

Creating Transparency & Collaboration Between Payers & Providers

Value-based contract relationships between payers and providers continue to accelerate due to providers seeking a more stable, guaranteed revenue stream as a result of reduced utilization during COVID-19.¹ CMS is also driving the shift to value-based payments with a goal of 100% of Medicare providers in two-sided risk models by 2025.

However, while the transition toward outcomes-based payment models is growing, the technology to support those arrangements has lagged behind. Manual calculations, fragmented workflows, black-box processes and siloed data often leave providers and payers alike in the dark regarding how their value-based care is tied to financial risk and reward. Despite earnest initiatives to facilitate, mistrust and friction between payers and providers persists. We can help.

A Single Source of Truth

Apervita's Value Optimization Solutions provide transparency into key contract terms and insights into savings opportunities and analytics, empowering payers and providers to successfully collaborate in value-based contracts. Co-developed using Blue Cross Blue Shield of Massachusetts' industry-leading value-based payment expertise and Apervita's automated computation technology, our solution creates a platform-driven infrastructure for contracts, supporting value-based contract models across all lines of business (i.e. Commercial, Medicare, Medicaid, QHP/ACA).

Our cloud-based SaaS solution is accessible by both payers and providers, giving all stakeholders direct access to a summary of the key value-based contract terms, performance against those terms, and identification of opportunities to act upon to improve contract performance and care delivery. This transparent single source of truth of ongoing performance not only improves communications, but it encourages adoption and retention in value-based contract models.

Apervita makes the Learning Health System a reality through our Quality Measurement, Value Optimization and Clinical Intelligence Solutions, which are powered by the Apervita Vital™ Platform.



Value Optimization Solutions

- Contract Design
- Performance Insights
- Opportunity Analytics
- Settlement
- On-Demand Reporting

¹ <https://healthpayerintelligence.com/news/payers-continue-to-expand-value-based-contracting-despite-covid-19>

Our Solutions Drive Success

Built on the Apervita Vital™ Platform, our Value Optimization Solutions offer a variety of components to help on your journey to value.

Contract design

- Design value-based contract models optimal for the provider network
- Leverage configurable terms to model the impact of iterative negotiations
- Finalize and view provider's contract targets and other key contract methods
- Access and manage the physician roster

Performance insights

- Monitor ongoing cost and utilization performance against contract terms
- Create open lines of communication between payers and providers by encouraging proactive collaboration of on-going cost and utilization performance
- Identify potential improvement opportunities during the performance period that may impact the contract performance results
- Encourage provider engagement with dashboard and table views of performance against contract terms

Opportunity analytics

- Identify opportunities for improvement in specific clinical categories and quality measures and the financial impact of each improvement
- Uncover trends, themes and corresponding actionable opportunities for providers to intervene to reduce and eliminate low performance or care gaps

Settlement

Calculate accurate final settlement, integrating clinical and financial performance per value-based contract terms with our data infrastructure and custom analytics

On-demand reporting

- Access up-to-date performance results through dynamic performance analytics and reporting
- Create an infinite number of additional self-service analyses and data exploration when coupled with business intelligence software

Our Value Optimization Solutions Help Enable the Learning Health System

Incentivizing and measuring compliance against value-driven care is a core component of the Learning Health System. As we strive toward this framework of continuous learning and improvement, incentivizing quality care will become an increasingly important part to improving health outcomes and ensuring quality care is delivered to all patients. Our Value Optimization Solutions help advance this vision by providing a transparent, single source of truth for payers and providers to ensure success of value-based contracts and further support the shift to value-driven care.

Providing Reduced Friction & Improved Collaboration Between Payers & Providers

As outlined below, our Value Optimization Solutions help improve trusted collaboration and transparency between payers and providers across a variety of use cases.

Use Cases	Create a shared, transparent source of key value-based contract terms and methods throughout the contract lifecycle		
	Enable more real-time sharing of data and insights to inform contract performance		
	Offer industry-leading, actionable analytics to improve cost and quality outcomes		
	Provide trusted, expert services to simplify every step, from contract design to settlement		
Benefits	Payers	Provider-Sponsored Health Plans	Providers
	Single source of truth for payers, PSHPs and providers at risk to access key contract terms and methods used to calculate performance results		
	Single platform to view and share analytics and reporting within each organization and to use during engagement conversations between partners to improve collaboration		
	Single source of truth for financial and clinical performance, tying financial reporting to clinical action		
	Data-powered performance engagement discussions and contract negotiations		
	Early and ongoing insights on performance and improvement opportunities during the contract period		
	Predictability of year-end results		

Your Partner in Your Value-Based Care Journey

Our solutions were developed to provide a solid foundation to scale, empowering you to expand into new models, and retain and grow provider participation. Whether brand-new to value-based contracting or an early adopter, Apervita can help expedite your success. Our team of value-based contracting and predictive analytics experts will help navigate your path to adopting more risk, every step of the way.

Ready to optimize the success of your payer contracts?

Contact us today at info@apervita.com or **312.257.2967**

Apervita is committed to making the Learning Health System a reality. We make this possible through our quality measurement, value optimization and clinical intelligence solutions powered by the Apervita Vital Platform. Our cloud-based, trusted collaboration platform and solutions enable payers, providers and other healthcare stakeholders to transform quality measurement, value-based payment and care delivery. Serving over 60% of hospitals in the United States and several nationally recognized plans, Apervita conducts more than 10 billion value-based computations and insights for our clients each year.

We're on a journey to create transparency across the healthcare system to improve performance of care delivery. To realize a national Learning Health System, we must have commitment from all stakeholders to leverage interoperable systems, to measure quality using standardized methods, to incentivize value-based care and to provide First Time Quality by using the best evidence available at the point of care, one patient at a time.



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