

Value Performance Report 2012

Driving Quality Through Clinical Integration

2012 Clinical Integration Results





A Clear Vision

At Covenant Health Partners, our vision is to be an integrated network in which physicians and hospitals align to enhance quality and accountability in clinical outcomes and patient experience across the continuum of care.





Letters to Stakeholders

Covenant Health is proud to join with Covenant Health Partners to work toward the achievement of the strategic objectives that have been set for the entire health system. CHP plays an integral role in furthering our efforts toward physician engagement, population health management, and the development and implementation of a more comprehensive continuum of care. These initiatives are all aimed at creating better care and greater value for every patient. The physicians of CHP are leading the charge as we enter this new era of healthcare reform marked by changing delivery systems and new financial models.

We are counting on their insight and leadership to help us learn how to best provide care for the individual and the population we serve as a whole. Their work sets the foundation for our three in three covenant to be one of the premier healthcare systems by 2015, known for our Christian service, clinical excellence and commitment to healthy communities. I am proud of the work they are doing and excited to see the results these physicians will produce in the coming years.



Sincerely,

Richard H. Parks
Chief Executive Officer
Covenant Health

Over the past year, the physician members of Covenant Health Partners have continued to integrate, innovate and advance toward providing the highest quality of medical care. During the 2012 fiscal year, a significant number of our physician members surpassed our metrics thresholds, fueling our commitment to improving the level of care provided to Covenant Health Partners' patients. Our membership has expanded as well, including new specialties, reaching over 320 physicians.

As a result of the success and growing importance of Covenant Health Partners, the Covenant Health Board and Administration have asked that we lead the effort of transforming Covenant Health into an organization that can effectively manage the health of defined populations. One of the highlights of the strategic plan states that we will successfully manage the risk and total health for defined populations through a transformed care model. Leading this effort will require us to move more deliberately towards becoming an organization, such as an ACO, where the value of high quality care is seamlessly transitioned across the breadth of the continuum of care. We must continue to develop the technologies, infrastructure, and physician led behavioral changes that will allow Covenant Health to be successful. This transition is the next phase for the Clinical Integration model and the future of the healthcare industry, and an essential endeavor in providing the best care for patients in the society of tomorrow.

It is our hope that the strides made in developing a comprehensive transformed care model will strengthen the symbiotic relationship that exists between our providers and our patients. We are thankful for the responsibility to serve the surrounding community and region. As our organization grows and develops, we will continue to focus on the health of our patients and the value of the care we provide.

Sincerely,

John A. Grigson
Chief Executive Officer
Covenant Health Partners



About Our Organization

In 2007, a group of physicians with a shared vision began to collaborate in order to provide the community with the highest quality healthcare. Aligning with Covenant Health, this joint venture became Covenant Health Partners, an organization dedicated to improving quality processes and outcomes leading to better care and decreased cost.

Today, CHP assists physicians in the transition from volume-based to value-based care through various programs. These programs are comprised of quality goals and measures across multiple care settings.





Physician Performance Comparison

Covenant Health Partners & Non-Covenant Health Partners

Year Ended June 30

2012

2011

2010

Quality Summary

3 Day Readmission Rate	CHP	1.48%	1.39%	1.40%
	Non-CHP	1.85%	1.44%	1.17%
7 Day Readmission Rate	CHP	3.06%	3.00%	2.80%
	Non-CHP	3.23%	3.69%	2.61%
30 Day Readmissions Rate	CHP	7.84%	7.93%	7.74%
	Non-CHP	8.69%	8.89%	8.21%
30 Day Readmissions Rate Same Diagnosis	CHP	0.86%	0.63%	0.71%
	Non-CHP	0.90%	0.88%	0.64%
% Complications of Care	CHP	3.89%	3.86%	3.22%
	Non-CHP	4.10%	3.95%	3.48%

Utilization Summary

Inpatient Case Volume	CHP	55%	51%	51%
	Non-CHP	45%	49%	49%

Covenant Health Partners
Related Savings Generated

\$1,892,275

\$1,681,726

\$2,907,107



Recent Accomplishments

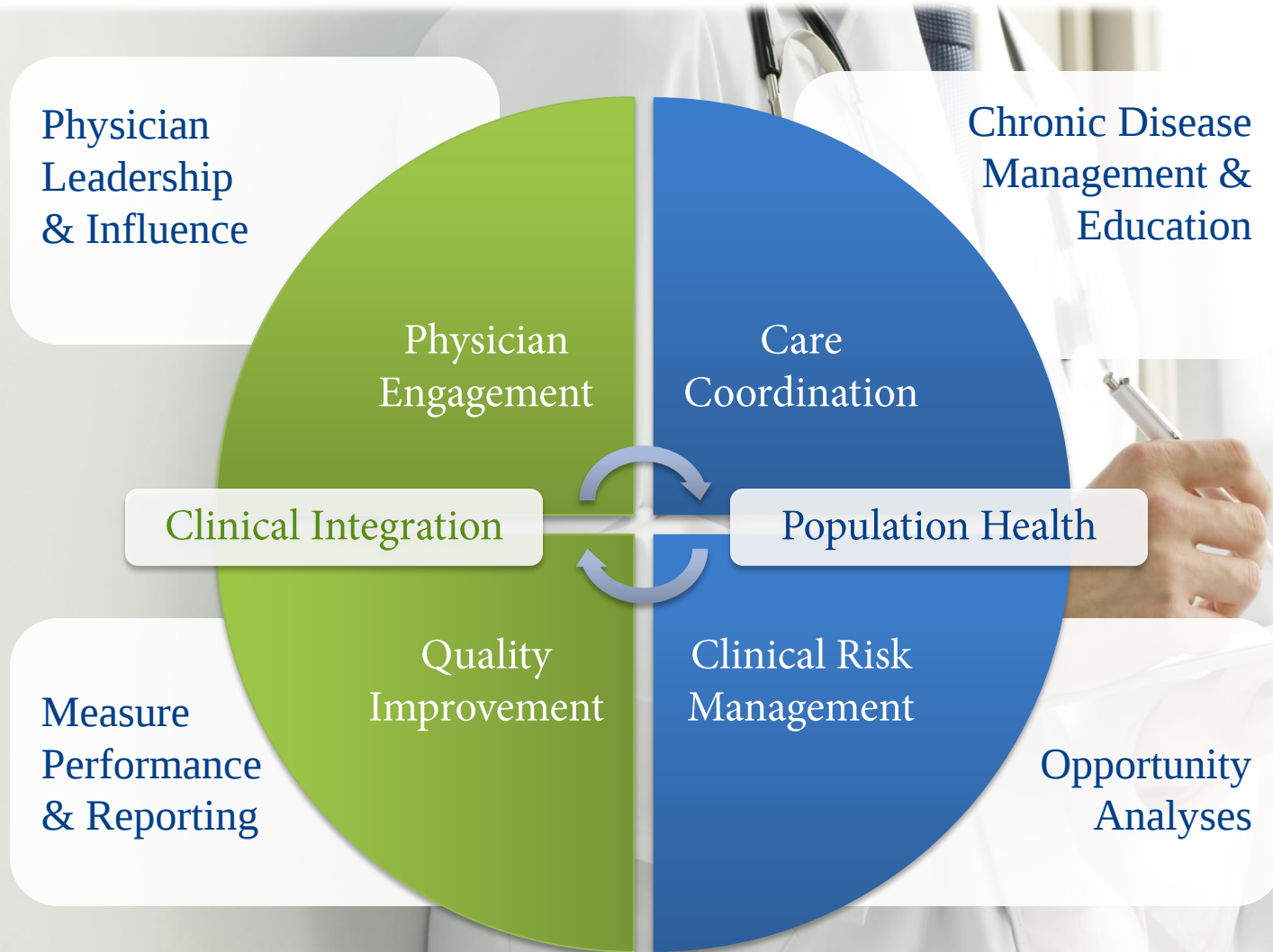
- ✓ Engaged in Population Health Management
- ✓ Expanded Physician Membership & Specialties
- ✓ Implemented Patient Navigation & Transitional Care Program
- ✓ Designated by Covenant Health as Vehicle for HealthCare Reform & Affordable Care Act
- ✓ Hospital Efficiency Program Generated Savings for 5th Consecutive Year





Covenant Health Partners

Cornerstones





The Cornerstones of CHP

Clinical Integration

Physician Engagement

A high level of physician engagement is critical to the effectiveness of this organization. At CHP, our physicians have a strong dedication to enhancing every aspect of medicine.

Quality Management

Our organization is comprised of an elite group of physicians who believe providing the highest quality of care is the only option. As iron sharpens iron, our physicians sharpen each other, ensuring that our organization's performance is operating at the highest level of quality.

Population Health

Clinical Risk Management

As the healthcare environment becomes increasingly complex, it is vital that we identify opportunities where enhancements can be made in both quality and utilization. CHP uses a number of different tools to create healthier communities.

Patient Navigation & Transitional Care

Patient care and satisfaction is CHP's most important objective. It is our belief that meeting the patients where they are in the continuum and walking with them through the remainder of the journey is the best way to have a positive impact, improve quality of life, and build satisfaction.



The Clinical Integration Benefit





Building on a Platform of Clinical Integration



Clinical integration allows healthcare efforts to be effectively and efficiently coordinated in order to maximize the benefit patients receive.

At CHP, clinical integration provides our physicians and Covenant Health with aligned incentives and the opportunity to share the cost of infrastructure development. By supplying physicians with a vast database of inpatient and outpatient data, our clinically integrated network responds to the demands of the marketplace by adding value to the medical consumer through enhanced quality and decreased cost.

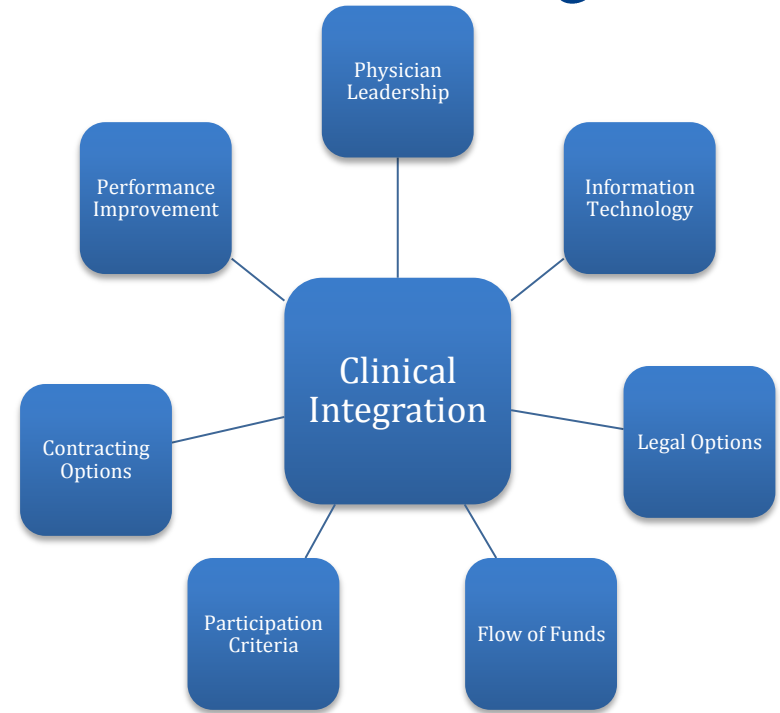
The advantages of clinical integration balance additional demands on physicians through the opportunity to create and share in cost savings.



Building on a Platform of Clinical Integration

Key Components of Clinical Integration

- ✓ Collaboration between hospitals and physicians (both independent and employed)
- ✓ Improving quality and efficiency in care through measurable outcomes
- ✓ Using a robust IT infrastructure to support data-driven performance improvement
- ✓ Aligned financial incentives





Physician Engagement is the Foundation

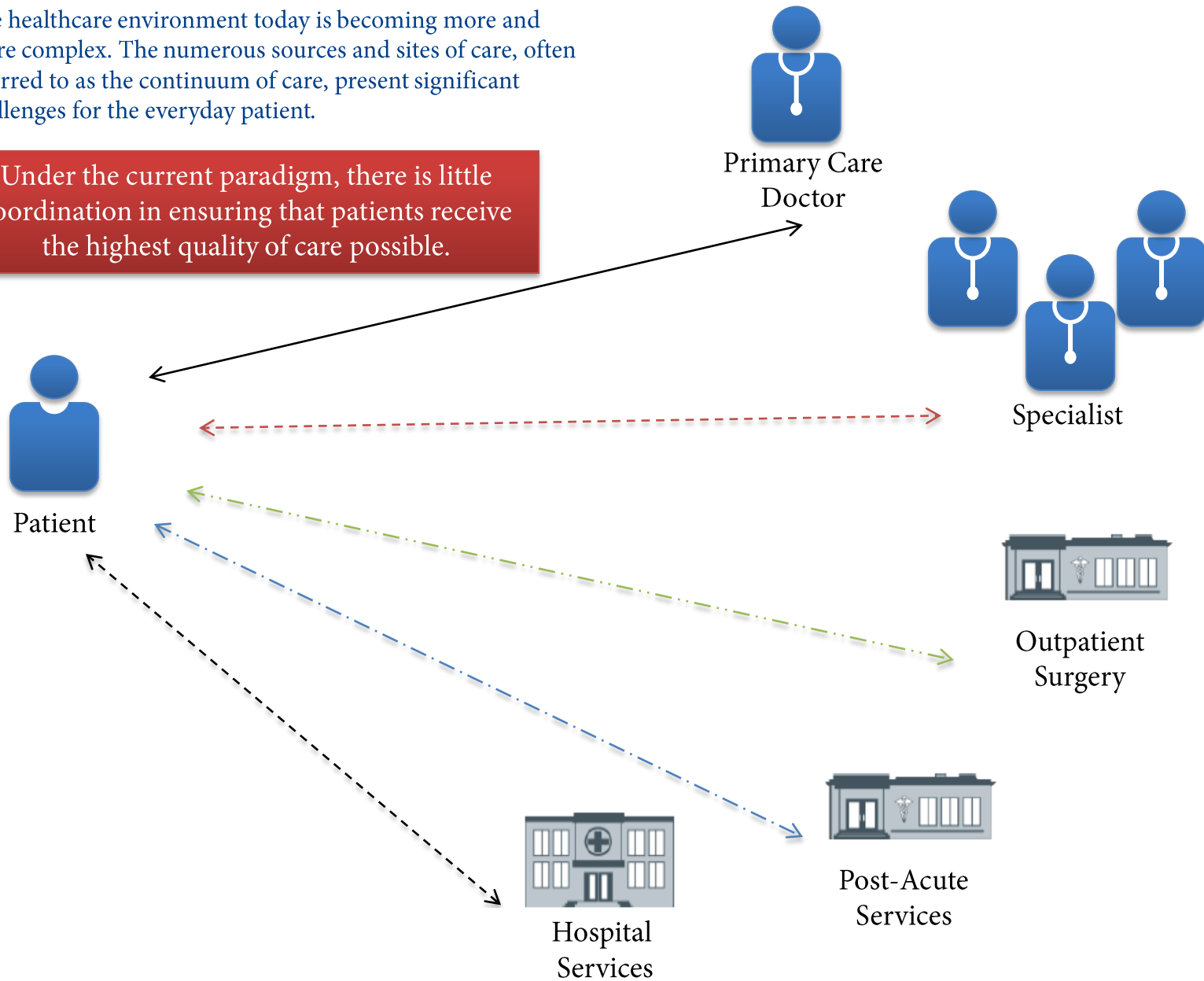
At Covenant Health Partners, one of our core components is physician engagement. The main way physicians get involved in CHP is by serving on one of our committees. Clinical leadership and influence on these committees plays an integral role in the achievement of the strategic initiatives of Covenant Health Partners. From guiding the development of measures to process improvements, CHP physicians light the path for our future.



Traditional Health Continuum

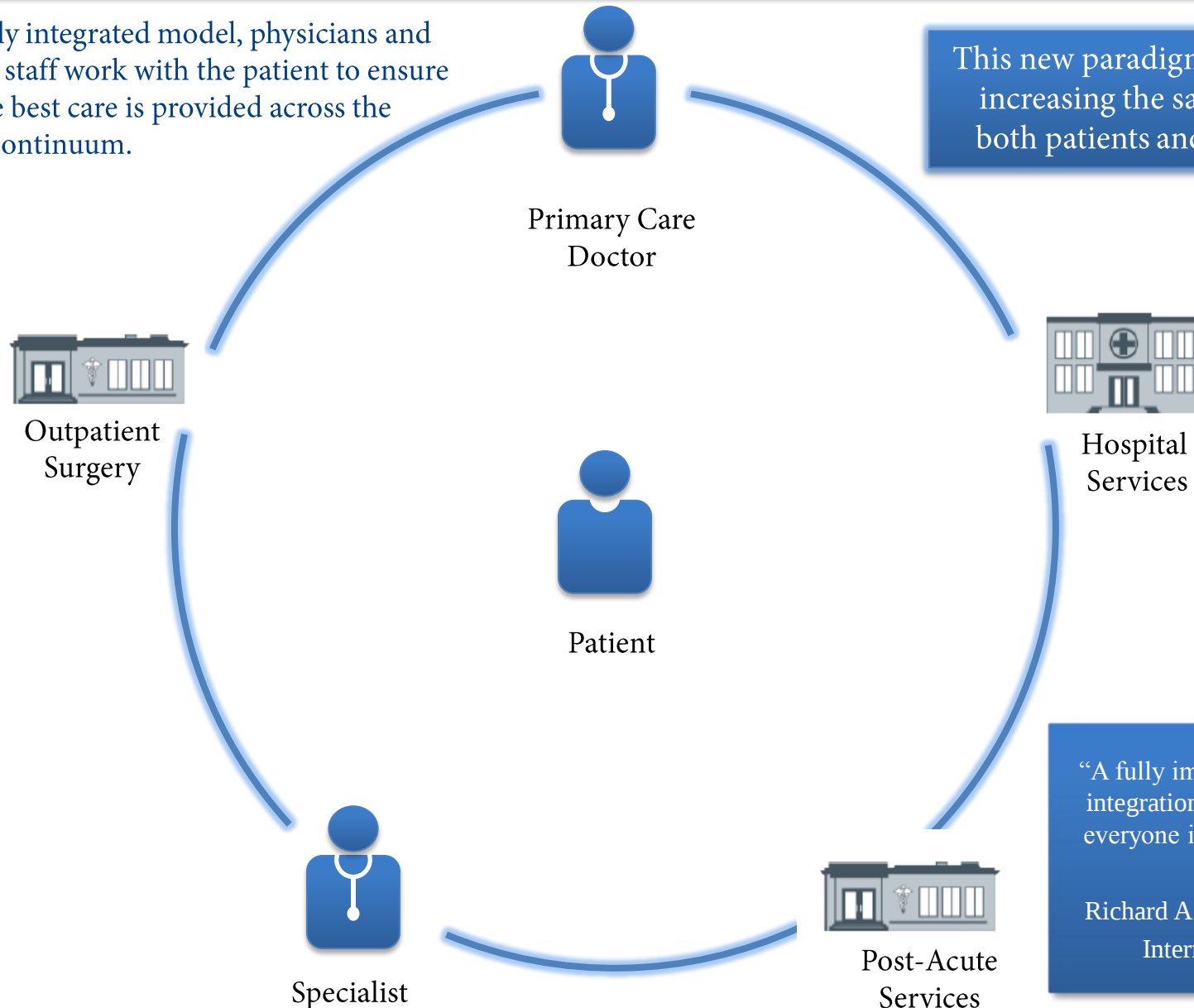
The healthcare environment today is becoming more and more complex. The numerous sources and sites of care, often referred to as the continuum of care, present significant challenges for the everyday patient.

Under the current paradigm, there is little coordination in ensuring that patients receive the highest quality of care possible.



Clinical Integration Continuum

In a fully integrated model, physicians and clinical staff work with the patient to ensure that the best care is provided across the entire continuum.



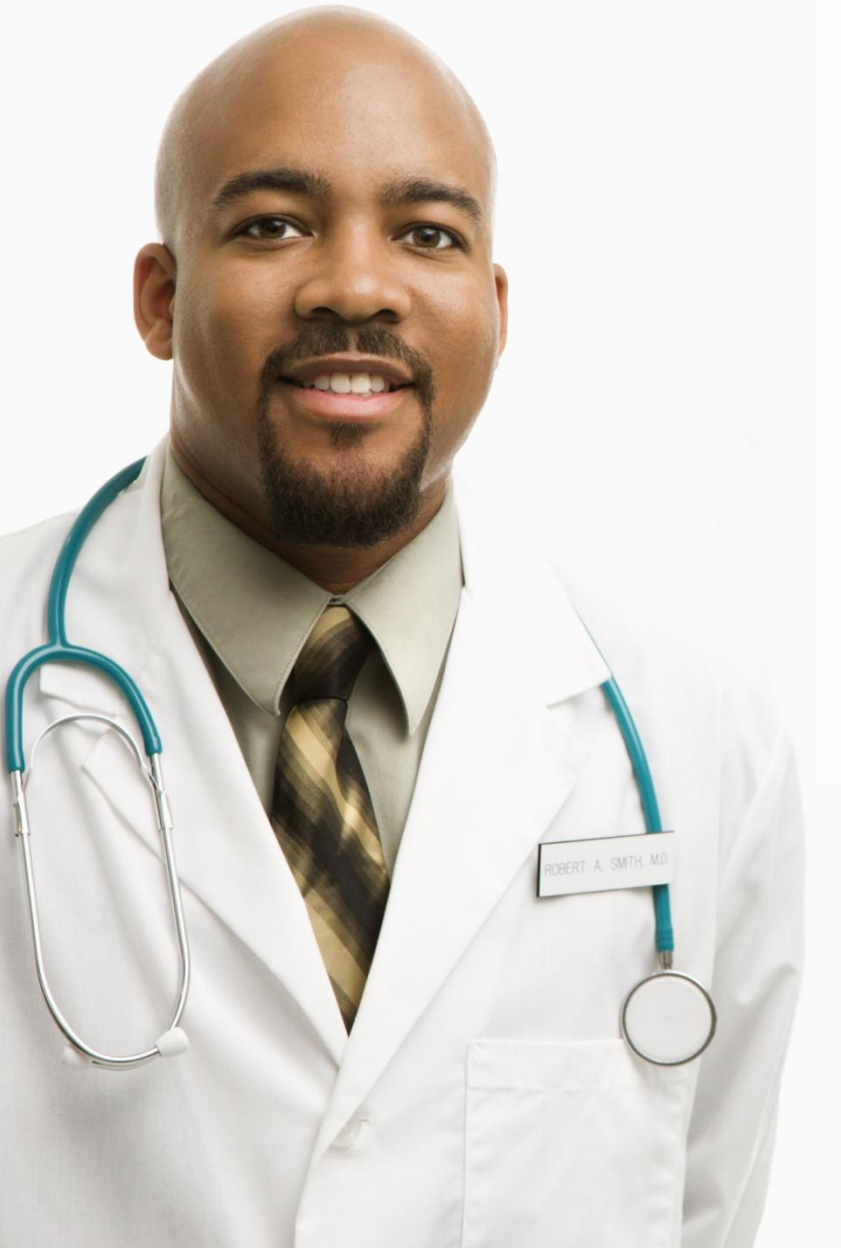
This new paradigm is critical for increasing the satisfaction of both patients and physicians.

“A fully implemented clinical integration program benefits everyone in the community.”

Richard A. Henderson, M.D.
Internal Medicine



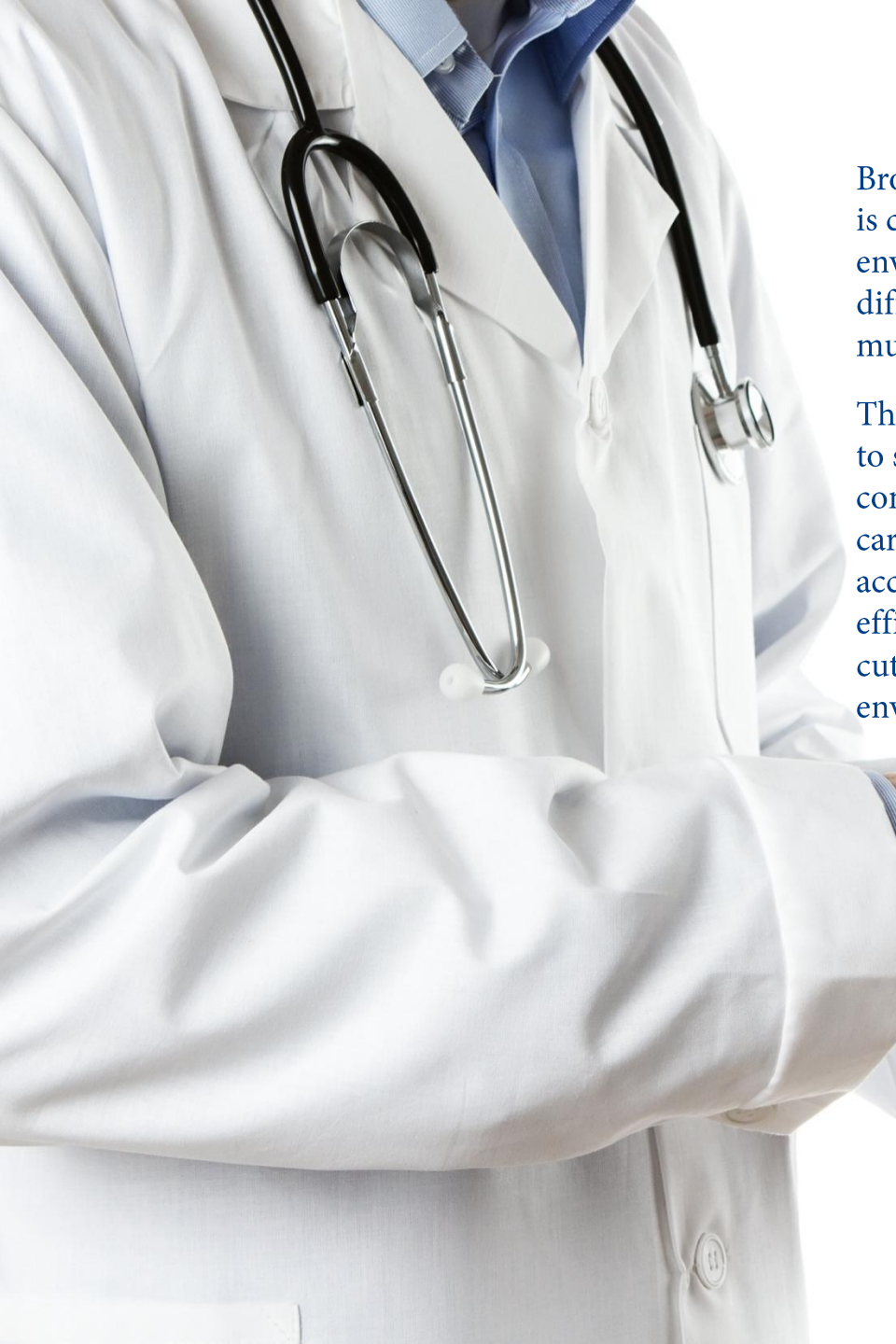
Recognizing Performance



In addition to physician engagement and participation, Covenant Health Partners firmly believes in rewarding outstanding performance. Our pay-for-performance incentive program recognizes those members whose commitment to quality and clinical excellence is apparent. This mechanism provides a unique opportunity to incentivize behaviors that are not currently emphasized or rewarded through the present fee-for-service reimbursement model.

Our incentive system not only rewards performance for the individual physician, but for the entire team of physicians as well. This design creates a culture of encouragement and promotes the advancement of quality, safety, and cost-effective practices.

For the 2012 Clinical Integration Program, Covenant Health Partners carefully researched metrics and established performance targets for each of the program's clinical initiatives based on national best practices, research findings and other recognized benchmarks. Overall, the pay-for-performance program is a critical component in developing a high quality continuum.

A close-up photograph of a doctor's torso and arms. The doctor is wearing a white lab coat over a blue collared shirt. A black stethoscope is draped around their neck. Their right hand is holding a silver tablet, and their index finger is touching the screen. The background is plain white.

Data Sharing

Broader availability of healthcare data through electronic format is crucial for the enhancement of quality of care. In the current environment, details of a patient's health may reside in several different locations, such as a doctor's office, a lab, an x-ray suite, multiple hospitals, pharmacies, or an urgent care site.

Through electronic communications, doctors are now beginning to see information gathered from a variety of locations into a common patient chart. This enables safer, more efficient medical care by allowing providers to be aware of a more complete and accurate picture of a patient's health status. CHP is promoting efficiency and timeliness for the west Texas community through cutting edge technology to create a more integrated healthcare environment.

“When physicians share their knowledge, everyone benefits.”

David A. Gray, D.O.
Chief Medical Officer
Covenant Health Partners



Impact of Clinical Integration Physicians

- ✓ Increases Efficiency
- ✓ Enhances Ability to Monitor Patients
- ✓ Recognizes Higher Quality
- ✓ Shares Best Practices
- ✓ Improves Communication Among Physicians
- ✓ Builds Physician – Hospital Relationship





Impact of Clinical Integration Patients

- ✓ Enhanced Patient Engagement
- ✓ Patient Focused Care
- ✓ Better Access to Physicians
- ✓ Open Communication
- ✓ Increases Safety
- ✓ Top-quality Care
- ✓ Improves Satisfaction
- ✓ Unified Care Experience





Impact of Clinical Integration

Hospitals & Employers



- ✓ Greater Value
- ✓ Healthier Employees
- ✓ Higher Employee Satisfaction



- ✓ Builds Hospital – Physician Relationships
- ✓ Creates Shared Goals
- ✓ Cost-effective Care



Hospital Efficiency Program



5th Consecutive Year of Generated Savings & Improvement



Hospital Efficiency Program

Implementing Inpatient Best Practices

\$9,480,782

Covenant Health Partners utilizes pay-for-performance to reward physicians for achieving certain quality targets. The Hospital Efficiency Program specifically focuses on quality for the inpatient setting. From evidence-based medicine to patient safety to value-based purchasing, physicians are measured on their individual and specialty group performance. This specific program has resulted in enhanced clinical quality and significant savings.

During the 2012 fiscal year, Covenant Health Partners generated a total savings of \$1.72 million from this program alone. Over the lifetime of this program, Covenant Health Partners has generated over \$9.48 million in savings.

\$1,720,765

HEP Lifetime

2012

“By addressing specific measures and targeting efforts in clinical outcomes, efficiency, medical and technological infrastructure, patient safety and patient satisfaction have been effective in improving Covenant Health Partners’ clinical outcomes and cost savings.”

Michael D. Robertson, M.D.
Chair of Quality Improvement Committee



Hospital Efficiency Program

Fiscal Year 2012 Performance

Fiscal Year 2012 Hospital Efficiency Program Measures	Exceptional	Target	Average
30 Day Readmission Rates			
<i>Acute Myocardial Infarction (AMI)</i>			
<i>Heart Failure</i>			
<i>Pneumonia</i>			
3 Day Readmission Rate			
Risk Adjusted Mortality Ratio For Attending M.D.			
Effective Rounding & Decision Making With Care Team Members To Reduce Delays In Patient Testing, Treatment And Discharge			
<i>% Of Cases Over Milliman Length Of Stay Benchmarks</i>			
<i>Discharge Orders Written Prior To 10 Am</i>			
Appropriate Documentation Of Diagnoses To Accurately Reflect Acuity & Procedure			
<i>Surgical Procedures</i>			
<i>Medical Procedures</i>			
Reduced Urine Nosocomial Infection Markers			
Reduced Waiting Time For Emergency Care			
<i>Length Of Stay In Adult ED: ED Room To MD Exam</i>			
Response Rate For Clinical Documentation Management			
Best Practice Development For Select Conditions			
Physician Meetings			
<i>Initiate Pathways</i>			
<i>Review Variances</i>			
<i>Improve On Variances</i>			
Surgery Patients With Appropriate VTE Prophylaxis Ordered			
Surgery Patients With Appropriate VTE Prophylaxis Received In A Timely Manner			
Discharge Instructions Provided To Patients With Heart Failure			
Percutaneous Coronary Intervention (PCI) Administered Within 90 Minutes Of Arrival For Patients With Heart Attack			
Initial Antibiotic Selected Within 24 Hours For Patients With Community-acquired Pneumonia			
HCAHPS 5: During This Hospital Stay, How Often Did Doctors Treat You With Courtesy And Respect ?			
HCAHPS 6: During This Hospital Stay, How Often Did Doctors Listen Carefully To You?			
HCAHPS 7: During This Hospital Stay, How Often Did Doctors Explain Things In A Way You Can Understand?			



Population Health Management Initiatives





What is Population Health Management?

It is the coordination of care delivery across a population to improve clinical and financial outcomes through disease management, case management, and demand management.



“Population Health Management is only as successful as our ability to engage the individual patient.”

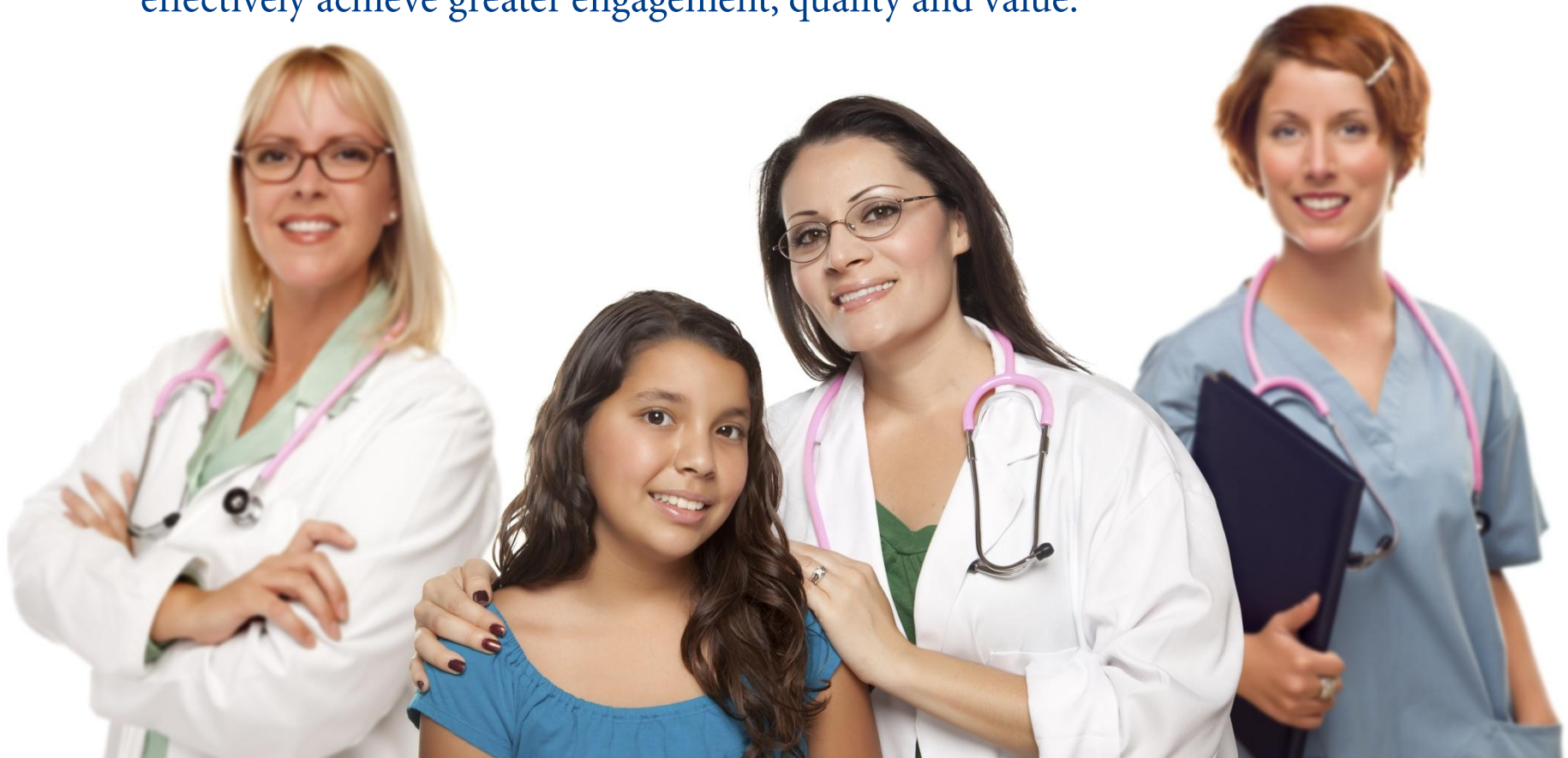
David A. Gray, D.O.
Chief Medical Officer
Covenant Health Partners



Why Population Health Management?

Evidence suggests the economics of the current fee-for-service model are unsustainable. This recognition accentuates the need for models which lead to greater patient engagement, increased clinical quality, and greater financial value.

Covenant Health Partners believes the Population Health Management model can effectively achieve greater engagement, quality and value.





Population Health Management At Work

Clinically Integrated Network of Physicians

- 325 Physicians
- 75 PCPs
- Pay-for-Performance
- 150+ Metrics
- Physician Scorecards
- Data transparency
- 5 Physician-led committees

Population Health Management Analytics

- Risk Stratification
 - Chronic disease
- Efficiency Opportunities
 - ED
 - Pharmacy
 - Imaging

Use of Care Registry

- Practice Data from EMRs
- Lab Interfaces
- PM system Interfaces
- Care Coordination/Outreach

Care Coordination

- Extension of Physician Practice
- RN Care Coordinators and Patient Navigators provide education and resources for patients to manage their conditions
- Assist in eliminating physician access issues for patients

Engaged Physicians

Predictive Analytics

Disease Registry

Improved Outcomes



Transitional Care Coordination



Tailored Education Provided For

- ✓ Asthma
- ✓ Chronic Obstructive Pulmonary Disease
- ✓ Congestive Heart Failure
- ✓ Coronary Artery Disease
- ✓ Diabetes
- ✓ Hypertension
- ✓ Pneumonia

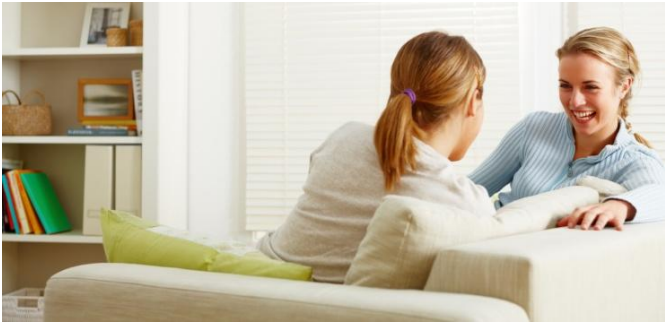


Patient Navigation & Transitional Care

A Disease Management Program Unlike Any Other

In the fall of 2012, Covenant Health Partners introduced an innovative care coordination program we believe will revolutionize the patient experience and create healthier communities.

As our patients transition across different care settings, a team comprised of registered nurses and patient navigators work hand-in-hand with physicians and patients to improve outcomes for chronic conditions through education, goal-specific behavior change, and the procurement of necessary resources.





Patient Navigation & Transitional Care

There with you every step of the way

Education serves as the foundation in facilitating changes in behavior, improving our patients' ability to manage their chronic diseases.

The care coordination program affects behavior change through motivational interviewing, increasing patient confidence and helping them to become self-sufficient.

From the comfort of their homes, patients can experience a highly interactive visitation, during which Care Coordinators use sophisticated processes and protocols to promote patient engagement and behavior change.

This interaction is intended to achieve the outcomes specifically designed by physicians who direct their care.



The core design of this program focuses on patient education and their transition across the continuum.



Pharmacy Initiative

For the 2012 fiscal year, our generic fill rate was 71%, a 3% increase from 2011.



71%

2012

68%

2011

Working to Eliminate Waste in Pharmaceutical Drugs

Generic Fill Rate



Pharmacy Initiative

In 2011 alone, suboptimal pharmacy-related behavior by U.S. consumers wasted more than \$408 billion – equivalent to more than \$1,300 for each American.¹

Pharmacy Waste in Texas During 2011



¹Frazer, PhD, S., et al. (2012) Express Scripts International 2011 Drug Trend Report.

More importantly, the state of Texas wasted \$38 billion. In terms of per-capita, Texas is the second most wasteful state at \$1,480.17/ per-capita.¹ Covenant Health Partners believes it is our responsibility to educate our patients on the most efficient and highest quality programs and processes.

Generic Rx Program

During the past year, our organization began a generic utilization initiative that will create value by lowering pharmaceutical costs. As brand-name patents expire, consumers will have the ability to create significant savings by using more generic medications rather than branded medications.

Express Scripts estimates that for every 1% increase in the generic fill rate, savings increases 1.5% to 2%¹. Based on these arguments, our focus is to provide education to both our physician members and patients about generic medications currently available.



71%

2012

68%

2011

Generic Fill Rate 32



¹Frazer, PhD, S., et al. Express Scripts International 2011 Drug Trend Report (2012, April).



Looking Ahead

As Covenant Health Partners looks toward the future of healthcare, we believe enhancing quality and lowering cost are essential endeavors. If we are to successfully manage risk and the overall health of defined populations through a transformed care model, CHP must continue to invest in critical resources and programs.

In the past year alone, CHP has made tremendous strides in enhancing the quality of care for specific populations. Through clinical integration, care coordination, and population health management, CHP is determined to continue to make an increasingly positive impact on Lubbock and our surrounding communities.





Learning Opportunities

To learn more about Covenant Health Partners, please contact us at 806.725.0711, or visit CovenantHealthPartners.org for seminar schedules.





Executive Officers

John A. Grigson
Chief Executive Officer

Michael J. Camacho
Chief Operating Officer

David A. Gray, D.O.
Chief Medical Officer



Board Of Directors

Bill D. Atkinson, M.D.
Maternal and Fetal Medicine

Frederick J. Hensal, M.D.
Orthopedics

Michael D. Robertson, M.D.
Internal Medicine

David W. Blann, M.D.
Obstetrics/Gynecology

Srinivas P. Kadiyala, M.D.
Pulmonary

Chris R. Rose, M.D.
Family Medicine

Cynthia R. Brown, M.D.
Anesthesiology

Kelly P. Kensing, M.D.
Gastroenterology

Ibrahim A. Shalaby, M.D.
Oncology

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Radiology

David E. Mangold, M.D.
General Surgery

Jonathan D. Skelton, M.D.
Emergency Medicine

Sammy A. Deeb, M.D.
General Surgery

Joseph L. Martinez, M.D.
Neurosurgery

Ikechukwu C. Umezurike, M.D.
Hospitalist

Juan F. Fitz, M.D.
Emergency Medicine

Piyush Mittal, M.D.
Internal Medicine

Paul D. Walter, M.D.
Cardiology

Sham S. Gandhi, M.D.
Ophthalmology

Brian E. Nicholson, M.D.
Urological Surgery



Recognitions & Awards

Working to Create a Better Tomorrow



StuderGroup



JOINT COMMISSION CERTIFIED
ADVANCED PRIMARY STROKE CENTER



Development
Partner



Crimson Clinical Advantage
Continuum of Care

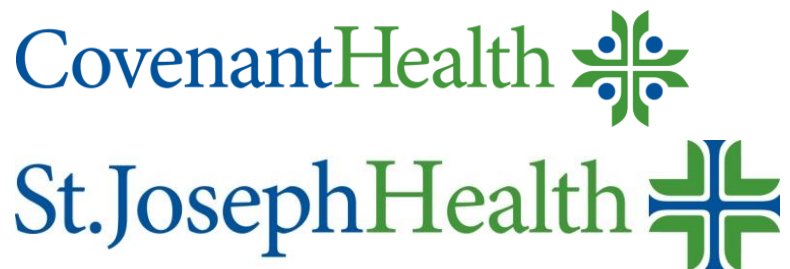
During Fiscal Year 2012, Covenant Health and Covenant Health Partners received significant recognition for its achievements.



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CovenantHealthPartners.org



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