**P3 INSIGHTS**

better healthcare outcomes

**acg**

JOHNS HOPKINS

POPULATION HEALTH MANAGEMENT THROUGH
CARE COORDINATION AND INTERVENTIONS

"Using the ACG System, our population health management approach led to decreases in hospitalizations, emergency room visits, readmissions, and total cost of care (-$1,643 per beneficiary per quarter)."

– Melissa Sherry, MPH, CPH
Director, Population Health
Innovation and Transformation
Johns Hopkins HealthCare

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CASE STUDY

Jointly owned by the Johns Hopkins Health System and the Johns Hopkins University School of Medicine, Johns Hopkins HealthCare (JHHC) develops and manages medical care contracts with organizations, government programs, and health care providers for more than 350,000 plan members. A dedicated advocate for client-employers, patient-members and physician-providers, JHHC believes that collaboration between the three creates optimal results for patients and healthy financial outcomes for providers and employers.

## OVERVIEW

Population health management is the process of implementing strategies to address population health needs and control problems at the population level. Population health at JHHC represents a comprehensive approach to health care considering the distribution of health outcomes within a population, and the health determinants that influence that distribution as well as policies and interventions.

## CHALLENGES

- Clinical care has a limited effect on the health of populations. Social and economic factors as well as behaviors are key areas often ignored when trying to change health outcomes for the better.
- Access to quality data from multiple sources is needed to analyze and understand conditions that cause outcomes disparities within populations so that actionable interventions can be deployed to reduce those disparities.

## METHODS USED

The ACG System's inclusion in the population health management structure allows for a better understanding of health and risk patterns:

- Predictive modeling based on claims, labs, age/gender, resource use, morbidity and medication patterns, and cost burden
- Segmentation of the population into subgroups based on risk scores to aid in the identification of primary, secondary, and tertiary intervention opportunities
- Care coordination monitoring across the system and cost analysis
- Evaluation of an intervention post-implementation to measure improvement and change in morbidity risk and health care utilization

## RESULTS

ACG System output is successfully used to develop interventions and monitor those which best serve the population based on data-supported population health information. When used in an underserved urban population in Baltimore City, the JHHC population health management approach led to:

- Creation of multiple programs aimed at clinical, behavioral, and social factors of health disparities
- Decrease in total cost of care for all Medicaid beneficiaries (-$1,643 per beneficiary per quarter)
- Decreases in hospitalizations, emergency room visits, and readmissions for all Medicaid beneficiaries
- Decrease in emergency room visits for dual eligible beneficiaries
- Decreases in hospitalizations, emergency room visits, and readmissions for those enrolled only in Medicaid
- Decrease in potentially avoidable hospitalizations for all Medicaid beneficiaries