THE PRINCIPLES OF POPULATION HEALTH MANAGEMENT

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DEFINING POPULATION HEALTH MANAGEMENT (PHM)

- A network of providers who take quality, clinical care and financial risk on a set population, defined by contracts and geography.
- A PHM system aligns clinical outcomes, care experience and financial incentives for patients, providers and payors.
PHM GUIDING PRINCIPLES

- Treat every patient as family
- Spend each dollar as if it’s your own
- Team Approach
THE INTEGRATED CARE TEAM

Nurse Practitioner/Physician's Assistant
Medical Doctor
Dietician
Pharmacist
Medical Assistant
Nurse Navigator/Care Manager
Behavioral Health
Social Worker
Receptionist
FUNDAMENTALS OF PHM

- Access
- Provider/Physician Ownership
- Population Engagement
- Adopt Best Clinical Practice
- Data Reporting
- Health Promotion and Disease Prevention, Rather Than Disease Management Alone
- Risk Stratification Through Understanding Your Population’s Disease Burden
- Integration and Coordination Throughout the Continuum of Care
INDISPENSABLE COMPONENTS OF PHM

Engaged Providers
Empowered Patients
Coherent, Easy to Use, Trusted Data Analytics
THE ROLE OF TECHNOLOGY AND INFORMATION IN PHM

You must have coherent, comprehensive data to engage in PHM; including:

- Ability to Define the Population
- Documentation of the Starting Point for Cost, Utilization and Quality
- Data Mining Ability for Providers and Patients
- Consistent Metrics Reporting

Sources of Data
- EHR
- Claims
- Other Providers/Referrals
- Analytics and Reporting
BUILDING A SUCCESSFUL PHM SYSTEM

- Start with a Contract or Commitment for a Defined Population
- Build the Culture Based on the Guiding Principles and the Fundamentals
- Build the Tools and Vehicle for Communication and Integration
- Build the Team and Infrastructure Necessary for the Population
SECRET SAUCE

- Patient Centered
- Provider/Clinician Led
- Population Focused
- Operating Within the Construct of a Patient Centered Medical Home
- Coherent, Easy to Use, Trusted Information System
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<tr>
<th>OBSTACLES OF PHM</th>
<th>BENEFITS OF PHM</th>
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<tr>
<td>Culture Change</td>
<td>Aligned Social, Moral and Economic Incentives Between Patients, Providers and Systems</td>
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<td>Appears to be Overwhelming</td>
<td>Manages/Reduces Physician Burnout</td>
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<td>Financial Risk of Moving from Fee-for-Service to Fee-for-Value</td>
<td>Improves Patient and Provider Experience</td>
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<td>Lack of Clarity/Lack of Comfort with a Value Based Model</td>
<td>Decreases Medical Errors</td>
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<td>Improves Clinical Outcomes</td>
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<td>Control Health Care Expenditures</td>
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