

TCPI Exemplary Practice Performance Summary, April 2019

OrthoArizona

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Innovative Use of Evidence-based Protocols in Orthopedic Care Practice

OrthoArizona (OAZ) is a physician owned private practice, comprised of a team of orthopedic specialists and primary care physicians specializing in all areas of orthopedic care including sports medicine, spine, shoulder and elbow, hand and wrist, hip and knee, foot and ankle, podiatry, pediatrics, trauma, industrial injuries and workers' compensation. OAZ has over 20 offices spread across the Phoenix Metropolitan area with more than 70 orthopedic specialists, each focused on quality care and exceptional customer service. Since 1994, we have been providing comprehensive orthopedic care of the highest quality to our community with extraordinary compassion.

OrthoArizona achieved success on TCPI Aims 2 and 3 by improving health outcomes and care processes and reduction of unnecessary hospital use through innovative use of evidence-based protocols and progressive infrastructure including shared services that are nontraditional in orthopedic care practices. By implementing changes to workflow and increasing the resource infrastructure around best practices, we have improved comprehensive care for our patients, resulting in decreased overall spend per episode of care, and reducing the need for post-acute care utilization.

Evolving our Practice

OrthoArizona's mission is to provide comprehensive orthopedic care of the highest quality to our community. To meet our mission, OAZ physicians utilize evidence-based medicine to ensure delivery of effective and optimal care that supports our patient promise.

In 2016, we decided to voluntarily participate in CMS' Bundled Payment for Care Improvement Initiative (BPCI). This program is designed to improve patient outcomes by putting an end to fractured care throughout the 3 months following a major surgery. Over the life of our involvement in the program, our organization built an infrastructure and processes to further support best practices and evidence-based medicine. Although our participation in this program only involves a subset of traditional Medicare patients undergoing a Major Joint Replacement of the Lower Extremity (approximately 1500-1700 patients annually), we have created processes that drive improvements in care for the entire population.

OrthoArizona started care transformation by targeting changes to how we look at patients. In the initial phase of BPCI we came to realize that to meet our goals in creating a seamless episode we would have to look at each patient individually and holistically.

Our initial infrastructure for success started with the foundation of

- Hiring dedicated Nurse Case Managers (NCM)
- Creating modifiable risk factor guidelines based upon research
- Establishing a Steering Committee to oversee and evolve program

- Championing Physician engagement

Case Management

Our dedicated Nurse Case Managers help our BPCI patients navigate through their episode of care from three weeks preoperatively through surgery as well as the three-month post-surgical window. Through education, discharge planning, and support these patients gain confidence, knowledge about their procedure, expectations of their recovery and support for questions or concerns.

The benefits of this extra layer of patient touch are twofold. First, case managers are tracking utilization management and outcomes. Second, the patient has a single touch point who acts as advocate and conduit to patient and all their providers.

Modifiable Risk Factor Guidelines

A pillar for success in BPCI is the holistic treatment of the patient. OrthoArizona believes optimization preoperatively leads to better outcomes post-operatively. Our committee knew it would be important to create appropriate surgical guidelines that would also address modifiable risk factors. Review of evidence-based research drove our Steering Committee to establish 3 guidelines that align with best practices and support getting the best possible outcome for our patients. These modifiable risk factors include:

- Hemoglobin A1c < 7.5
- Body Mass Index < 40
- Nonsmoker within 3 weeks of surgery

Along with setting these guidelines, our committee also created a blinded process for indication review of complex cases. This process drives unbiased conversations about care and plans for best outcomes.

Steering Committee and Physician Engagement

This committee is comprised of physicians from all regions of the organization. Monthly committee meetings review CMS program and timeline updates, internal updates or needs, performance trending, financials and high spend case studies. Updates are sent out after all meetings to the entire organization. The communication of updates and participation of all regions of our organization leads to carryover education to non-committee physicians and teams.

Proven Success

Three years into the program, data demonstrates our infrastructure and practices have succeeded in transforming our practice for the better. Following best practices such as preoperative optimization, patient education, physician and patient engagement along with case management have led us to a sustained reduction in cost per case. At inception, OAZ cost per episode was more than \$21,000 on average (Q1 2016) per Major Joint Replacement of the Lower Extremity. As of most recent data from

CMS (Q1 2018), our average episode spend is around \$18,500 (Figure 1). Additionally, OrthoArizona's readmission rate in this population is most often below the set benchmark of 5%. Over the life of our program a reduction in utilization of skilled nursing for patients has gone from 24% to most recently 10% (Figure 2). We have also noted a significantly decreased need for home health care with utilization rates dropping from 62% to 20% (Figure 3).

Figure 1. Average Cost/Case

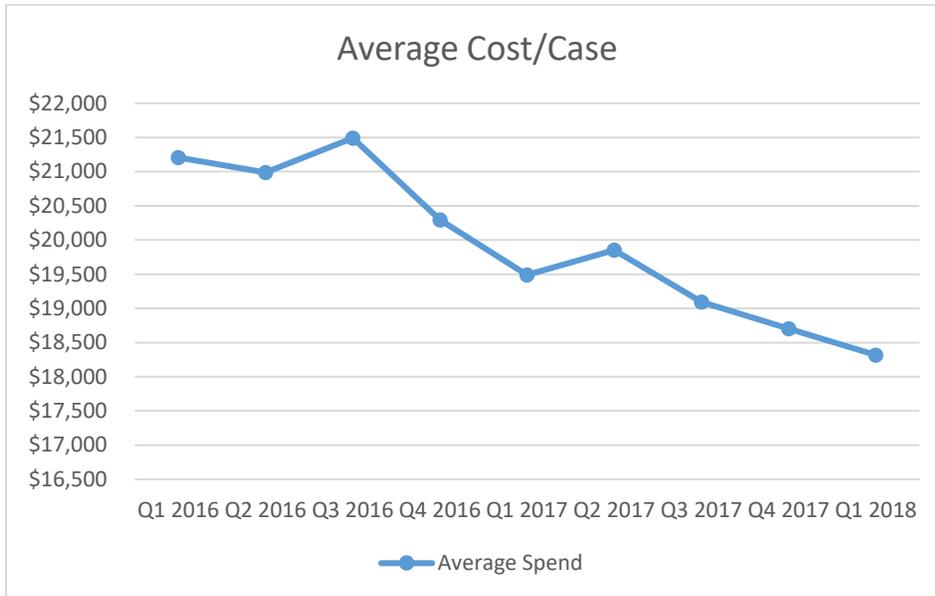


Figure 2. Skilled Nursing Utilization

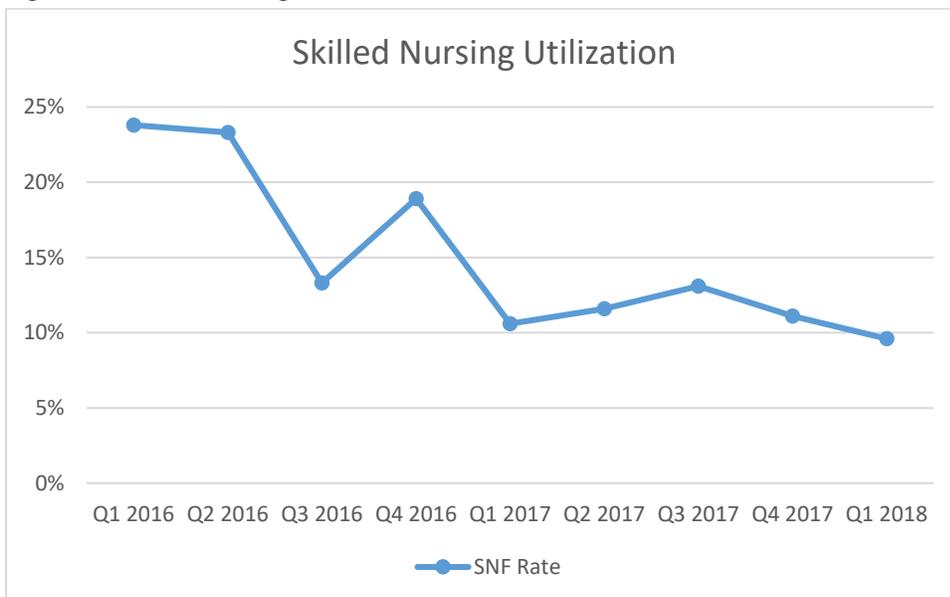
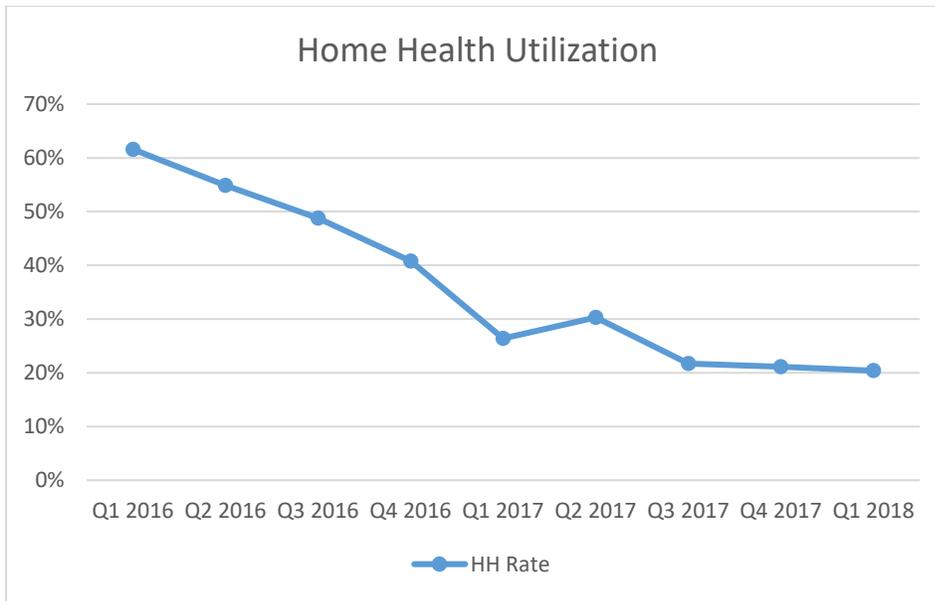


Figure 3. Home Health Utilization



Evolution

Since program inception at OrthoArizona, we have upgraded our solid infrastructure to ensure we evolve with health care and our patient’s needs. Recent innovative additions to the program in the last 12 months include adding a program manager and an integrated health and wellness program. The Program Manager has the primary responsibility to analyze claims and real time data trends to identify opportunities for improvement. The Program Manager works closely with the organizational leaders and physicians to guide program changes, provide regular communication on updates, and act as a resource for education about changes to the program or processes.

OrthoArizona recognized it was not enough to have guidelines for modifiable risk factors. It was also important to our organization that we address those risk factors with our patients to improve their health in preparation for potential surgery on non-surgical management of their orthopedic issues. As such, we have also proudly added a shared service line practicing integrated health and wellness that fits a great need in our organization, Bundled Payment for Care Improvement Initiative (BPCI) and non BPCI patients.

Integrated Health and Wellness Services

It is our goal to provide the best possible outcome with the fewest complications. To meet those goals, OrthoArizona has adopted safe surgical parameters that can be modified prior to surgery to minimize our patient’s risk and maximize the outcome. Studies have shown that certain parameters put patients at an increased risk for complications and have proved to lead to infection and other problems following surgery. To assist with optimization, we implemented a health and wellness line.

OrthoArizona provides a level of integrative healthcare combining the latest research in evidence-based medicine in combination with complimentary therapies to optimize our patients' results. We work with patients to understand their concerns and we take the time necessary to understand their needs as fully as possible.

OrthoArizona's health and wellness team provides an individualized comprehensive treatment to help improve BMI and metabolic health to support comprehensive care for optimizing outcomes for our patients' orthopedic conditions. Our comprehensive care plan including the four pillars for long term success utilizing evidence-based medicine including FDA approved anti-obesity medication when clinically indicated, nutritional recommendations, improvement in physical activity, and assistant with behavioral changes to help improve outcomes for long term success.

We have found that when we take the time to listen to patient's goals, needs, and concerns, we are able to adapt our knowledge and understanding to their beliefs and goals to the best of our ability, while maintaining sound medical practice principles.

Going Forward

Although we have built a sound and beneficial infrastructure, we know that healthcare is forever evolving. To continue to achieve success in value-based programs and create the best possible outcomes for our patients we have visionary goals for our practice. These include:

- Expanding our shared service lines to include more helpful branches of medicine that align with health and wellness
- Growing our Case Management team to support more patients
- Adding to our guidelines to include additional modifiable risk factors
- Applying appropriate guidelines to other subsets of elective procedures

OrthoArizona anticipates continuing to grow and adjusting our practice for the better of our patients and musculoskeletal medicine.

OrthoArizona is an active participant of the Practice Innovation Institute (Pii), Arizona's Practice Transformation Network.

As of September 2018, OrthoArizona has completed all 5 Phases of Transformation.



Practice Innovation Institute
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