



Steward

Steward Health Care System

March 2018





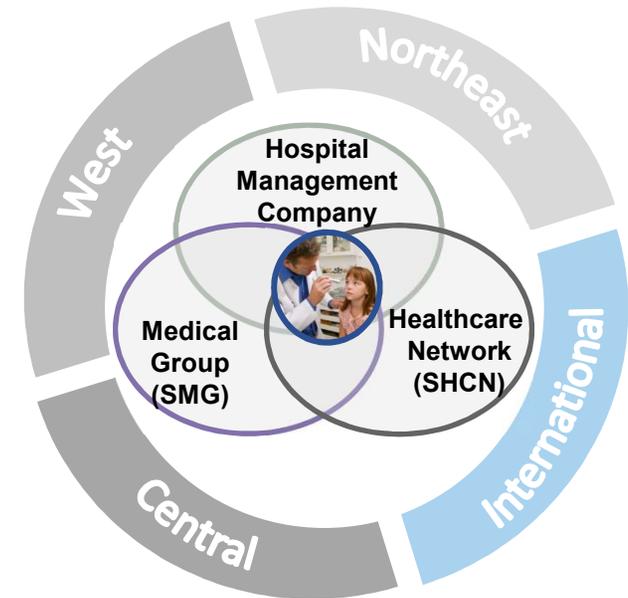
Steward Company Overview

Steward Health Care System – Leading, Fully Integrated Health Care Organization



Who We Are

- Steward is a **nationally recognized, fully integrated health care system**, offering a comprehensive spectrum of services across 10 states in the U.S. and 1 country in Europe
- Steward is the **largest private for-profit hospital operator in the United States** focusing on maximizing efficiency as a way to deliver the lowest cost / highest quality care for patients
- Operates **three scalable business units** – Steward Hospital Management Company, Steward Medical Group (“SMG”), Steward Health Care Network (“SHCN”) in North America as well as an international arm – Steward Health Care International (“SHCI”)



Our Growth Trajectory

- Since its inception, Steward has continuously grown. In Massachusetts it has:
 - Tripled its physician network and paneled lives; increased its managed lives by 900%
 - Significantly increased its access points along the spectrum of care (primary, acute, home, etc.)
 - Expanded its innovative, award-winning ACO model (\$50+ million of value to Steward)
- In 2017, Steward more than tripled its size in its national U.S. expansion:
 - Closed its acquisition of 8 hospitals from Community Health Systems in 3 states
 - Closed its merger with IASIS Healthcare of 18 hospitals across 6 states
- In December 2017, Steward signed an agreement with the government of Malta to operate 3 hospitals in the country of Malta

Key Stats (Projected 2018)	
Annual Revenue (post HC)	~\$7 billion
Employees	37,000
States (U.S.)	10
Hospitals	38
Total Beds	7,400
<i>Psych Beds</i>	1,050
Employed Providers	1,500
Practice Locations	~400
Network Providers	4,800
Paneled Lives	2,200,000
Total Patient Encounters	~6,000,000

Our Platform—

An Integrated Approach to Care Delivery



Steward Health Care System LLC

Steward Hospital Management Company (“SHMC”)

- Manages 36 newly renovated acute care hospital campuses in MA, PA, OH, FL, TX, UT, AZ, CO, AR, LA and Malta; as well as 1 long term acute care hospital, 1 rehab hospital, and one behavioral health hospital, focusing on driving value to patients through high quality / low cost points of care
- Ambulatory surgery centers, affiliated or owned urgent care providers; and preferred skilled nursing facilities (“SNFs”)

Steward Medical Group (“SMG”)

- Large employed multi-specialty group practice across entire Steward footprint
- ~1,500 employed providers across MA, PA, OH, FL, TX, UT, AZ, CO, AR, and LA
- ~400 practice sites
- ~6M encounters annually

Physician Affiliated Businesses

- Home Care and Hospice, eICU, Mobile Oncology (PET) Imaging, Tailored Risk Assurance Company (“TRACO”) with 5 types of coverage (e.g., professional, liability, worker’s comp, facility, etc.)

Steward Health Care Network (“SHCN”)

- Largest care management/ACO in New England, and growing national footprint
- Largest community-based contracting network of physicians in New England – currently expanding
- Highly integrated physician network and managed care contracting entity
 - >1,065,000 covered lives under value-based contracts (MA-only)
 - 2.2M total paneled lives
 - >4,800 contracted physicians including approximately 1,300 PCPs, 3,500+ specialty physicians and 500+ AVPs
- Medicaid ACO & MCO expansion in MA and FL
- Nationally recognized population health & analytics infrastructure to optimize performance

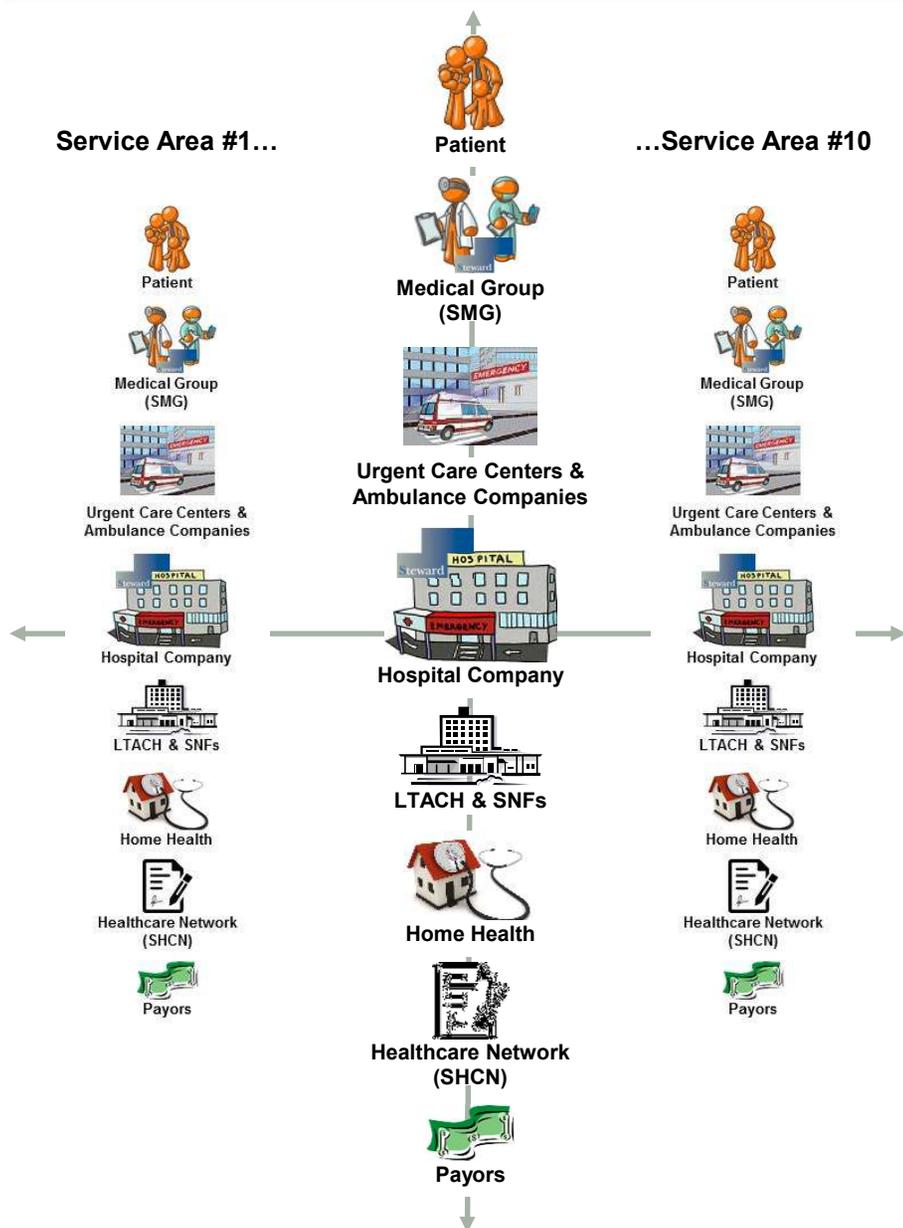
Health Choice

- Managed care organization and insurer offering 5 products across 2 states
- >600,000 Medicaid, Medicare and Commercial members
- Expanding into MA and FL; 2018, 2019
- Administer Medicaid ACO and MCO

Steward’s integrated model offers a scalable, proven, and innovative platform for healthcare delivery across the continuum, with best-in-class quality of care and underlying operating tactics designed to simultaneously improve profit and market share

Our Model – Vertically and Horizontally Integrated Patient Care

Steward



Steward's integrated model has been purposely constructed through acquisitions, partnerships, and affiliations to create a seamless experience for patients and providers and optimize the use of resources.

Operational Benefits

- **Vertical integration** reduces duplication and waste, capturing the financial benefit (global payment)
- **Horizontal integration** provides multiple entry points across a broader geography, increasing efficiency through scale and improved purchasing power

Clinical Benefits

- **Vertical integration** improves coordination of care delivery between settings, resulting in better patient experiences and outcomes, higher quality of care, and local care delivery
- **Horizontal integration** expands access points across a broader geography, resulting in improved convenience and affordability for patients and businesses in local communities, increased scale for development of clinical best practices, and regionalized tertiary and quaternary services to improve in-network access to highly coordinated specialty care

Steward's uniquely integrated model protects against market risks faced by discrete hospital, insurance and physician enterprises, while also creating scale and substantial financial and clinical benefits

History & Transformation

Steward Health Care System – Brief History



- Health care delivery is transforming rapidly from a “fee for service” horizontal model to a vertical system focused on “value for the patient”. This evolution places increased emphasis on quality, increased efficiency, and finding new ways of partnering with patients and providers.
- Steward was formed with a business model that embraced this transformation. **Steward acquired the bankrupt, non-profit Caritas Christi Health Care System in 2010 and quickly built a scalable, community-based integrated ACO delivery system.** It embraced a multi-pronged strategy consisting of acquisitions, reorganizations, cost-efficiency initiatives and a robust primary care and physician network development with a focus on financial and clinical integration.
- In its new model, Steward **spent the last five years creating a replicable, centrally coordinated, locally managed ACO model that integrates primary care and a spectrum of community-based services as the foundation of a sustainable care delivery model.**
- Shifting to value requires providers to become clinically and financially aligned as a “provider community.” It also requires a more holistic view of our roles in this “integration”, tearing down the barriers created by existing reimbursement mechanisms and focusing on a patient’s total care experience as well as the total medical expense of care rendered.
- **Now, in 2018, Steward stands to be a \$7 billion, asset-lite, integrated organization with a broad presence across 10 states.** With over 1,000,000 emergency department visits and over 500,000 adjusted discharges annually, this replicable ACO model successfully cares for approximately 1,065,000 lives under value-based contracts (MA-only), serves as the marquee provider network for eight health plans, and an insurer offering 5 products across 2 states.

Steward Timeline –

Transformative model has evolved ahead of industry

Steward

2011

2012

2013

2014

2015

2016

2017

2018+

Establish Core

- Formation of Steward after acquisition of select assets from Caritas Christi
- New management team
- Consolidated 5 separate medical groups into one company and centralized management

Strategically Grow in New England

- Formed SHCN
- Acquired 9 acute care hospitals
- Consolidated 5 separate medical groups into one company and centralized management
- Acquired 1 LTACH hospital with 2 campuses
- Acquired 4 homecare and hospice companies and merged into 1 company
- Linked SMG PCP compensation to retention and productivity
- Entered Pioneer Medicare ACO Program as part of first cohort of providers in nation
- Acquired Compass and Hawthorn medical groups to increase SMG providers by 219
- Added PrimaCARE in Fall River
- Incorporated multiple PCP groups (e.g., AIM, Bridgewater Primary Care)
- Acquired 6 ambulatory surgery centers
- Expanded network by ~1,000 physicians

Optimize and Transform

- Transformed facilities through addition of cutting edge clinical and operational technology, new patient care areas (invested >\$700M)
- Reorganized Revenue Cycle Ops
- Added quality metrics to SMG physician compensation model
- Created 3 separate, scalable business units
- Continued acquisitions of physician practices, imaging centers, surgery centers
- Folded urgent care affiliates into network
- Brought all hospitals and onto a single clinical EHR platform
- Consolidated SMG practice sites and introduced mid level providers
- Launched Preferred SNF network and population-based payments
- Launched proprietary CARES tool
- Launched proprietary length of stay (LOS) tool and initiative
- Launched proprietary proactive labor management (PLM) tool

Position for Growth

- Recapitalized Steward to prepare for acquisitions
- Restructured pension plan
- Sell Steward MSO services and proprietary IT platform
- Launched Next Gen ACO and piloted Medicaid ACO
- Optimized Supply Chain
- Expanded nationally across 9 new states

Continue to Grow

- Continue to invest in hospital, physician and managed care services in our 10 states
- Expand physician network
- Expand Medicaid ACO and MCO (Mar 2018) and introduce Health Choice as a plan to administer Medicaid ACO and MCO in MA (Jan 2019), and FL subsequently
- Assess new opportunities in domestic and international markets

Business Strategy

Centralized Business Services and Tools

Hospital Management Company –

Hospitals as COGS that drive quality



Steward created central structure, processes and proprietary tools to focus on delivering high quality care while controlling expenses:

In its quest for efficiencies, Steward has invested in the development of tools, that are easily scalable, to improve efficiency focusing on quality of care:

- **Co-Morbidity Assessment Rules Engine (CARE)** – Codes and cross functional set of rules that suggests to physician in real time potential diagnoses related to diagnostic results
 - Improving the timeliness, safety and quality of care
 - Assists other physicians throughout the continuum of care for the patient – transitions of CARE
 - Ensures that the Diagnostic Related Group (DRG) is appropriate, driving more accurate and efficient billing with a direct impact on revenue
- **Length of Stay (LOS)** – Provides a comprehensive hospital operating tool to predict and then proactively manage in real-time patient length of stay from the moment the patient is admitted through to their discharge
- **Predictive Labor Management (PLM)** – Provides a comprehensive hospital operating tool to predict and then proactively manage in real-time workforce labor
- **Supply Chain Management** – Controlling hard costs utilizing contracting, standardization, central controls and analytics

The Easy:

- GPOs – ensure “on-contract” purchasing
- Standardizing item master across regions / institutions

The Difficult:

- Standardized/optimized formulary – physicians and institutions disagree on set formulary
- Approval process / vendor policies
- Proactive monitoring of spend

The Hard:

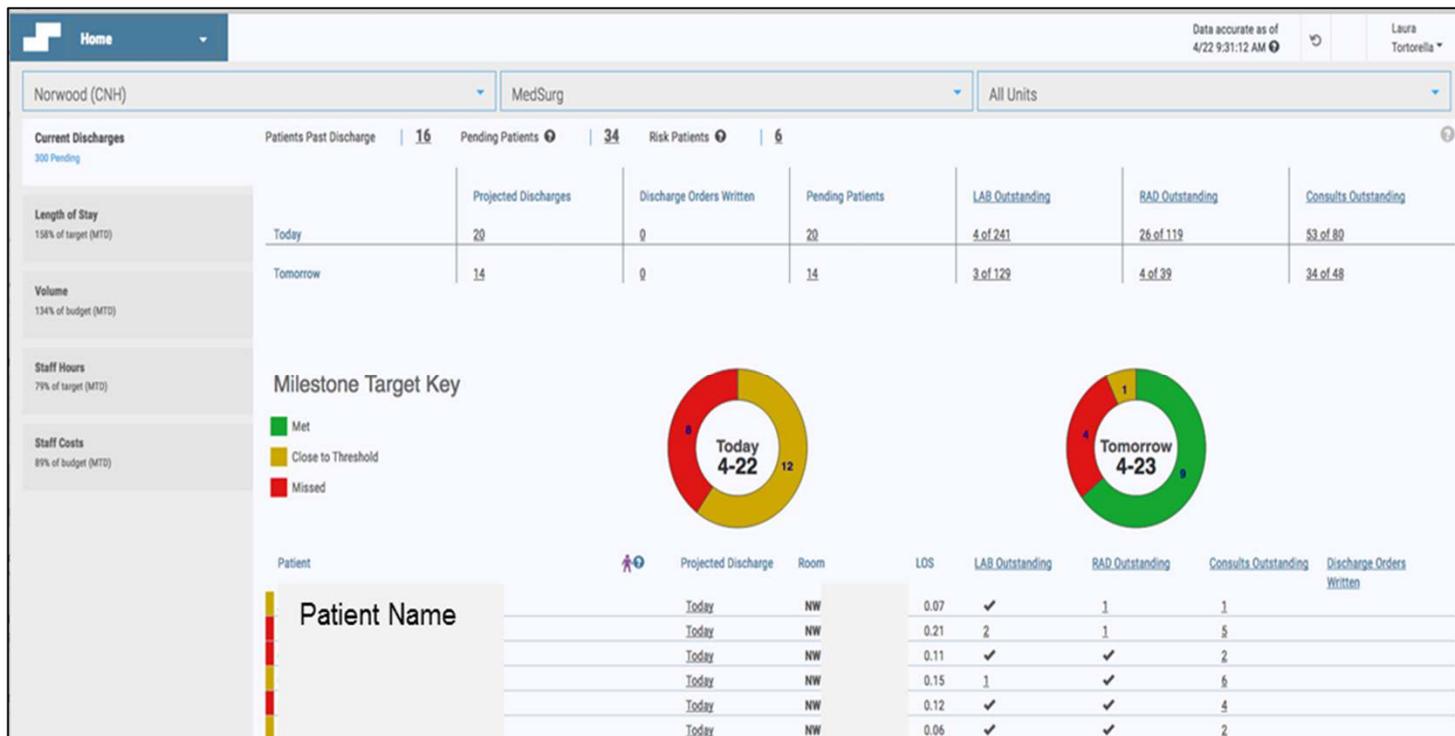
- Physician preference items (PPI)
- Inventory management

Hospital Management Company – Length of Stay (LOS)



How it works:

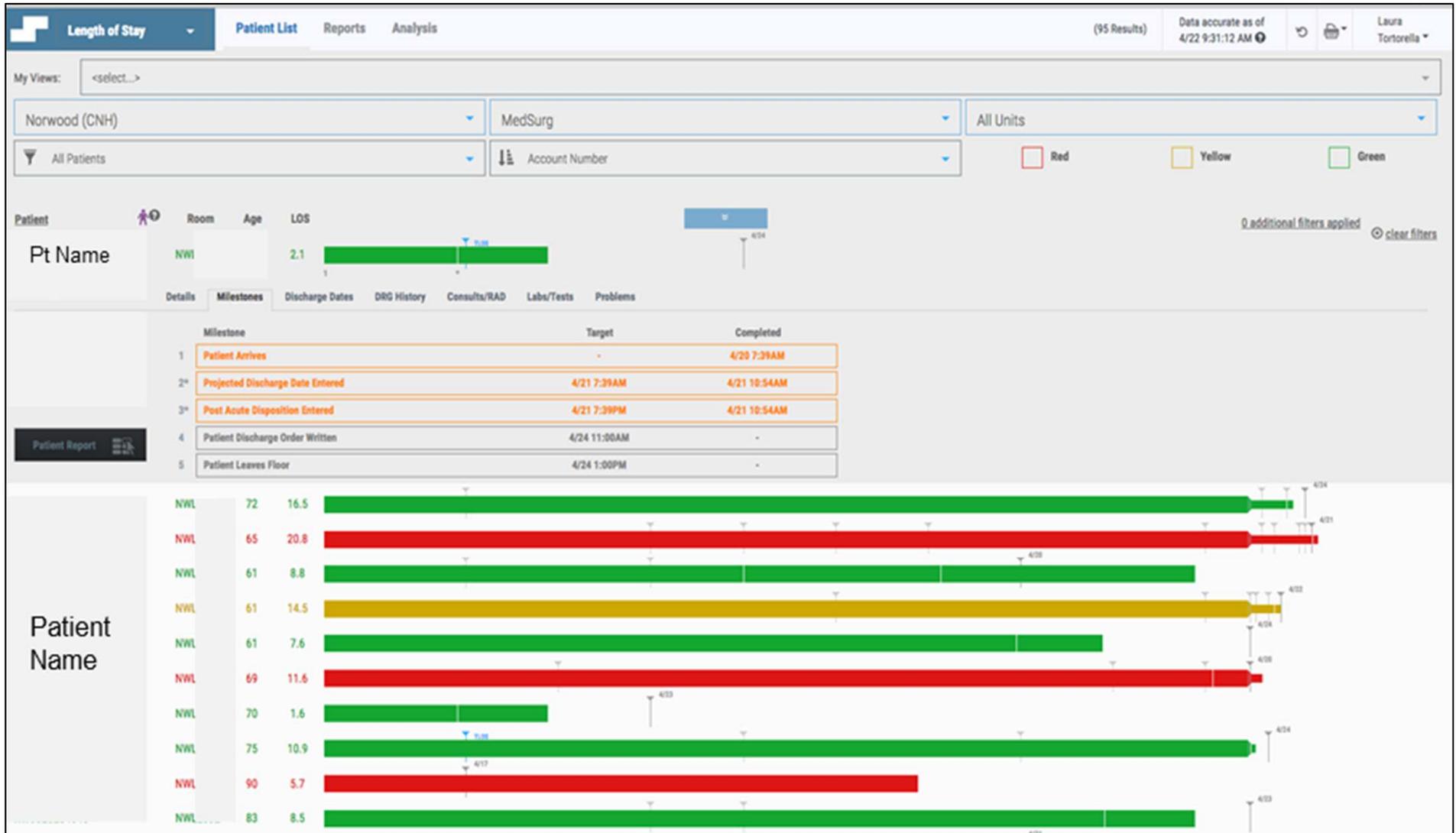
- Uses predictive analytics to forecast patient LOS
- Aggregates patient clinical and demographic information to make better clinical decisions faster
- Pushes clinical results out to the clinical decision makers via text page allowing for quicker follow up to patient needs
- Prioritizes scheduling of tests and consults
- Prompts providers when data is available
- Sets targets with reminders for each milestone



- LOS home page provides executive summary of patients discharging today or tomorrow
- Highlights outstanding patient clinical needs required for discharge

Hospital Management Company – Length of Stay (LOS)

LOS detail page outlines where a patient is in the care continuum and consolidates critical clinical information including expected discharge date and time, outstanding labs/consults, etc.

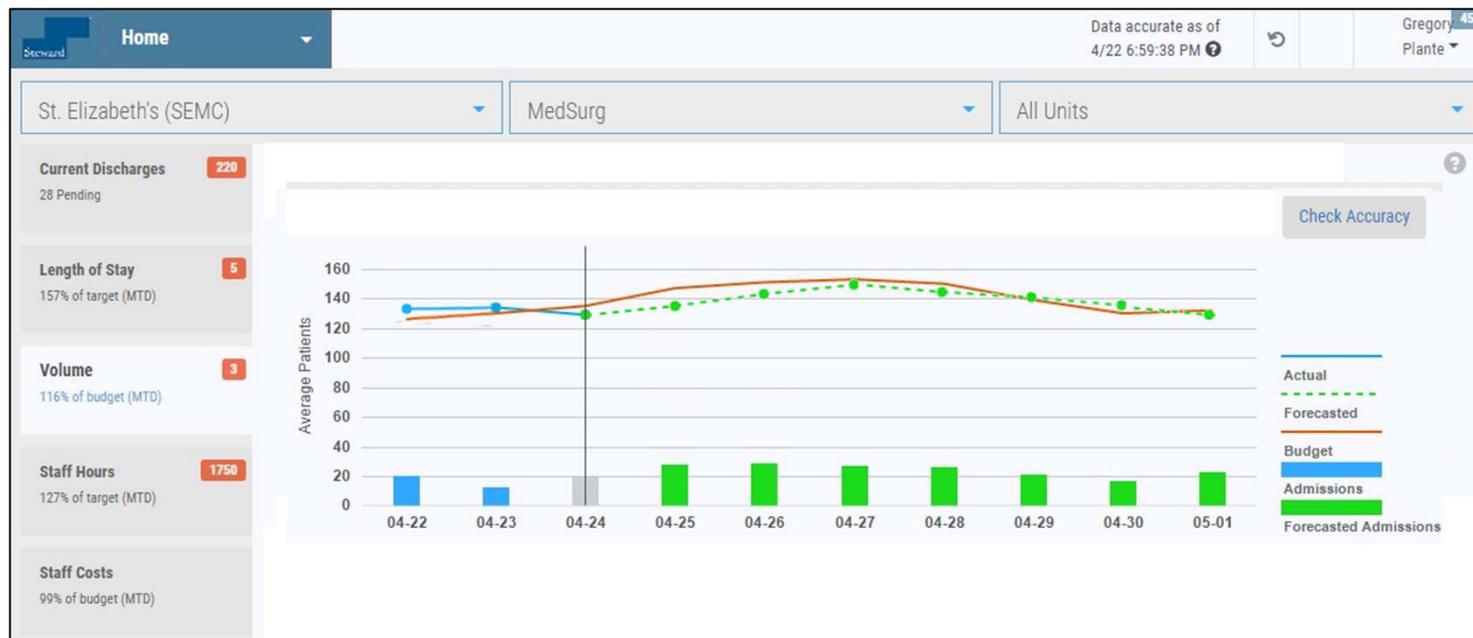


Hospital Management Company – Predictive Labor Management (PLM)



How it works:

- Uses predictive analytics to forecast inpatient census with 97% accuracy at 7 – 10 days
- Overlays staffing schedules over predicted census to allow hospital teams to make better staffing decisions faster
- Pushes staffing opportunities (proactively) out to the local and central decision makers allowing for quicker follow up to patient needs
- Uses predictive analytics to optimize staffing levels
- Streamlines data allowing for easier oversight and reductions in management staff



- Predictions are displayed to front end users in a simplistic interface
- Immediate needed actions are pushed out to users
- Volume and staffing is linked and system notifies appropriate user of over/under staffing situations and suggests staff to call off by highest cost

Hospital Management Company – Predictive Labor Management (PLM)



Labor (PLM)		Analysis	KPI Rollup	Accuracy Tracker	Updated 39 minut
All Hospitals		All Unit Types		All Job Types	
KPI Metric	Interval	Start	End		
Cost of Staff	Week	2017-12-17	2018-01-06		
HOSPITAL	TOTAL	2017	12/17	12/24	12/31
Carney (CAH)	\$715,713	Act	\$260,740	\$246,929	\$208,043
	\$672,099	Bud	\$247,211	\$231,444	\$193,445
	\$635,363	Adj	\$240,247	\$207,097	\$188,019
ICU	\$144,417	Act	\$45,144	\$64,038	\$44,738
	\$127,166	Bud	\$44,782	\$48,680	\$27,724
	\$635,363	Adj	\$240,247	\$207,097	\$188,019
MEDSURG	\$243,249	Act	\$89,871	\$81,210	\$72,968
	\$246,952	Bud	\$88,241	\$86,262	\$72,449
	\$635,363	Adj	\$240,247	\$207,097	\$188,019
PSYCH	\$328,046	Act	\$136,825	\$111,181	\$90,339
	\$297,981	Bud	\$114,207	\$109,302	\$83,272
	\$635,363	Adj	\$240,247	\$207,097	\$188,019
Good Samaritan (CGS)	\$1.96M	Act	\$718,593	\$711,426	\$527,871
	\$1.87M	Bud	\$670,236	\$656,258	\$540,343
	\$1.90M	Adj	\$701,217	\$604,310	\$595,636
Holy Family (HFH)	\$1.25M	Act	\$446,172	\$476,296	\$331,038
	\$1.59M	Bud	\$580,103	\$548,789	\$461,303
	\$1.62M	Adj	\$575,752	\$549,545	\$493,695
Morton Hospital (MH)	\$852,526	Act	\$306,002	\$302,354	\$244,170
	\$803,272	Bud	\$294,227	\$281,211	\$227,834
	\$803,571	Adj	\$291,769	\$245,889	\$265,914

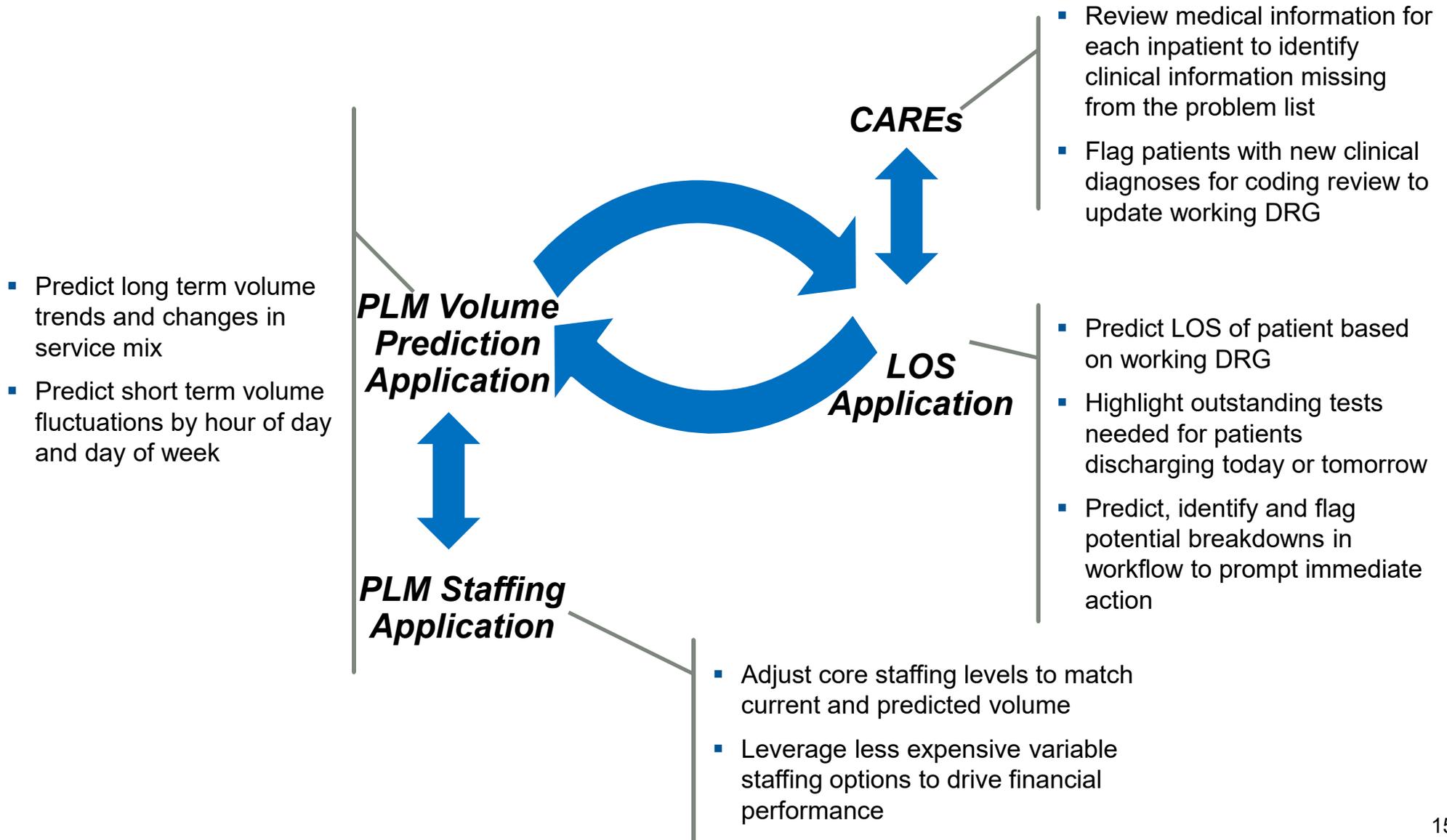
- Detailed labor KPIs, such as cost of staff, can be monitored at the hospital level and drilled down further to the unit and floor level for additional detail
- Color coding helps users to narrow in on areas that are under or over performing

Hospital Management Company –

Putting it Together: Integration of CARE, PLM and LOS



Objective: Accurately predict patient census to allow for most efficient management



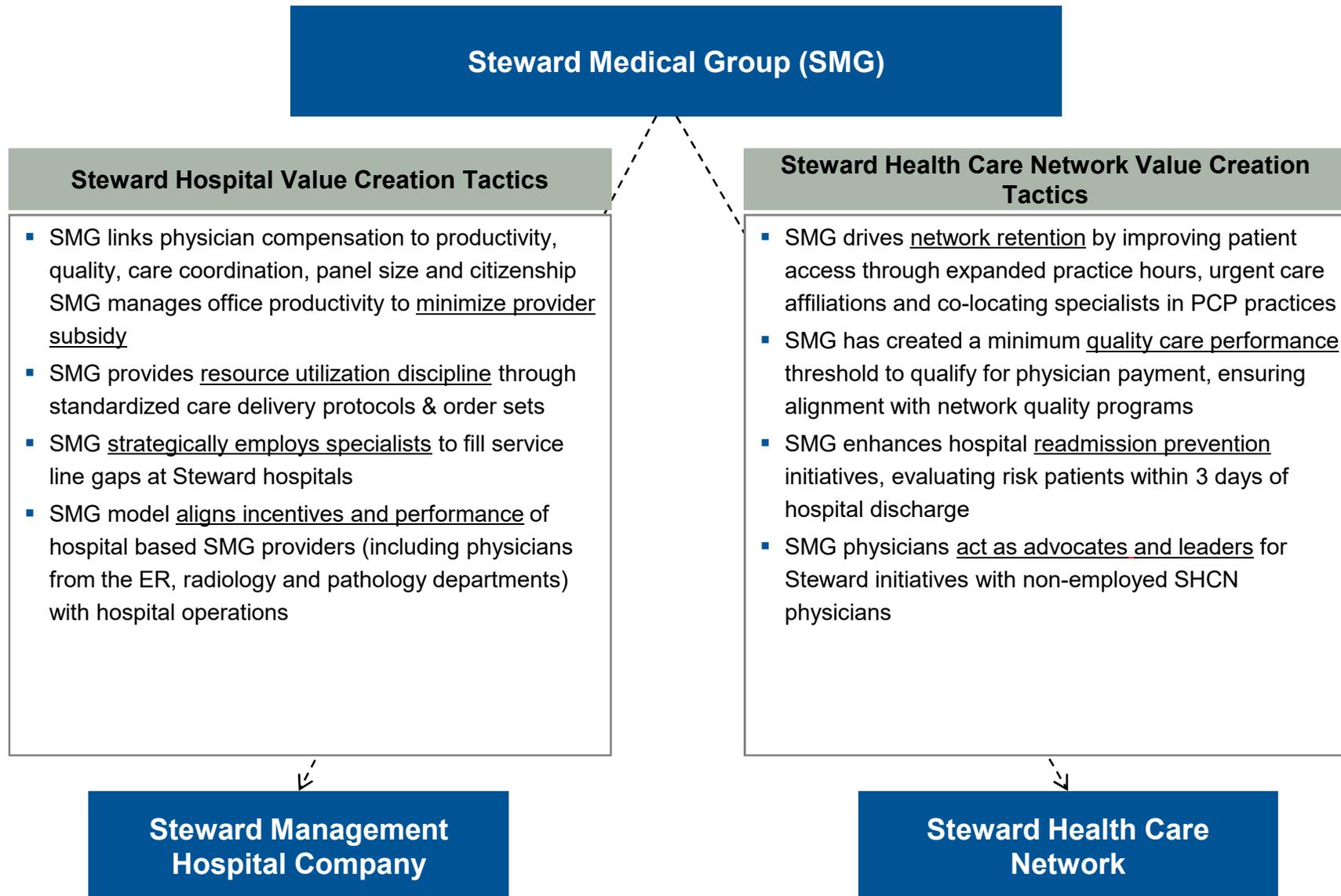
Steward Medical Group (SMG) –

Physicians managed in a central organization



- Centralized governance & management of all physician strategy & operations
 - Physician practices are primary business; management team builds expertise in practice management
- Clinical
 - Standardized templates, protocols, and processes to improve compliance with best practice and quality measure performance
- Network Development
 - Review age of all existing MDs to identify future gaps for proactive succession planning
 - Perform analytical need assessment of existing PCP sites and population demographics to quantify the demand for physicians across specialties needed
 - Target towns with little SHCN presence and high population density for recruitment
- Operations
 - Delegate administrative tasks (vitals, medications, etc.) to office staff to maximize efficiency of provider
 - Leverage technology to enhance clinical access (ZocDoc)
 - Embrace innovation to improve utilization (SmartScheduling)
 - Manage most costly component of practice expense through monitoring staffing levels per provider, flexing office staff to cover volume demands, and consolidating offices
 - Supply chain achieves value in outpatient purchasing through formularies and adherence
- Physician Accountability
 - Robust compensation models align salary with productivity and incorporate quality & retention metrics
 - Physician service line leaders that manage system-wide quality and performance

Steward Medical Group (SMG) – SMG's value contribution



Steward Medical Group (SMG) –

Examples of SMG's scalable tools

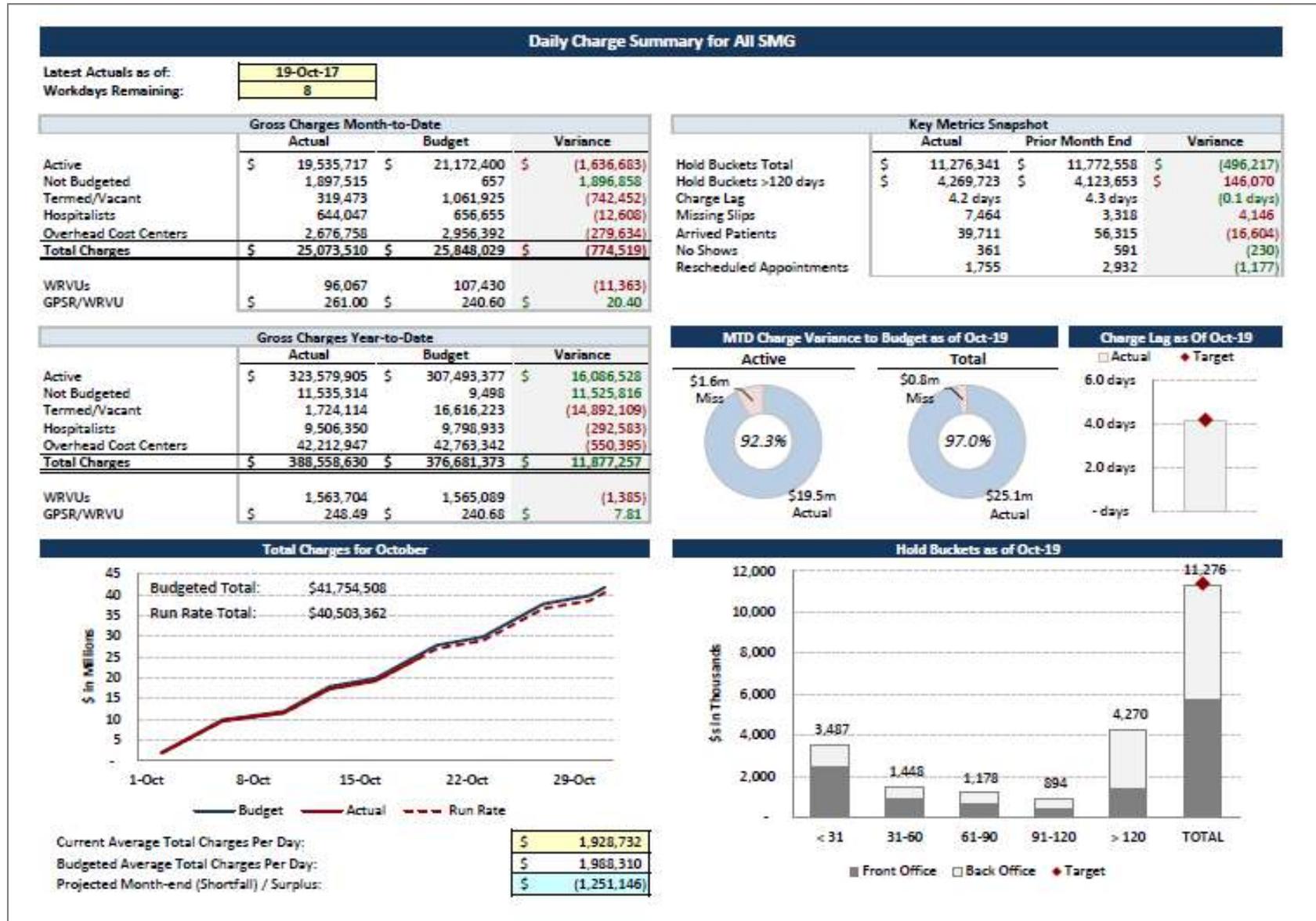


- Other customized, non-proprietary tools are scalable, enabling SMG to support a growing network:
 - Athena Collector including SmartScheduling (practice management)
 - Steward DoctorFinder & all web search optimization (including Yext)
 - ZocDoc & Kyruus DirectBook
 - Phreesia (tablet/mobile check-in)
 - American Well (telehealth, direct to consumer)
 - Cactus (payor enrollment platform)
 - MPV (revenue cycle)
 - BACTES (records retrieval)
 - Athena Coordinator (referral management)
 - Athena Communicator (patient campaigns/pop health)
 - Axiom (budgeting)

Steward Medical Group (SMG) –

Examples of SMG's scalable tools

Daily Charge Report: Volume, charges, missing slips, A/R data and other metrics by doctor produced daily and distributed to SMG and hospital leadership



Steward Medical Group (SMG) –

Examples of SMG's scalable tools



Physician's KPI (key performance indicators): Produced monthly and pushed out to doctors

Select Date...		YTD	Bud/LYTD	YTD Var	14-month Trend	MTD	Bud/LMTD	MTD Var
Transaction Post								
	Gross Charges	298.3M	290M	2.85%+		15.06M	19.74M	-23.73%*
Market	Cash Collected	95.34M	88.45M	7.79%+		6.2M	7.06M	-12.28%*
CAH								
CORPORATE	Adj. wRVU	1.2M	1.21M	-0.72%*		58.99k	82.07k	-28.12%*
GSMC								
HFH	Missing Slips	18.88k						
MH								
Practice	Charge Lag	7.79	15.51	-49.75%*		5.24	6.56	-20.09%*
Provider	Encounters	914.7k	918.3k	-0.40%*		40.82k	51k	-19.96%*
Provider Names	Visits	497.5k	482k	3.22%+		22.13k	27.59k	-19.79%*
	Gross Charges per Adj. wRVU	249.3	240.6	3.60%+		255.3	240.6	6.12%*
Payor Group	Adj. wRVU per Encounter	1.46	1.39	4.86%+		0.64	0.57	12.28%*
Cost Center	Clean Claim Rate	65%	68%	-5.06%*		64%	63%	2.86%*

Data Through: 8/14/2017

Date (MTD)

Steward Health Care Network (SHCN)

SHCN is:

A clinically integrated, community based ACO and insurer

With the Vision:

To provide high quality, cost efficient care that is accessible, affordable, and sustainable

For:

Each and every member of the communities we serve (across the entire payer spectrum)

Mission

Achieve the quadruple aim:

- Better care of individuals
- Better health for populations
- Lower cost
- Drive value to physicians outside of the traditional fee for service construct

How we create value for providers & patients

- Patient + MD relationship centered
- Integrated delivery system with hospitals, employed providers, and private practice providers as equal partners
- 5 Key Attributes:
 - Physician leadership and governance
 - Quality, Outcomes, and Patient Experience
 - Clinical and Financial Integration (CI and APMs)
 - Payer Agnostic
 - ACO infrastructure to support high value care

Steward Health Care Network (SHCN)

Steward Value to Providers



PRACTICE LEVEL

ORGANIZATION LEVEL

ACO LEVEL

Practice Level: Employed and Affiliated

Revenue Enhancement

- Enhanced FFS Rates through risk contracting
- Additional quality and surplus payments maximizes value
- Participate in Next Gen ACO/ MSSP to earn 5% MACRA Bonus
- Participate in BPCI to earn 150% Medicare FFS

Expense control

- Full EHR subsidization through ACO Waiver
- Lower malpractice premiums through Traco
- Enrollment / Credentialing / Referral management reducing office based staff
- Reduced health insurance premiums through narrow network plan
- Recruitment Assistance and income guarantees through ACO waivers
- Access to Steward GPO

Organization Level:

- Physician led organization and governance structure
- Data Aggregation, Warehousing / Analytics
- Programs
 - Compliance and coding support
 - Risk management
 - Utilization, Disease, Care management
 - Clinical and quality performance measurement and improvement
- Access to Steward's suite of best in class and proprietary Population Health Management tools and technology

Accountable Care Level:

- Scale at local, regional and national level to interact with evolving payor (Medicare, Medicaid, Commercial) markets
 - Drive and influence health care reform rather than reacting to it: make it work for providers
- Better financial and clinical outcomes
- Leverage investments Steward has already made

Steward Health Care Network (SHCN)

Steward Value to Patients

Steward

The patient is at the center of everything we do and we believe strongly in showing commitment to our patients and communities by delivering the right and affordable care in the right setting at the right time

Quality

- Portion of provider compensation is based on measurable quality and patient experience metrics.
- Comprehensive wellness & prevention services to keep people healthy.
- World class healthcare when people do get sick.
- Integrated I.T. platforms track and manage patients medications, allergies, conditions, medical history. This also goes with the patient from care setting to care setting.

Accessibility

- Ease of access and broad spectrum of care in communities where patients work and live.
- Integrated care delivery from home health through acute hospitals.

Affordability

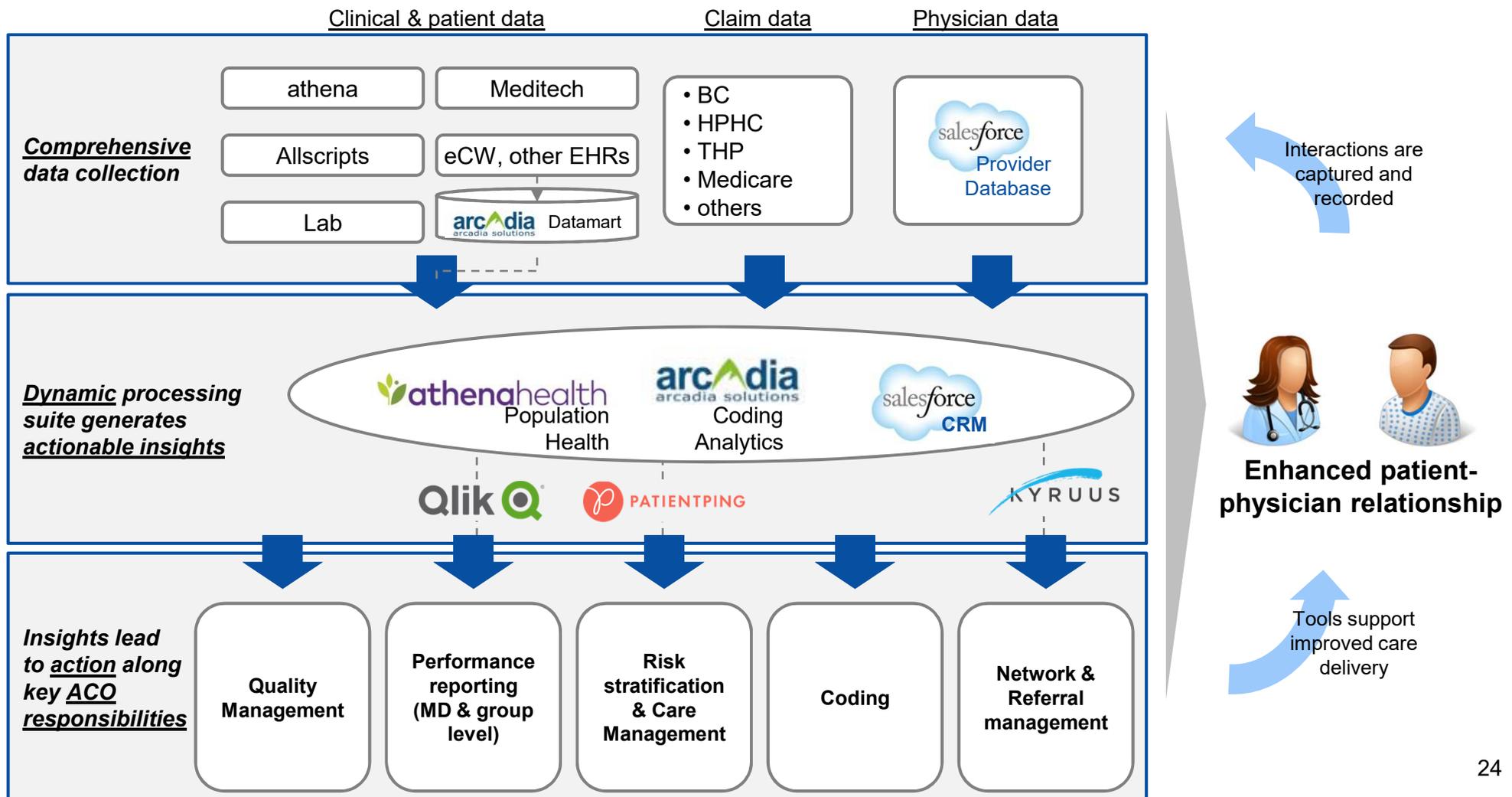
- Care and costs are tracked and managed across the spectrum of care reducing redundancy and keeping costs low for the patients.
- Comprehensive wellness & prevention services including home health, chronic disease management, colonoscopy screenings, mammography screenings, etc., to keep patients out of the hospital where care is most costly.

Steward Health Care Network (SHCN)

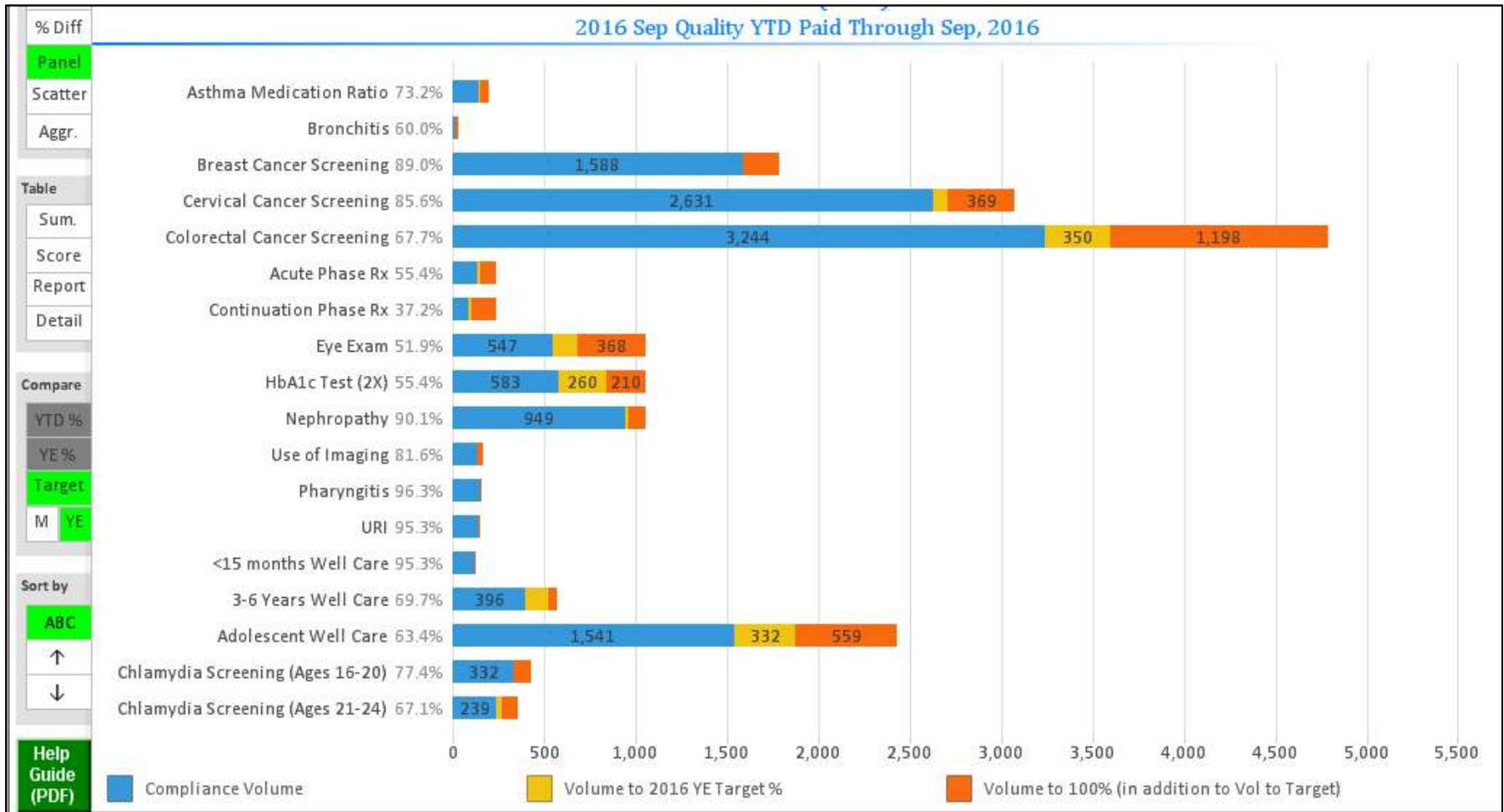
Technology Suite



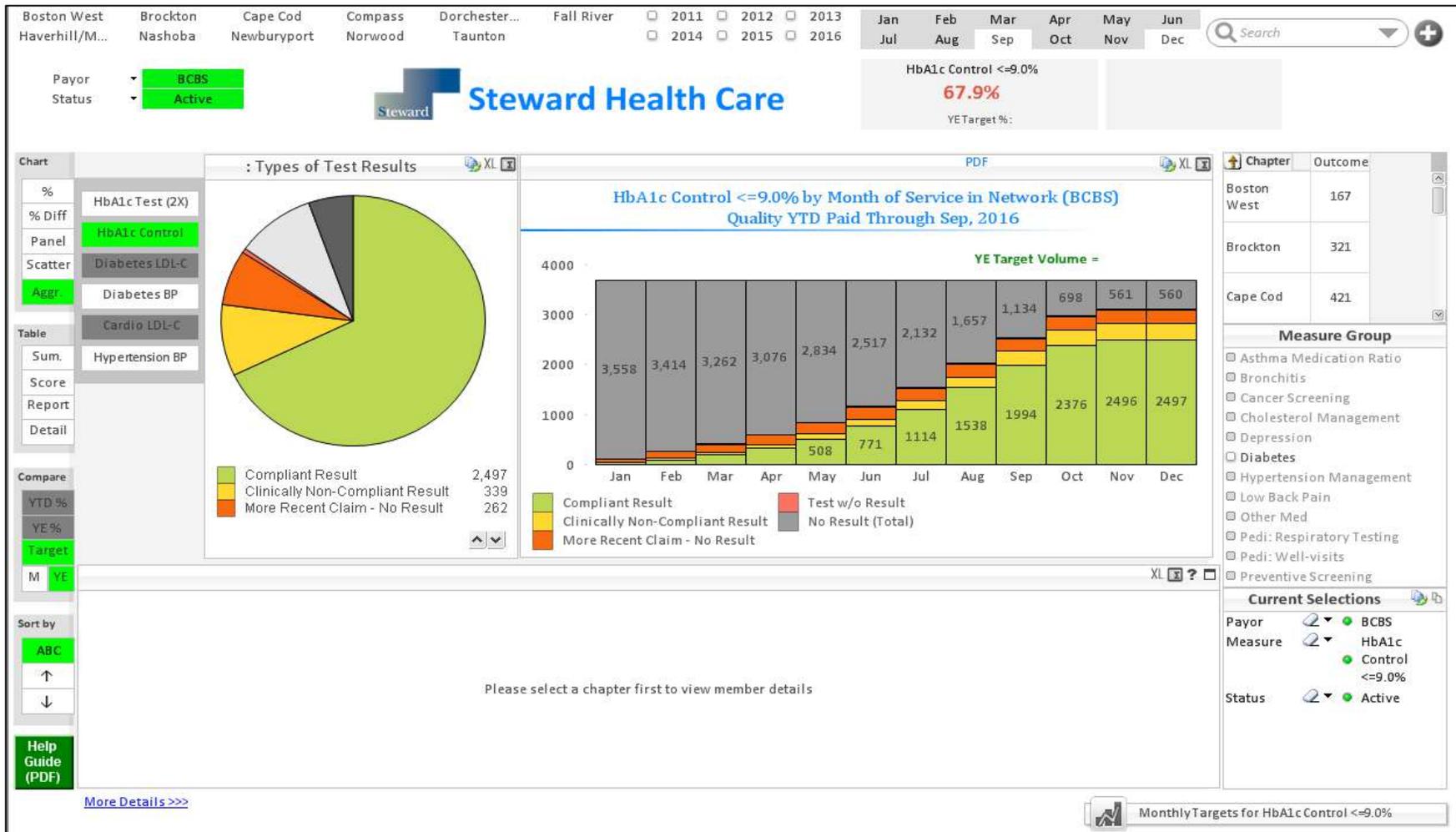
- Business intelligence allows us to analyze quality, patterns of care, and referral patterns at a very granular level, enabling process re-design, provider interventions, incentives, and new business development.
- Data-driven strategies are informed by a Steward-built *custom* data mining and reporting tool, which provides the ability to drill down in real-time on areas of interest at all levels. As our experience with value-based contracts continues to increase, the universe of available data will expand, providing additional sources of information to broaden our view into the patterns of care among our network providers.



Steward Health Care Network (SHCN) Analytics – Quality Dashboard



Steward Health Care Network (SHCN) Analytics – Network Level Quality Dashboard



YTD compliance on diabetes measure across entire network. Can drill all the way down to provider and actual patients.

Steward Health Care Network (SHCN) Analytics – Provider Level Quality Dashboard



Boston West | Brockton | Cape Cod | Central Mass | Compass | Dorchester/... | 2014 | 2015 | 2016 | 2017
 Fall River | Haverhill/Me... | Nashoba | Newburyport | North Shore | Norwood

Payor: **BCBS** | Status: Active

Steward Health Care

HbA1c Control <=9.0%: **87.0%** | 2017 YE Target %: 87.00%

Patient Experience Scores: Aggregate NA, Adult NA, Pedi NA

Chart: Oct: Types of Test Results

Compliant Result: 20
 Clinically Non-Compliant Result: 2
 Test w/o Result: 1

HbA1c Control <=9.0% by Month of Service in **Provider Name (BCBS)**
2017 Oct Quality YTD Paid Through Oct, 2017

YE Target Volume = 21

Month	Compliant	Clinically Non-Compliant	Test w/o Result	No Result (Total)
Jan	0	0	0	23
Feb	0	0	0	23
Mar	0	0	0	23
Apr	1	0	0	22
May	2	0	0	21
Jun	3	0	0	20
Jul	3	0	0	20
Aug	5	0	0	17
Sep	9	0	0	12
Oct	13	0	0	8
Nov	16	0	0	5
Dec	20	0	0	0

PCP: 23

Outcome: 23

Measure Group:

- Asthma Medication Ratio
- Bronchitis
- Cancer Screening
- Cholesterol Management
- Depression
- Diabetes
- Hypertension Management
- Low Back Pain
- Other Med
- Pedi: Respiratory Testing
- Pedi: Well-visits
- Preventive Screening

Current Selections:

- Year: 2017
- Payor: BCBS
- PCP: Provider Name
- PCP Chapter: Boston We
- SMG?: Yes
- Measure: HbA1c Control

HbA1c Control <=9.0% - Yu-Wong, Alberto: BCBS 2017 Oct Quality YTD Paid Through Oct, 2017

Measure	PCP	Compliant ?	Test Label	Member Name	Member DOB	Date of Service	Test Result	Test Result 2	Process Date of Service	Year			
HbA1c Control <=9.0%	Provider Name	No	Test w/o Result	Patient Name & DOB		2017-08-01			2017-08-01	2017			
			Clinically Non-Compliant Result			2017-12-19	9.3		2017-09-14	2017			
						2017-09-15	11.6		2017-09-15	2017			
						2017-10-17	5.6		2017-10-17	2017			
						2017-11-16	6.2		2017-07-21	2017			
						2017-11-27	7.5		2017-06-23	2017			
						2017-06-19	6.1		2017-06-19	2017			
						2017-12-04	8.9		2017-04-06	2017			
						Yes	Compliant Result						

YTD compliance on diabetes measure for an individual PCP

Steward Health Care Network (SHCN) Analytics – PCP Scorecard Cover Page Example

Steward Health Care Network
2015 Q2 Performance Report
 Report prepared for: Dr. Sample

Service Category	Commercial ³				TMP				Pioneer			All Payor	
	PCP Performance (Rolling 6 Month)	Prior 6 Month Change	Local Chapter Target (2015)	Variance from Target	PCP Performance (Rolling 6 Month)	Prior 6 Month Change	Local Chapter Target (2015)	Variance from Target	PCP Performance (Rolling 6 Month)	Prior 6 Month Change	Local Chapter Target (2015)	Variance from Target	Percentile in Chapter
Adult Inpatient Admits ⁵	67%	27%	55%	12%	100%	50%	53%	47%					60th
Adult Inpatient Med									25%	-5%	75%	-50%	0th
Adult Inpatient Surg									70%	14%	57%	13%	70th
Outpatient Procedures	77%	23%	62%	15%	100%	50%	75%	25%					90th
CT/MRI	64%	8%	63%	1%	100%	50%	77%	23%					50th
ED ⁶	54%	-15%	70%	-16%	100%	0%	76%	24%					30th
Specialist Visits (Focus Specialties)	66%	0%	73%	-7%	85%	-7%	86%	-1%					30th

Stewardship (Good Standing)	
Coding / Risk Adjustment Training ⁷	TBD
Participation in Referral Management Program ⁸	Compliant
Satisfactory POD Meeting Attendance: Attended/Held ⁹	2/3
Contracted with Meaningful Use Certified EHR ¹⁰	Compliant

⁷Coding / Risk Adjustment Training will be applicable in Fall and YE;
⁸PCP used the Local Chapter's referral management program for out of network referrals in CY 2015;
⁹PCP is required to attend 2/3rd of all required pod meetings in CY 2015;
¹⁰PCP is contracted with a meaningful use-certified EHR.

Leading Indicator	Commercial ²		Senior ⁴	Network Target (2015)
	PCP Performance (Rolling 12-Month)	PCP Performance (Rolling 12-Month)	PCP Performance (Rolling 12-Month)	
% of wellness visits completed (Commercial)	53%	N/A	N/A	75%
% of wellness visits completed (Senior)	N/A	N/A	26%	60%
% of diabetic members with 2+ visits/year with PCP or Endocrinologist	88%	88%	73%	75%
% of type 2 diabetics with A1c > 9 initiated on insulin	100%	100%	100%	75%

¹Care Retention is September 2014 through February 2015, paid through April 2015; Quality LI data is Rolling 12-month ending February 2015;
²Commercial data includes BCBS, HPHIC, and Tufts; ED and adult inpatient admits exclude arrival by ambulance; ⁴Senior data includes TMP and Pioneer.

Summer 2015 Distribution	
Care Retention Average Variance from Target (AVT) ⁹	3.0%
2014 Weighted AQC Process Score (Pediatric Only)	N/A
2014 Quality PCP Rank In Network ¹⁰ (Process Only)	208 Of 592
Non-Emergent ED Percentile	70th
Stewardship	✓

⁹A score of 0 or above indicates positive performance against target.
¹⁰Based on Process Measures only, claims data is from January 2014-December 2014, through April 2015 (best reviewed)

LEGEND	For PCP Performance, green shading indicates on or above target performance.	For PCP Performance, red shading indicates below target performance.
		For Prior Period Change, green shading indicates an increase in performance rate from prior period.

Scorecard and other reports can be produced at the provider level

Steward Health Care Network (SHCN) Analytics – PCP Specialist visits Care Retention Dashboard

Steward

STEWARD HEALTH CARE NETWORK

Performance Summary | Trend Ana

From 1/1/2016 To 11/30/2016

Data View: PCP View | Metrics: Retention | Sort Options: Vol. ↓, OON ↓, % ↓, ABC

Rank Options: Top by Volume = 5

Reporting Category: PCP Perspective; 201601-201611

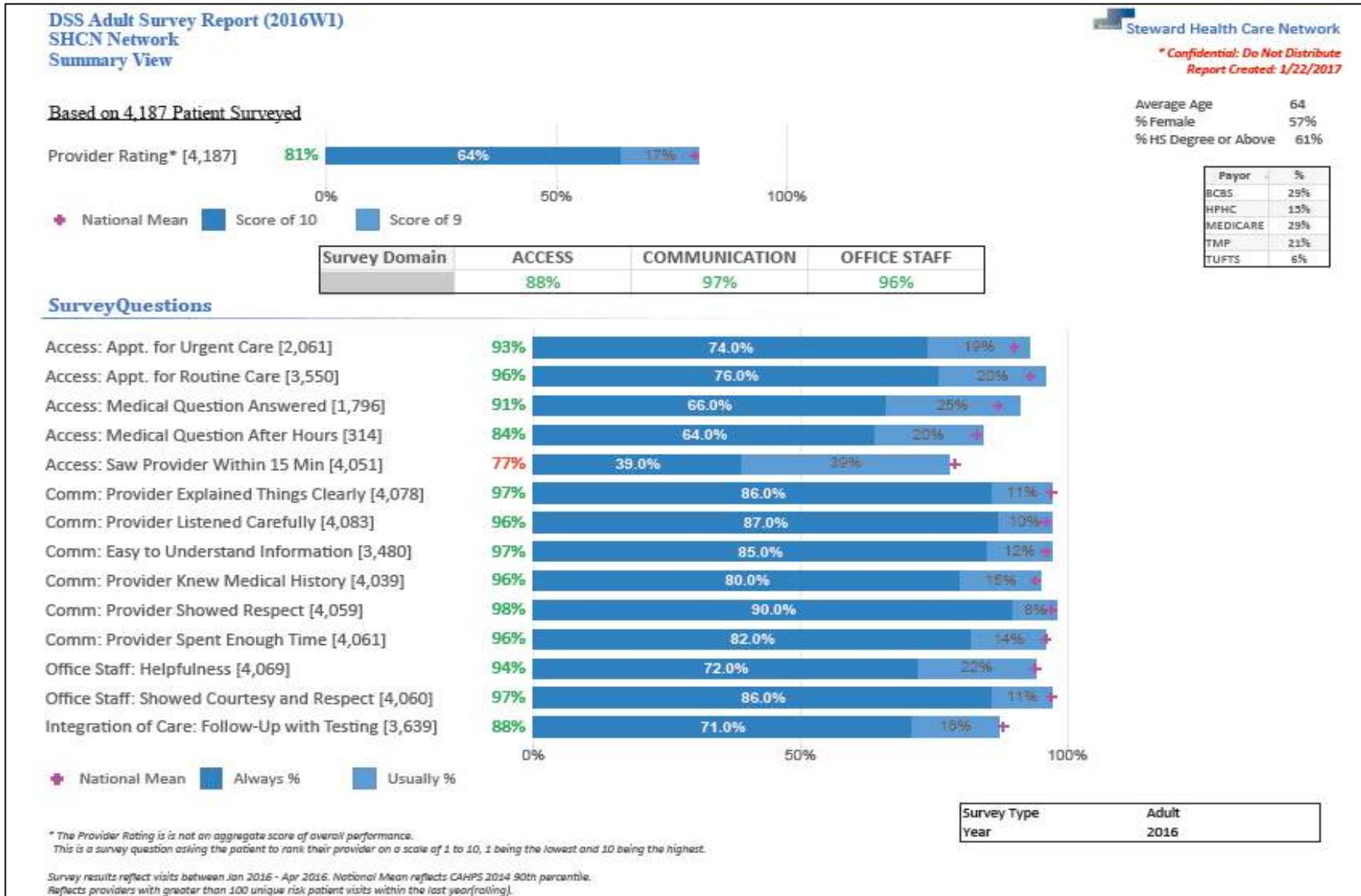
Reporting Category	SPECIALIST VISITS			
Chapter Base	77%			
Chapter Target	80%			
PCP	OON	Steward	Volume	% Retained Events
Grand Total	1,067	3,923	4,990	79%
Provider Names	0	3	3	100%
	0	1	1	100%
	0	9	9	100%
	0	6	6	100%
	0	1	1	100%
	0	5	5	100%
	0	9	9	100%
	1	24	25	96%
	11	140	151	93%
	12	122	134	91%
	6	59	65	91%
	27	233	260	90%
	18	151	169	89%
	28	204	232	88%
	7	47	54	87%
2	13	15	87%	
3	18	21	86%	
13	76	89	85%	
5	29	34	85%	

Steward Specialist Rank				
Top 5 Steward Specialist	Visits	OP Proc Steward	OP Proc OON	OP Proc % Re
	788	126	0	100%
Provider Names	194	0	0	-
	172	0	0	-
	170	120	0	100%
	133	6	0	100%
	119	0	0	-

OON Specialist Rank				
Top 5 OON Specialist	Visits	OP Proc Steward	OP Proc OON	OP Proc % Re
	277	45	0	100%
Provider Names	84	26	0	100%
	69	0	0	-
	63	0	0	-
	39	19	0	100%
	22	0	0	-

Procedure Rank				
Top 5 Procedure	Visits	OON	Steward	% Retained Events
	4,975	1,058	3,917	79%
OFFICE/OUTPATIENT VISIT, EST	3,517	802	2,715	77%
OFFICE/OUTPATIENT VISIT, NEW	1,240	200	1,040	84%
OFFICE CONSULTATION	187	35	152	81%
SUBSEQUENT HOSPITAL CARE	21	14	7	33%
INITIAL HOSPITAL CARE	10	7	3	30%

Steward Health Care Network (SHCN) Analytics – Patient Experience Dashboard



Patient Experience Dashboard can be produced at the provider and patient level

Questions?
