



A case study: Optum and Excel Medical Center

Empowering provider success and improving member care through digital integration

The downside of data

Interoperability failures. Outdated workflows. Tedious member form management. Lack of training and technical resources. Unfortunately, this is often the experience for many providers when working with a health plan assessment program.

On average, providers have 10 different payer contracts with larger systems averaging more than 40.* The larger the practice, the greater the barrier. As clinicians see more members, practices need to comply with more payer contracts, each with unique requirements, incentives and workflows. The extra effort can spread employees thin, especially if the office is facing staffing shortages. Between multiple points of contact and variable processes – this can contribute to provider frustration and diminishing returns.

That's a problem many practices see. According to one study:*

- 74% of providers say they are challenged by variations in health plan processes, changing processes and additions to clinician workloads to participate in programs
- 77% of health systems experience moderate-to-serious problems with staff capacity to support health plan risk adjustment and quality programs

It doesn't have to be this way. Payers that can help providers overcome these challenges with solutions to improve their workflow are rewarded with optimized provider engagement, which delivers a new ability to comprehensively assess health conditions and improve quality and risk outcomes.

A flexible, provider-first solution that integrates with a provider's EHR and other clinical platforms can help physicians spend more time with their members and deliver better outcomes while creating minimal administrative burdens and barriers for medical practices.

Get to know Excel Medical Center

Excel Medical Center is made up of 14 primary care offices in Philadelphia, with about 25 primary care physicians and nurse practitioners. Excel serves approximately 20,000 members. Sixty-five percent are dual population (Medicare/Medicaid). The organization is planning an expansion with new locations and additional staff, made possible in part through digital integrations that have saved time and improved care delivery.

* Frost & Sullivan. The Impact of Health Plan Risk Adjustment and Quality Programs on Healthcare Providers. Presented to Optum July 23, 2020.

Opening up new possibilities at Excel Medical Center

Excel Medical Center in Philadelphia enrolled in the Optum® In-Office Assessment Program in 2020, and transitioned to a different EHR in 2022. Optum was able to integrate with Excel's EHR, creating a more streamlined workflow for Excel and providing access to member insights and alerts from Optum data and analytics. Excel quickly recognized the In-Office Assessment Program's potential to support physicians and staff.

A customized approach to integration

Optum has a highly experienced field team that engages providers at the point-of-care to help improve performance. The team is made up of over 1,000 health care advocates that work on behalf of payers to deliver wraparound services that are customized to each practice.

Shadina John, an Optum health care advocate, worked closely with clinical and administrative staff at Excel Medical Center to assess the practice's needs, resources and goals. They devised new processes and workflows to improve Excel's digital capabilities. Shadina meets monthly with Excel's director of operations, Aisha Fulton; and Andrew Gaston, RN, the practice's population health specialist. As a team, they review utilization lists, address issues related to health risk assessment submissions, refine the digital integration process and optimize workflows. Through this collaboration, Shadina helped coordinate a successful process for the practice's assessment program.

By integrating the EHR with Optum, practices have access to advanced solutions and capabilities that reduce administrative burdens, including:

- Data that follows the member at each point of care, providing a complete picture of the member's health and helping to improve outcomes
- Industry-leading data and analytics that proactively identify risk-suspected conditions
- Preprogrammed alerts for risk-suspected conditions at the point of care
- Automated submissions to close risk-suspected conditions and automated chart and notes extraction

“The automated chart notifications prompt us to do tests and interventions that might not have occurred to us. We're able to recognize red flags and diagnose conditions early when they are easier and less expensive to treat.”

Andrew Gaston, RN, Excel Medical Center

“Optum is a great partner that helps us look at the metrics and find solutions for patients enrolled in the In-Office Assessment Program ... Together, we're keeping high-risk patients as healthy as possible and minimizing rehospitalizations and unnecessary ED visits.”

Theodore Burden, MD, MBA
Chief Medical Officer, Excel Medical Center

Member success story

With more than 10,000 high-risk and high-cost members, Excel relies on population data to manage chronic conditions and detect emerging health issues promptly. A recent member experience illustrates how the In-Office Assessment Program supports their care efforts.

The member, a 61-year-old woman with multiple comorbidities, came to Excel for a checkup with her primary care physician. She initially reported no concerning symptoms. However, the physician received a notification from the EHR, prompted by Optum data, for a suspected condition based on clinical evidence resulting from previous treatment for peripheral vascular disease (PVD).

Based on the information in the alert, the physician asked a few probing questions to determine the status of her PVD condition. When the member mentioned occasional leg pain, the physician performed a screening test right in the office. The results indicated a possible problem, so the physician referred her to a vascular surgeon. The member ended up needing surgery to correct a right popliteal total occlusion. Because her physician caught the issue early, she is now doing well.

Without the notification from the Optum data, the physician says he may have overlooked the previous diagnosis. Early intervention prevented the member's condition from deteriorating and she was able to avoid the need for emergency care.

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Optum In-Office Assessment Program provides actionable insights to support your plans goals and objectives. The program brings a tailored approach to support providers based on their needs through field team support, insights on member prioritization driven by Optum data and analytics, and increased reimbursement accuracy. By reducing administrative burden, providers have more time to focus on clinical activities leading to better outcomes for members.

[Learn how](#) top-performing health plans work with Optum to engage providers and improve outcomes.



Optum suspecting logic and smart analytics is 98% accurate in flagging suspected conditions*

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Want to know more about how the most effective assessment programs address the 3 main challenges providers face? [Read how](#) Optum can help address digital barriers, inaccurate medical coding and workforce shortages.

* Internal Optum study, 2021



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