AHA Vitality Index[™]

in collaboration with

HYVE HEALTH

Comparative financial and operational data straight from hospitals for better decision making



Today's Speakers



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Revenue Cycle and
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Management,
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Chief Executive Officer
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- AHA efforts to address unfair commercial health insurance practices.
- How AHA Vitality Index tracks payer-specific revenue cycle measures using de-identified claims data.
- See AHA Vitality Index live as a panelist demonstrates how it can help identify opportunities to reduce operational challenges.

Why AHA Vitality Index is Needed

- Need national data strategy (need to remove barriers to data and reduce data silos)
- 2. Brand new solution, never has been done in industry
- 3. Current data from hospitals for hospitals, not antiquated cost report information or data from unknown sources

An ecosystem of data to support all AHA member constituencies

The American Hospital Association

- Collaboration with ATEX Financial to market and support the data collection and standardization
- National data set to amplify messaging about commercial payers' behavior

Data from

Data from hospitals, for hospitals

State Hospital Associations

- State level commercial payer information
- National and state level benchmarks to amplify messaging about commercial payers' behavior
- Insights into hospital performance

Hospitals

- Systematic, visual review of all claims and remittances
- Peer group comparisons
- National and state level benchmarks

Health Systems

- Aggregate hospital performance across states and hospital type
- National and state level benchmarks

Commercial Payer Practices

are receiving more prominent coverage in the media



OIG calls out issues with denials of payment and services in Medicare Advantage



19 Tenet hospitals sue Cigna over alleged low reimbursement rates, denied claims



State slaps Anthem Blue Cross Blue Shield with \$5M in fines



Insurer under fire for millions in unpaid claims

Recognition of the negative impact of these practices is mounting





Holding commercial insurers accountable: Priority issues to address

- 1. Health plan utilization management and other business practices leading to:
 - Delayed or denied patient access to medically appropriate care
 - Clinician burn out
 - Excessive administrative cost and burden in the health care system
- Lopsided access to financial resources and data that enables commercial health plans to reshape the health care landscape through vertical integration at the expense of patient care.

AHA Strategy

- Change law and regulations to improve how coverage works and increase oversight of health plans
- 2. Tell the story to policymakers and the public of how health plans are increasing patient and provider burden, frustration, and cost
- Support legal efforts to establish precedent and challenge anticompetitive activity

An ecosystem of data to support all AHA member constituencies

National and state level

benchmarks

State Hospital Associations The American Hospital Association Collaboration with ATEX Financial State level commercial payer information to market and support the data collection and standardization National and state level benchmarks to amplify messaging National data set to amplify Data from about commercial payers' messaging about commercial hospitals, for payers' behavior behavior hospitals Insights into hospital performance **Hospitals Health Systems** Systematic, visual review of Aggregate hospital performance all claims and remittances across states and hospital type Peer group comparisons National and state level

benchmarks



American Hospital Association + Allied Hospital Associations

- The AHA is strategically partnering with allied hospital associations to create a national database of de-identified claims data from hospitals across the country
- Allied associations and their member hospitals can gain access to benchmarks, insights, and patterns not available anywhere else in the industry



What if we could see the whole picture

to address commercial payer issues and help your organization better navigate this environment?

The solution is the creation of a national, de-identified, normalized database of hospital claims and remittances

Hospitals lack critical data to help address the challenges caused by commercial payer issues

There are no unbiased industry standards or measurements that can help hospitals analyze the operational and financial efficiency of their hospital compared to the rest of the field

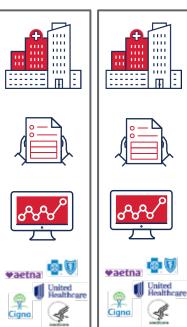
Until now...

True transparency

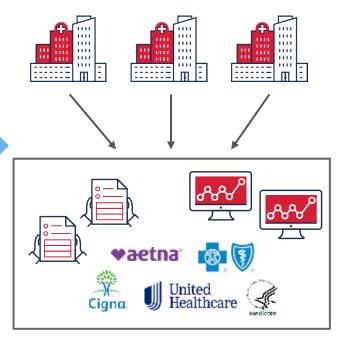
Backed by data directly from hospitals, for hospitals

Hospitals are currently operating in their own data silos





It's time for hospitals to use their data wisely to see the whole picture AHA Vitality Index is backed by aggregated, de-identified claims data



Answer questions that were once unanswerable

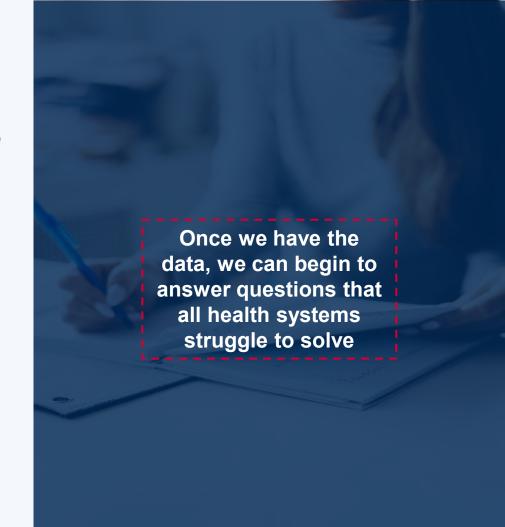
- What hospitals have claim processing challenges and which are efficient?
- What payers have prompt payment timing issues?
- What hospitals have denial issues where others to do not?
- What payers have denial issues across specific states (national and state payers)?
- How much are managed care reimbursements across states and from what providers (percentiles not dollars)?

This helps hospitals

- Better assist in payer performance by understanding who is thriving and who needs help
- Understand which payers are good or bad actors to aid in any policy/advocacy issues

Solve issues that were once unsolvable

- "Prompt Pay" legislation and accountability
- No Surprise Billing Act and the Qualified Payment Amount (QPA)
- For years, hospitals, health systems and state associations have been trying to collaborate with each other, but lacked a unified data strategy



Let's take a deeper look at the solution

Operational metrics, focused on revenue flow

Divided into four quadrants



Velocity

measures the speed related to claims, remits and cash



Variety

reviews what type of reimbursement is expected



Volatility

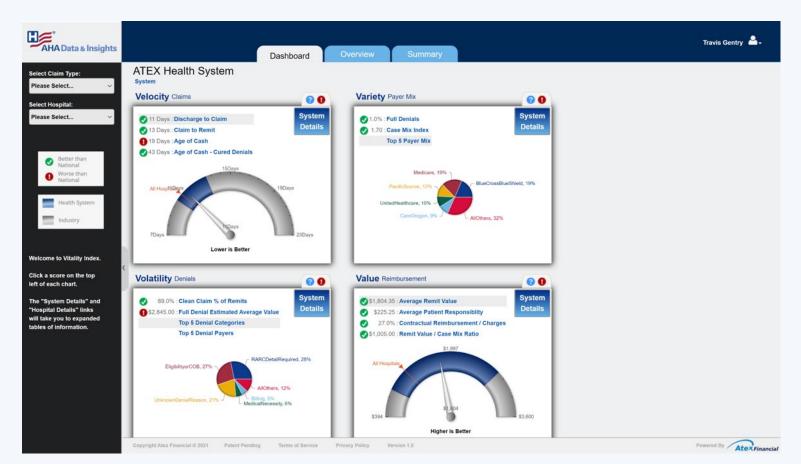
looks at the risk that could impact the speed and amount of cash



Value

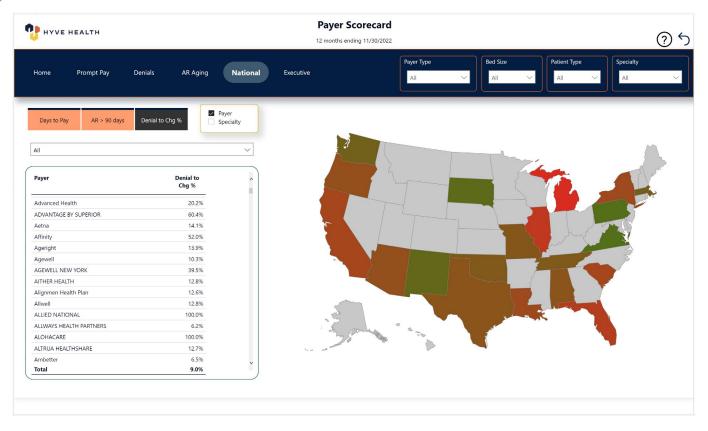
evaluates the amount collected by payer, patient type, specialty and denials

Get a complete picture of what's happening



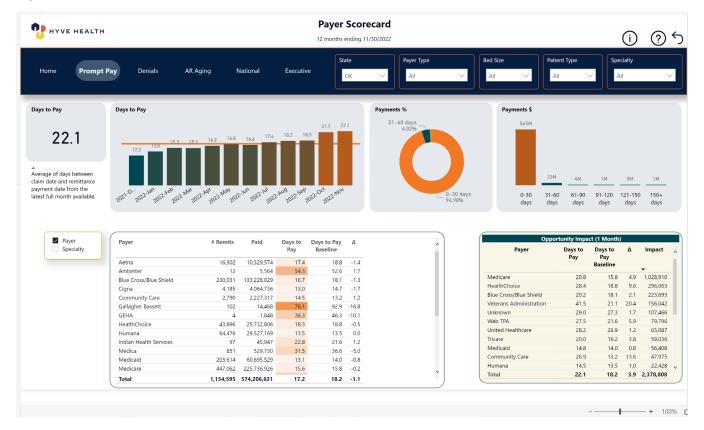
National Payer Scorecard

State by State



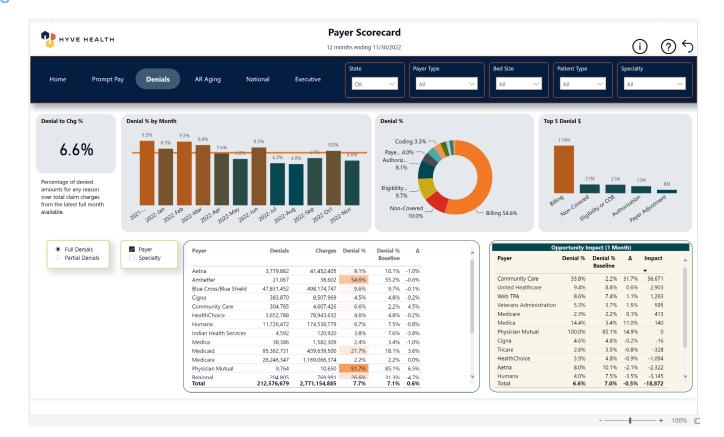
National Payer Scorecard

Prompt Pay

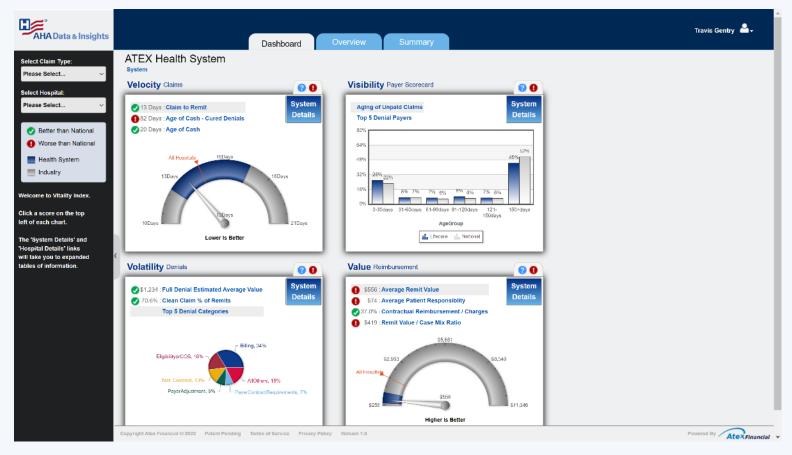


National Payer Scorecard

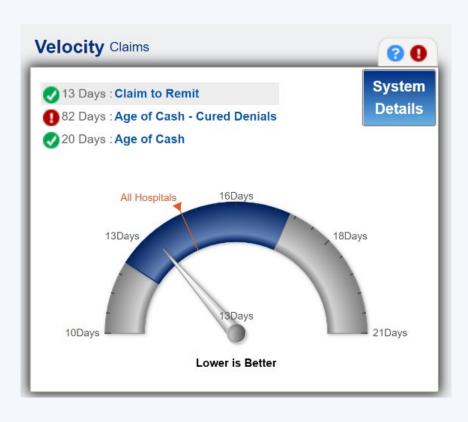
Denials



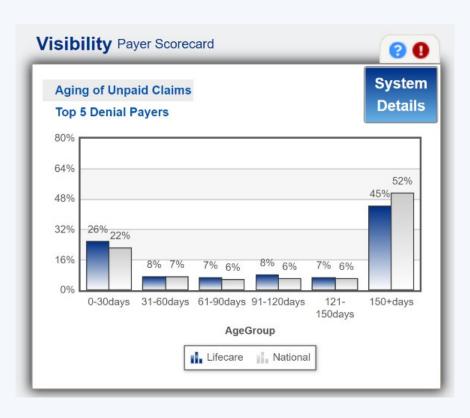
Get a complete picture of what's happening



Velocity



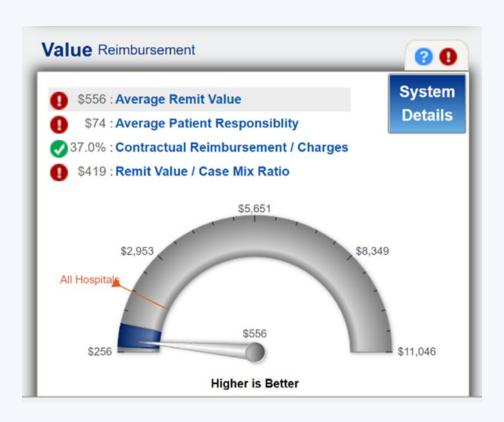
Visibility



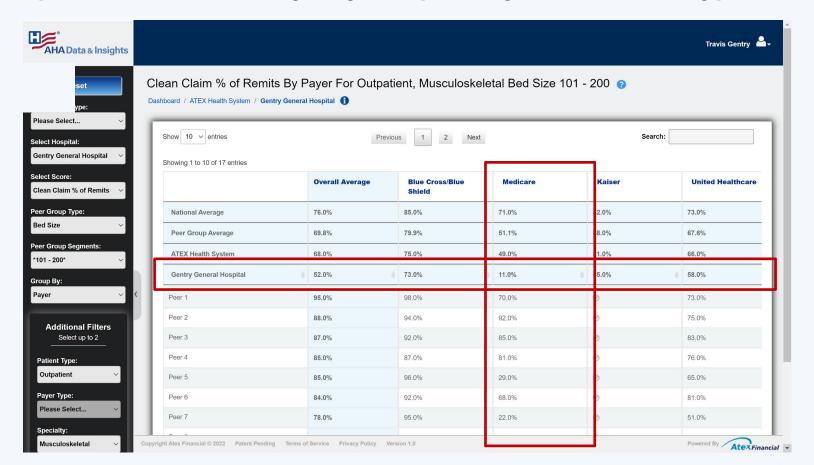
Volatility



Value



Compare Clean Claims by Payer, Specialty, and Patient Type



An ecosystem of data to support all AHA member constituencies

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Overview

Dashboard / Lifecare

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Sorted: BEST to WORST	cal	Age Age	Age Age	d Cash . di	ania	ELOCITO DE LA CLESTA DE LA CLES			BILITY Rated Avec		Responsibility Responsibility	VALUE TO THE STATE OF THE STAT
Jackson County Memorial Hospital	0	0	0	0	0	0	0	0	0	0	0	
Duncan Regional Hospital	0	0	0	0	0	0	0	0	0	0	0	
Stillwater Medical Center OK	0	0	0	0	0	0	0	0	0	0	0	
Grady Memorial Hospital OK	0	0	0	0	0	0	•	0	0	0	0	
Great Plains Regional Medical Center	0	0	0	0	0	0	0	0	0	0	0	
Jefferson County Hospital OK	0	0	0	0	0	0	0	0	0	0	0	
Comanche County Memorial Hospital	0	0	0	0	0	0	0	0	0	0	0	
McAlester Regional Health Center	0	0	0	0	0	0		0	0		0	

means there is no statistically significant data for that item.

Final Thoughts and the Power of Comparison Data

Hospitals Services

Contractual Reimbursement / Charges By Payer State Oklahoma 🧿

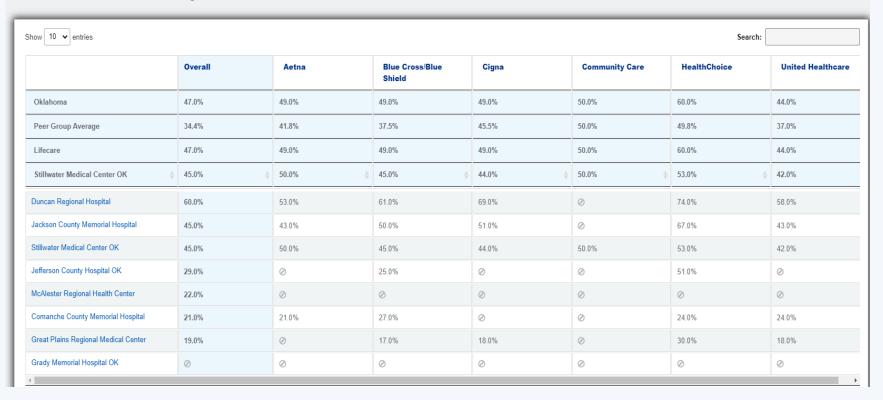
Dashboard / Lifecare / Stillwater Medical Center OK

ow 10 v entries	Search:						
	Overall	Aetna	Blue Cross/Blue Shield	Cigna	Community Care	HealthChoice	United Healthca
Oklahoma	26.0%	40.0%	33.0%	82.0%	60.0%	33.0%	37.0%
Peer Group Average	27.9%	49.9%	35.4%	71.9%	65.3%	35.0%	41.9%
Lifecare	26.0%	40.0%	33.0%	82.0%	60.0%	33.0%	37.0%
Stillwater Medical Center OK	23.0%	47.0%	33.0%	86.0%	64.0%	27.0%	36.0%
Grady Memorial Hospital OK	23.0%	79.0%	39.0%	60.0%	84.0%	40.0%	61.0%
lackson County Memorial Hospital	40.0%	66.0%	54.0%	80.0%	0	49.0%	43.0%
lefferson County Hospital OK	42.0%	50.0%	36.0%	63.0%	0	27.0%	48.0%
Stillwater Medical Center OK	23.0%	47.0%	33.0%	86.0%	64.0%	27.0%	36.0%
AcAlester Regional Health Center	28.0%	42.0%	36.0%	79.0%	48.0%	45.0%	34.0%
Comanche County Memorial Hospital	24.0%	33.0%	31.0%	62.0%	0	33.0%	38.0%
Duncan Regional Hospital	23.0%	32.0%	30.0%	85.0%	0	28.0%	39.0%
Great Plains Regional Medical Center	20.0%	0	24.0%	60.0%	0	31.0%	36.0%

Professional Services

Contractual Reimbursement / Charges By Payer State Oklahoma ?

Dashboard / Lifecare / Stillwater Medical Center OK



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benchmarks

At this unprecedented time when hospitals are fighting daily to get the reimbursements they are due and lack the critical data they need to navigate these pressures

Let's come together to put aggregated, deidentified claims data in your hands for smarter decision making and help you remove bottlenecks once considered unsolvable



Advancing Health in America

Questions

Learn More:

ahadata.com/aha-vitality

