Population Centric Intelligence: Using Data Segmentation and Community Health Assessments for Better Patient Insights

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American Nursing Informatics Association





UC Irvine Health

Stony Brook Medicine

Nurse Leadership in Population Health

- Historically, Nursing has provided the bridge between the lives that patients live and the healthcare services being delivered to them
- Population Health requires a bridge between the lives that populations live and the positive healthcare decisions we need them to make
- Nurses are the most historically intuitive leaders in the area of population health



- Background, Business Challenges and Implications
- Analytics Strategy and Objectives
- Use Case and Example
- Next Steps

Background

UC Irvine Health

- Academic Medical Center and Health System
- Consistently ranked among the nation's best hospitals in the US News and World Report for 15 years
- Only comprehensive Cancer Center and Stroke and Cerebrovascular Center in Orange County, CA



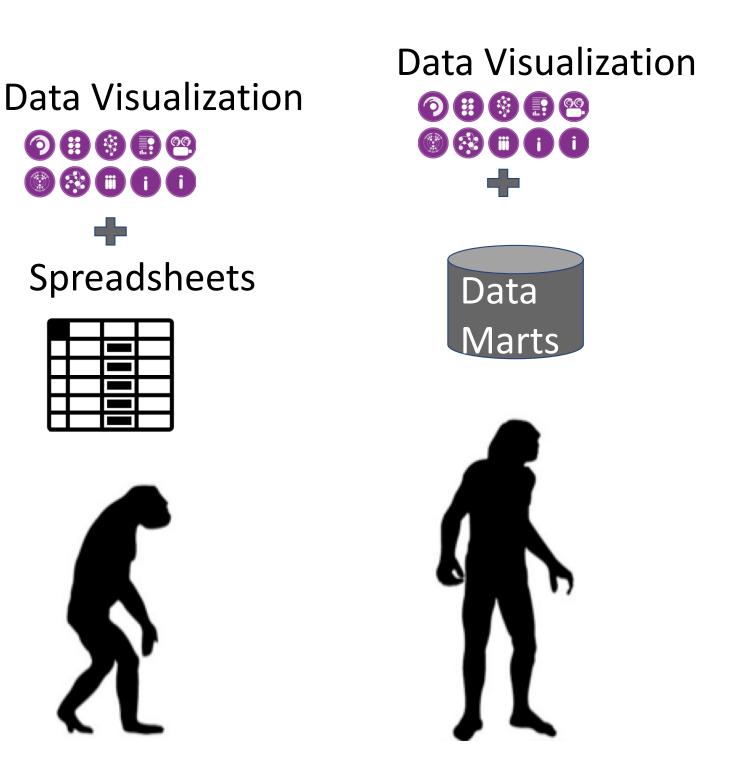
Business Challenges

- Significant Information Gaps in Value based Care Models
- You are about to go at-risk for a patient population, what do you know about them?
 - Do you know what conditions they have?
 - Do you know what they are being treated for?
 - Do you know what they have that they are not being treated for?
- You have predicted the high-risk patients, <u>now what</u>?
 - Do you know how to best communicate with them?
 - Do you know what is driving non-compliance?
 - If you did know, would you know what to do about it?
- You are contracting with a group of providers, why them?
 - Are they the right providers for your population?
 - Are you giving them the tools they need for your patients?

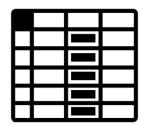


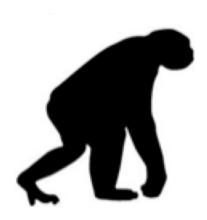


Evolution of Healthcare Analytics



Spreadsheets





Data Visualization



Big Data Ecosystem

Data Marts Enterprise Data War **Predictive Analytics** Streaming Device Da **Population Data** Social Data



Implications of these Challenges from a Population Health Management perspective

- Inability to meaningfully segment patient population based on risk, demographics, life style, socio-economic conditions, insurance coverage etc.
- Inability to proactively identify the multi-morbid/highest risk patients for care • coordination
- Inability to proactively manage 30 day re-admission rates and other population • health metrics resulting in higher penalties and fines
- Inability to differentiate offering based on quality of care delivery thru population health management excellence

Analytics Strategy

Use advanced population health insights enabled thru Visual Analytics for Population Health Management

Profile:

- Our Patients
- Competitors Patients
- Market Area of Interest

In order to:

- Manage Care
- Manage Risk
- Grow Market Share

are sk et Share **At-Risk Populations**

Building Provider Networks

MACRA / Value-Based Incentives

Revenue Collections

> Strategic Marketing

Population Intelligence Clinical Intelligence

Patient

The Rapidly Evolving

Provider Landscape

Business Intelligence

Market Expansion 7 Consolidation Life-Science Intelligence

> Market Potential

Communication

Care Team Management

> Discharge Transition

Clinical Research

Trial Recruitment and Retention

Population Intelligence



Communications

Thif

Demographics



Population Comparison

Comprehensive Population

Intelligence

Page

Care Access &

Utilization



Reporting

Clinical Intelligence



Health Issues



Health Activities & Beliefs

> Life-Science Intelligence

Business Intelligence



A Bit About Population Intelligence Data

- Locally sampled
- Self reported surveys (Non-PHI)
- Scalable to any geography
- Billion data points / 100,000+ measures
- Current to the most recent quarter
- Social and economic determinants
- Terms
 - Designated Marketing Area (DMA)
 - Block Level

A Bit About the Sources of Population Intelligence Data

- Exclusive Partnerships with trusted sources
- Geo-spatial and data equalization IP
- Rigorously tested and validated
 - Consistent, representative, equalized
- Methodology validated in multiple markets



Data Driven Insights

Demographics

Finance, Assets, Expenses Health Insurance Language and Ethnicity Household Composition Age and Gender Education Housing and Stability

Care Delivery Hospital Services Service Utilization **Provider Utilization** Tests & Procedures Monitoring & Testing Mobile Health **Primary Care Preventative Care**

Activities

Caregiving Where & When Activities Done/ Preferred Purchasing Social Communications **Restaurant & Grocery** Anticipated Life Changes **Driving & Transportation**

Products & Treatment

Treatments by Aliment RXN Consumption Medication Purchasing **OTC** Consumption Brand vs Generic Health-Related Products Remedies by Ailment Satisfaction with Treatment

Health Behaviors

Food & Nutrition Smoking **Alcohol Consumption** Exercise **Sedentary Behaviors** Diet & Weight Loss **Dental Care Provider-Driven Activities**

Opinions & Attitudes Self-Care Providers. Medication & Treatment Health Education Health Motivation Family & Friends Lifestyle Technology & Information

Conditions – Have/Had Treated & Untreated **Discussed with Doctor** Health Mental Health Pain Stress & Wellbeing

Health & Conditions

- **Condition-Specific Issues Overall**

Marketing, Media, Technology

- Health Information
- General Info. Sources
- Trusted/Valued Sources
- Internet Activities
- Mobile and Computer
- Social Media
- Radio and Television
- Print Media

Rapid Access to Insights: Patient Population



Identif B&BSocate You Memoritsed Target Populations With Cancer Ot **UC** Irvine Profile edited on Namestend Addresses



AFdmahkody Miang-Segiplenfiatibat description



Mappet stad daver Ear gath 34,000 Insignes to Your Specific Mangetsigned Target Populations and the Locations of their Care Care Access and Utilizations

- Demographics
- Communications
- Health Activities and Beliefs
- Related Provider Locations



Analytics **Platform**

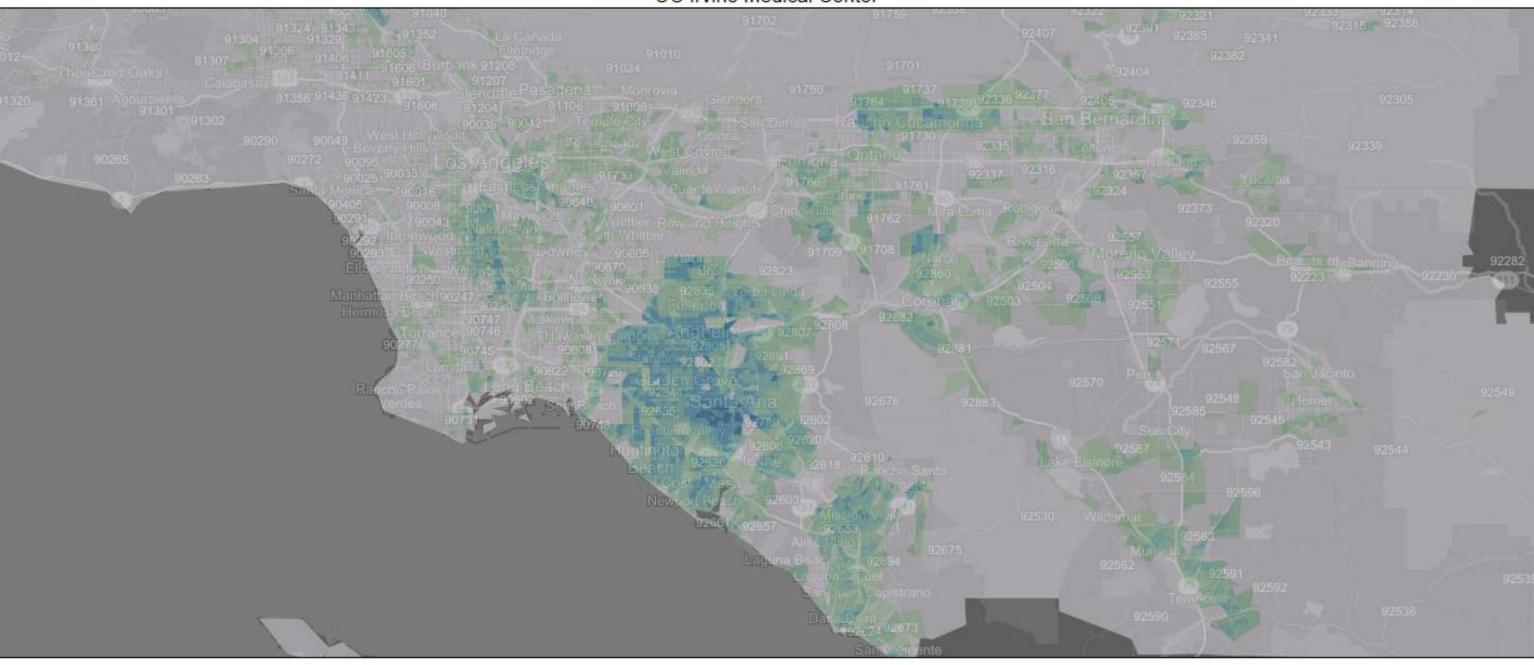
Block Level Mapping Person Level Insights

- Manage Risk
- Manage Care
- Grow Share

Case Study: Understanding UC Irvine Health Patient Population and Markets

Understanding UCI Patient by Density



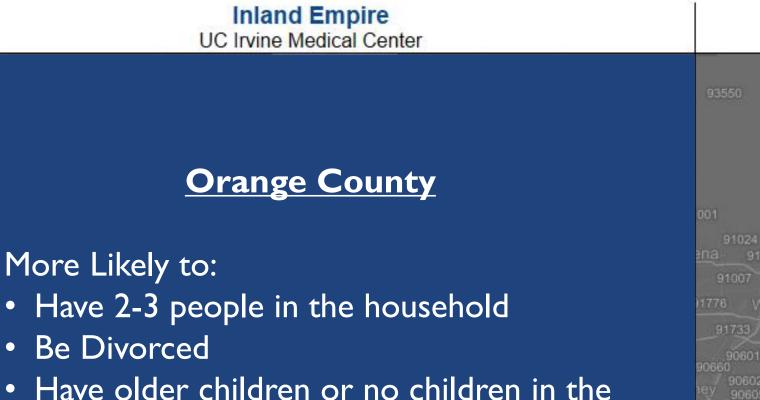


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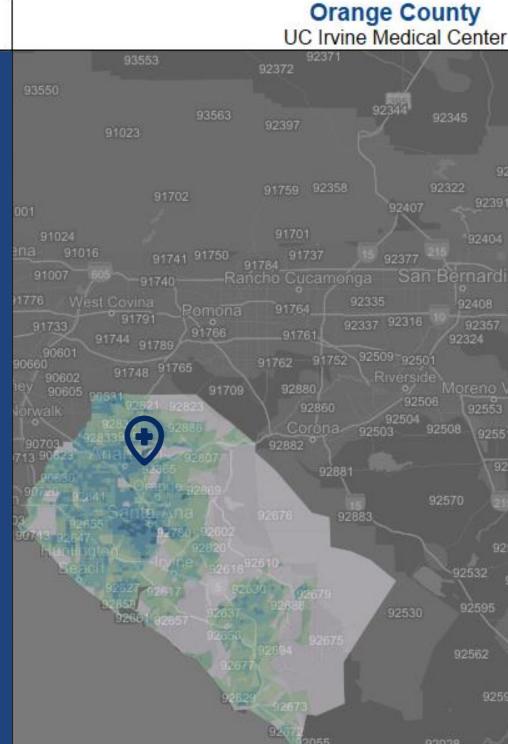


A Tale of Two Markets – Orange County and Inland Empire

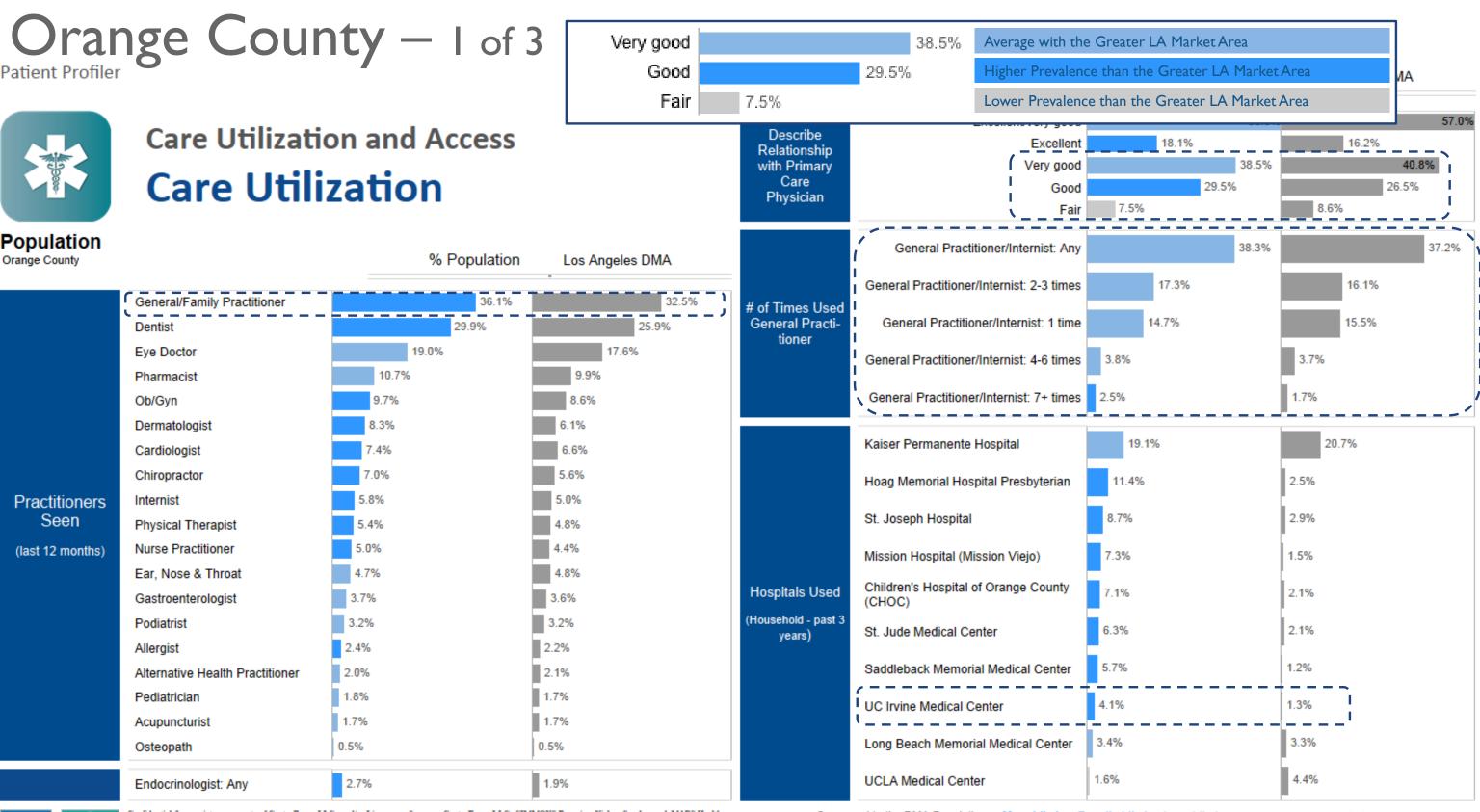


• Have older children or no children in the household

- Own a condo or town home \bullet
- Work in White Collar Jobs including Management and Sales



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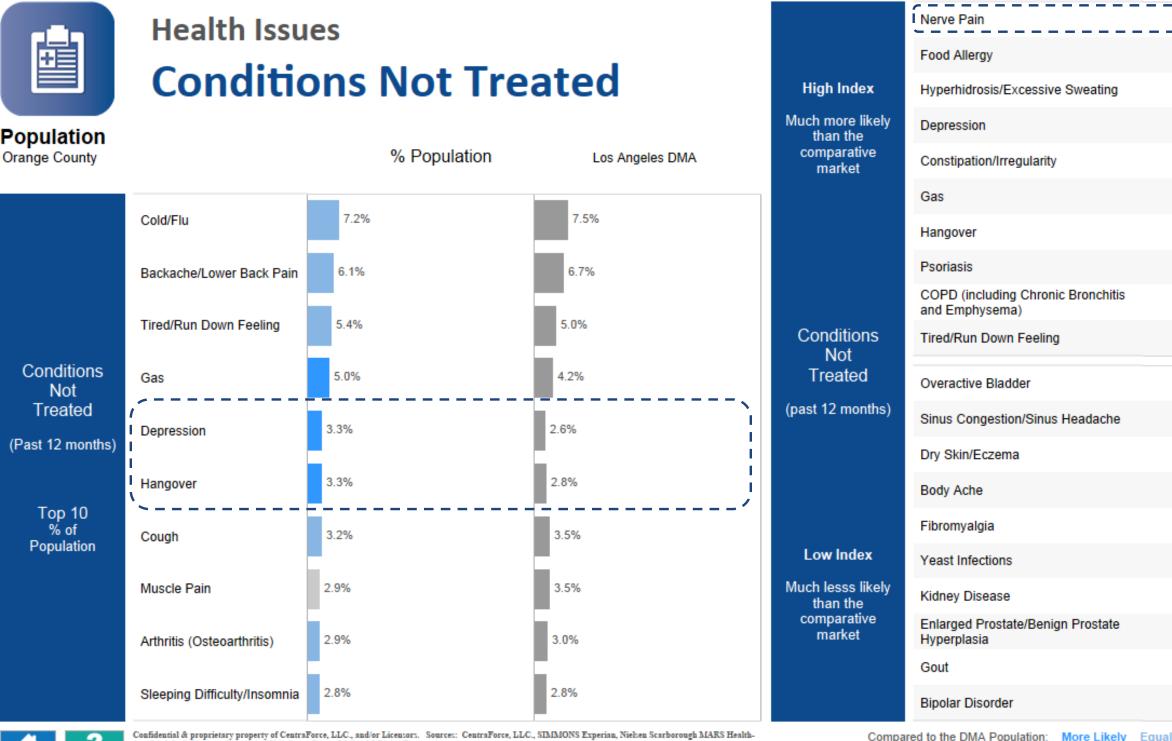
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Compared to the DMA Population: More Likely Equally Likely Less Likely

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Patient Profiler Orange County – 2 of 3

Market Los Angeles DMA



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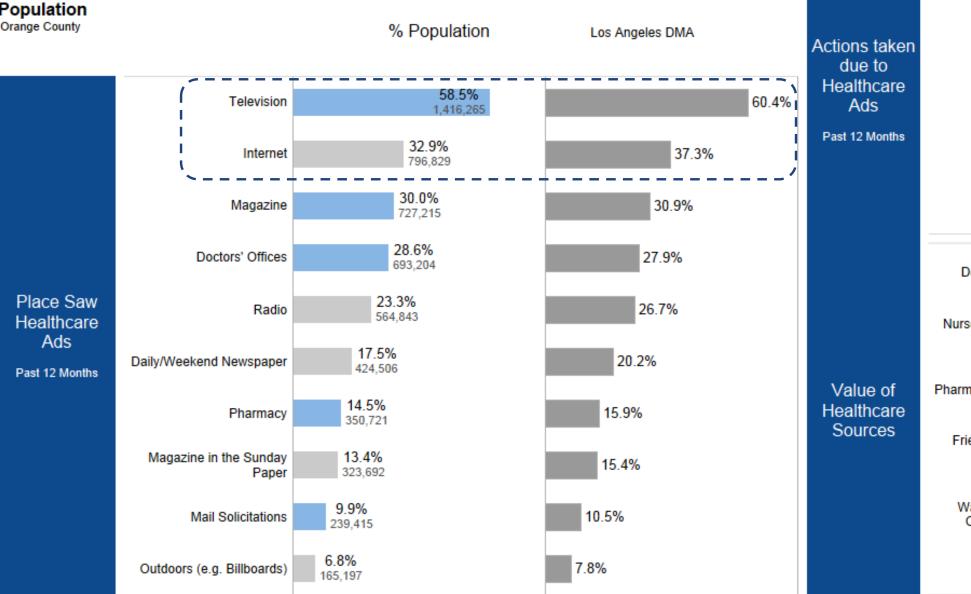
Compared to the DMA Population: More Likely Equally Likely Less Likely

_	Index	% Population
	165	2.2%
	146	2.0%
	130	0.3%
	128	3.3%
	122	1.1%
	119	5.0%
	115	3.3%
	115	1.1%
	109	0.5%
	107	5.4%
	64	1.1%
	63	1.5%
	60	1.0%
	58	1.5%
	58	0.2%
	58	0.2%
	53	0.1%
	51	0.2%
	43	0.2%
	37	0.3%

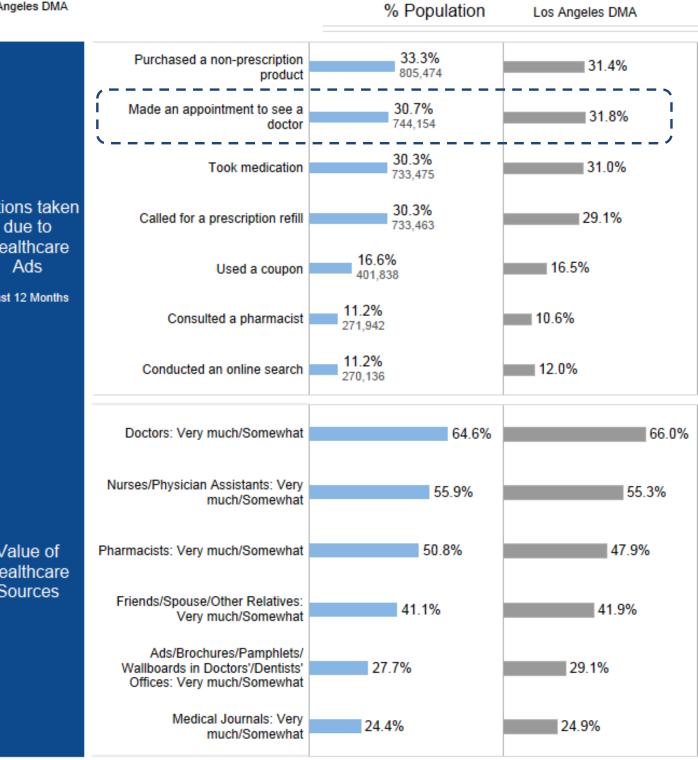
Orange County – 3 of 3



Communication Health Marketing



Market Los Angeles DMA



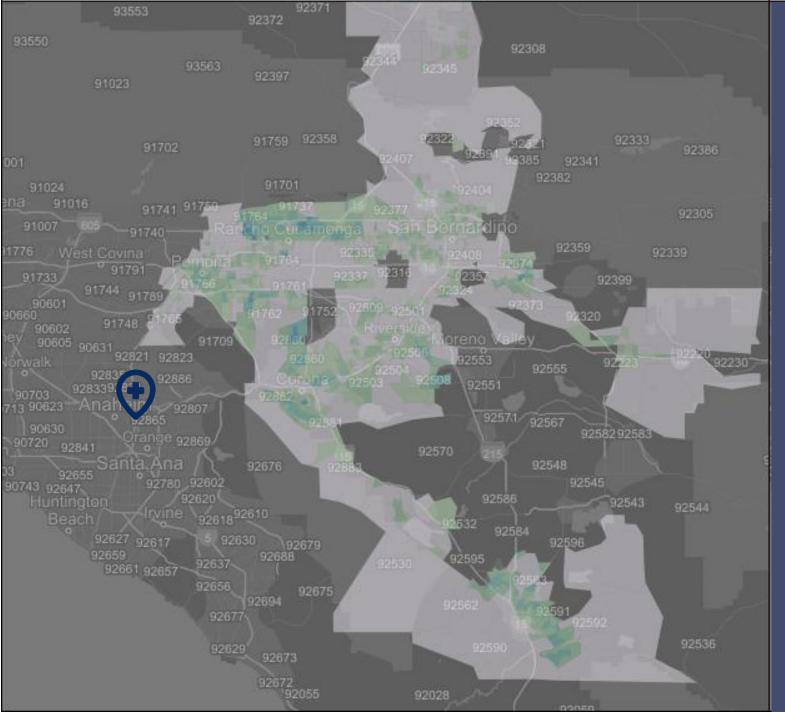


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A Tale of Two Markets – Inland Empire

Inland Empire UC Irvine Medical Center





Inland Empire

More Likely to:

- Have 5-6 People in the household
- Be Married ullet
- Have a child of any age living in the household
- Own a single family home
- Work in blue collar jobs including transportation and production



Inland Empire – 1 of 3

Market Los Angeles DMA

Describe

Relationship with Primary

Care

Physician



Care Utilization and Access Care Utilization

Population Inland Empire		% Population	Los Angeles DMA		General Practitioner/Internist: Any	
	General/Family Practitioner	31.8%	32.5%	# of Times Used	General Practitioner/Internist: 1 time	
	Dentist	24.4%	25.9%	General Practi-	General Practitioner/Internist: 2-3 times	14
	Eye Doctor	17.0%	17.6%	tioner	General Practitioner/Internist: 4-6 times	4.5%
	Ob/Gyn	9.0%	8.6%			
	Pharmacist	8.9%	9.9%		General Practitioner/Internist: 7+ times	1.3%
	Cardiologist	6.0%	6.6%		/	
	Dermatologist	5.7%	6.1%		Kaiser Permanente Hospital	23.4
	Chiropractor	5.5%	5.6%		Riverside Community Hospital	12.0%
Practitioners	Ear, Nose & Throat	4.9%	4.8%		1	
Seen	Physical Therapist	4.6%	4.8%		Loma Linda University Medical Center	10.0%
(last 12 months)	Nurse Practitioner	4.3%	4.4%		St. Bernardine Medical Center	5.0%
	Internist	4.1%	5.0%		``	
	Gastroenterologist	3.8%	3.6%	Hospitals Used	UC Irvine Medical Center	2.5%
	Podiatrist	3.0%	3.2%	(Household - past 3 years)	St. Joseph Hospital	2.3%
	Alternative Health Practitioner	2.4%	2.1%	,,		
	Allergist	2.0%	2.2%		UCLA Medical Center	2.0%
	Pediatrician	1.7%	1.7%		Children's Hospital of Orange County	1.8%
	Acupuncturist	1.3%	1.7%		(CHOC)	
	Osteopath	0.7%	0.5%		Huntington Memorial Hospital	1.4%
	Endocrinologist: Any	1.5%	1.9%		Long Beach Memorial Medical Center	1.2%

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Excellent/very good

Excellent

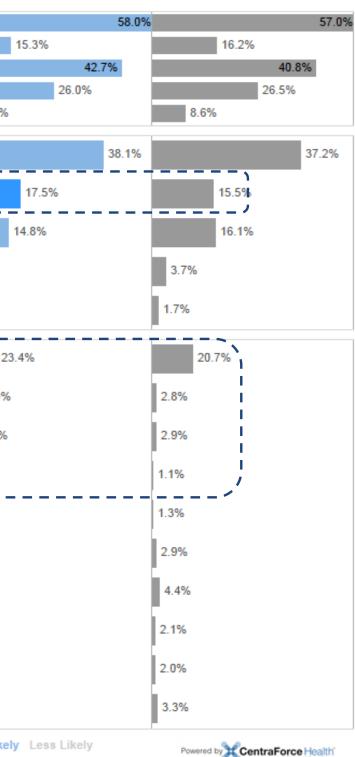
Very good

Good

Fair

6.8%

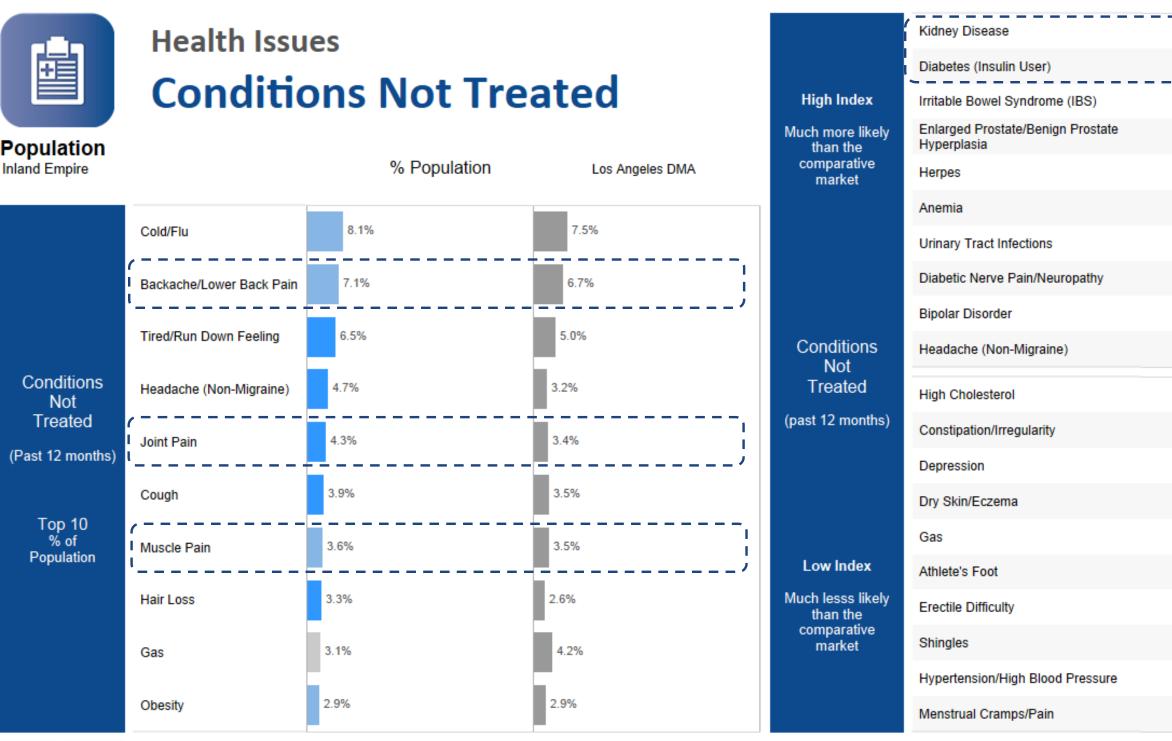
% Population Los Angeles DMA



Inland Empire – 2 of 3

Patient Profiler

Market Los Angeles DMA



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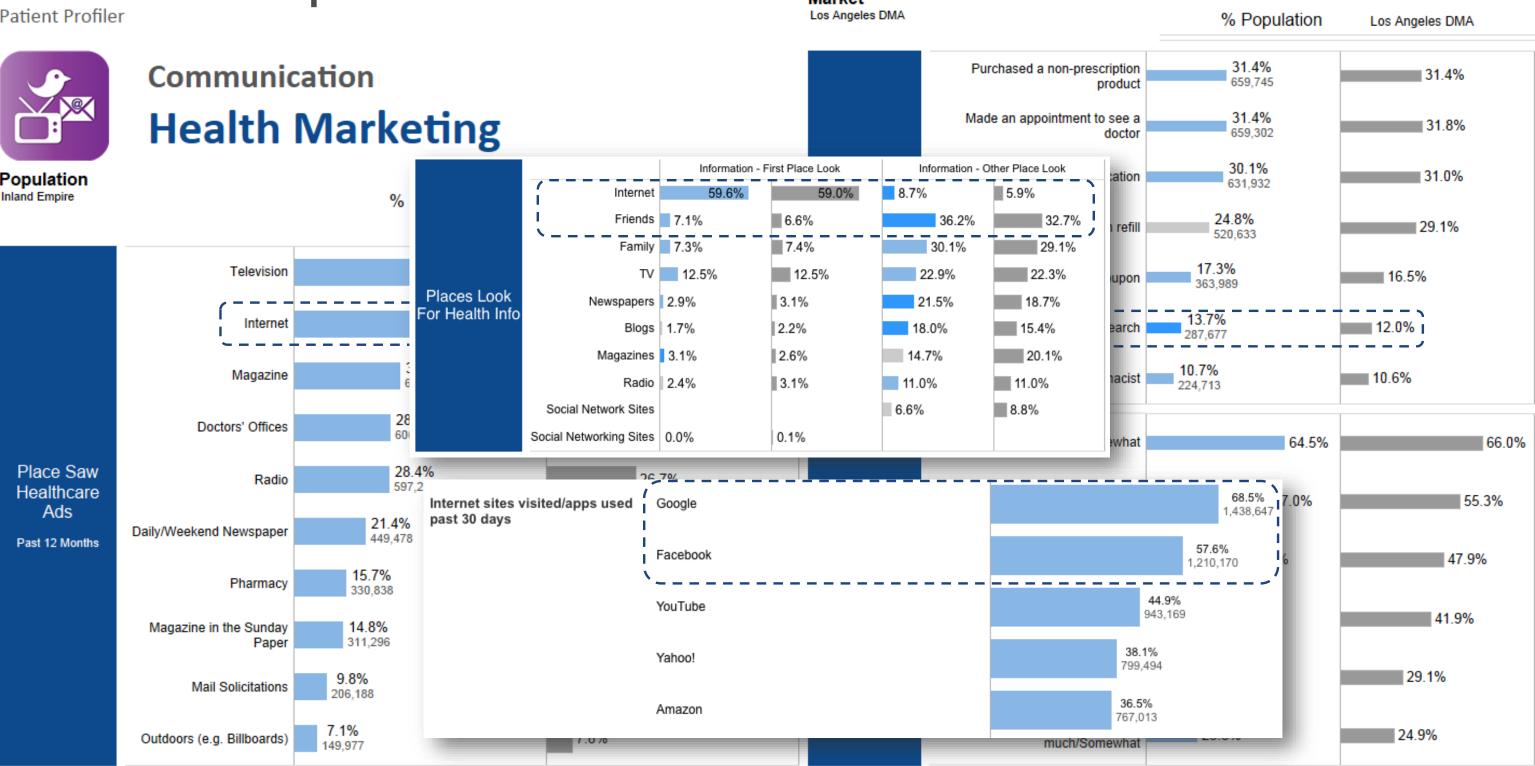
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-	Index	% Population		
	233	0.5%		
	201	0.4%		
	193	1.4%		
	192	0.9%		
	191	0.4%		
	183	0.9%		
	175	0.9%		
	168	0.7%		
	152	1.1%		
	150	4.7%		
	80	2.1%		
	79	0.7%		
	76	2.0%		
	74	1.2%		
	74	3.1%		
	73	0.4%		
	64	0.9%		
	57	0.4%		
	53	0.7%		
	45	0.7%		

Inland Empire – 3 of 3

Patient Profiler

Market





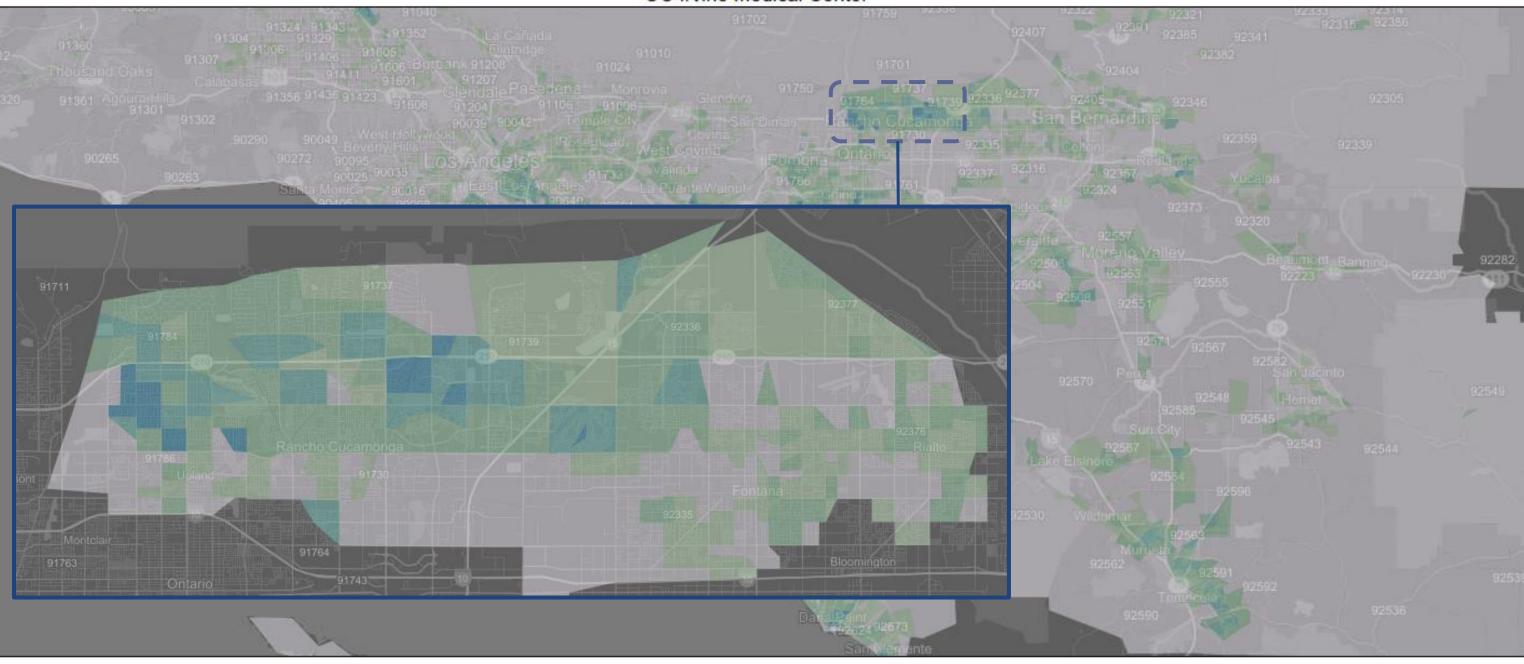
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Compared to the DMA Population: More Likely Equally Likely Less Likely

Focusing on Opportunities: Rancho Cucamonga

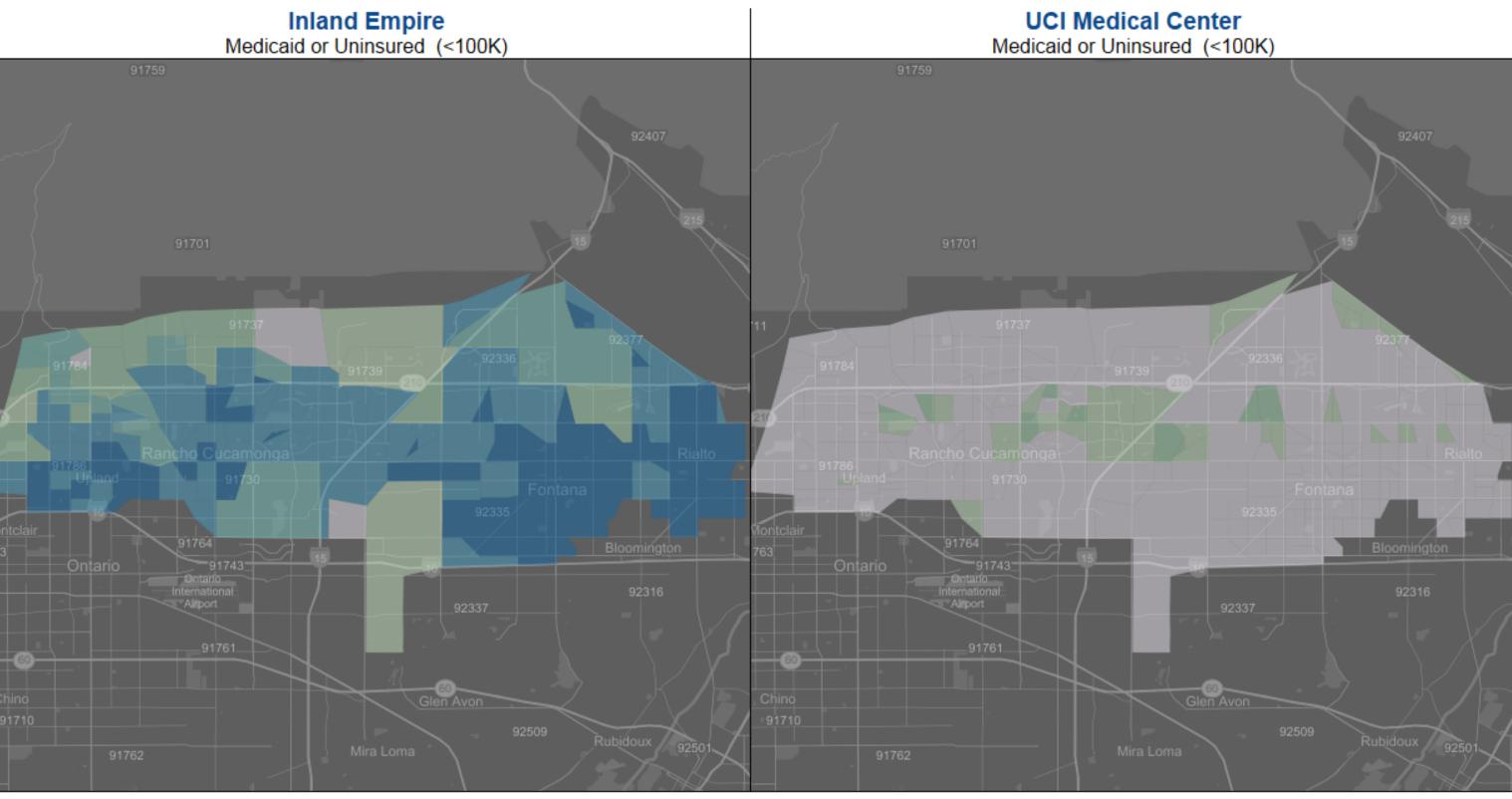
UCI Medical Center

UC Irvine Medical Center



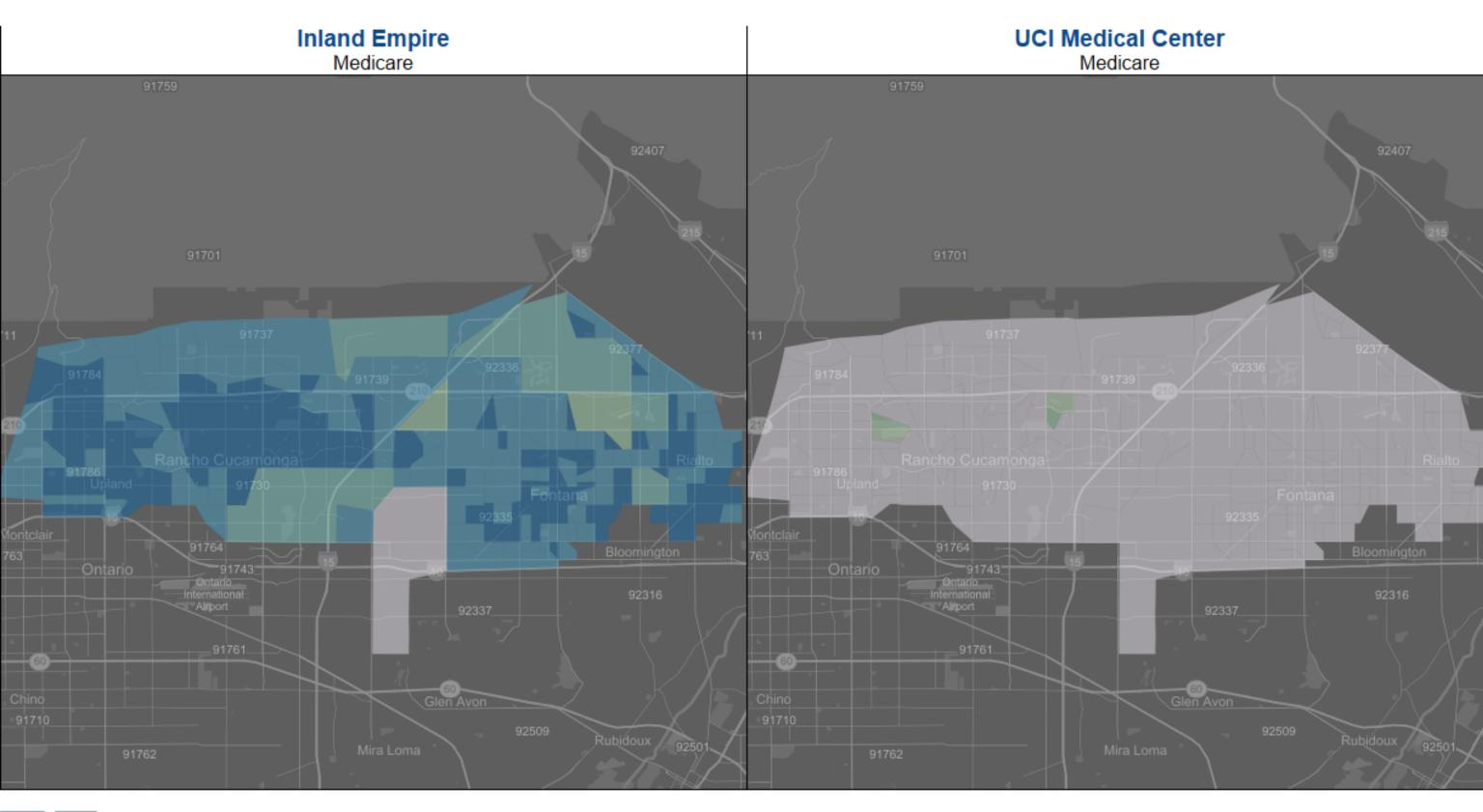
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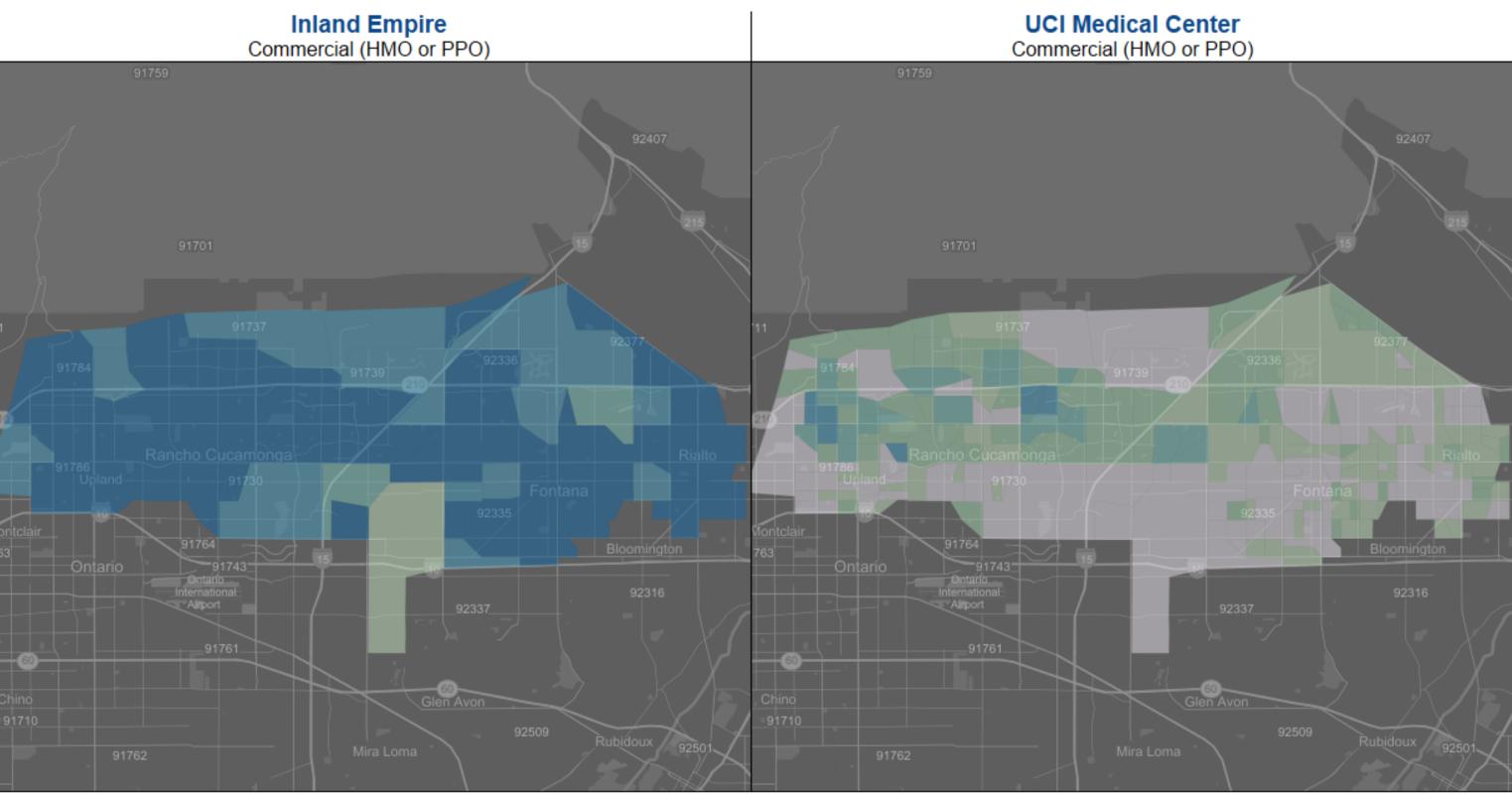




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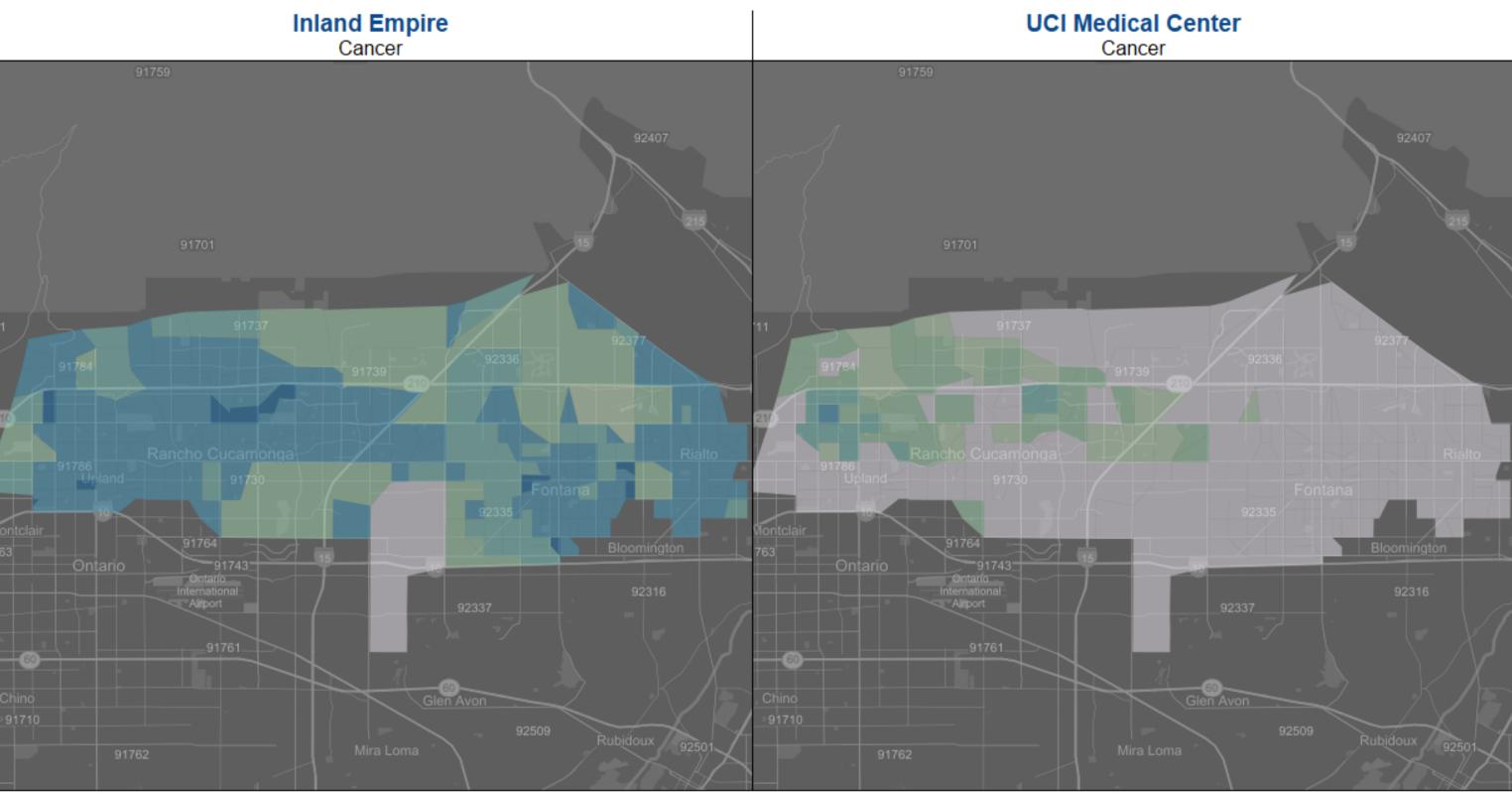
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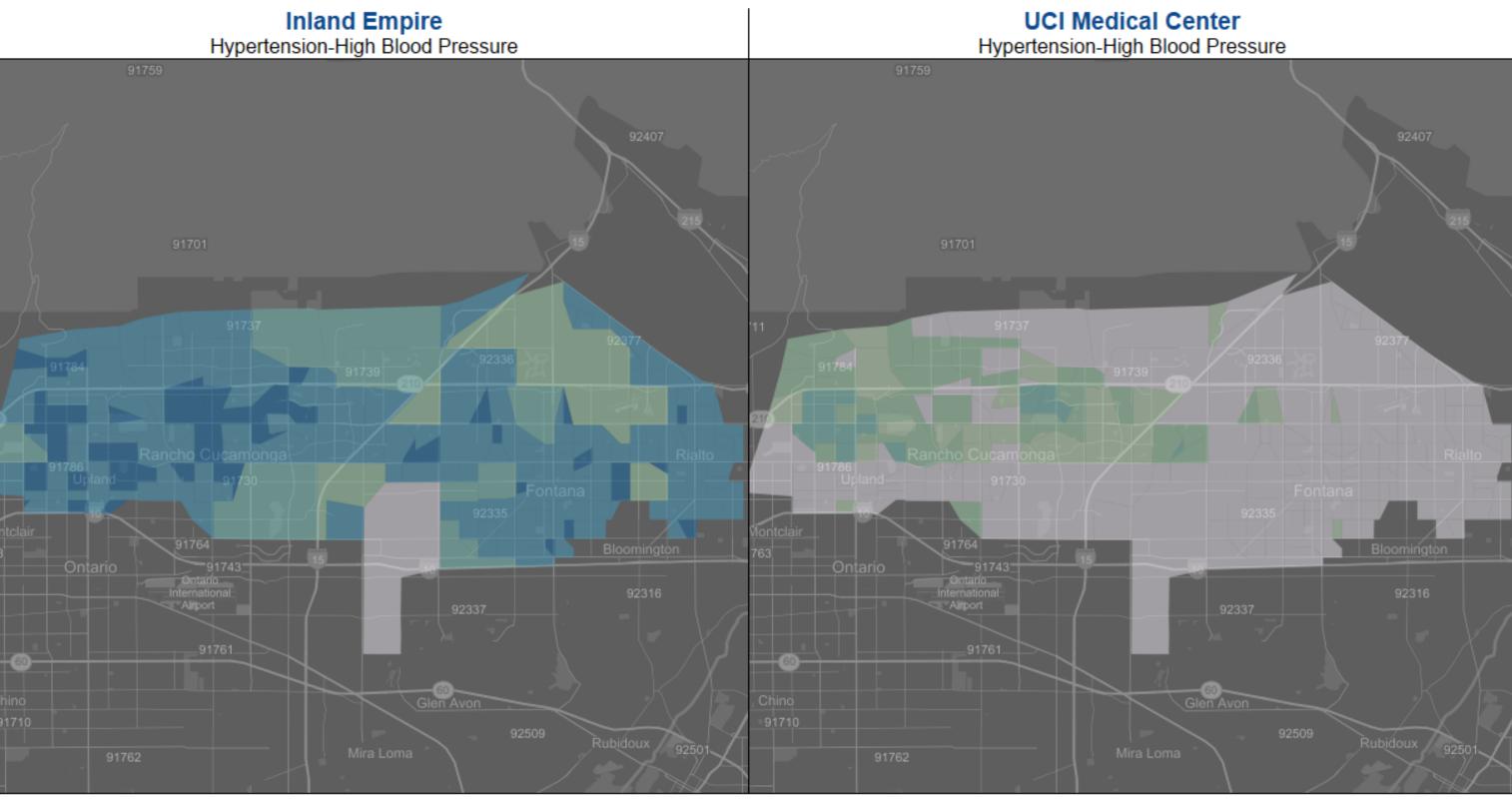
















Anticipated Benefits

- The Population Health Segmentation insights helped us understand the unique attributes of our attributed Patient Population
- These population health insights will dramatically impact the way we view, segment, and target our patients for the delivery of high quality, cost-effective care
- These insights are key enablers of value-based care at a lower risk, while helping us meet our population health metrics

Community Needs Assessment

- Description of Health Care Resources and Community Resources
- Description of the Community Served
 - Demographics of the Population
 - Population Size, Age, Sex and Race/Ethnicity
 - Income, Education and Employment
 - Health Status
 - Leading Cause of Death
 - ER Utilization
 - Mental Health
 - Tobacco Use
 - Cancer
- Service Challenges
- Assets & Resources
- Suffolk County, NY
 - <u>http://tinyurl.com/pdtf564</u>

Paradox of Population Health

- Understanding the Patient as a Person
 - Social Determinates
 - Demographic Issues
- A Person's Personal "Big Data"
 - Medical IoT
 - Omics
- High Quality and Value Care at the Personal Level
 Quality Measures for the Masses
- Making it Personal
 - Access to and Understanding the Longitudinal Record

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Stony Brook Medicine

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