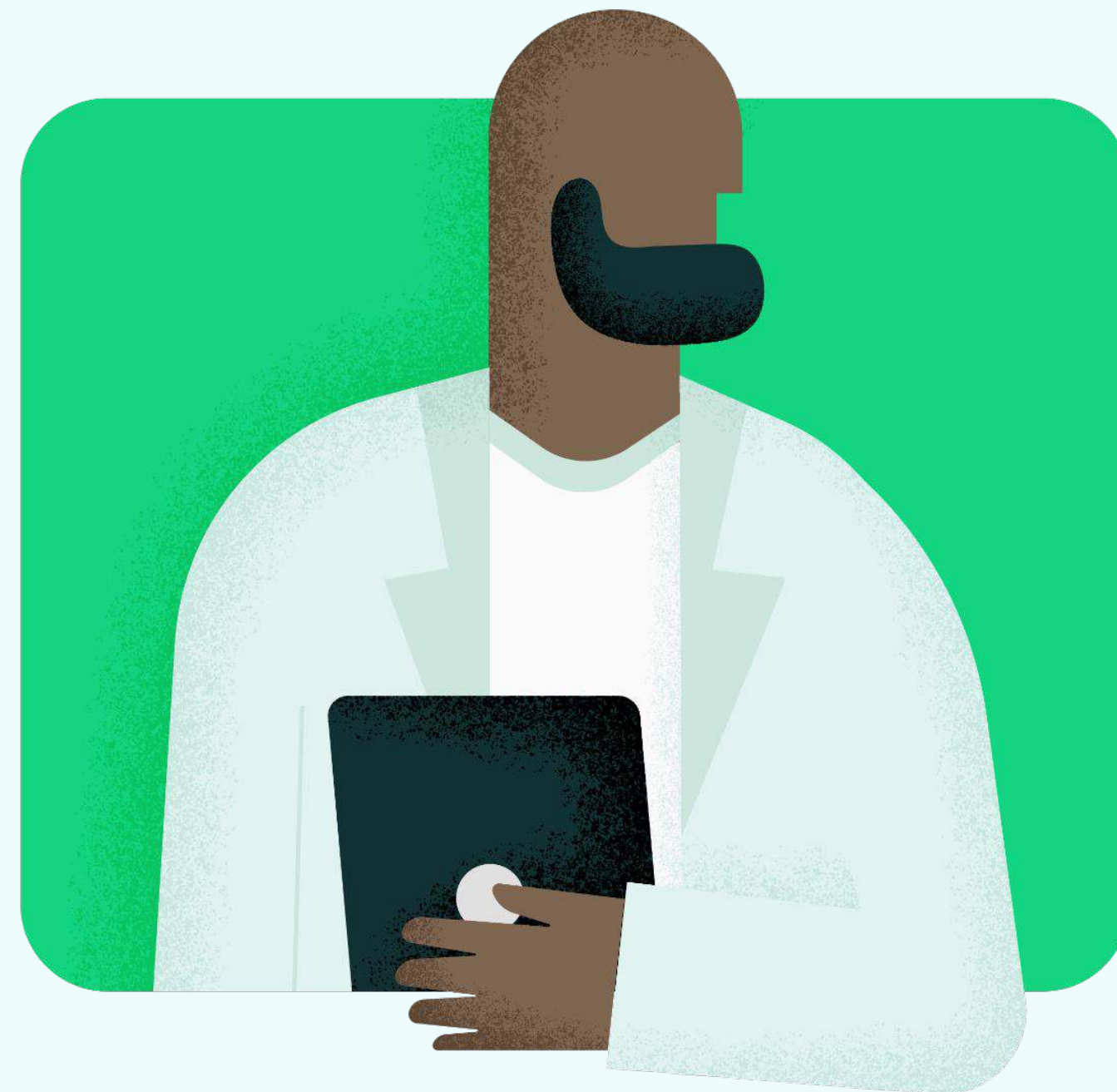


the healthcare experience playbook

achieving excellence in value-based care



this guide covers:

- best practices to realize value-based care goals through patient experience
- ways to shift patient behavior to improve quality management and contract performance
- how innovaccer supercharges teams to achieve value-based care and experience goals

improve value-based care outcomes with the power of experience

Prioritizing the healthcare experience empowers patients to take responsibility for their care. When organizations prioritize healthcare experience, patient behavior changes, care quality rises, and Value-Based Care (VBC) performance improves. By putting patient experience first, organizational and care outcomes can be transformed simultaneously.



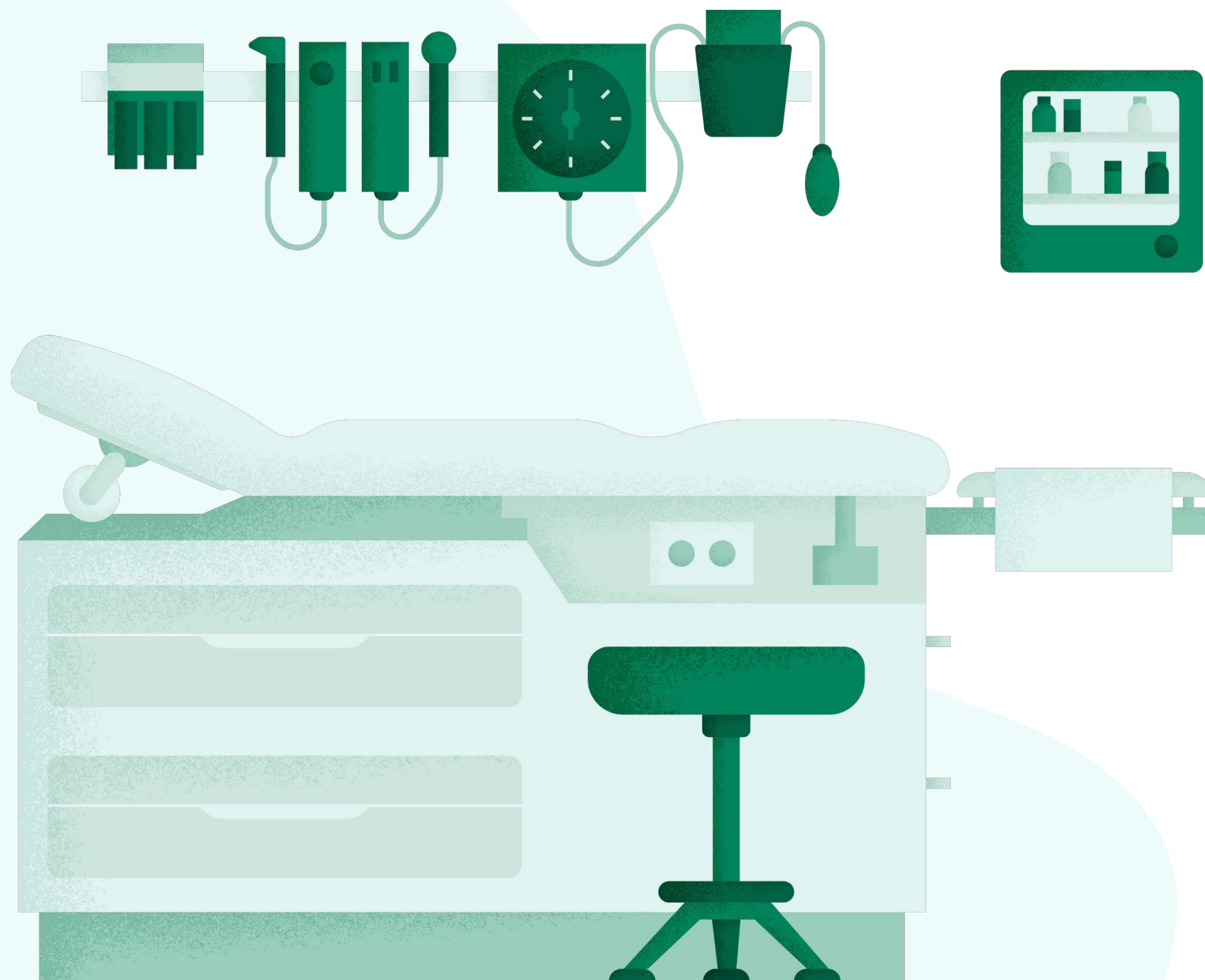
the shift to value-based care

The introduction of the Affordable Care Act in 2010 incentivized healthcare organizations to shift their focus from volume of care to value provided. This legislation paved the way for healthcare organizations to switch from traditional fee-for-service (FFS) models to value-based care (VBC) and Population Health Management (PHM) models. These healthcare delivery models emphasize high-quality, efficient, and patient-centered care. The Alternative Payment Model (APM) framework was created to move payments away from FFS, reduce the total cost of care, and improve care quality.

VBC and PHM models emphasize patient-centered care. To provide the experiences patients demand, organizations must clearly understand each patient's needs, preferences, and care history. Patient-centered care aims to reduce hospital admissions, improve chronic care management, and create better health outcomes in a more affordable structure. By prioritizing the patient experience, healthcare organizations can unlock the true potential of patient-centered care, leading to a healthier, more empowered population.

acronyms in order of appearance:

value-based care	VBC
fee-for-service	FFS
population health management	PHM
alternative payment model	APM
medicare advantage	MA
medicare shared savings program	MSSP
pay for performance	P4P
customer relationship management	CRM
social determinants of health	SDOH
return on investment	ROI



incentivizing proactive vs. reactive care

Unlike FFS models, VBC and PHM emphasize proactive care, aiming to reduce the need for expensive acute care by rewarding preventative care that keeps patients healthy. VBC models, such as Medicare Advantage (MA) or Medicare Shared Savings Program (MSSP), reward providers for delivering better patient outcomes based on metrics like Annual Wellness Visits, Chronic Disease Management, and lower emergency room visit numbers. As organizations improve patient experiences through tailored outreach, meaningful interactions, and consistent care, they are rewarded through their VBC contracts.

Compensation is based on various models that measure the quality of patient services. The most common value-based payment models are Pay-for-Performance (P4P) and Alternative Payment Models (APMs). P4P models compensate healthcare providers for meeting specific metrics on quality and efficiency, such as lowering blood pressure or counseling patients to stop smoking. APMs apply to specific clinical conditions, care episodes, or populations. Focusing on patient experience allows healthcare organizations to upgrade the quality of care, optimize VBC contracts, and improve every patient journey.

improve patient experience to meet preventative care and wellness goals

VBC efforts lack an effective method to improve patient behavior and care outcomes. Patients need guidance from trusted providers and proactive, personalized communication throughout their care journey to feel informed and take action. This requires unified, activated data accessible to all teams across the healthcare experience. Consolidated data enables holistic care and improved organizational metrics. Streamlining the healthcare experience is crucial for connecting patients to care and helping organizations achieve high-quality care and VBC goals.



The Cured by Innovaccer Healthcare Experience Platform (HXP) simplifies the care journey by integrating Customer Relationship Management (CRM), Social Determinants of Health (SDOH), and clinical data into Consumer360 views. This consolidation unifies teams for holistic care delivery across care management, marketing outreach, and contact center requests. HXP's AI capabilities, personalized journeys, and pre-built data integrations streamline the care experience to improve the quality of care, boost return on investment (ROI), and optimize VBC contracts.

unlock outcomes with pre-built patient journeys

100+ pre-built campaigns designed exclusively for all stages of the patient journey. These campaigns minimize the barriers to launch with ready-to-use strategies, audiences, and execution flows to automate the patient experience and deliver higher achievement of your VBC goals.



preventative care

- annual wellness visits
- primary care referral
- primary care acquisition

disease management

- diabetes
- hypertension
- chronic disease management

utilization management

- ED utilization
- ER avoidance
- hierarchical condition categories
- primary care
- urgent care
- transitional care management
- re-admittance
- risk adjustment

specialty

- cardiology CABG
- maternity care
- nephrology care
- orthopedic episodes

preventative care

annual wellness visits

Promote a shift toward patient-centered care by encouraging preventative care to achieve VBC metrics with annual wellness visit reminders.

key curation components

goal: educate and remind patients about the importance of an annual wellness visit

success metrics: increased annual wellness visit appointments

audience: patients who haven't had an annual wellness visit in the current calendar year

financial outcome: preventative care lowers cost associated with emergency visits

patient outcome: complete a health risk assessment and align on the level of care needed



\$250k

estimated revenue

44%

open rate

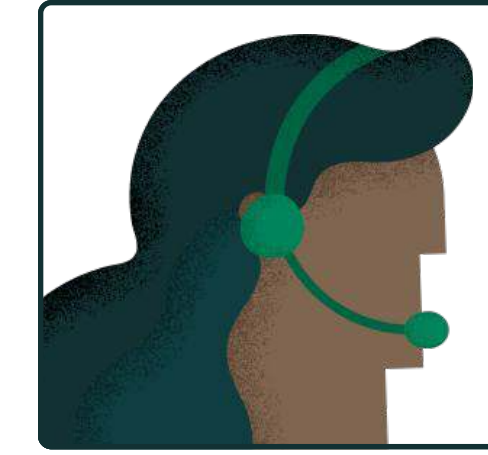


UnityPoint Health



preventative care


annual wellness visit journey



contact center agent reaches out to schedule appointment

patient alerted of upcoming annual wellness visit via email or sms

patient self-schedules, if not task is queued for contact center agent

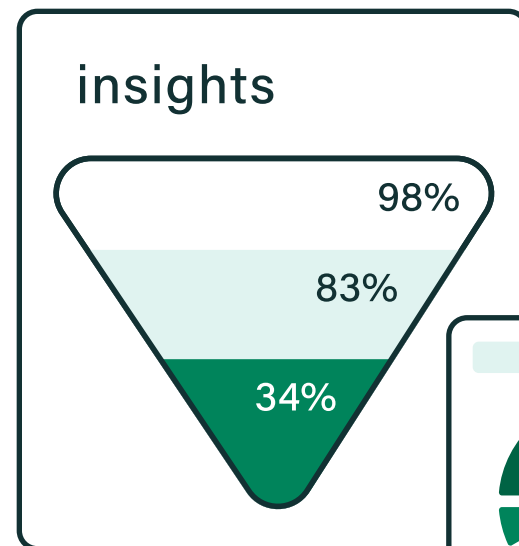
 **annual wellness visit:**
your due for your yearly checkin

appointment scheduled

patient receives follow-up email with additional resources

PCP emphasizes importance of routine screenings based on patient's needs

patient receives email or text reminder



ROI from appointment is calculated

patient receives email with suggested next appointment with their assigned PCP

contact center agent outreach for next appointment

follow up appointment scheduled

 automated by HXP

 clinical touchpoint

chronic disease care

chronic kidney disease journey

Prompt chronic kidney disease patients to adhere to care plans, medication needs, and appointments to drive better care outcomes and meet value goals.

key curation components

goal: engage with ckd patients to ensure medication adherence, regular check ups, dialysis and labs, and encourage healthy lifestyle

success metrics: reduction in ed visits, increased engagement with check ups and dialysis, navigating the system

audience: patients with egfr between 60 and 90 and comorbidities of hypertension and/or diabetes, or patients who are currently undergoing dialysis treatment

financial outcome: cost and utilization reduction, improved quality measures and with commercial payers a short-term value of \$5m, and a pltv estimation of \$119.8 m

patient outcome: consistent treatment for chronic care, reduction in ed visits

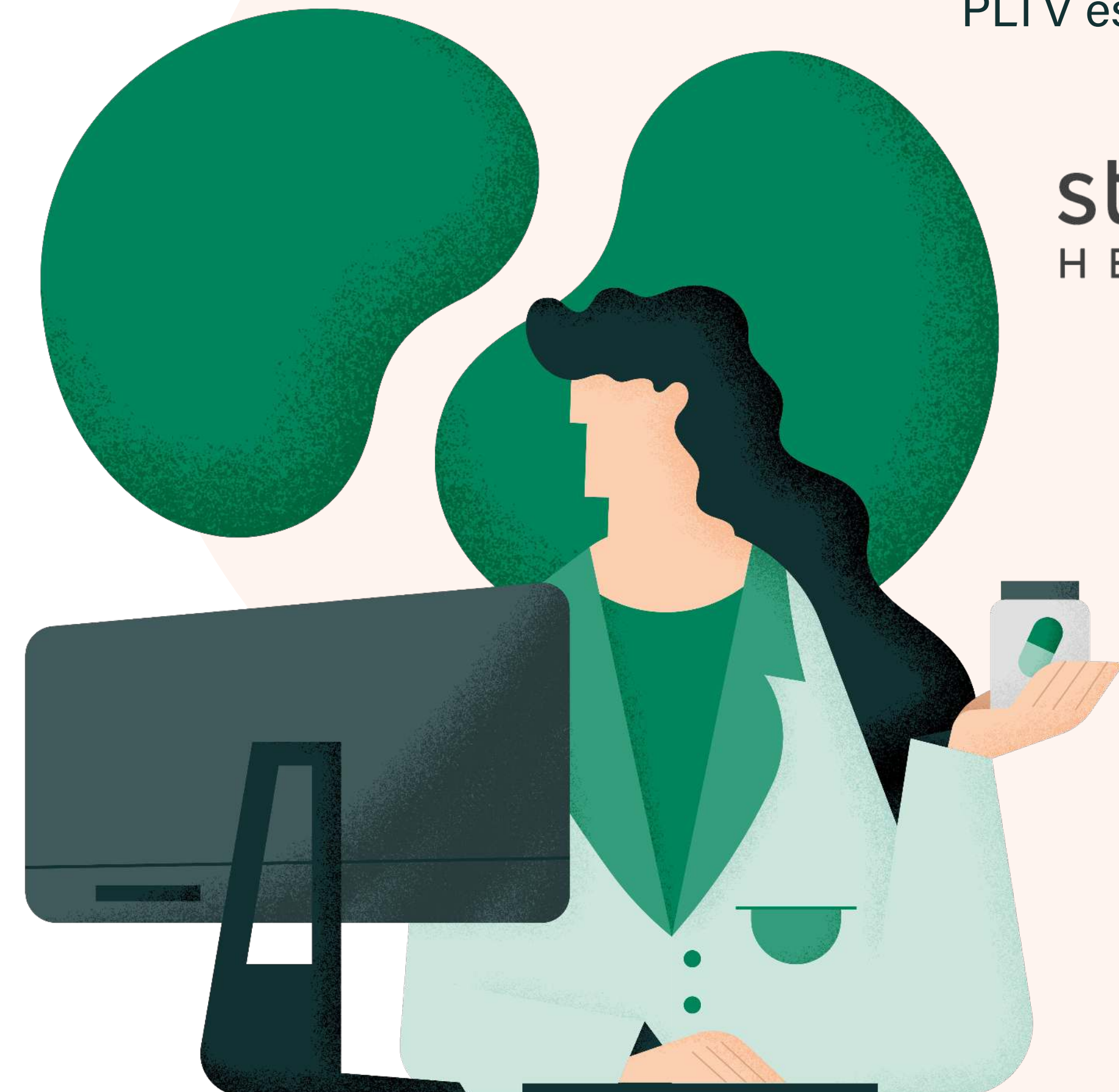


\$5m

short-term value

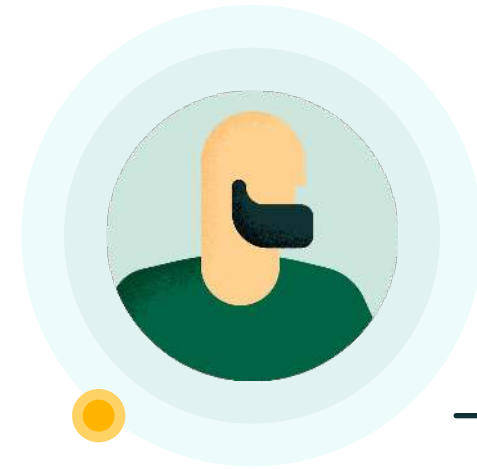
\$119.8m

PLTV estimation



chronic disease care

chronic kidney disease journey



patient identified at check-up as high-risk for chronic kidney disease (CKD)

patient receives appointment scheduling options in triage questionnaire from contact center

appointment is confirmed via email or text

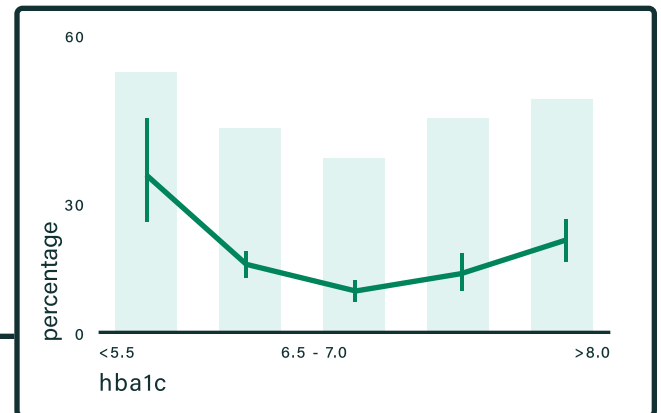


nephrologist runs comprehensive metabolic panel test, suggests lifestyle improvements, and presents medication options

patient receives follow-up email with lab results and detailed information on ckd care management

PCP refers patient to nephrologist and provides patient with glucometer to track blood sugar levels

PCP tests for increases in eGFR and HbA1C



referral: meet your nephrologist

patient receive follow-up email with lab results

care manager is assigned to patient based on lab results indicating CKD

107

care manager monitors glucometer readings to develop care plan and smart goals

patient is enrolled in email series focused on ckd lifestyle, medication, and care team information to schedule appointments for continuous monitoring

● automated by HXP

● clinical touchpoint



preventative screening

mammography journey

Transform patient outcomes with campaigns for mammography screening reminders. Drive contract adherence and meet financial goals while promoting life-changing preventative care.

key curation components

goal: raise awareness of breast cancer through education about screening, symptoms, and treatment

success metrics: increased mammography screening appointments

audience: patients between the age 50-74 who haven't had their mammography done in the last 2 years

financial outcome: 974 mammography appointments scheduled in a one week timeframe

patient outcome: consistently engages in preventative screenings for breast cancer

4%

decrease in time to encounter

363:1

margin-to-cost ratio

24.4%

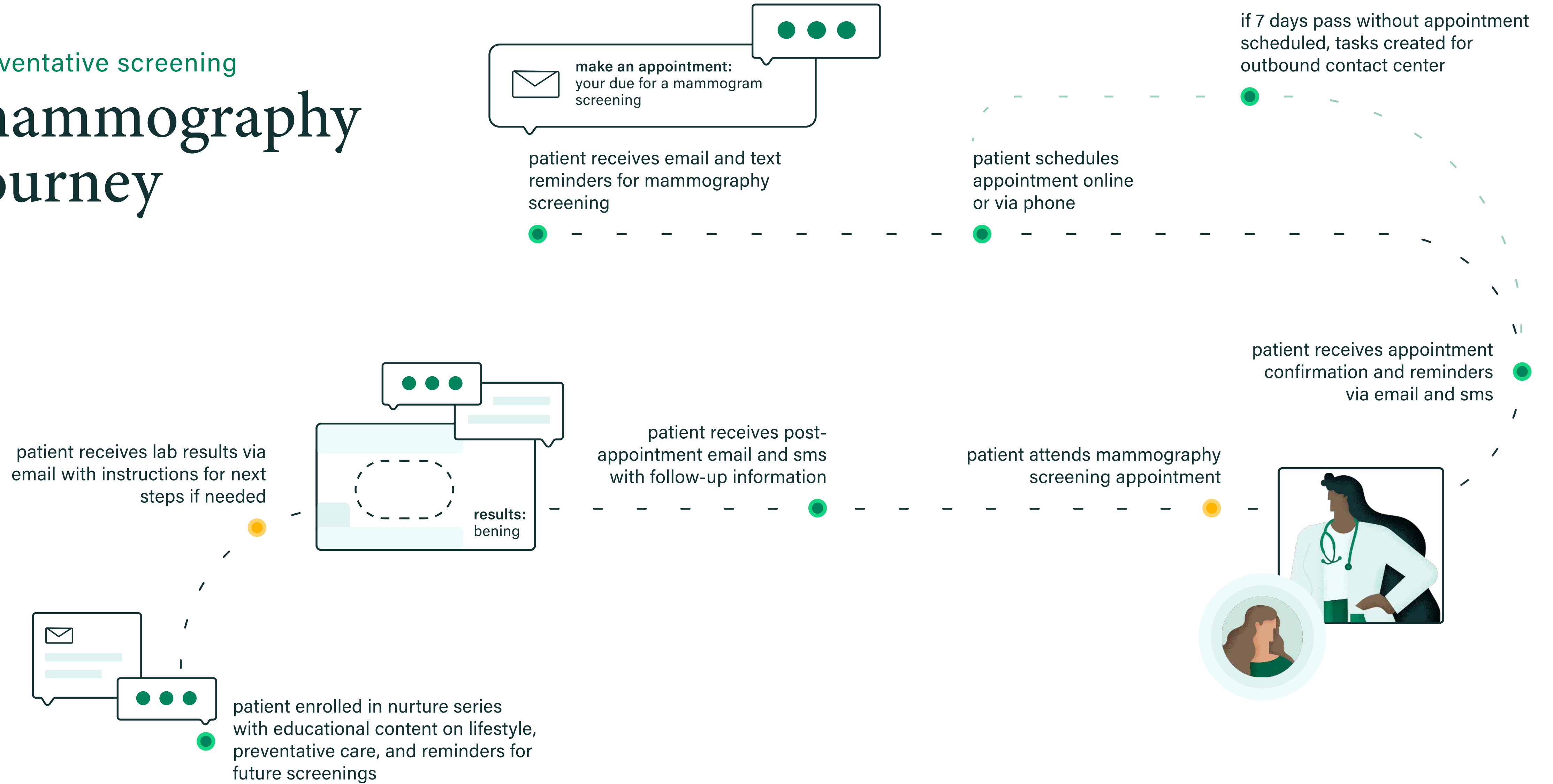
conversion rate

uhealth

An illustration featuring a doctor in a white lab coat with a green stethoscope, standing on the left. To the right are two women, one with brown hair and one with blonde hair, both wearing green tops. A large, flowing red ribbon, a symbol for breast cancer awareness, curves across the scene from the right towards the center. The background consists of soft, overlapping circles in light blue and light orange.

preventative screening

mammography journey



● automated by HXP

● clinical touchpoint

transitional case management

readmit avoidance journey

Connect with patients after discharge to prevent complications, improve outcomes, and maintain contract guidelines, reducing readmissions and ensuring seamless transitions from hospital to home.

key curation components

goal: ensure a smooth transition from hospital to home to prevent complications or readmissions

success metrics: reduced readmissions to the ed

audience: patient with an ed or ip discharge within the last 30 days

financial outcome: adherence to contracts

patient outcome: improvement in overall patient well-being, and the prevention of complications that could potentially arise during the transition from hospital to home, ensuring the home health/post-hospitalization care is provided

\$3 m

in generated value

23%

reduction in 30-day readmissions

CHES
HEALTH SOLUTIONS



built for healthcare, backed by experts

The Cured by Innovaccer Healthcare Experience Platform (HXP) addresses the missing component for many VBC organizations: an effective method to shift patient behavior and improve care outcomes. With HXP, you can simplify journey management, ensure high-quality care, and realize VBC goals.

- optimize VBC contracts
- boost financial performance
- create quality patient experiences
- drive patient action toward preventative care improve population health



HXP

the healthcare experience platform

One platform to power healthcare experience - with direct automation between EHR, contact center, digital marketing, and CRM solutions. Seamlessly integrate clinical and consumer-facing tools with HXP.

- AI trained in consumer experience
- market intelligence
- pre-built data integration
- contact center workflows
- personalized journeys

[request a personalized demo of hxp today ↗](#)