

Intel on Incentives to Share Health Data for Better Care

September 16, 2016



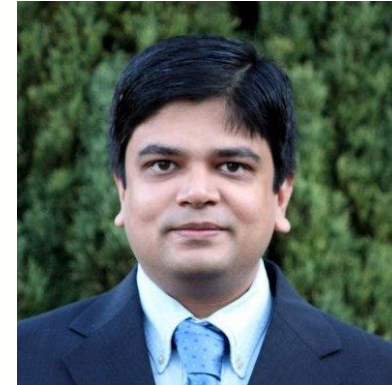
Meet Today's Presenters



Jennifer Rosas
Director, eHealth Exchange
The Sequoia Project

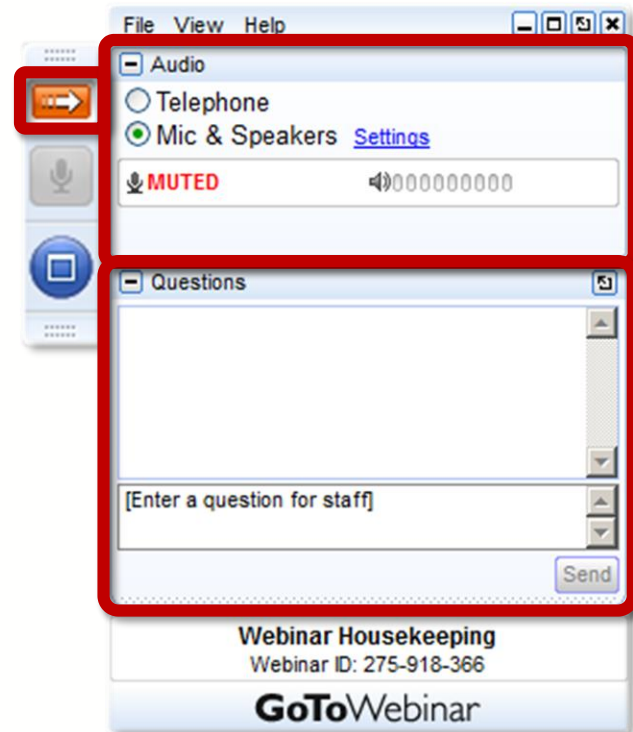


Angela Mitchell
U.S. Program Manager for
Connected Care
Intel Human Resources



Prashant Shah
Director of Engineering
Intel Health and Life Sciences

How Do I Participate?



Your Participation

Open and close your control panel

Join audio:

- Choose “Mic & Speakers” to use VoIP
- Choose “Telephone” and dial using the information provided

Submit questions and comments via the Questions panel

Note: Today’s presentation is being recorded and will be provided within 48 hrs

Problems or Questions? Contact Dawn Van Dyke

dvandyke@sequoiaproject.org or 703.864.4062

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About Intel Corporation

Our Vision: If it is smart and connected, it is best with Intel



Leading Manufacturer of Computer, Networking & Communications Products

107,000 employees worldwide..... 170 sites in 66 countries

\$56B in Annual Revenues

Top 10 brand.....Most Admired Company

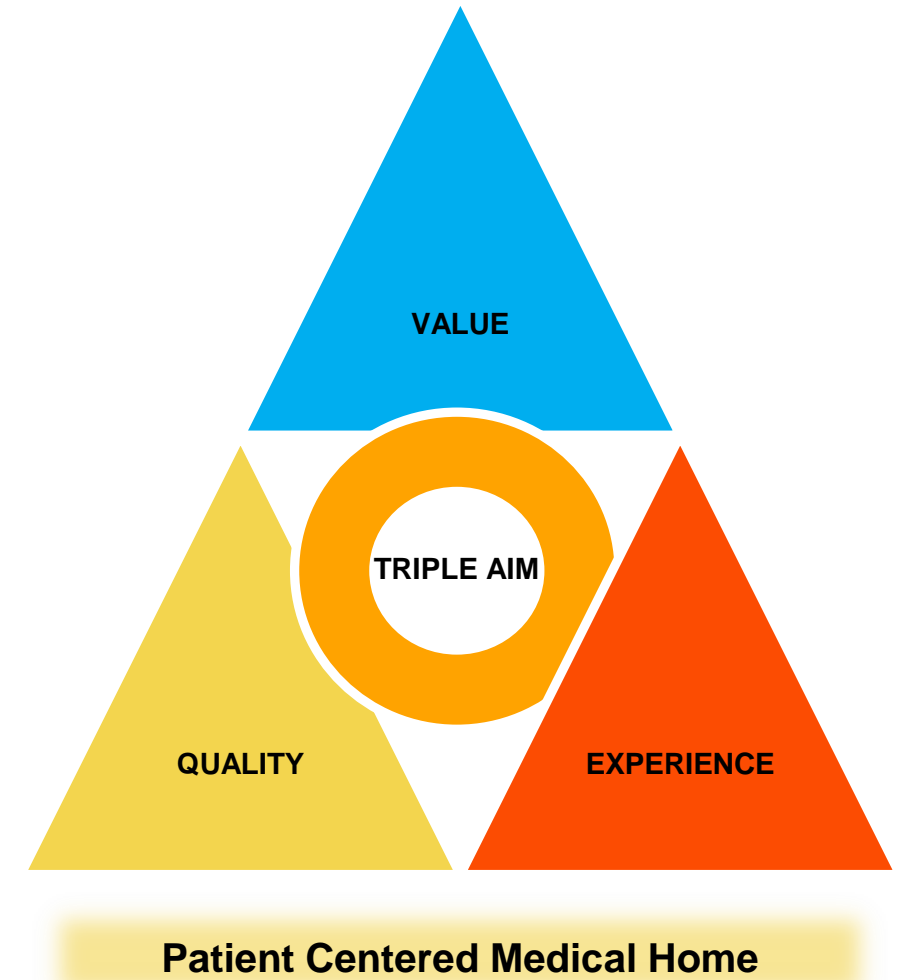
2015 Helen Darling Award for Excellence and Innovation

2015 Total U.S. Healthcare Spend: ~\$600M

Major US Sites: Arizona, California, New Mexico, Oregon, Texas

Employer-Driven Triple-Aim Approach


- **Improving experience**
 - Concierge approach
 - Dedicated teams with seamless transitions
 - Improved access
 - Innovative technology/tools
- **Reducing cost; increasing value**
 - Accountability for cost - PMPM
 - High-performing providers
 - EHR interoperability
 - No referrals or prior authorizations
 - Focused on preventive care
- **Population health management**
 - Targets are set on access metrics, patient satisfaction with experience, and clinical outcomes



Going Local and Connecting Care



NM - 2013



Oregon - 2015



Oregon - 2015



Arizona - 2016

HDHP and Co-Pay options available in each state

Customized Network



Medical Homes + Neighborhoods
(Includes Intel onsite clinics)

Pay for Performance



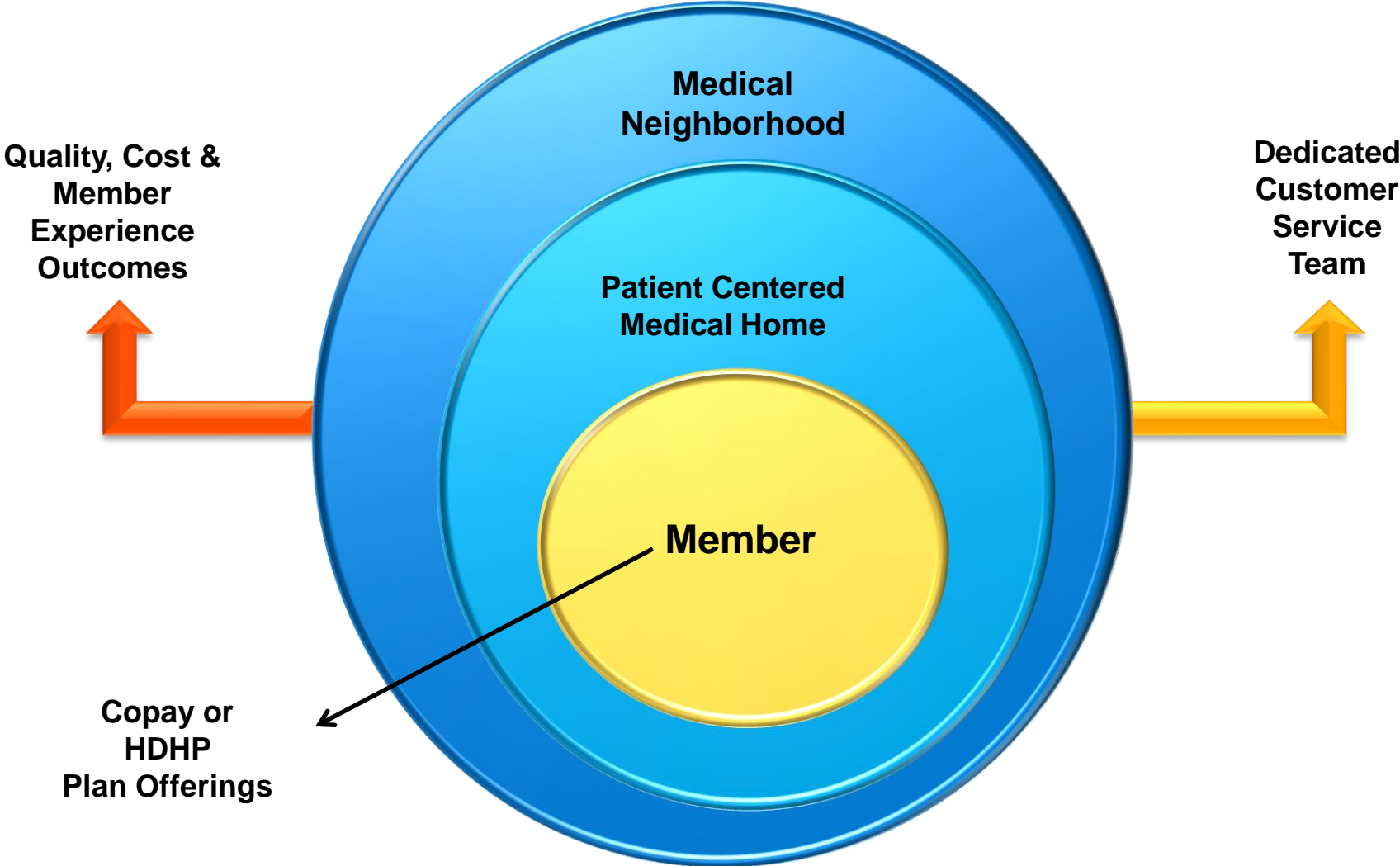
Aligned Incentives
through Gain and Risk Sharing

Measure



Accountability:
Developed metrics to measure 5 key attributes

Connected Care Model



Intel in Health and Life Sciences

Make it personal!


Life Sciences



All in One
Day

Diagnosis based on individual genome for a targeted treatment plan

Healthcare IT & Medical Devices



Wherever
You Are

Seamlessly connect patients, clinicians and data for holistic proactive care across settings

Consumer Health



Own Your
Health

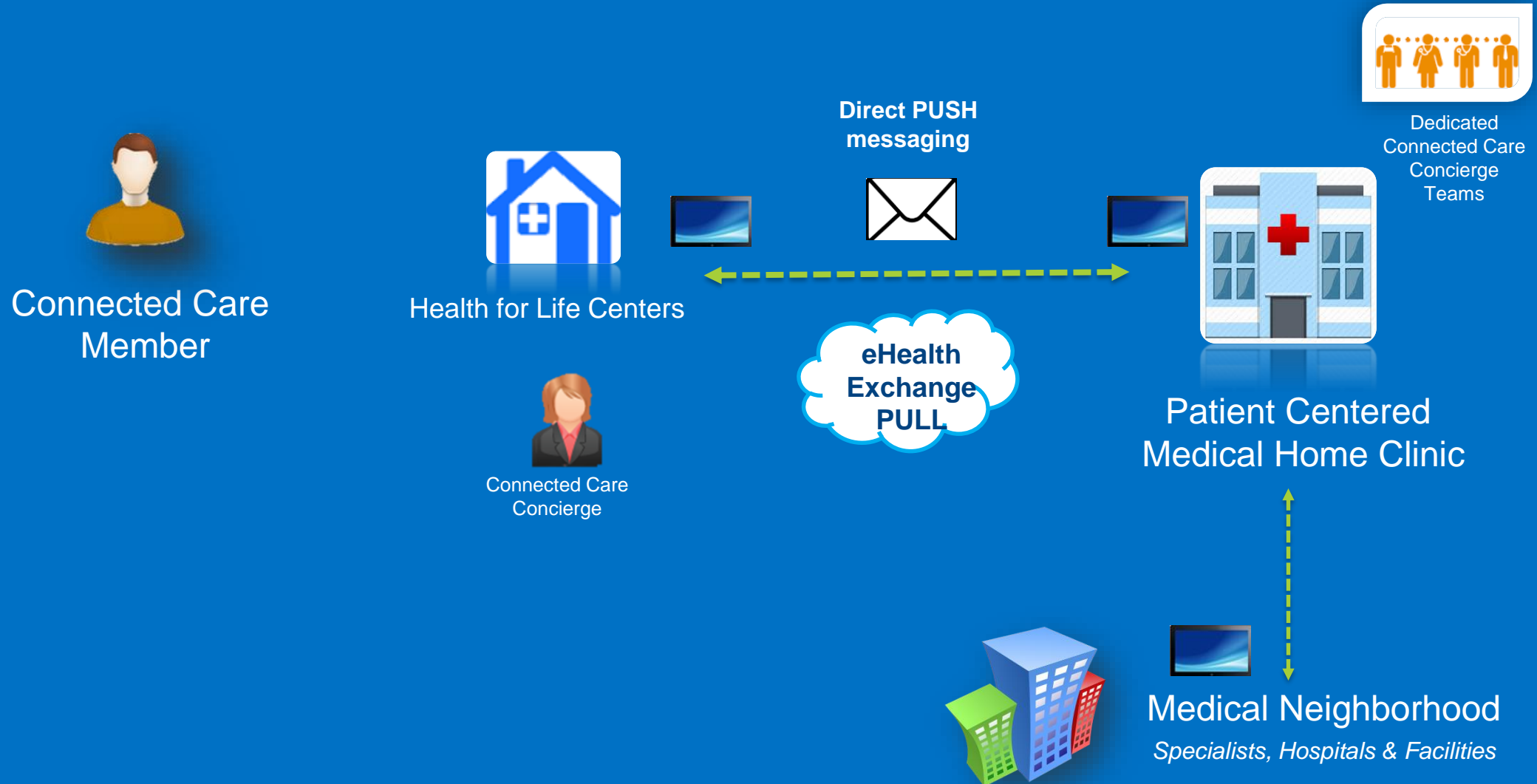
Engaging connections among people, their data and care community empower health ownership

Powerful & Trusted Computing, Storage and Communications Advances from Intel

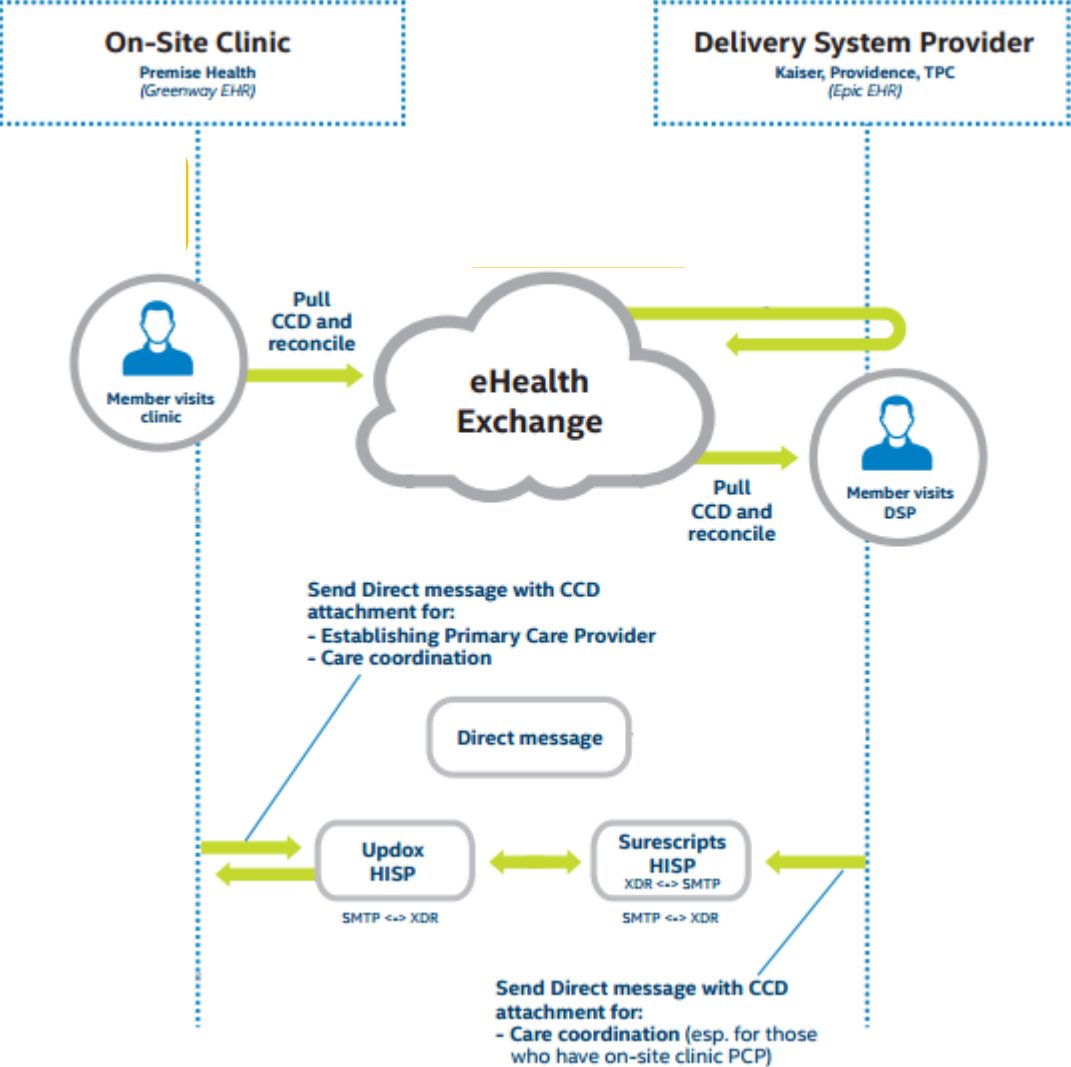
Connected Care Interoperability Requirements

- Exchange and reconciliation of **structured clinical data** within PCMHs and Neighborhoods
 - Including onsite primary care clinics at Intel campuses in NM, OR and AZ
- Enhance the **patient and provider experience through interoperable systems**
- Leverage **nationally recognized** health data and information exchange **standards**
 - eHealth Exchange (Sequoia Project)
 - Direct Messaging
 - IHE Data Interoperability Standards
 - CDA document family (e.g. C-CDA)
- Develop **IT utilization reports** to track and monitor matching rates and evolve the model

Connected Care Interoperability Model



Oregon HFLLC Integration Model – Data exchange



- Patient Matching – 87.83% average success rate on response
- Automated EHR Reporting lacking
- Delivery Service Provider gaps and roadmaps evolving
- Network of networks allows small practices to exchange data feasibly

Connected Care - Technology Utilization Metrics

January 1, 2015 – August 31, 2016

eHealth Exchange

- 116,629 queries via the eHealth Exchange
- 103,529 CCDs returned via query response
- 88.77% of queries resulted in retrieval of a CCD
- 0.01% of queries resulted in a “time out” error

Direct Messaging

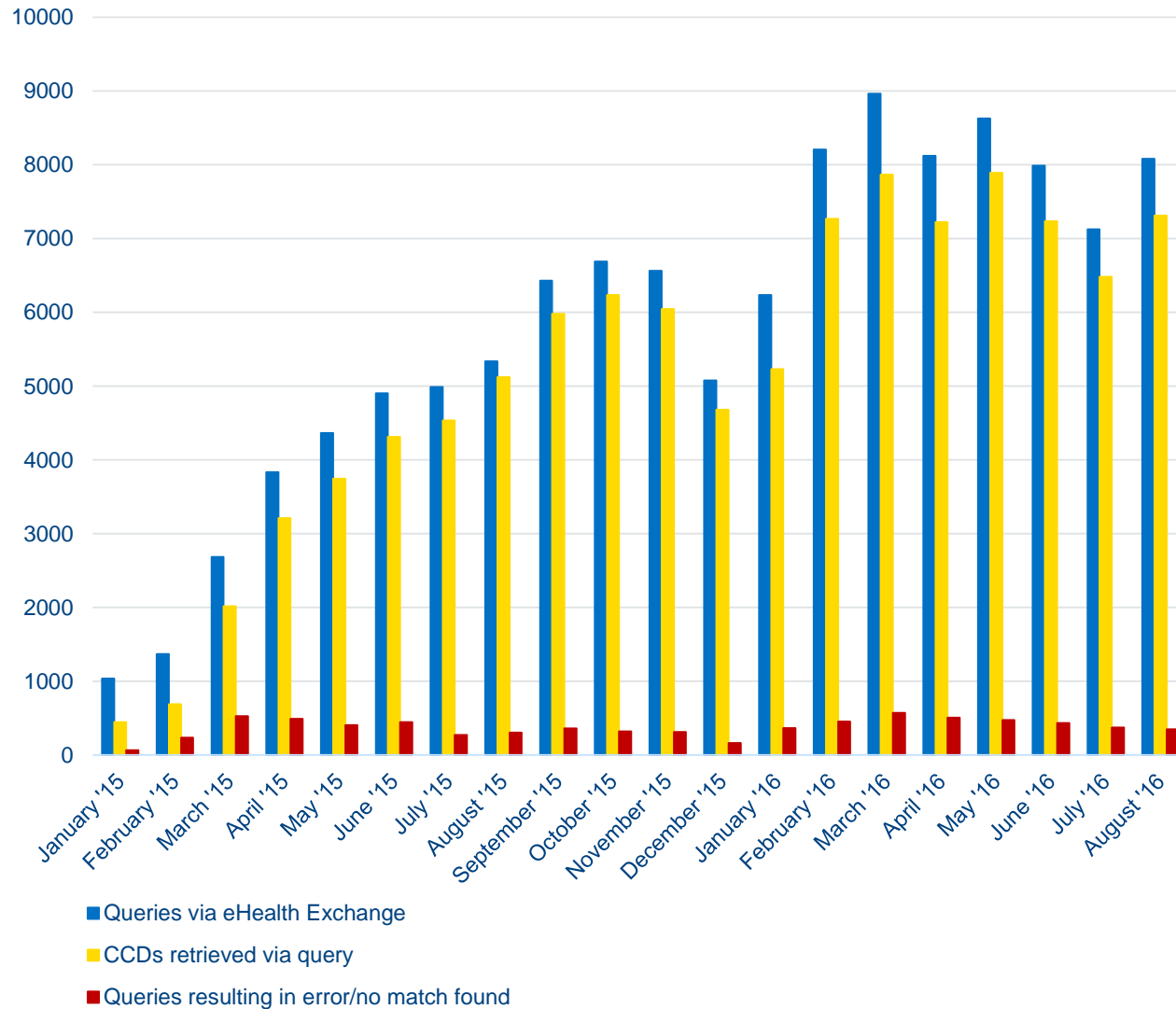
- 5,626 CCDs pushed via Direct messaging
- 96.9% of CCDs received successfully**

*Based on data provided by two DSPs

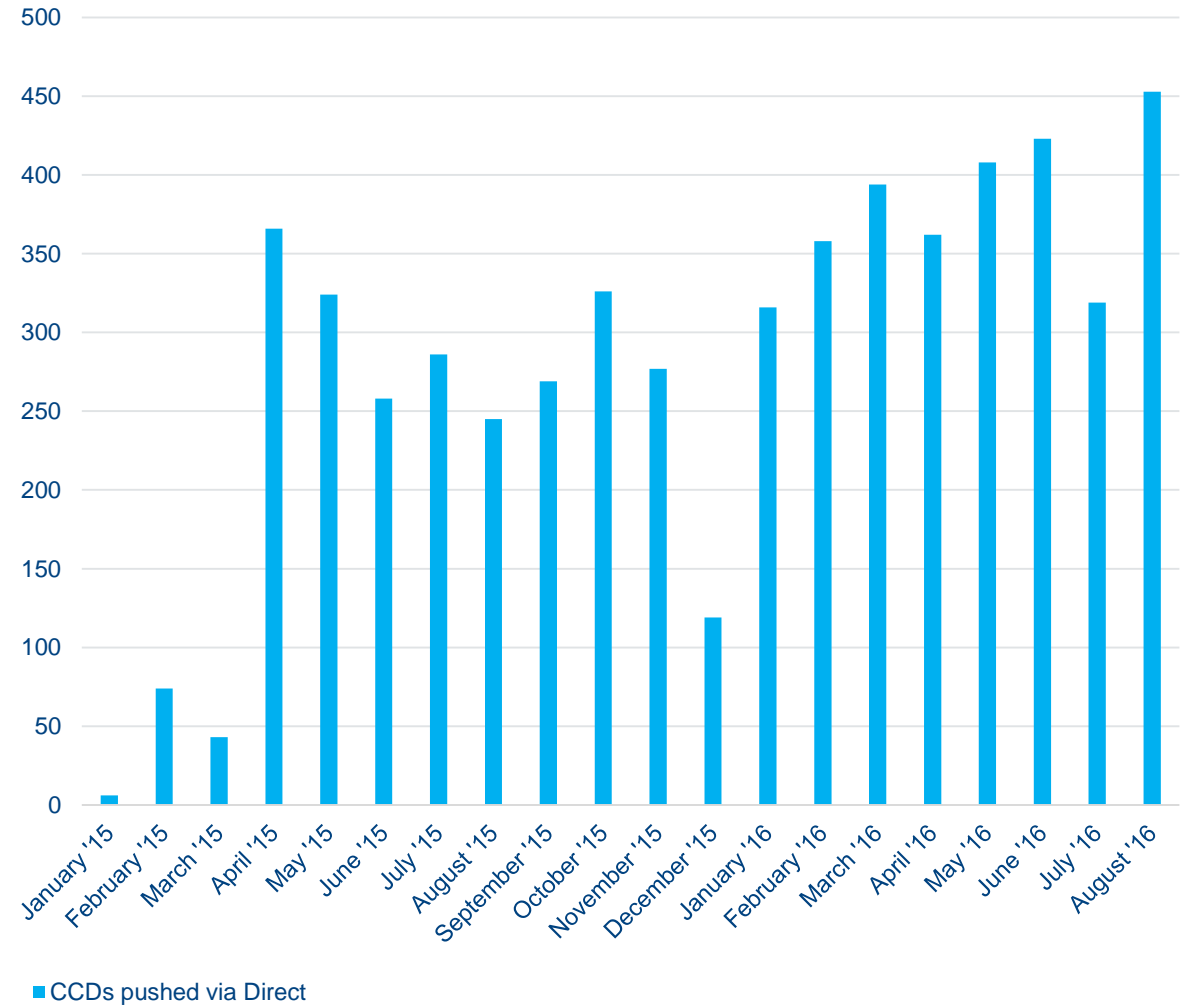
**This figure reflects 2015 data from one DSP

Connected Care - Technology Utilization Metrics

eHealth Exchange



Direct Messaging



In conclusion

- Employer-driven healthcare innovation leads to big wins for all involved.
- “Time-To-Interoperate” can be significantly reduced by leveraging national standards and established networks such as eHealth exchange.
- Measurement of IT utilization reports allows analysis of the care and IT models as they evolve
- Intel is scaling the Connected Care model in Arizona where the HIT landscape is more complex

Questions?

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Survey



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