

# Frequently asked questions for providers



## 1. What is a clinically integrated network (CIN)?

A CIN is an organization of providers (doctors, hospitals and other providers) who collaborate to improve quality, control health care costs, and work in partnership to provide coordinated care to better the patient experience.

## 2. What is UCHealth Integrated Network?

UCHealth Integrated Network is a provider-led organization open to doctors, hospitals and other providers who support population health care. Members share a common belief: Collaboration and innovation help put patients first while delivering cost efficiency.

In addition to CU Medicine, CIN participants include UCHealth Medical Group, Associates in Family Medicine and Family Medicine Center (residency program).

## 3. Why have UCHealth, CU Medicine and Parkview Medical Center developed UCHealth Integrated Network?

UCHealth, CU Medicine and Parkview Medical Center have partnered to help align patients, providers and payers in a way that offers greater access to care, higher clinical quality, better professional satisfaction and long-term cost control.

## 4. What are the benefits of a clinically integrated network?

For patients, payers and employers, CINs offer access to a high-performing network of health care providers. For health care providers, CINs assume financial accountability in providing health services, and providers receive access to a suite of tools and resources to reduce costs and boost efficiency.

## 5. Why should I join UCHealth Integrated Network?

New models of payment and care delivery require an integrated network dedicated to your success. UCHealth Integrated Network provides an opportunity for doctors, hospitals and other providers to benefit from our technology and infrastructure to clinically integrate across all sites to ensure delivery of high-quality, cost-effective care to Colorado residents.

## 6. What does it mean to be a UCHealth Integrated Network member?

By becoming a member of the Network, your organization can take advantage of a support system that covers everything from care management and administrative support to improvements in clinical quality and processes. That way, you can focus on what matters most: your patients.

## 7. How many providers participate in UCHealth Integrated Network?

The Network features over 2,400 providers throughout Colorado. That includes more than 330 primary care providers and 2,089 specialty care providers plus 11 hospitals.

## 8. How is UCHealth Integrated Network governed?

The board of directors sits atop the governance structure, overseeing four different committees—Clinical Committee, Information Technology Committee, Finance and Contracting Committee, and Network Development Committee. These groups collaborate on all aspects of UCHealth Integrated Network, including care management, clinical transformation, IT and analytics, payer relations and new member recruitment. Regional Advisory Councils will round out the last level of the governance structure.

## 9. What are the Network's focus areas for reducing costs?

Transitions of care, site of care, chronic disease management (which stems from reducing admissions to hospital facilities), reducing emergency room visits and medication management.

## 10. Can I participate on the board of directors and/or operating committees?

Yes. The Network encourages provider participation in governance and conducts an open nomination process annually to fill vacant seats.

## 11. Who is eligible to participate in UHealth Integrated Network? Who else is currently participating in UHealth Integrated Network?

To ensure the best value for patients and payers, the Network welcomes doctors, hospitals and other providers who want to be accountable and improve the quality of care.

The Network is currently communicating membership opportunities with UHealth's primary and specialty care medical staff providers.

## 12. How do I join UHealth Integrated Network?

To join, practices sign an agreement that requires a commitment to collaborate and participate in a clinically integrated model of care. The agreement has a number of requirements for providers:

- Access value-based payer contracts offered by the Network
- Adopt provider-designed clinical protocols and programs to enhance population health care
- Leverage information technology and data sharing to support communication, care coordination and reporting
- Contribute knowledge and expertise to drive the vision of the organization and improve community health
- Partner with the Network and other providers to improve the patient experience

## 13. What are the costs to participate in UHealth Integrated Network?

The Network charges a \$100 annual administrative fee to provider members. Annual fees vary and are determined by recommendations from our operating committees, with board approval.

## 14. What benefits do providers receive from UHealth Integrated Network?

Among other benefits, members have access to:

- A plan of action in the changing health care payment landscape
- Participation in a successful integrated network of providers
- Access to performance incentives and shared savings contracts
- Preferred provider status and access to patient populations
- Care management resources that engage high-risk patients with chronic illnesses
- Evidence-based processes, protocols and clinical pathways
- Increased ability to identify and address gaps in care and provide patient outreach
- Access to data for continuous quality and efficiency improvement

## 15. How do my patients benefit from UHealth Integrated Network?

Because the Network frees up resources and time for you to focus on patients, they can expect better quality of care. The Network also encourages better communication across a patient's continuum of care, ensuring that all providers involved are aware of any treatments and recommendations.

## 16. My staff cannot take on more work. How will this affect my organization?

UHealth Integrated Network is about saving time, helping achieve enhanced quality and care, saving overhead and infrastructure costs, and helping you meet stricter reporting requirements. Our services and resources include:

- A plan of action in the changing health care payment landscape
- Participation in a successful integrated network of providers
- Access to performance incentives and shared savings contracts
- Preferred provider status and access to patient populations
- Care management resources that engage high-risk patients with chronic illnesses
- Evidence-based processes, protocols and clinical pathways
- Increased ability to identify and address gaps in care and provide patient outreach
- Access to data for continuous quality and efficiency improvement

### **17. My practice has multiple locations. Can individual providers or practice locations participate in UHealth Integrated Network?**

The Network requires participation of all in-state providers across multisite practices.

### **18. Will membership require providers to change the way they practice medicine?**

Membership offers physicians the opportunity to participate in a clinically integrated model of care. That means more support and guidance in managing attributed populations, preventive care needs and at-risk patients. UHealth Integrated Network utilizes provider-designed clinical protocols, guidelines and programs, developed by the Network's Clinical Committee.

### **19. What types of payer agreements are available through UHealth Integrated Network?**

The Network offers value-based payer contracts from governmental and commercial payers. The Network encourages participation in all value-based payer contracts available through the Network.

### **20. What types of payer products are available through UHealth Integrated Network?**

Member providers have access to several value-based payer contracts, including the Medicare Shared Savings Program (Track 3) and several commercial agreements from Colorado's largest payers. UHealth Integrated Network also supports practices participating in Medicare's State Innovation Model (SIM) and Comprehensive Primary Care Plus (CPC+) programs.

### **21. What kind of payment is available to my practice through UHealth Integrated Network?**

Provider members are enrolled automatically in the Network's Performance Incentive Program, whereby providers are eligible for incentives and shared savings for demonstrated and effective population health management.

### **22. How is a value-based contract different from a fee-for-service contract? How is that managed?**

Value-based contracts provide incentive pools to providers based on performance—for example, cost and quality for attributed patients. Existing fee-for-service contracts are unchanged. As the Network receives value-based payments, it will distribute funds back to qualifying providers at the end of the year (fund flow to be determined).

### **23. How much can I expect to earn from CIN incentives?**

Members are enrolled automatically in the Network's Performance Incentive Program. Incentive levels depend on practice volume, contract enrollment and practice performance.

### **24. My practice is currently participating in another Medicare Accountable Care Organization (ACO). Can we join UHealth Integrated Network?**

Yes. However, Medicare primary care providers (PCPs) can only participate in one ACO program. PCPs participating in another ACO can still join the Network and take advantage of other benefits afforded by the Network. Specialty care providers may participate in more than one ACO.

### **25. My practice is currently participating in Medicare's Comprehensive Primary Care Plus (CPC+) program. Can we join UHealth Integrated Network?**

Yes. CPC+-participating practices may participate in CPC+ and join the Network, including participation in the Medicare Shared Savings Program (Track 3). Medicare has a special provision that allows CPC+ practices to dually participate in the Medicare Shared Savings Program (Track 3). The Network provides support, resources and education to CPC+ practices.

### **26. My practice is currently participating in Medicare's State Innovation Model (SIM) program. Can we join UHealth Integrated Network?**

Yes. SIM-participating practices may participate in SIM and join the Network, including participation in the Medicare Shared Savings Program (Track 3). Medicare has a special provision that allows SIM-participating practices to dually participate in the Medicare Shared Savings Program (Track 3). The Network provides support, resources and education to SIM practices.

### **27. My practice already is participating in a Medicare bundled payment program. Can we join UHealth Integrated Network?**

Yes. Certain specialty practices can participate in bundled payment programs with Centers for Medicare and Medicaid Services (CMS). These practices can be a member of UHealth Integrated Network and participate in the Medicare Shared Savings Program (MSSP) and commercial value-based contracts.

### 28. Are practices required to participate in all payer contracts available through UCHealth Integrated Network?

The Network encourages participation in all value-based payer contracts available through the Network to maximize the services and benefits available. Practices may opt out of select agreements.

### 29. Can providers enroll in fee-for-service contracts within UCHealth Integrated Network?

Network providers currently participate in value-based agreements with government and commercial payers. The Network does not offer fee-for-service contracts.

### 30. Is the CIN a narrow network, and will providers be excluded from products if they don't join?

The Colorado market is dynamic, yet quality outcomes are more profound in clinically integrated networks and ACOs. Therefore, payers and employers are selectively contracting with these types of entities to provide better care for beneficiaries.

### 31. When will the CIN assume downside risk?

This is a work in progress. The Network will evaluate the risk model that is best for all participating providers.

### 32. What types of training and best practices are made available as a member of UCHealth Integrated Network?

The Network provides tools, training and ongoing support to improve health outcomes, the patient and provider experience, and effective cost management while meeting the unique needs of our members. Examples of common training and best practices include:

- Review of performance measures
- Education with available resources to manage at-risk populations
- Design of a preventive care outreach process
- Development of a team-based model of care
- Development of a practice quality improvement project
- Implementation of a patient referral management process

### 33. How will my practice access performance reports and patient information as part of UCHealth Integrated Network?

Performance reports and patient lists will be made available through a web-based portal on a regular basis. Users of UCHealth's EpicCare electronic health record can access this information through "radar dashboards."

### 34. What is UCHealth Plan Administrators? Is UCHealth Plan Administrators the same thing as UCHealth Integrated Network?

UCHealth Plan Administrators is a separate UCHealth entity that provides support to self-funded employer groups, including third-party administration of health benefits plans.

### 35. What types of quality and performance metrics and reports are available through membership in UCHealth Integrated Network?

Member providers receive comparative metric reports outlining performance, trends, success and opportunities. Reports are provided electronically on a routine basis. Performance is demonstrated through key performance indicators (KPIs) such as:

#### Health Outcomes

- Breast Cancer Screening
- Hypertension
- Colorectal Cancer Screening
- Pneumonia Immunization
- Cervical Cancer Screening
- Diabetes Composite

#### Patient Experience

- Timely Care
- Provider Communication
- Provider Rating
- Access to Specialist
- Shared Decision Making
- Health Status/Functional Status
- Stewardship of Patient Resource
- Likelihood to Recommend Clinic

#### Cost/Utilization

- Cost per Member per Month
- Emergency Department Visits
- Acute Inpatient Admissions
- Readmissions (30/90 days)
- Cost per Member per Month
- Percent of Patients Seen Quarterly
- Emergency Department Visits
- Acute Inpatient Admissions
- Readmissions (30/90 days)
- Attribution Retention Rate

#### Access

- Time to New Appointment
- Third Next Available-Median

**36. Is UHealth Integrated Network a Regional Care Collaborative Organization (RCCO)? How does UHealth Integrated Network help my practice with Medicaid patients?**

No. An RCCO—and, in the future, a Regional Accountable Entity (“RAE”)—connects Colorado’s Medicaid patients to Medicaid providers and helps patients find community and social services in their specific region/county.

**37. What types of clinical services and care management programs are available to my practice as part of UHealth Integrated Network?**

Doctors, hospitals and other providers have access to UHealth Integrated Network’s care management services, including registered nurses (RNs) and Master of Social Work (MSW) support for managing attributed patient lives. The Network’s care management program has a demonstrated track record of improved health outcomes, patient experience and cost management.

**38. My practice has care managers on staff. Is my practice required to utilize care management services from UHealth Integrated Network?**

The Network’s care management program is flexible to support the needs of your practice, including providing care management services and/or partnering with your care management staff to provide training, education and resources to maximize performance.

**39. My practice currently does not utilize an electronic health record (EHR) system. Will my practice be required to purchase an EHR system to participate in UHealth Integrated Network?**

The Network encourages adoption of a certified EHR system to facilitate sharing of patient information and availability of data for quality metrics. The Network has not adopted a requirement at this time.

In the event you do not use an EHR, you will be required to send clinical data to the Network at a later date.

**40. Can my practice utilize the EpicCare electronic health record (EHR) system through membership in UHealth Integrated Network?**

Yes. The Network has made available UHealth’s EpicCare platform at discounted rates for UHealth Integrated Network members. In addition, Epic Community Connect is an option for provider groups to better manage patient outcomes.

**41. Who is a member in the Network, and how are new members selected?**

The Network partners with location medical communities, clinical leaders and practices to identify high-performing providers committed to the Quadruple Aim: enhance the patient experience, improve population health, reduce costs and improve provider satisfaction.

**42. What is Children’s Pediatric Care Network, and what is the benefit of this relationship?**

Children’s Pediatric Care Network is a pediatric clinically integrated network, sponsored by Children’s Hospital of Colorado. Pediatric Care Network is a preferred partner for supporting pediatric practices and delivering pediatric care for patients and payers.