

ApolloMed ACO Expands, Improves Care Coordination with Integrated Healthcare Holdings Agreement

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Apollo Medical Holdings, Inc. (ApolloMed) and Santa Ana-based Integrated Healthcare Holdings, Inc. (IHHI) aim to raise the bar for patient care coordination with an eye to providing their Accountable Care Organization's patients with better outcomes at a lower cost. ApolloMed ACO and IHHI will leverage their combined strengths of hospital management, hospitalist medicine, management of high

risk patients, care coordination and post-acute care to enhance patient care through improved patient engagement.

Kyle Francis, Executive Vice President and CFO of Apollo Medical Holdings, provided insight and feedback on the partnership. "Our ACO model works extremely well throughout Southern California. We were one of the first Californian groups approved to participate as an ACO under the Medicare Shared Savings Program. We've been building our presence in Southern California and our partnership with IHHI; this is a natural progression in our expansion efforts. IHHI is a well-known four hospital network in Orange County."

As Mr. Francis explained, local physicians gain access to resources and tools that a larger network provides, which include integrated IT systems that assist the primary care physicians to provide a higher level of service to their Medicare and Medi-Medi Fee-For-Service (FFS) patients. Through ApolloMed ACO

and its healthcare partners, primary care physicians and their patients gain access to case management support, liaisons for drug protocols and management, care clinics, and home health. "Prior to the ACO, many of these physicians were on their own and didn't have access to the resources and the support the ACO can provide. Our ACO model alleviates day-to-day burdens faced by primary care physicians and their staff, allowing the physician to focus on actual patient care."

One of the quickest ways a partnership like IHHI and ApolloMed ACO helps curb costs and improves care efficiency is through the implementation of integrated IT solutions, such as a central patient database. This provides primary care physicians real-time access to patient data to see labs tests, specialist visits, pharmacy orders and other recent medical events. The ACO uses claims data and HCC coding information from CMS to identify patients with multiple chronic conditions and then places those

patients in disease management programs. The integrated IT system is readily available to care providers and allows a patient's care team to ensure the best care and support is given to each patient. Improving how care coordination is performed improves care efficiency, so quality and savings begin to add up. Doctors realize the reward (reduced error potential, time saved) and patients experience it (improved health).

The biggest challenge? Patient engagement. "Many patients are simply unaware of the resources available to them," Mr. Francis said. "We're providing education on how they can better manage their care, showing that there are different options available. They learn what's appropriate for a particular type of health issue, and that there's no need to default to the ER."

The ACO model readily eliminates excess costs and duplicative treatments a patient may receive. It also assures better management of higher acuity patients that truly need a higher level of coordinated

care to manage their chronic conditions. Care coordination across the full spectrum of a patient's needs, like post-discharge follow-up appointments, medicine reconciliation and house calls, helps improve patient care and satisfaction. By improving patient engagement through frequent communication, patient care will lead to improved outcomes.

As Mr. Francis emphasized, "Our aim is not to limit access or deny medical care, our goal is to make sure that the patient receives the care they need using evidence based medicine protocols, which tends to be the most efficient care. Making the patients aware of healthcare resources and care options, like home health, clinics and urgent care, guides them with the help of their primary care physicians and care managers to make appropriate care decisions." Such attentiveness is critical in reducing the 30-day readmission rate for recently discharged patients. Key attributes include appropriate communication with the primary care physicians

and completion of a post-discharge medication reconciliation in a timely manner, increasing the probability for a successful recovery and improved outcomes.

Through the IHHI and ApolloMed partnership, patients and physicians benefit from the organizations' expanded reach and ability to offer a greater, more effective breadth of care coordination services. "We've already had great feedback from our local physicians," Mr. Francis shared. "The ACO provides resources to help manage the higher acuity patients." All in all, the two organizations believe that the ACO model helps assure no one falls through the cracks, because great care coordination brings all the pieces together: hospital, specialist, pharmacy, home health, primary care, patient and family. Better communication leading to better care decisions. All of which leads to a healthier population.

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