



# MVC Data in Action

Exploring Organizational and System-Level Insights through MVC Custom Analytics

Presented by:

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## Agenda

- Background on MVC Custom Analytics
- Member Custom Analytic Request: McLaren Macomb
  - Report Results
  - Presentation by Dr. Beth Wendt, VP of Clinical Operations / Medical Director of Quality & Accreditation, McLaren Macomb
- Other Opportunities for Custom Analytics
- MVC Unblinded Data: Timing to Home Health
- Q&A

The background of the slide is a grayscale collage of various financial data visualizations. It includes candlestick charts, line graphs with multiple series, and bar charts. Some elements are semi-transparent, creating a layered effect. Faint text like 'Dec' and '201' is visible in the background.

# Background on MVC Custom Analytics



# What Are Custom Analytic Reports?

- Customizable reports using MVC claims data to help inform members' specific questions and interests
- Outputs used to drill down within a member's patient population
- Available to MVC members and healthcare systems upon request

# Why Pursue an MVC Custom Analytic Report?

## Member Benefits

Receive data **focused** on your unique **interests**

Helps **reveal key insights** from the data and **inform decision making**

Earns **MVC engagement points for P4P** after returning feedback to MVC

## MVC Benefits

Learn member's **interests** and **values**

Creates opportunity to **explore claims** data in **novel ways**

Feedback **informs enhancements of** MVC engagement and analytic offerings



# Custom Report Process

Typically takes **3-4 weeks** from submitting online request to receiving the final report



A GUIDE TO

## Custom Analytics

SETTING EXPECTATIONS FOR THE MVC CUSTOM REQUEST PROCESS

STEP 1



Share your ideas for a custom request with MVC staff via email or during a meeting.

STEP 2



Attend an initial meeting with an MVC Analyst to narrow scope and answer any questions.

STEP 3



MVC Analyst prepares the data, following up with clarifying questions as needed.

STEP 4



MVC provides your completed custom report and answers any questions about the findings.

STEP 5



MVC follows up after receipt of the report to collect your feedback about its usefulness and impact.

# How to get the most **VALUE** from MVC custom analytic reports

## The key is thoughtful preparation!

**Identify key questions and interests  
within your organization or health system**

Review available data and  
identify gaps / opportunities

Consult stakeholders and  
experts



**Determine which questions can be  
explored using claims data**

Consult with the MVC analytic team to set expectations and  
determine what is possible using claims



**Leverage MVC to help fulfill data needs**

Communicate intended  
use case with MVC

Provide MVC feedback after  
receiving completed report

The background of the slide is a faded, grayscale image of a complex financial chart. It features multiple data series: a candlestick chart at the bottom right, several moving average lines, a histogram at the top left, and various other line graphs. Faint text like 'Dec' and 'III' is visible at the bottom of the chart area.

# **McLaren Macomb Request for MVC Custom Analytics**



# McLaren Macomb's Questions & Goals

## Part 1:

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### **McLaren Macomb's Question:**

What does specialist participation in the CHF and COPD populations look like?

### **McLaren Macomb's Goal:**

Identify gaps based on specialist participation and identify opportunities for streamlining protocols for these populations

## Part 2:

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### **McLaren Macomb's Question:**

How many days after index discharge from hospital do CHF and COPD patients receive their first Home Health service?

### **McLaren Macomb's Goal:**

Learn what is happening within the Home Health process and identify opportunities for intervention and improvement

# Components of McLaren Macomb's Final Custom Report



## CHF Total Episode Payments

Stratified by patient  
readmission status



## CHF Post- Discharge Care Utilization

Stratified by type of post-  
discharge care



## Exploratory Analysis of Specialist Participation

Stratified by provider specialty

*Other components included in the original report that this presentation will not cover:*

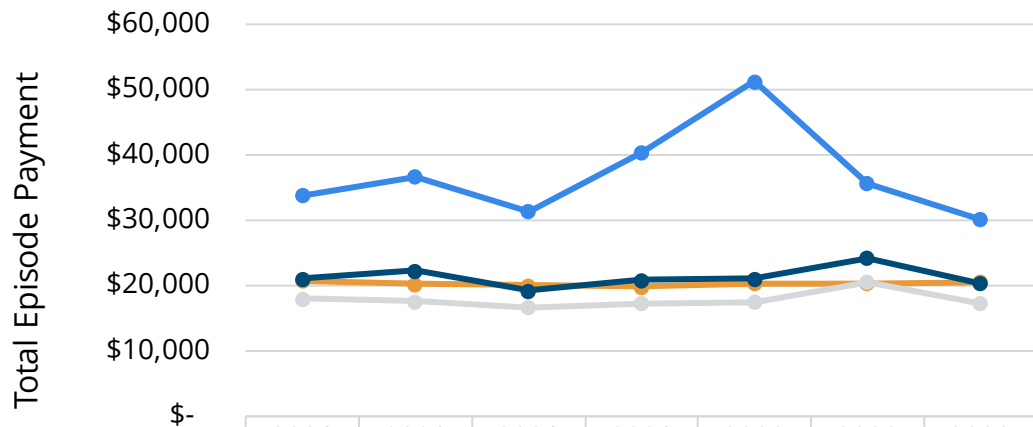
- Same metrics as above within COPD patients
- Days to Home Health or SNF due to low case counts within the CHF population







# Total Episode Payments (CHF)

Stratified by patient readmission status

**Trends in Risk-Adjusted, Price-Standardized CHF Total Episode Payments, Overall and by Readmission Status (McLaren Macomb, 2021 - Q3 2022)**



 MVC All	2021 Q1	2021 Q2	2021 Q3	2021 Q4	2022 Q1	2022 Q2	2022 Q3
 McLaren Macomb Overall	\$20,733	\$20,250	\$20,053	\$19,848	\$20,380	\$20,323	\$20,548
 Readmitted*	\$21,101	\$22,302	\$19,185	\$20,822	\$21,022	\$24,187	\$20,312
 Not Readmitted*	\$33,799	\$36,690	\$31,366	\$40,328	\$51,184	\$35,590	\$30,075
	\$18,023	\$17,593	\$16,657	\$17,276	\$17,473	\$20,572	\$17,308

\*Among McLaren Macomb CHF episodes

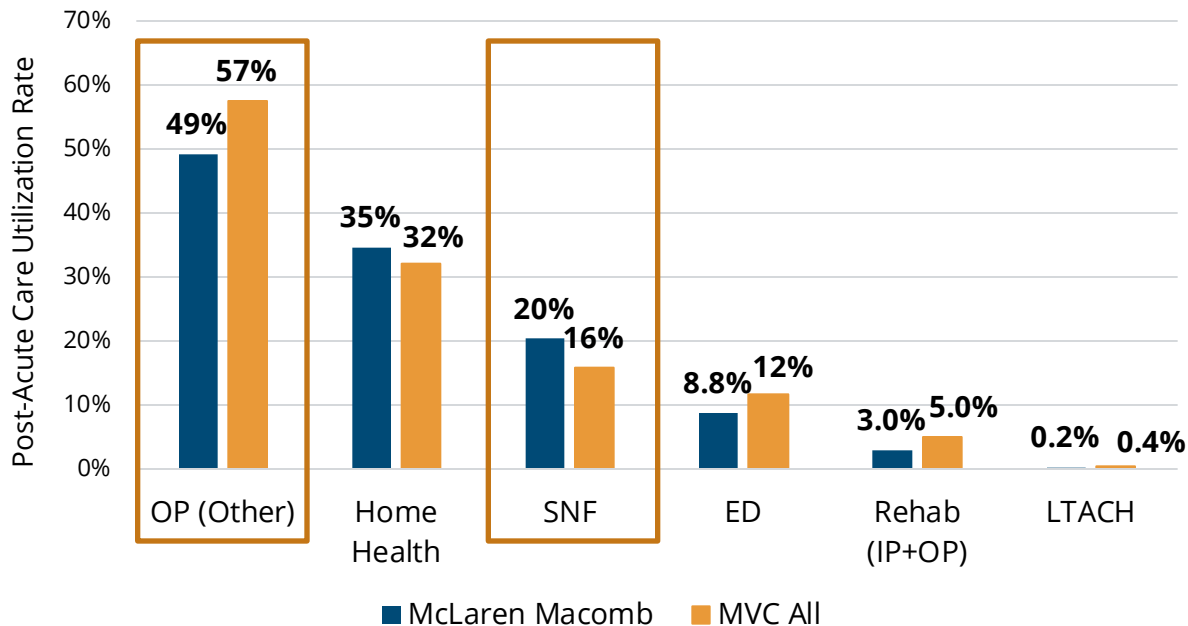


# Post-Discharge Care Rates (CHF)

Stratified by type of post-discharge care component

\*Examples of OP Other: *E&M, Imaging, Tests, DME, Procedures, Unclassified (ambulance, chemo, other drugs, misc.)*

## Post-Discharge Care Utilization Rates Among Patients with CHF (McLaren Macomb, 2021 - Q3 2022)



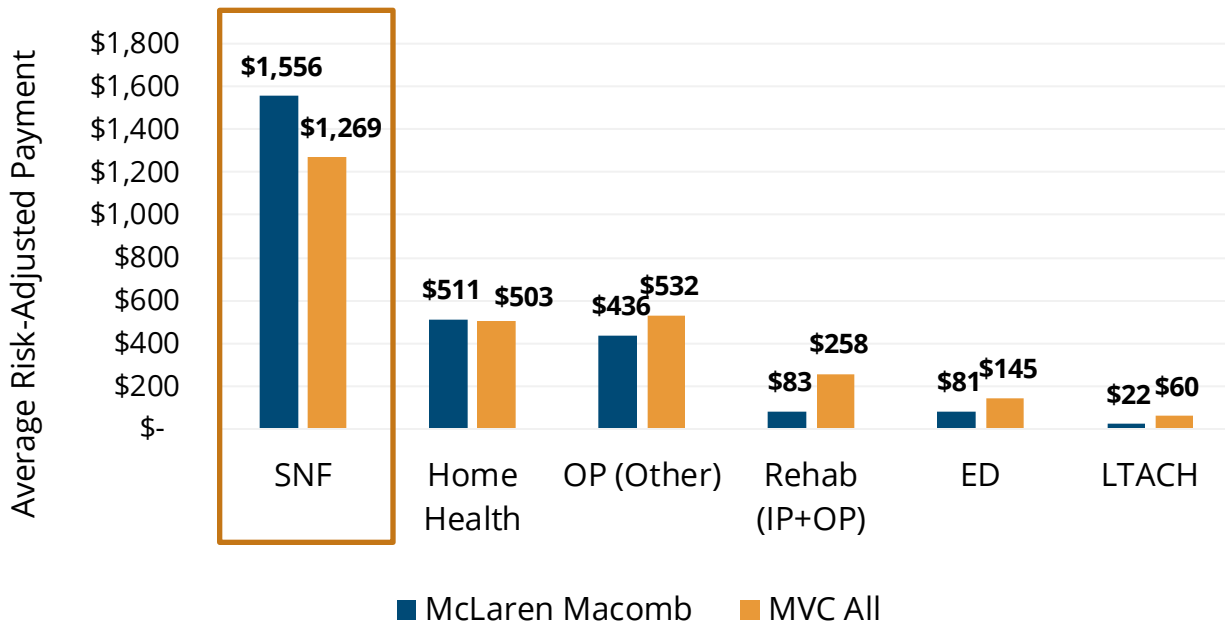


# Post-Discharge Care Cost (CHF)

Stratified by type of post-discharge care component

\*Examples of OP Other: *E&M, Imaging, Tests, DME, Procedures, Unclassified (ambulance, chemo, other drugs, misc.)*

## Average Risk-Adjusted Post-Discharge Care Payments Among Patients with CHF (McLaren Maccomb, 2021 - Q3 2022)



# Components of McLaren Macomb's Final Custom Report



## CHF Total Episode Payments

Stratified by patient readmission status



## CHF Post-Discharge Care Utilization

Stratified by type of post-discharge care



## Exploratory Analysis of Specialist Participation

Stratified by provider specialty



## Discharge Dispositions

Stratified by cardiac specialist consultation status

## Proportion of 7-Day Follow-Up

Performed by a cardiac specialist

## 30-Day Readmission Status

Stratified by cardiac specialist consultation status

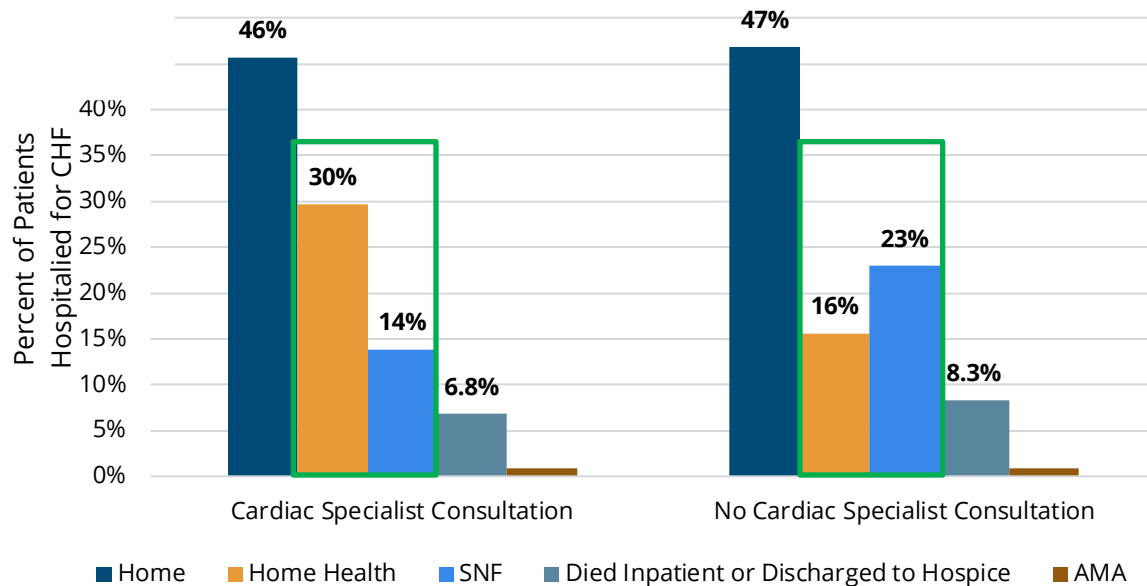


# Discharge Dispositions (CHF)

Stratified by cardiac specialist\* consultation status

\*Specializations included:  
*Cardiovascular Disease, Clinical Cardiac Electrophysiology, Interventional Cardiology, Pediatric Cardiology, Advanced Heart Failure and Transplant Cardiology, and Nuclear Cardiology*

## Specialist Consultations During Index Stay at McLaren Macomb and Discharge Dispositions, (CHF, 2021 - Q3 2022)



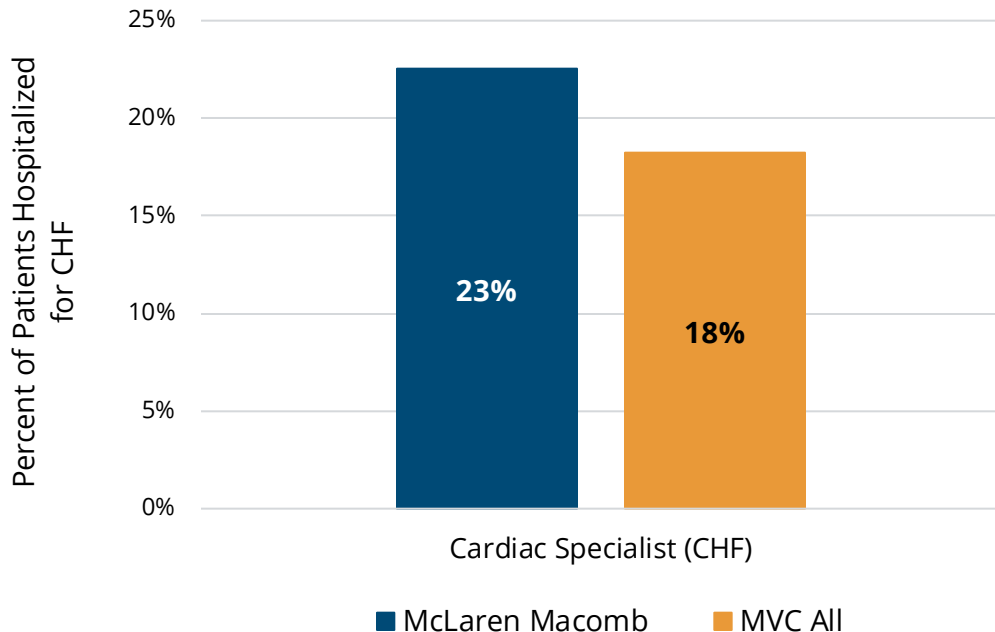


# Proportion of 7-Day Follow- Up (CHF)

Performed by a cardiac  
specialist\*

\*Specializations included:  
*Cardiovascular Disease, Clinical Cardiac  
Electrophysiology, Interventional  
Cardiology, Pediatric Cardiology,  
Advanced Heart Failure and Transplant  
Cardiology, and Nuclear Cardiology*

## Percent of CHF Episodes that Received Follow-Up from a Cardiac Specialist within 7 Days Post-Discharge (CHF, 2021 - Q3 2022)





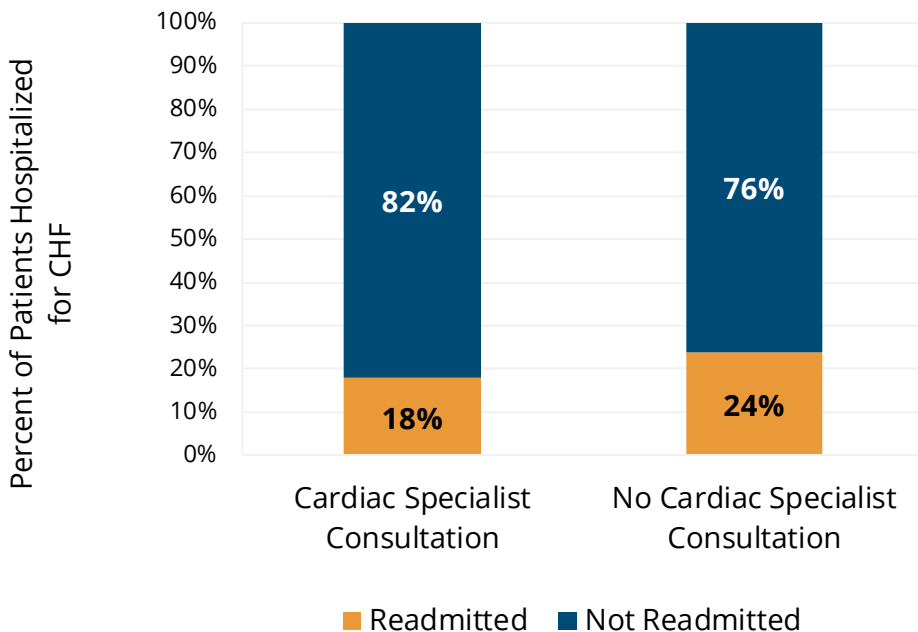


# 30-Day Readmission Status

Stratified by cardiac  
specialist\* consultation  
status

\*Specializations included:  
*Cardiovascular Disease, Clinical Cardiac  
Electrophysiology, Interventional  
Cardiology, Pediatric Cardiology,  
Advanced Heart Failure and Transplant  
Cardiology, and Nuclear Cardiology*

## Specialist Consultations During Index Stay at McLaren Macomb and 30-Day Readmission Status, (CHF, 2021 - Q3 2022)



# DRILLING DOWN:

Why were readmission rates lower among McLaren Macomb patients who had an inpatient consultation with a cardiac specialist compared to those who did not?

# Exploring Potential Drivers

Possible reasons why readmission rates were lower in this group that MVC can explore through claims data

**MVC could not assess all due to low case counts**



Quicker Home Health?



Greater Follow-Up Rates?



Specialty Follow-Up?



Quicker Follow-Up?



# 30-Day Follow-Up Rates

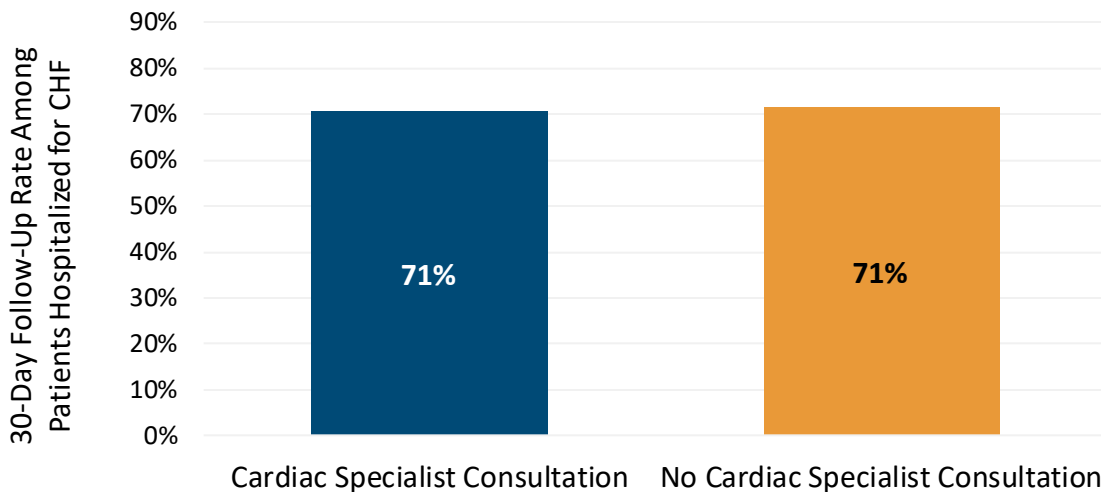
Stratified by cardiac  
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status

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**The proportion of CHF patients eligible for  
follow-up who had an inpatient consultation with a  
cardiac specialist**



**Which of these groups had greater follow-up rates?**

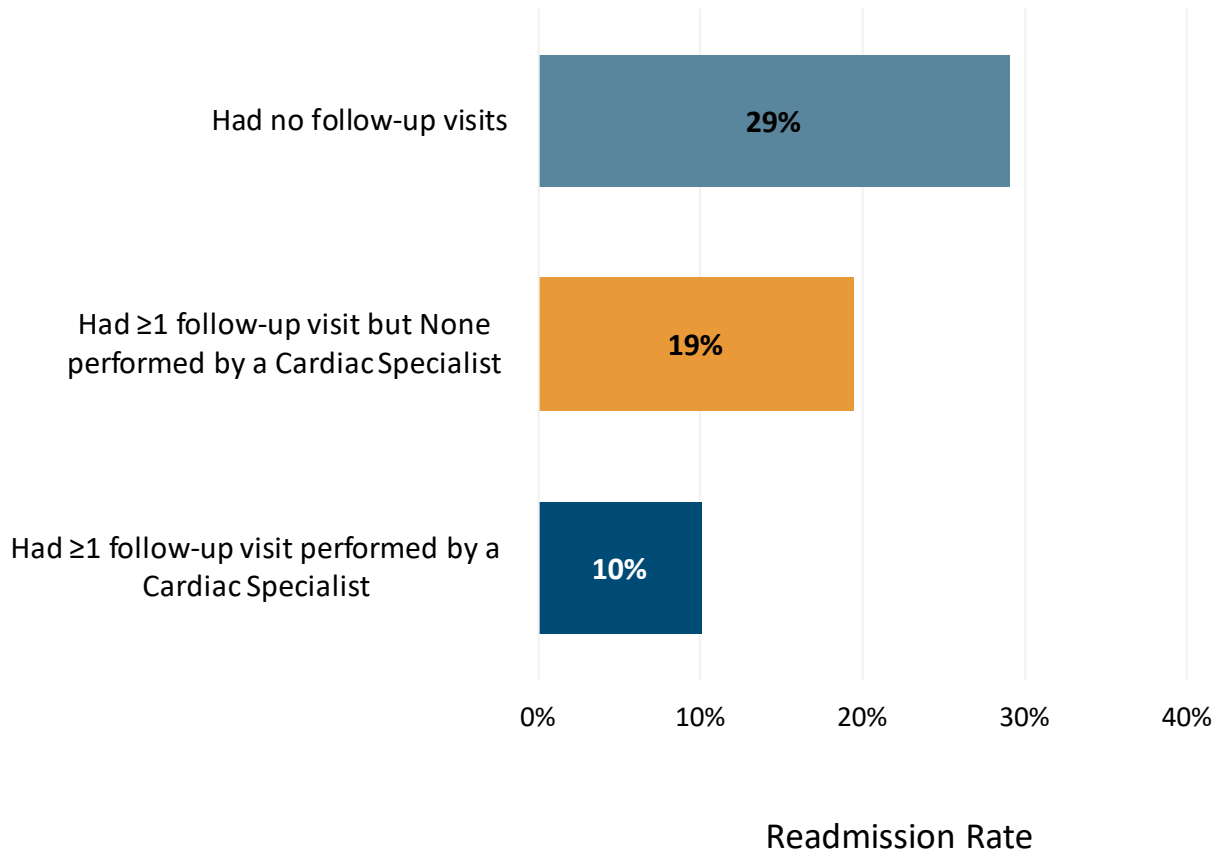




# 30-Day Readmission Rates

Stratified by specialty of  
performing provider

\*Specializations included:  
*Cardiovascular Disease, Clinical Cardiac  
Electrophysiology, Interventional  
Cardiology, Pediatric Cardiology,  
Advanced Heart Failure and Transplant  
Cardiology, and Nuclear Cardiology*



# DRILLING DOWN

Why were readmission rates lower among McLaren Macomb patients who had an inpatient consultation with a cardiac specialist compared to those who did not?

## CONCLUSION

**We're not sure!**

*Low case counts made it tricky to assess*



What do you think are the drivers of the lower readmission rates when seen by a cardiac specialist inpatient or during follow-up?



# Data in Action: McLaren Macomb's QI Efforts

Presented by Beth Wendt, DO, VP of Clinical Operations /  
Medical Director of Quality and Accreditation, McLaren Macomb



# Initial Questions and Goals

## Part 1:

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## Part 2:

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### **McLaren Macomb's Question:**

How many days after index discharge from hospital do CHF and COPD patients receive their first Home Health service?

### **McLaren Macomb's Goal:**

Learn what is happening within the Home Health process and identify opportunities for intervention and improvement



# McLaren Macomb's QI Efforts



## Identify opportunities to lower SNF utilization in the CHF population

- Ongoing weekly multi-disciplinary meetings to address barriers to discharge for encounters with LOS > 7days
- Daily multidisciplinary Rounds to improve communication and facilitate care across the disciplines
- Inpatient Palliative Care Service Line to identify chronic conditions for appropriate disposition



## Identify what triggers cardiac specialist when admitted to IM hospitalist

Work with providers to standardize care of CHF patient population



## Identify barriers to timely Home Health and develop action plan to overcome barriers

Multi-disciplinary Readmissions Committee driving improvement efforts



## Second MVC report request to look closer at ICU usage among COPD episodes

Identifying true opportunities within the data versus population differences

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## Other Opportunities for MVC Custom Analytics



# Other Conditions to Explore via MVC Custom Analytics

- Commonly requested MVC conditions
  - CHF
  - COPD
  - Joint Replacements
  - Sepsis
  - CABG
- Other MVC Conditions to explore
  - Pneumonia
  - Birthing Outcomes
  - Sepsis
  - PCI
  - And many more...

# Other Potential Insights About Continuum of Care Using MVC Data

- **How many different hospitals do patients get admitted to? How many different ERs do they visit?**
- **What type of provider do patients see following an ED visit and what were the outcomes?**
- **What happened to a group of patients before an index event or ED visit?**
- **What are the top reasons for readmissions and the timing of readmissions?**

# Thank you!

**What questions do you have?**

For questions or to begin the MVC custom analytics process,  
email [Michigan-Value-Collaborative@med.umich.edu](mailto:Michigan-Value-Collaborative@med.umich.edu)