG and EAPG groupers

Supports stabilization of inpatient and outpatient payment variation

Provides options for refined payment processing and editing

Pushes value-based care programs in rewarding quality and efficiency



# Medicare pricing modeling

## CMS Medicare IPPS

- Prices at levels Medicare would pay under MSDRGs
- Covers acute hospitals

## CMS Medicare OPPS

- Prices visits at levels Medicare would pay under APCs
- Covers acute hospitals

## Critical access hospitals (CAHs)

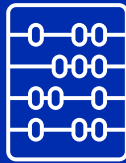
- Are not included in IPPS or OPPS price
- Computed Medicare reimbursement based on costing for the case x 101%

# Impacts of 3M APR DRG and 3M EAPG groupers

**Benchmarking**



**Rate setting**



**Contracting**

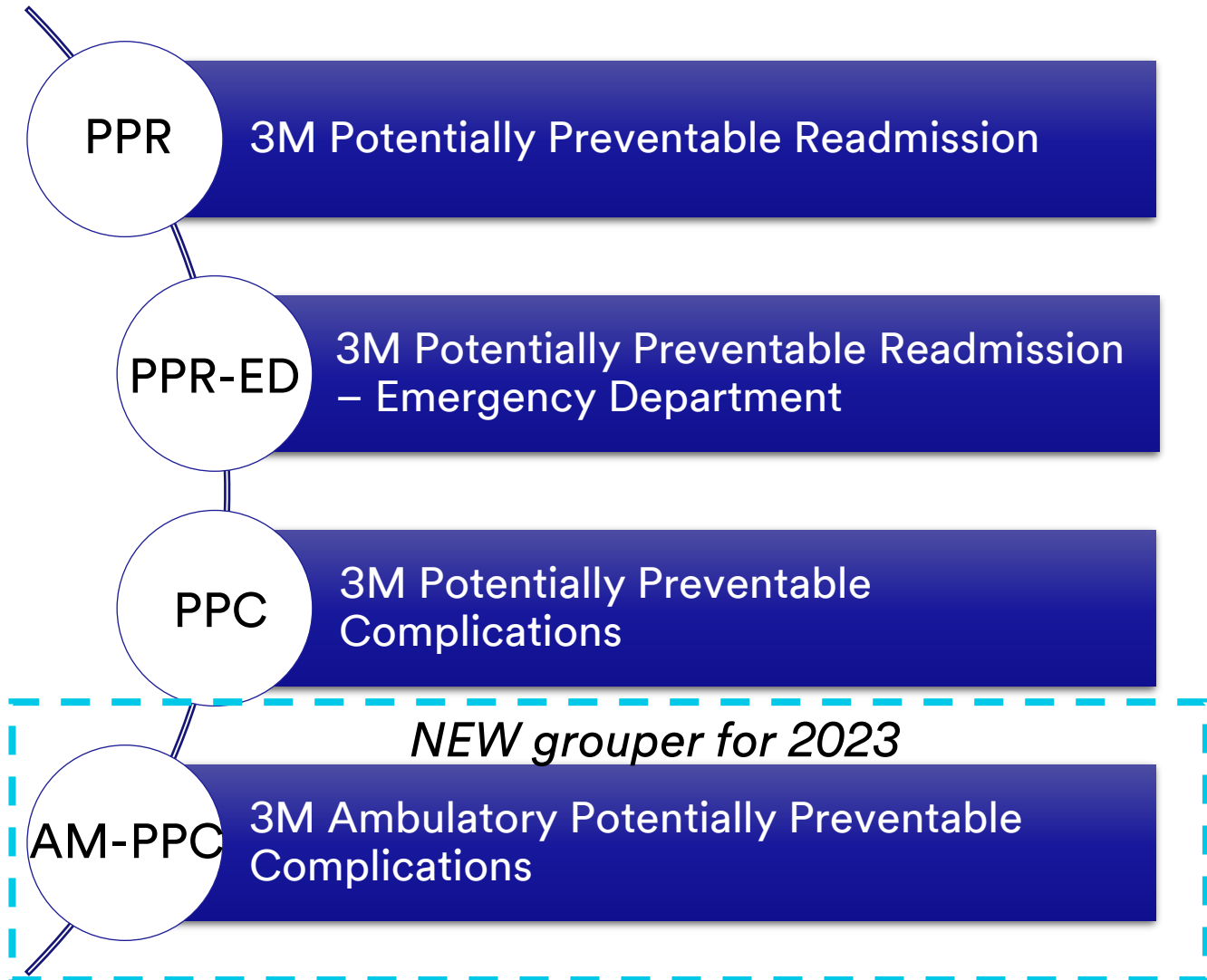


**Claim editing**



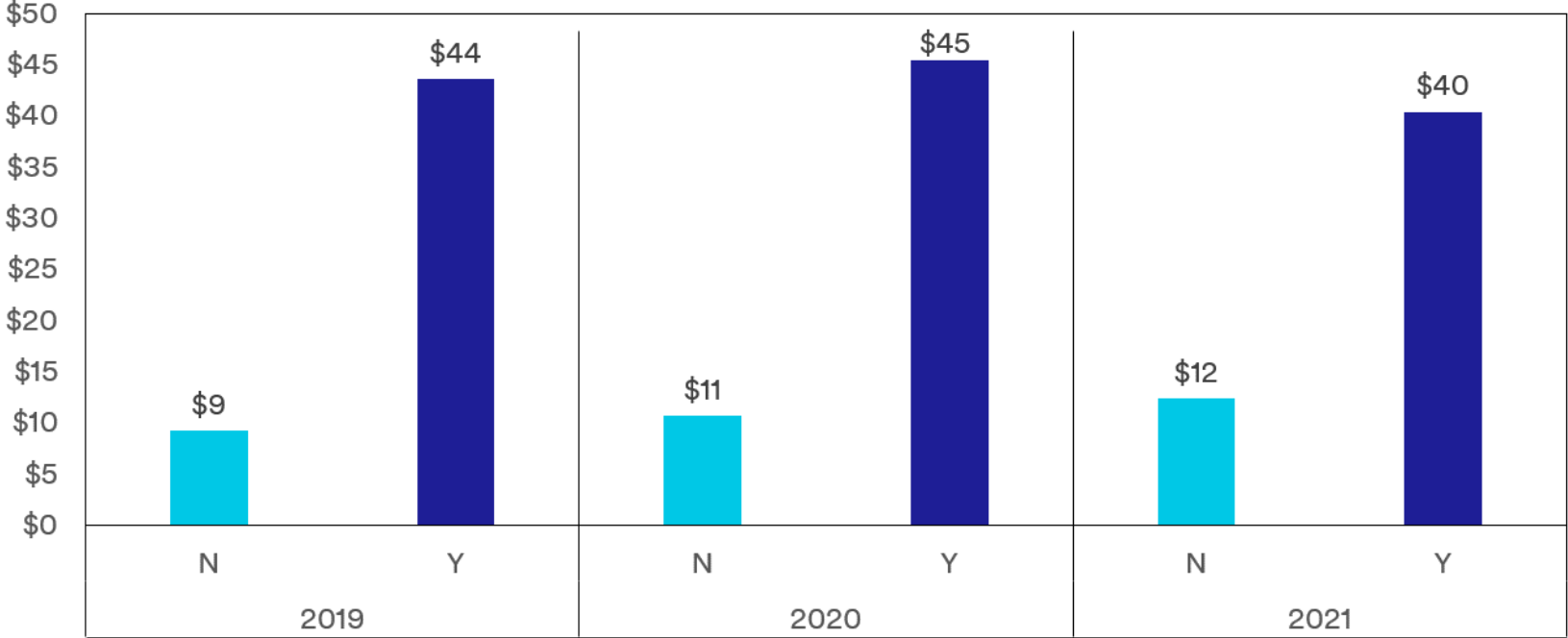
**Analytical support**

# 3M approach to facility programs



# Impacts of mental health on payment

Impacts of the Presence Mental Health & Substance Abuse\*  
PPR Allowed PMPM



\*Yr/Yr compare of chronic population PPR utilization. Chronic defined as any patient with CRG status 5 or greater.

Data Source: Demo Commercial Data 3/2019-2/2020, claims paid through 5/31/2020.



Targeted approach  
to improvement



Leverage behavioral  
health services



Focused transitions  
of care

# PPC network hospital profile

% Difference from expected across three network hospitals			
Network hospitals	Hospital A	Hospital B	Hospital C
Candidate cases	4,494	3,522	3,856
Observed case count	633	405	530
Expected case count	642	345	563
% Difference from expected	-1.41%	17.39%	-5.86%

% Diff. from expected Hospital B by PPC Group	
PPC group	% Difference
Infectious complications	17.85%
Perioperative complications	2.45%
Malfunctions, reactions, etc.	1.15%

% Diff. from expected Hospital B by complication	
PPC	% Difference
Clostridium Difficile Colitis	45.12%
Septicemia and severe infections	4.52%
Gastrointestinal complications	2.75%

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# Population health / VBC grouper application

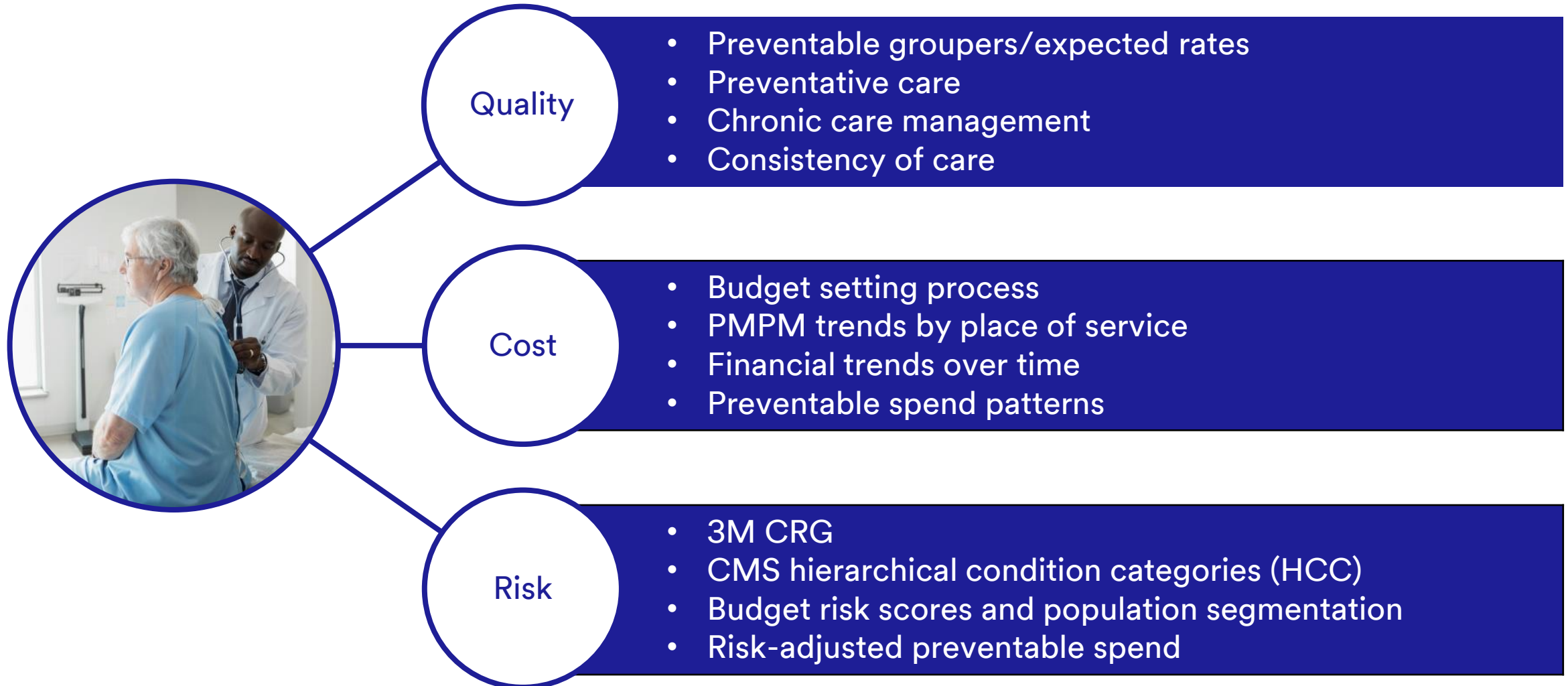
# The foundation for value-based care



"Uncontrolled variation is the enemy of quality."  
-W. Edwards Deming



# The foundation for value-based care

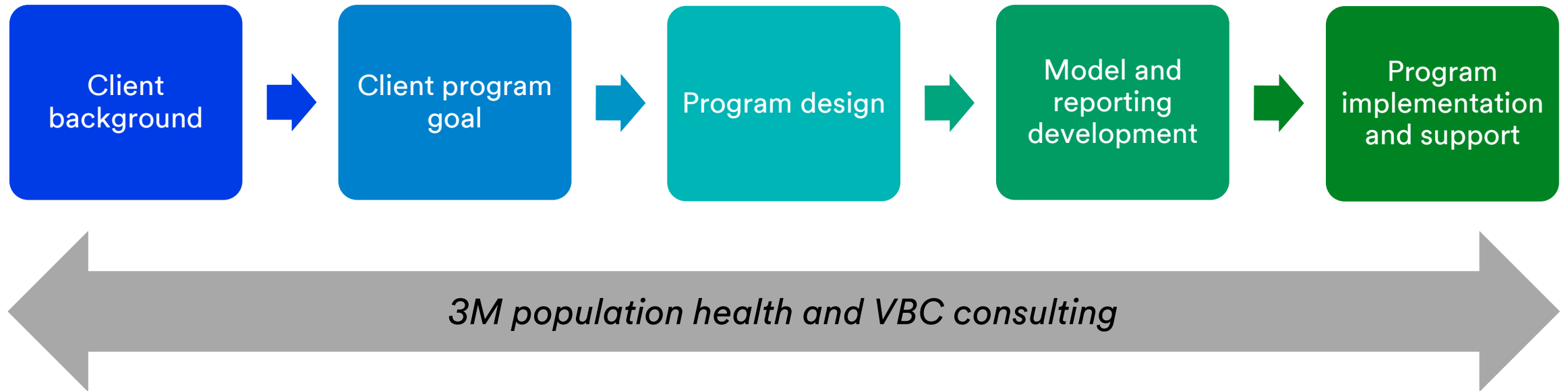


# Program types

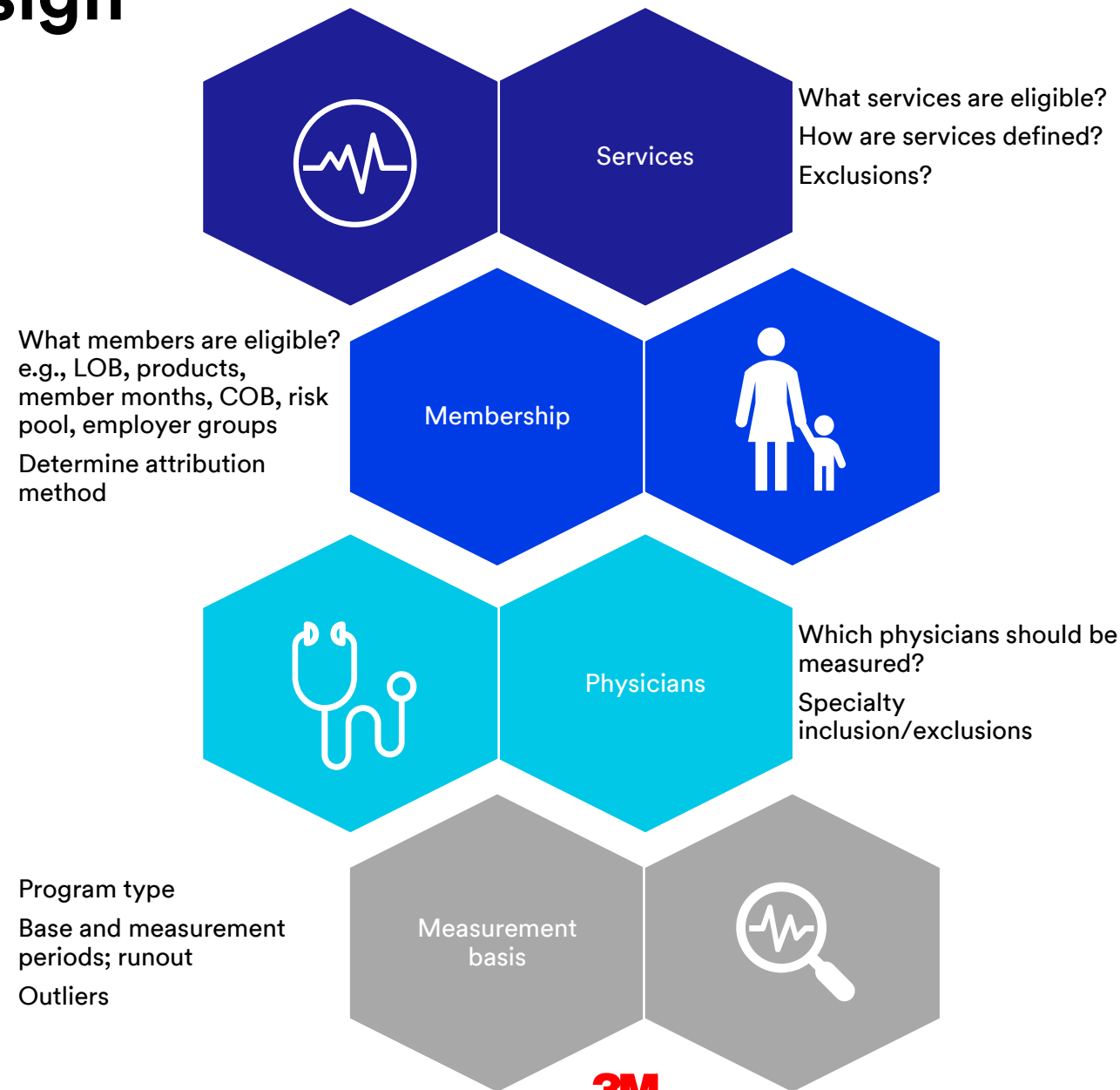
Based on our client's value-based program goals, our team advises on various types of alternative payment models



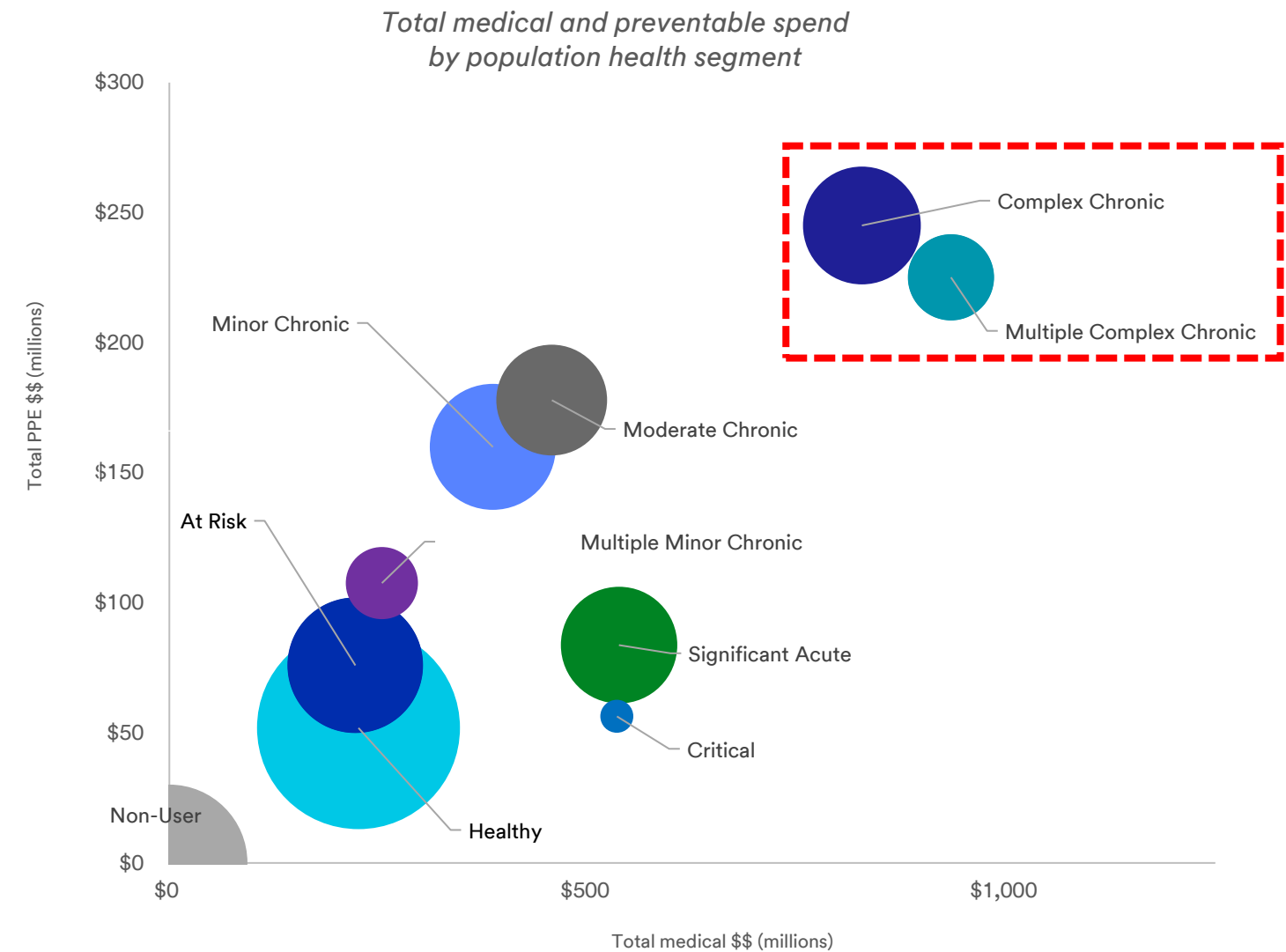
# Foundation of population health and VBC program design



# Program design



# Risk stratification and segmentation



Data is for illustrative purposes only and does not come from a specific data source.



## PPEs

Spend on potentially preventable events (including admissions, ED visits, readmissions, etc.) can be reduced in more complex population with more adequate patient coordination



## CRGs

Segment the population by complexity to identify the subset of members with the highest spend on potentially preventable events.

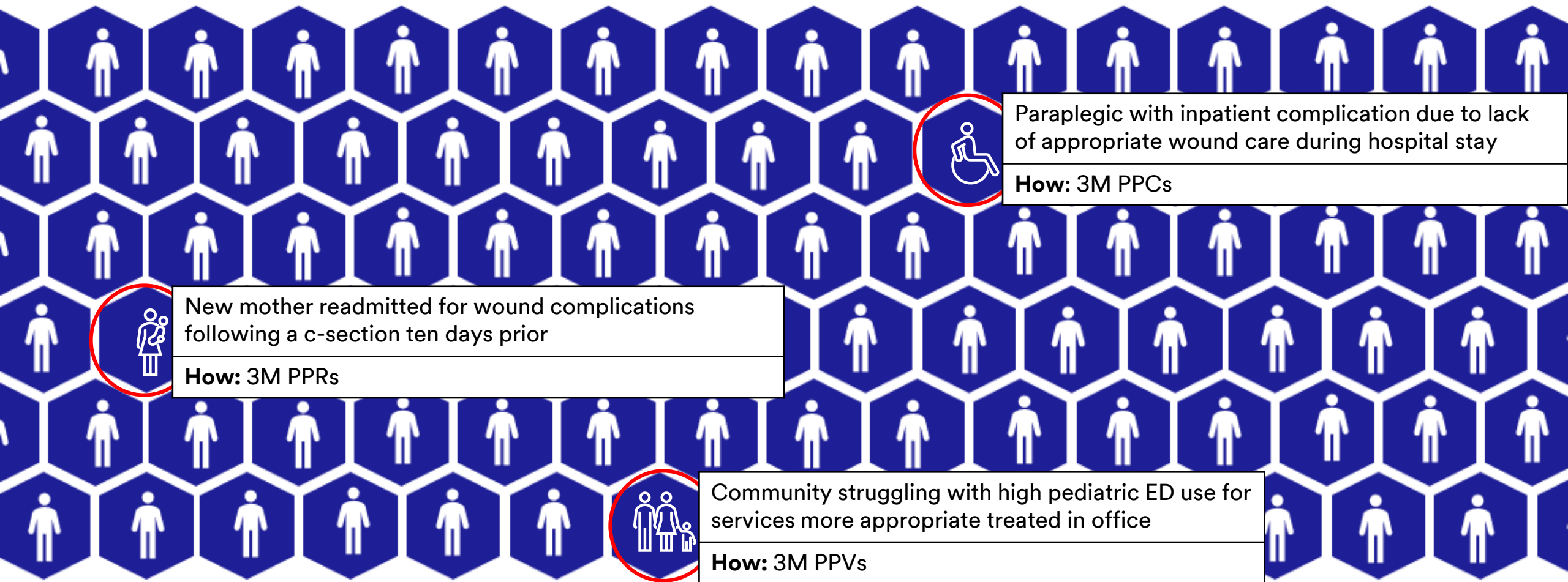


## Reporting and analytics

Care management reporting, designing effective reporting for provider data sharing, drilling into drivers of healthcare spend

# Harnessing potentially preventable events

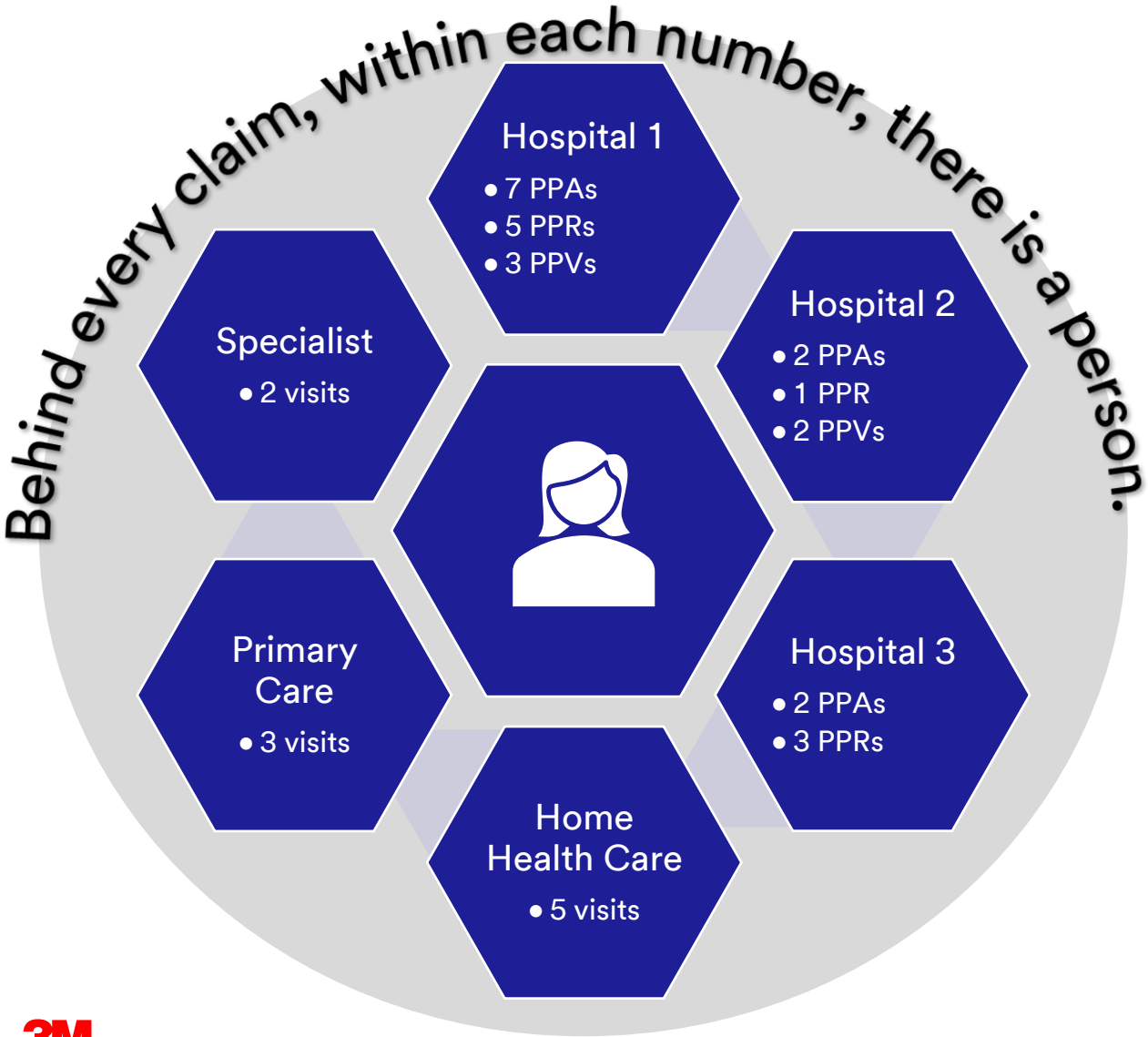
Identifying the most vulnerable patients and improving population health strategy



# Supporting payers and providers in population health

Connecting data to create actionable results

% Reduction in PPRs	# of PPR cases	Potential savings
5%	13	\$267,808
10%	25	\$535,616
15%	38	\$803,424
20%	51	\$1,071,233



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# Analyzing drivers of utilization

## 3M™ Potentially Preventable Events



### Disease cohort

- CRGs (e.g., Primary EDC)
- Specialist ordering Patterns
- RX utilization/adherence



### Geography

- Rural vs. urban
- Regional differences



### Population trends

- Age group patterns
- Gender patterns
- Seasonal ordering Patterns

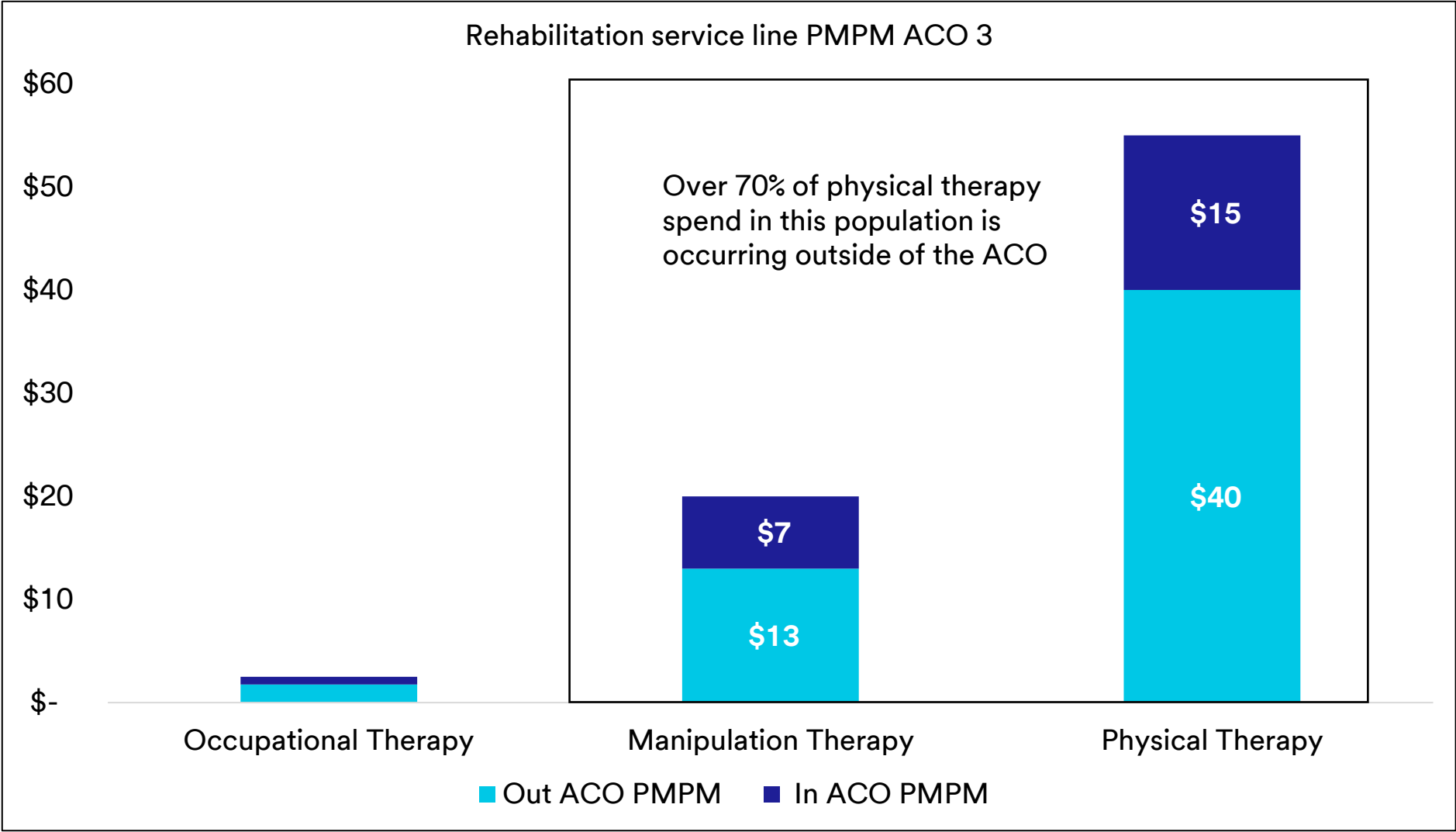


### Quality of care

- Medical policies
- Outflow
- Overuse



# PPS analysis using 3M EAPGs in rehabilitation service line



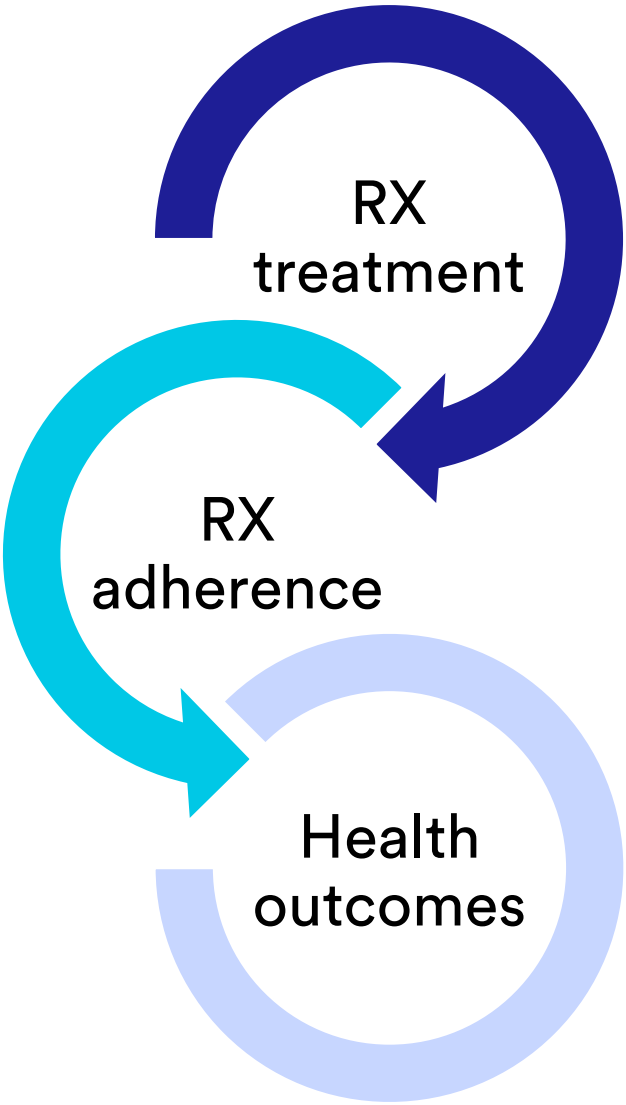
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# Providing insight to drive clinical decision making

## Medication adherence reporting

Asthma medication adhere example				
Provider practice	# of Asthma members	% RX adherence	PPV count	PPV PKPY
Provider A	157	75%	15	96
Provider B	210	90%	10	48
Provider C	180	84%	11	61



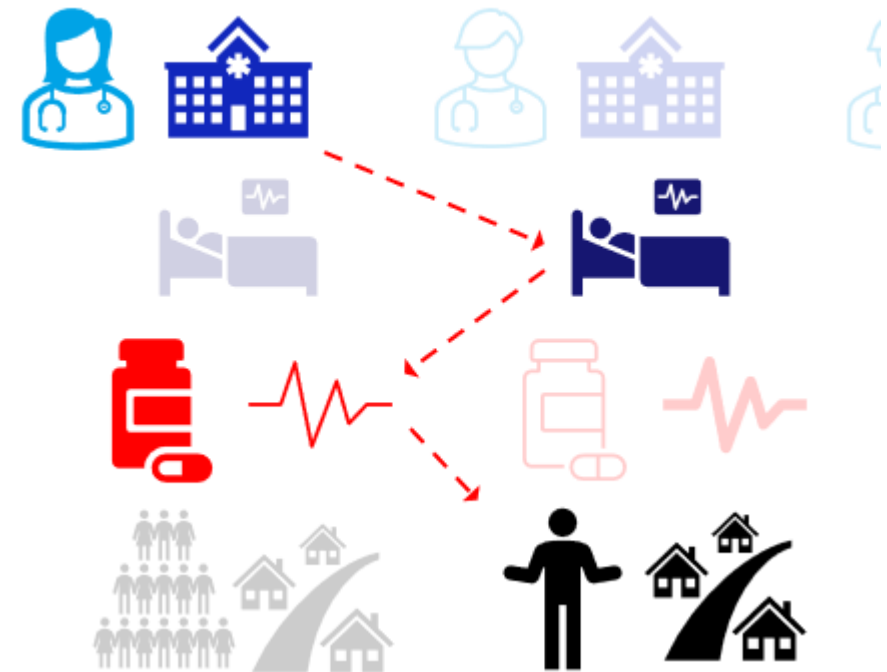
# Bundled program analytics

# Why are episodes important?

Episodes are a critical tool that can be used to identify and measure sources of variation that impact cost, quality and outcomes.

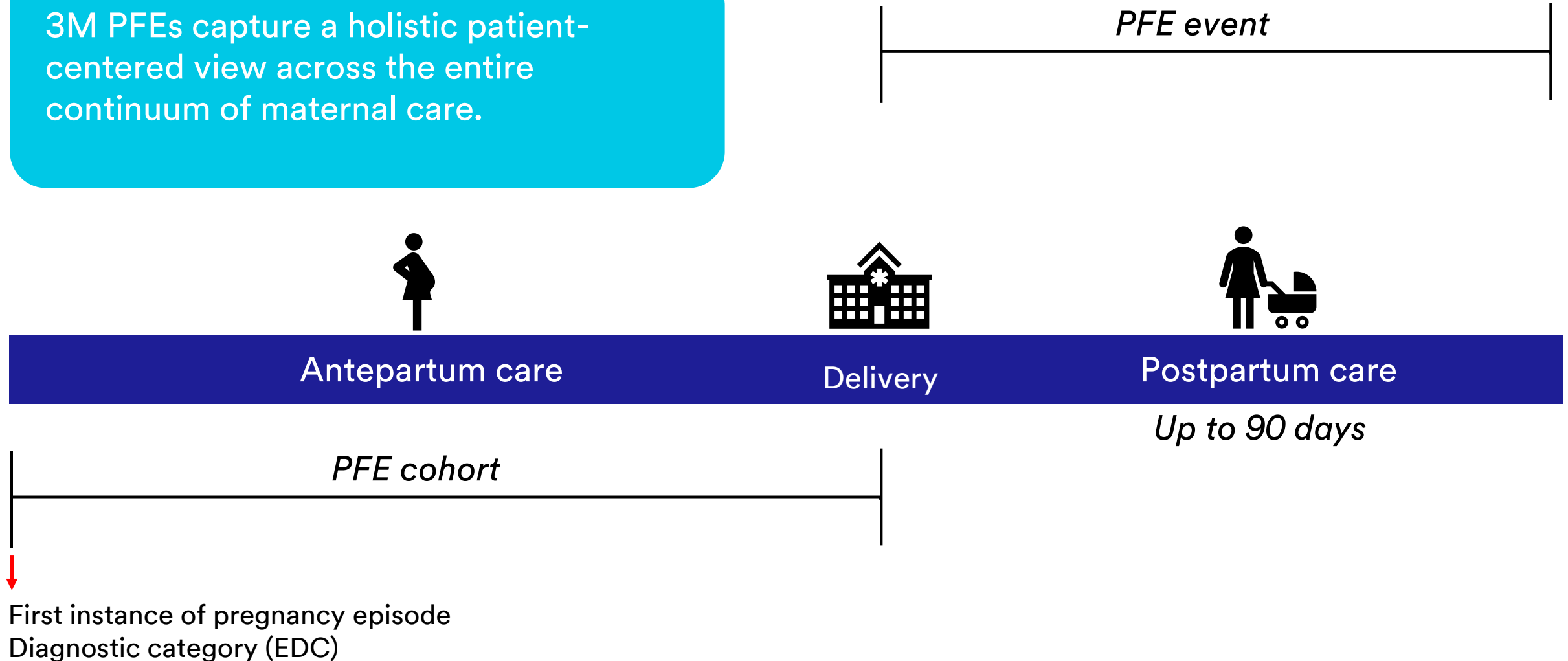
Episodes promote:

- Transparency and communication
- Performance improvement
- Coordinated, whole person care
- Better patient-experience

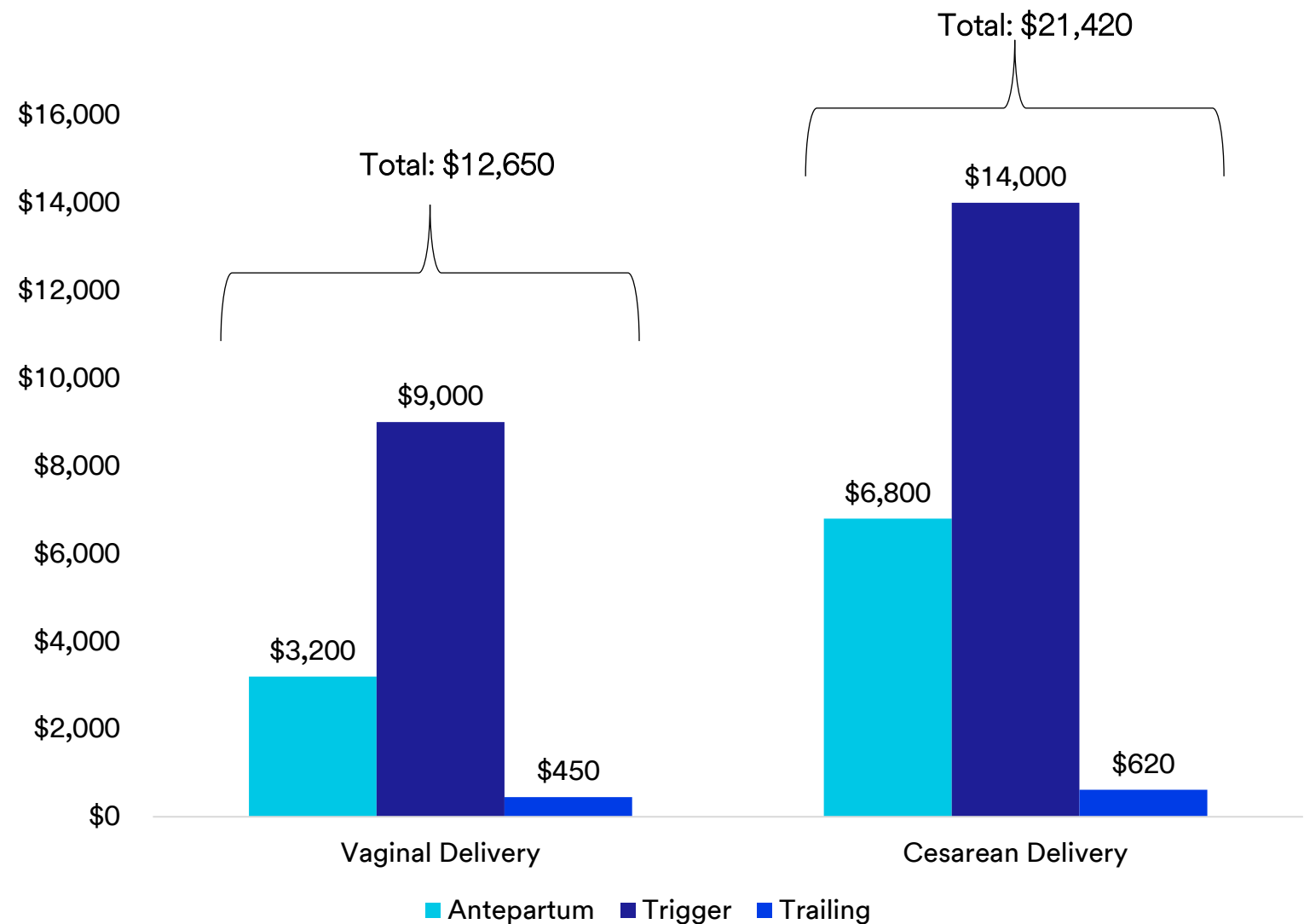


# Case study: Maternal care

3M PFEs capture a holistic patient-centered view across the entire continuum of maternal care.



# Event profile of allowed amount by episode window



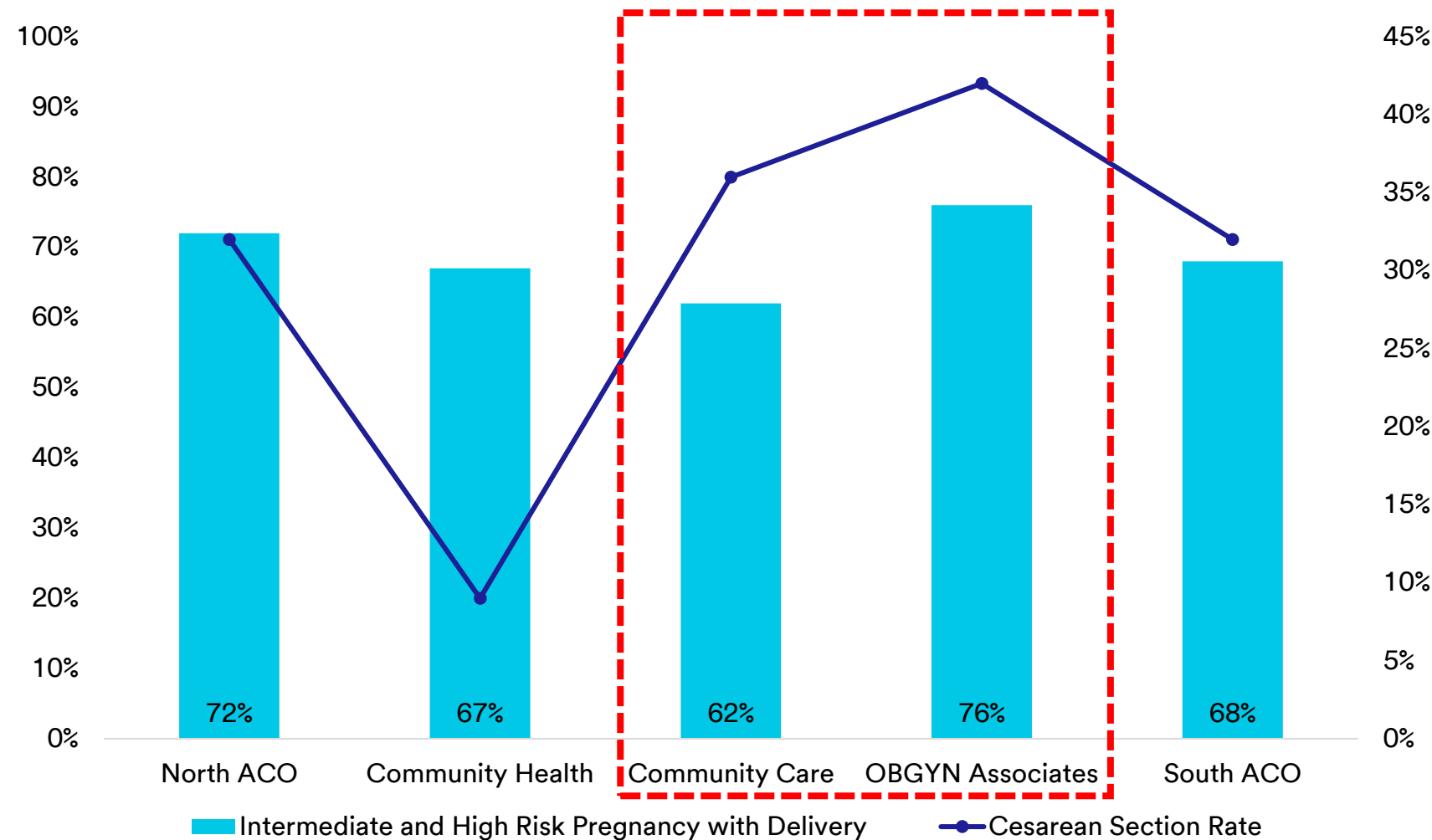
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# Cesarean rates compared to patient acuity

Community care has the second highest cesarean rate but the lowest % of high/intermediate risk pregnancies.



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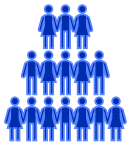
**3M AM-PPCs**



# Current opportunities and challenges



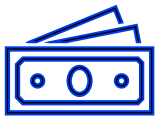
Ambulatory care is one of the fastest growing and a higher margin segment in healthcare industry <sup>1</sup>



70% procedures performed in outpatient settings<sup>2</sup>



Limited outcomes/safety quality measurement systems



Impact of patient safety has multiple costs, “complications are the strongest indicator of costs”<sup>3</sup>



Source:

<sup>1</sup> [Walking out of the hospital | McKinsey](#)

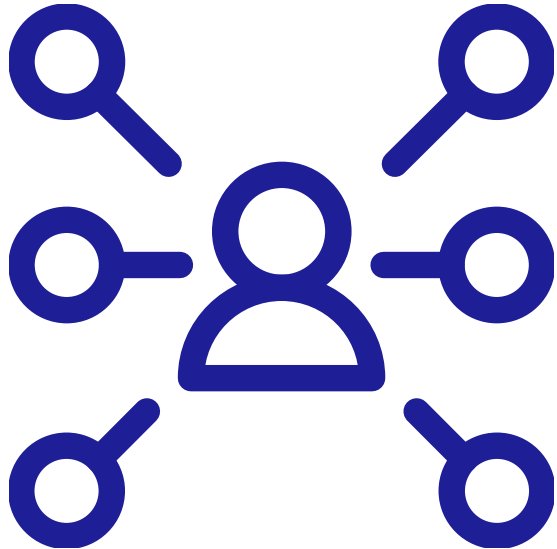
<sup>2</sup> July 2017 report from the Centers for Medicare & Medicaid Services (CMS)

<sup>3</sup> [The Impact of Complications on Costs of Major Surgical Proce... : Annals of Surgery \(Iww.com\)](#)

# 3M AM-PPCs

Harmful events (e.g., accidental laceration) or negative outcomes (e.g., sepsis) that develop after an **elective procedure** was performed in the **ambulatory care setting** and that may result from processes of care and treatment rather than from natural progression of an underlying illness and are therefore potentially preventable.

# Logic to developing 3M AM-PPCs



## 93 procedure groups

2900 procedures with a risk for a complication

Started anatomically

Risk / complexity grouping

Clinical procedure risk hierarchy

Service line

Chained – 30 days

Examples: Colonoscopies, upper GI endoscopy, cataracts, arthroscopies, biopsies

# Logic to developing 3M AM-PPCs

## 35 complication groups



~1500 unique complications

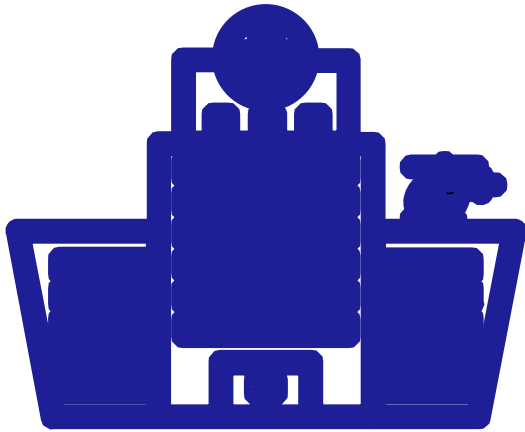
Complications plausibly related to procedure

Timing limits

Examples: Sepsis, UTI, bleeding, wound dehiscence, infection

# Logic to developing 3M AM-PPCs

## Four complication types



**Type 1 AM-PPC** found in **emergency department**

**Type 2 AM-PPC** found POA on **inpatient admission**

**Type 3 AM-PPC** found in **outpatient encounter**

**Type 4** complication is an inpatient claim that contains an ambulatory procedure resulting in a complication and inpatient admission- 72 hour rule

Medicare and national benchmarks (ED and IP only)

# 3M AM-PPC: Risk adjustment approach

First at procedure level



Age



Disability status

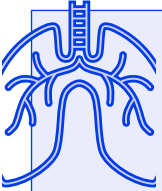


Oncology



Correlated with  
chronic conditions

# Samples of complications



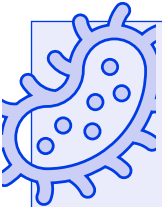
## Lung issues

- Pneumonia and Other lung infections
- Aspiration Pneumonia
- Pulmonary Embolism
- Other pulmonary and chest complications



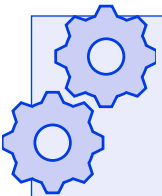
## Bleeding Hematoma

- Post-Hemorrhagic and other Acute Anemia
- Other Hemorrhage and Hematoma
- Venous Thrombosis



## Infection Sepsis

- Septicemia and severe infections
- CLABSI, UTI
- Infection, inflam. compl. of devices, implants or grafts
- (Specific examples: Cardiac, vascular. GU, GI, eye, musculoskeletal)



## Mechanical complications

- Mechanical compl. of device, implant and graft
- (Specific examples: Cardiac, vascular, GU, GI, eye, musculoskeletal)

# Sample procedure directed complications

- 101 Post-procedural infections of eye and adnexa
- 102 Post-procedural complications of eye and adnexa
- 110 Pulmonary/cardiovascular - Hemorrhage and hematoma
- 112 Genitourinary/abdominal - Hemorrhage and Hematoma
- 114 Musculoskeletal - Hemorrhage and Hematoma
- 120 GI and Hepatobiliary - Mechanical compl. of device, implant or graft
- 121 GU and Hepatobiliary - Infect., inflam compl. of devices, implants or grafts
- 122 Genitourinary - Mechanical compl. of device, implant or graft
- 123 Vascular - Mechanical compl. of device, implant or graft
- 124 Vascular - Infection, inflam. compl. of devices, implants or grafts
- 125 Cardiac - Infection, inflam. compl. of devices, implants or grafts
- 126 Cardiac - Mechanical compl. of device, implant or graft



# Top 20 PSGs 3M AM-PPC rates 19/20 Medicare FFS HOPD

PSG	Description	At-Risk procedures	ED complications	IP complications	AM-PPC rate
70	Upper Gastrointestinal Endoscopy Procedures	1,438,611	7,594	23,019	1.9%
85	Lower Gastrointestinal Endoscopy Procedures	1,168,141	6,102	9,290	1.2%
99	Spine Injection Procedures	1,150,443	2,546	7,017	0.7%
53	Coronary Angiography Procedures	564,725	2,214	9,184	1.8%
103	Routine Cataract Procedures	487,922	114	938	0.2%
91	Lower Genitourinary Procedures	480,719	10,122	11,535	3.9%
84	Colonoscopy Screening Procedures	301,792	696	901	0.4%
60	Dialysis Shunt Procedures	253,216	7,285	11,456	6.7%
74	Upper Airway Endoscopy Procedures	252,147	1,161	3,079	1.5%
55	Pacemaker/AICD Procedures	248,479	2,932	4,716	2.8%
61	Periph Vasc Access - Tunn PICC w Pump or Port	226,955	1,274	7,908	3.8%
39	Breast Biopsy and Localization Procedures	219,378	409	588	0.2%
13	Knee Arthroplasty Procedures	218,660	2,544	3,719	2.6%
56	Percut.Transluminal Coronary Angioplasty (PTCA)	218,434	1,624	3,779	2.3%
34	Facial and ENT Procedures	190,112	1,255	1,312	1.1%
94	Upper Genitourinary Stent & Guidewire Procedures	174,908	5,619	9,664	7.6%
44	Female Genital System Procedures	160,185	3,208	2,031	2.8%
43	Male Genital System Procedures	158,095	5,934	4,793	6.1%
48	Inguinal and Hydrocele Hernia Procedures	156,426	2,048	1,765	2.1%
63	Perip Vasc - Percutan Transluminal Angioplasty	129,983	1,873	5,038	4.7%

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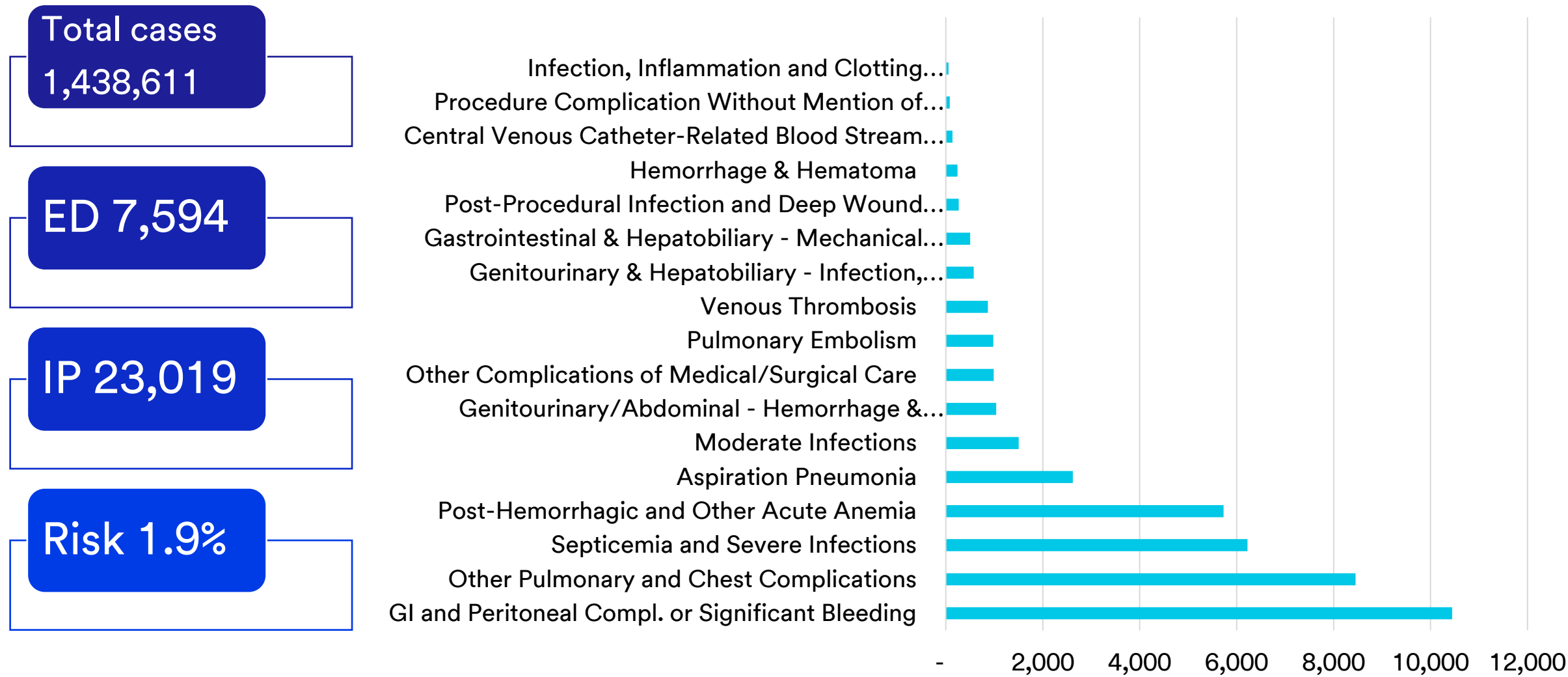
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# Data by procedure subgroup (PSG) 70 Upper GI Endoscopy

Medicare HOPD 19/20

PSG 70 Upper GI Endoscopy Complications



# Data by facility/ provider : Gastroenterology complications

Medicare HOPD 19/20

Gastroenterology complications

Total cases:

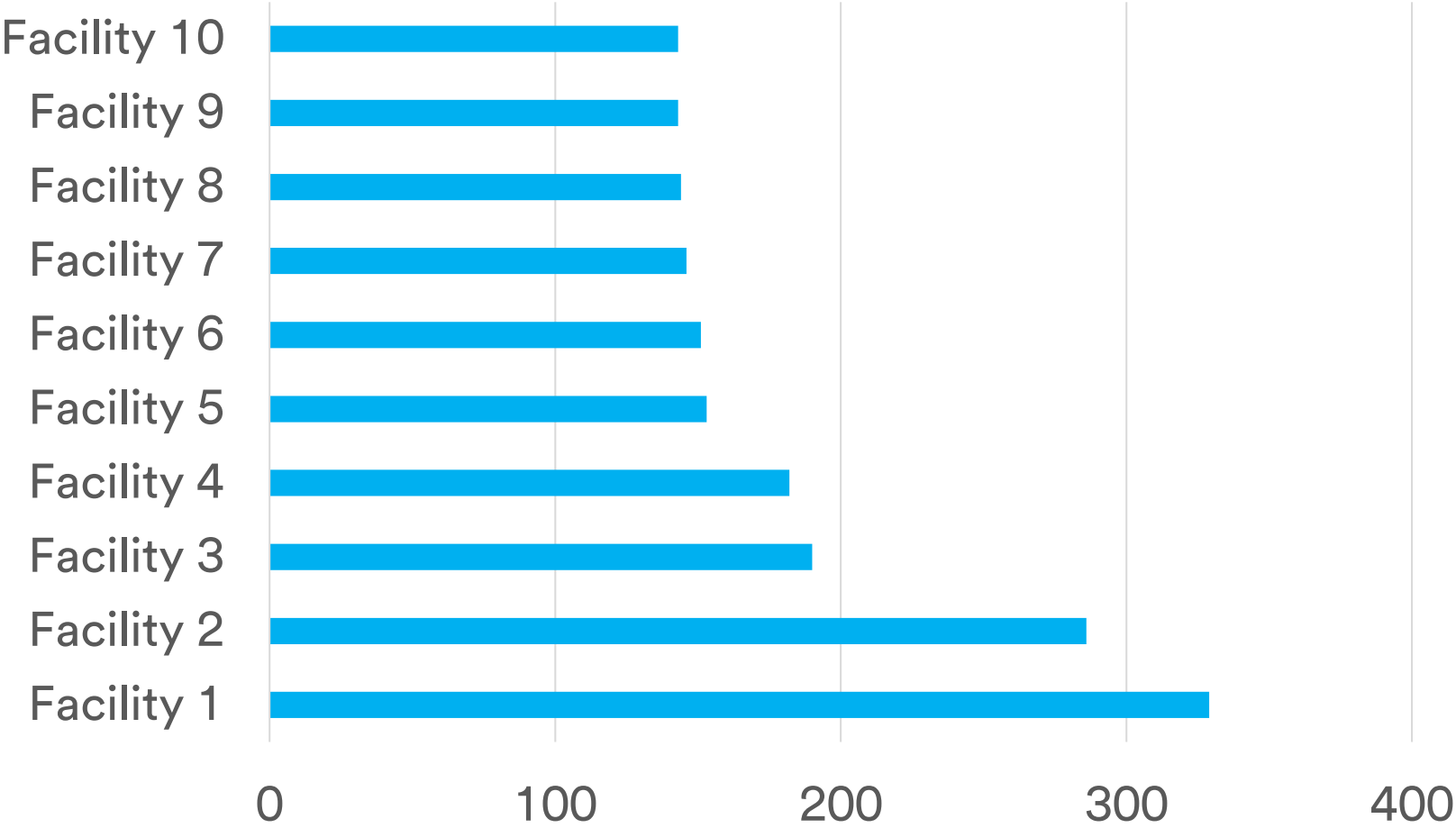
3,227,388

Complications:

54,189

Risk:

1.68%



# Data by service line and PSG

## Medicare FFS 19/20

PSG		Total procedures	Complication seen in ED	Complication inpatient admit	Risk IP and ED
Spine	17-Cervical Spine Procedures	5,016	50 ED	79 IP	2.7%
	16-Cervical Spine Fusion Proc.	31,017	262 ED	429 IP	2.23%
	20-Lumbar and Sacral Spine Proc.	131,619	869 ED	2,284 IP	2.40%
	19 –Lumbar and Sacral Spine Fusion	13,589	122 ED	277 IP	2.94%

# Top 10 service line ortho PSGs (Medicare FFS 19/20)

PSG	PSG_Description	Cases	ED counts	IP counts	OP counts	ED & IP counts	Compl Rate
13	Total Knee Arthroplasty Procedures	231,215	2,655	3,818	2,231	6,473	2.80%
26	Foot (Mid/Fore) Procedures	135,317	837	2,547	2,872	3,384	2.50%
20	Lumbar and Sacral Spine Procedures	131,619	869	2,284	929	3,153	2.40%
1	Shoulder and Elbow Arthroscopy Procedures	97,128	241	343	325	584	0.60%
3	Knee Arthroscopy Procedures	96,584	448	384	538	832	0.86%
27	Foot (Hind/Ankle) and Lower Leg Procedures	78,641	515	1,250	1,101	1,765	2.24%
11	Primary Hip Arthroplasty Procedures	64,118	693	1,247	535	1,940	3.03%
24	Open Shoulder Procedures	47,509	258	427	349	685	1.44%
16	Cervical Spine Fusion Procedures	31,017	262	429	137	691	2.23%
2	Hand and Wrist Arthroscopy Procedures	25,825	41	62	99	103	0.40%
22	Thoracic Spine Procedures	24,719	225	663	408	888	3.59%



# Complications of PSG 13 Total Knee Arthroplasty

## Medicare FFS 19/20

Total cases  
231,215

ED  
2,655

IP  
3,818

Risk  
2.8%

Infection, Inflammation and Clotting Complications of PV...

Procedure Complication Without Mention of Misadventure

Mechanical Complication of Device, Implant and Graft

Septic Arthritis and Other Musculoskeletal Infections

Aspiration Pneumonia

Moderate Infections

Other Complications of Medical/Surgical Care

MSK- Mechan Compl. Device/Implant/Graft

Other Pulmonary and Chest Complications

Musculoskeletal - Hemorrhage & Hematoma

Pneumonia and Other Lung Infections

Pulmonary Embolism

Hemorrhage & Hematoma

Venous Thrombosis

Septicemia and Severe Infections

Post-Proce Infect & Deep Wound Disrupt

MSK- Infect, Inflam Compl.. Devices/Implants/ Grafts

Urinary Tract Infection

Post-Hemorrhagic / Acute Anemia



200 400 600 800 1,000 1,200 1,400 1,600

# Prevention: Post Hemorrhagic Anemia/ Acute Anemia

## Best practice examples

### Pre-Op

- Low hgb., hct.
- Preexisting anemia
- Nutrition deficit (iron, vit B12, folic acid)
- Anticoagulants (INR)
- Herbs / medications
- Ex. Erythropoietin. St John's Wort

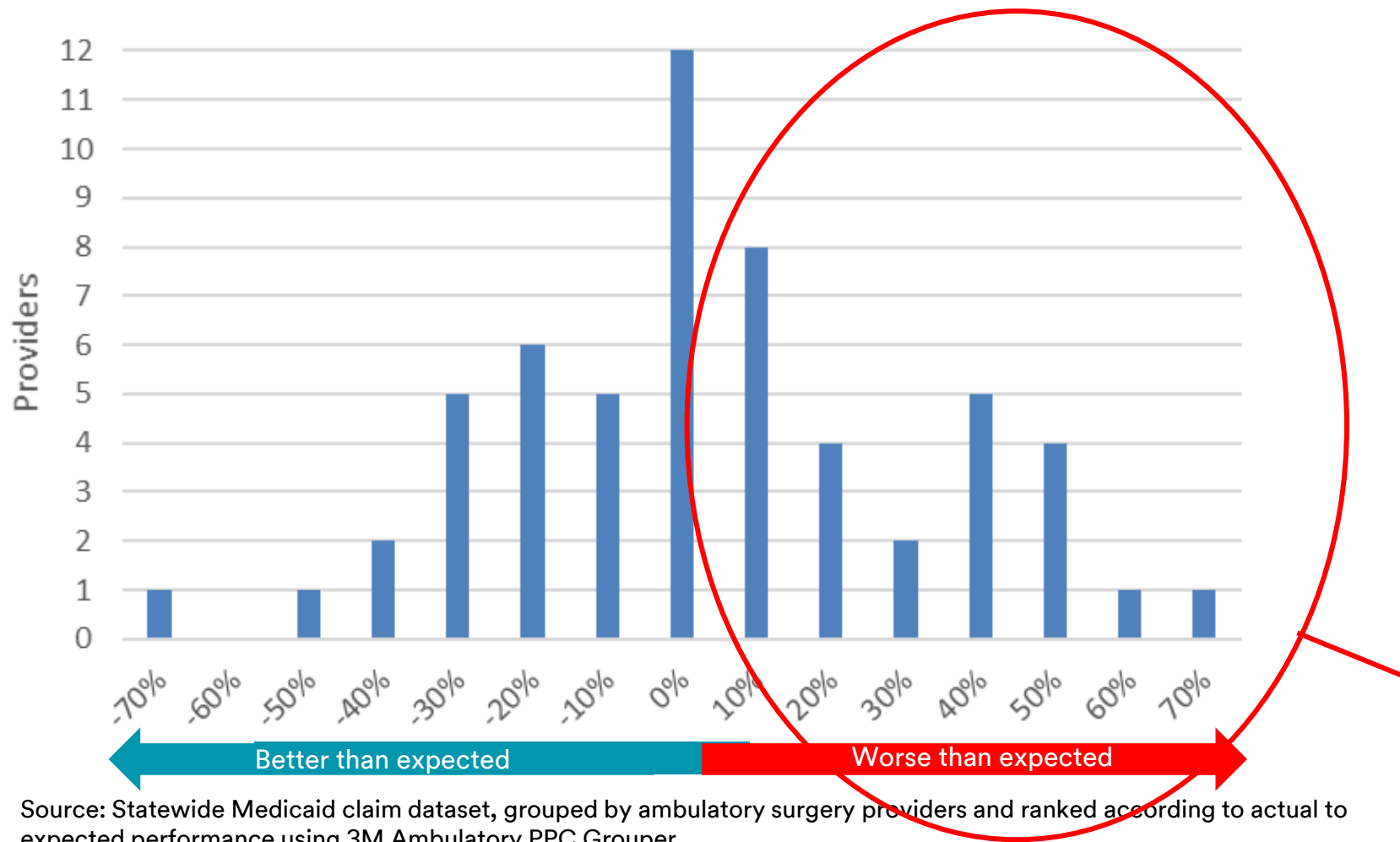
### Intra Op

- Incision /exposure
- Hemodilution
- Hypotension
- Blood loss
  - (tourniquet)
- Cauterization
- Cell saver
- Transfusion
- Tranexamic acid

### Post Op

- Follow up
- Dressing
  - Compression
  - Neg pressure
- Ice /Cold therapy
- Iron

# Driving network performance by site of service (state level)



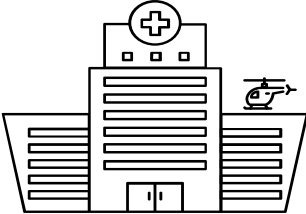
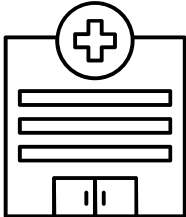
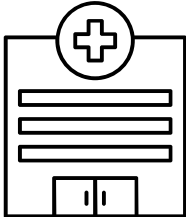
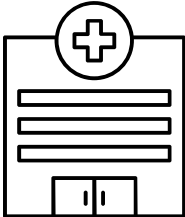
- The best performing facility/provider was 70% better than expected
- Worst performer was 70% worse than expected

Concentrate improvement here

# Performance across health systems

## 3M AM-PPCs (demo system data)

	At-risk cases	Expected rate	Actual rate	Actual/ expected
Hospital Network	33,042	913	920	1.01

	Main HOPD	Regional hospital 1	Regional hospital 2	ASC
				
AM-PPC at-risk cases	16,795	4,118	5,446	6,683
Expected rate	428	133	159	193
Actual rate	430	144	191	155
Actual/ expected	1.00	1.08	1.20	.80

\*Data is for illustrative purposes only.  
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# Network scorecard example

Facility	At-risk cases	ED*	Location of AM-PPC		Actual/ expected*
			Inpatient*	Ambulatory	
Provider/ facility 1	4,739	35	31	117	1.24
Provider/ facility 2	3,631	21	22	70	1.45
Provider/ facility 3	2,374	14	16	48	0.99
Provider/ facility 4	2,029	15	14	63	0.77
Provider/ facility 5	1,428	12	8	17	1.20
Provider/ facility 6	1,358	7	5	21	1.25
Provider/ facility 7	1,237	5	8	25	1.46
Facility/ provider network	16,796	109	104	361	1.24

\*Data is for illustrative purposes only.

\*Only inpatient & ED claims are included in benchmarks.

# State level data by service line conservative costs of complication

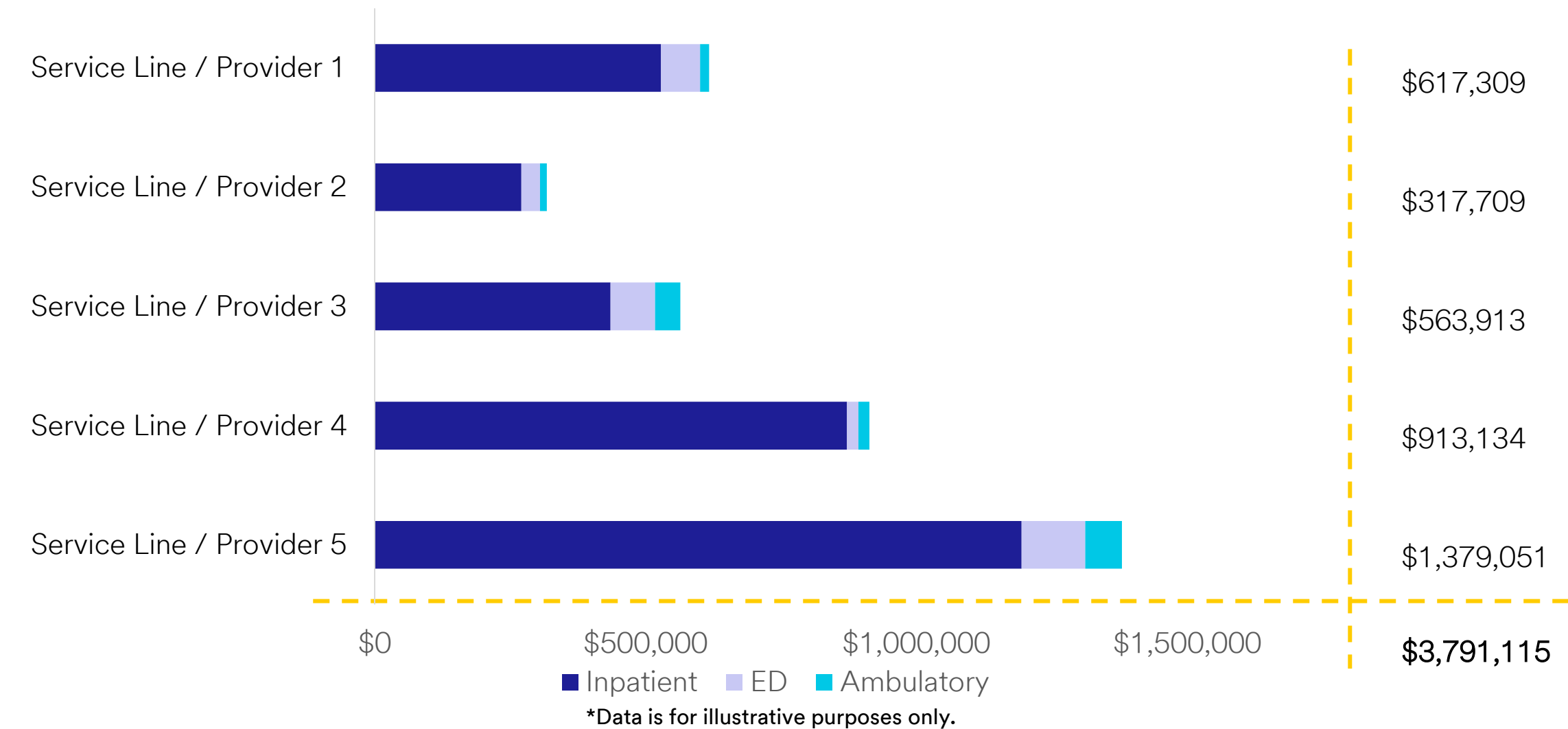
## Medicare FFS 19/20

Service Line	At Risk Cases	IP/ED Complications	Estimated Complication Cost
Urology	21,306	1,144	\$3,675,100
Gastroenterology	51,412	965	\$3,100,063
Interventional Radiology	10,508	722	\$2,319,425
Cardiology	15,769	439	\$1,410,288
General Surgery	7,896	300	\$963,750
Pulmonology	3,878	152	\$488,300
Orthopedic Surgery	5,746	138	\$443,325
Vascular Surgery	2,085	92	\$295,550
Pain Management	7,627	48	\$154,200
Spine Surgery	1,033	27	\$86,738
Facial, Ear, Nose, and Throat Surgery	1,566	15	\$48,188
Gynecology	608	0	\$0
Hand and Wrist Surgery	648	0	\$0
Ophthalmology Surgery	2,240	0	\$0
<b>Total</b>	<b>132,322</b>	<b>4,042</b>	<b>\$12,984,925</b>

- Cost estimates are based on our standard series reports under QOPM available at
- <https://www.3mhiscer.com/3m-research-and-commentary/>.



# Financial analysis of potential associated savings



# Summary

3M AM-PPCs use cases:

- Promoting patient safety in the outpatient setting
- Address the growing need for ambulatory procedure standards of care
- Foundation for value-based care
- Illuminate areas for performance improvement





**Check out the resources  
and complete the survey!**

**Thank you**