# Diving Deeper into Financial and Utilization Impacts:

An ACO Cohort Study of COVID-19 Episodes



# **Speakers**



Amy H. Kotch, MHA
Principal Business Consultant

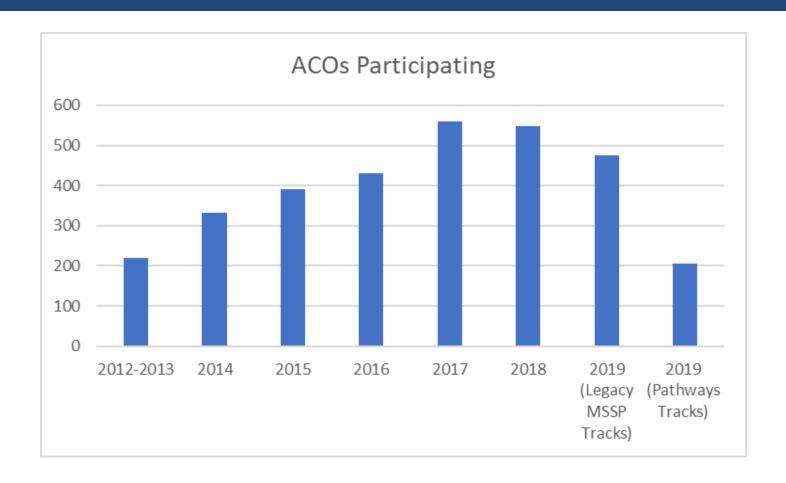


Maria Nikol, MJ Sr. Business Consultant

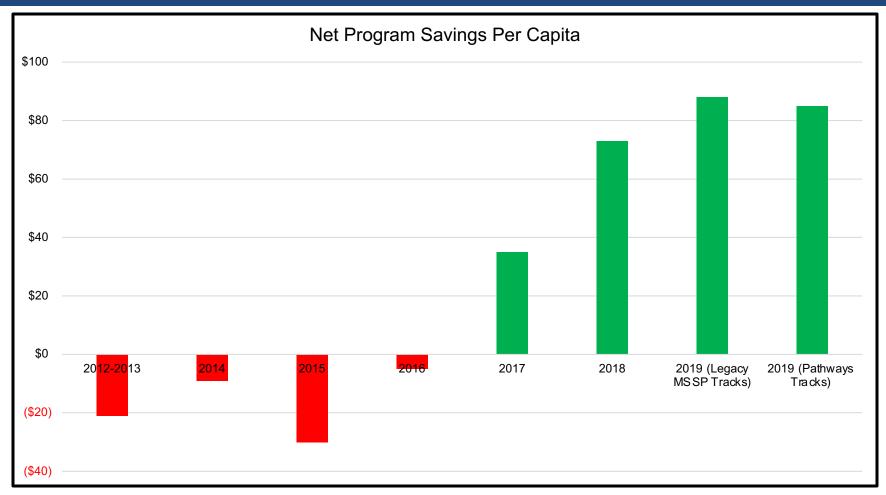
# Agenda

- Pre-COVID 2019 Status
- COVID-19 2020 Impacts
- CMS Decisions and Responses
- 2021 Expectations









# **The Cohort Study**

2019 n=89,494 2019 All MSSP: 10.9B



















The average ACO in the MSSP program generated \$3.9 Million in shared savings, however, Salient clients generated an average of \$6.4 Million in shared savings

	Visit ER/1000	Visit IP/1000	HHA/1000	SNF/1000	Observation /1000	Hospice/1000	PCP/1000	PMPY	Benchmark
Salient Cohort	835	379	5300	79	90	760	13,864	\$10,291	\$12,470
All MSSP	720	326		63			9,767	\$10,148	





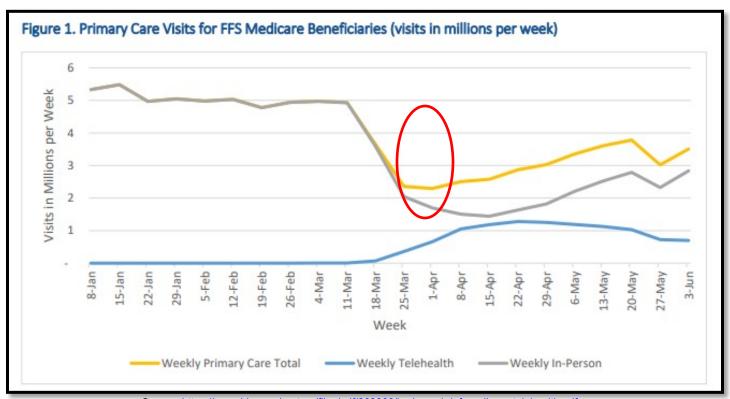
HOSPITAL REVIEW

116+ hospitals postponing elective surgeries broken down by state



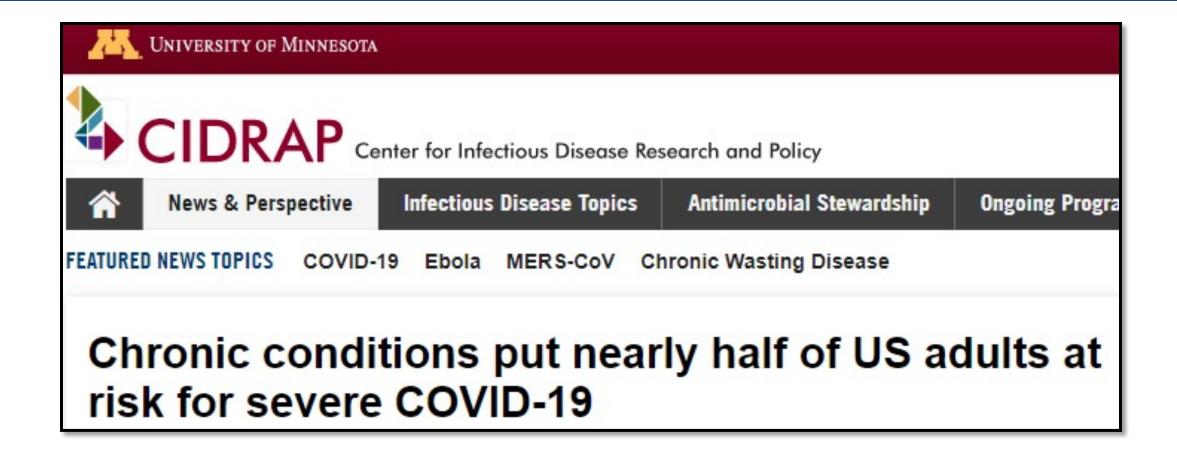


April: 43.5% of Medicare primary care visits were provided via telehealth



Source: https://aspe.hhs.gov/system/files/pdf/263866/hp-issue-brief-medicare-telehealth.pdf;

Medicare claims data up to June 3<sup>rd</sup>, available as of June 16



#### The CDC indicates that patients with certain medical conditions are at an increased risk for severe illness

At Increased Risk	Potentially At Increased Risk			
Cancer	Asthma			
Chronic Kidney Disease	Cerebrovascular disease			
COPD	Cystic fibrosis			
Down Syndrome	Hypertension			
Heart Conditions (such as heart failure, coronary artery disease, or cardiomyopathies	Immunocompromised state			
Immunocompromised state	Neurologic conditions, such as dementia			
Obesity	Liver disease			
Severe Obesity	Overweight			
Pregnancy	Pulmonary fibrosis			
Sickle Cell Disease	Thalassemia			
Smoking	Type 1 diabetes			
Type 2 Diabetes				



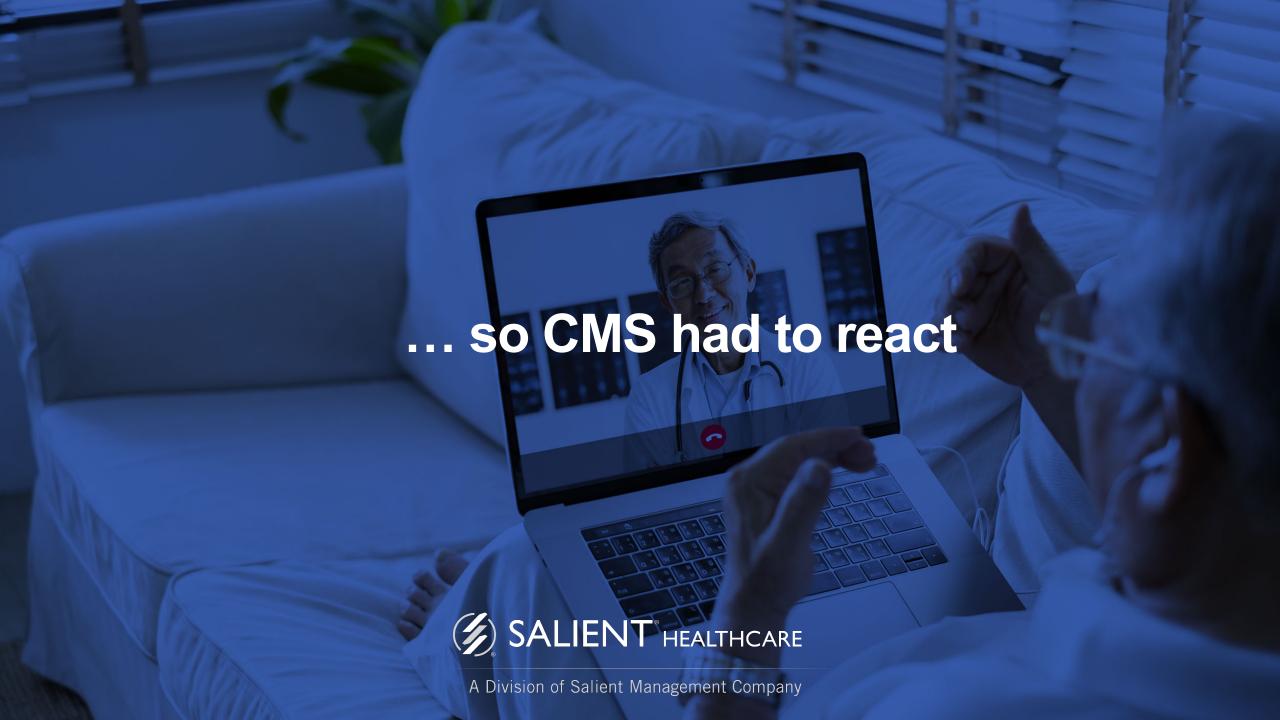


Identifying and Reaching Out to High-Risk Patients

Telehealth and Remote Monitoring

**Care Transitions** 

**Focus on Nursing Homes** 



# CMS Response

Telehealth
Benefit
Expansion,
Phone
Consults &
Licensure

New CPT code set: 87635-infections agent detection

Quality reporting deadline changes

# Covid-19 and how At-Risk Organizations Will be Affected

Extreme and Uncontrollable Circumstances

Benchmark Methodology Applied to Optional 4<sup>th</sup> Year for ACOs that elect the 1-year Extension



## **CMS** Response

CMS will be excluding cost and utilization for COVID-19 episodes.

These episodes are specifically defined by flagged timeframes patients had COVID-19 inpatient services.

**Medicare Shared Savings Program** 

# SHARED SAVINGS AND LOSSES AND ASSIGNMENT METHODOLOGY

Specifications of Policies to Address the Public Health Emergency for COVID-19

December 2020



# ... so Salient enhanced our solution to accommodate CMS regulations



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#### **Data Enhancement for COVID-19**



# **The Cohort Study**

2019 n=89,494 2020 n=102,251











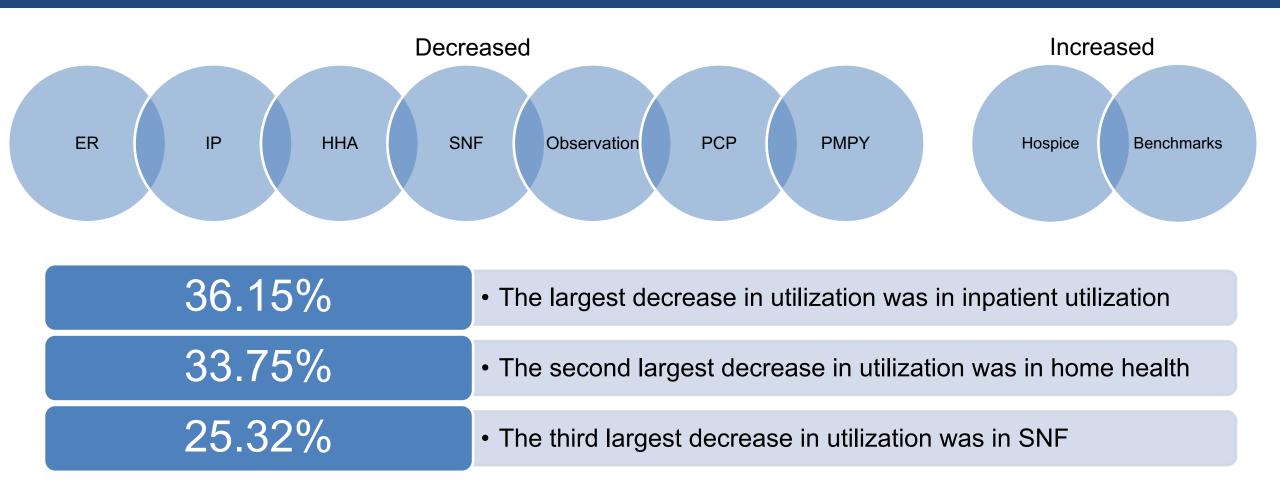








# **COVID 2020 Impacts: Spend and Utilization Comparison**



### COVID 2020 Impacts: Patients with COVID episode

~ 1% of patients were reported to have a COVID episode

Risk scores were higher

Costs were ~3x higher

~ 3% of ER utilization was due to COVID episodes

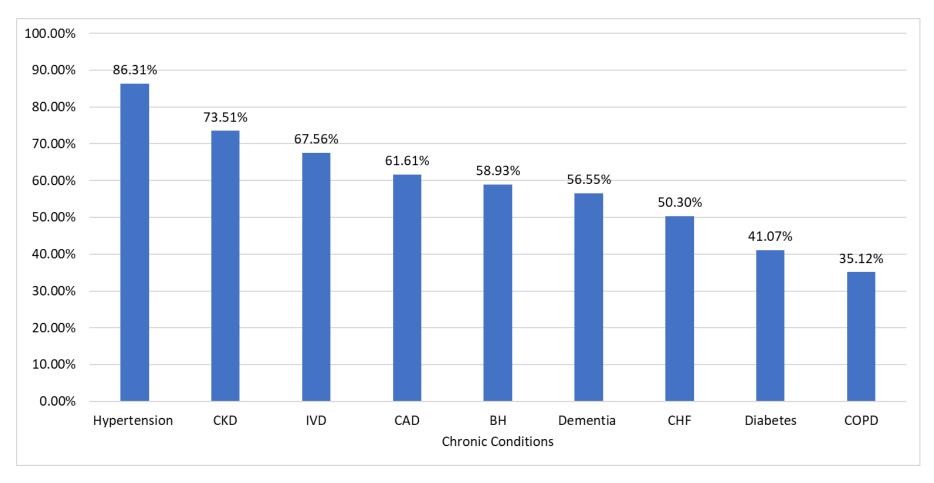
~ 6% of IP utilization was due to COVID episodes

IP length of stay was ~2x higher

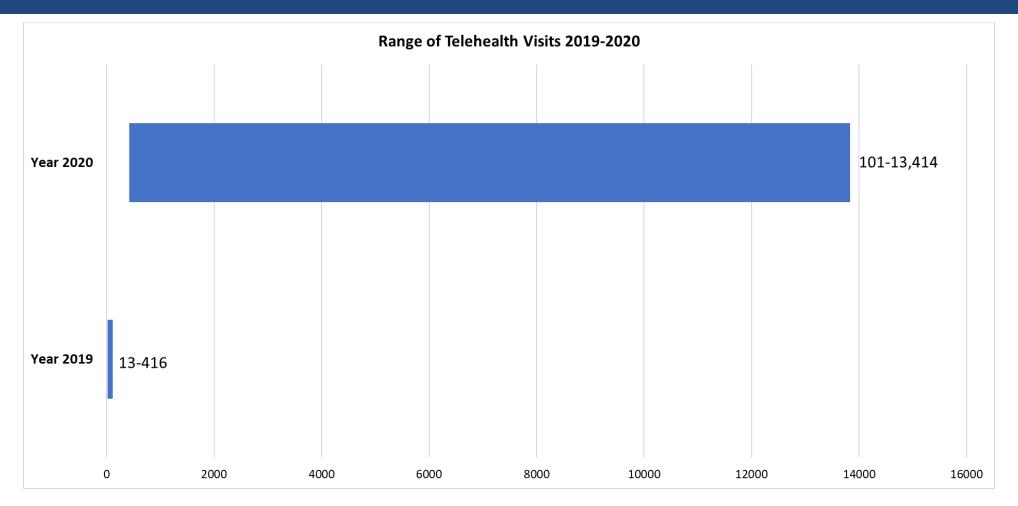
Of the patients that died, ~ 5% had a COVID episode



# COVID 2020 Impacts: Patients Deaths with COVID Episodes



### **Telehealth**





... what can we expect moving forward?



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# 2021 Expectations and Beyond

High Likelihood for Shared Savings

Maximum cap

**Shared Savings Distributions** 

Benchmarking for 2022 and Beyond

**Exacerbations** 



E-mail the secret word to <a href="mackman@salient.com">rmackman@salient.com</a> to enter to win an Amazon Gift Card.



# Thank you

# Questions?

Amy Holm Kotch, MHA | Principal Business Consultant

Mobile: 914.275.6531

Email: akotch@salient.com

Maria Nikol, MJ | Senior Business Consultant

Mobile: 410.812.7156

E-mail: mnikol@salient.com

