

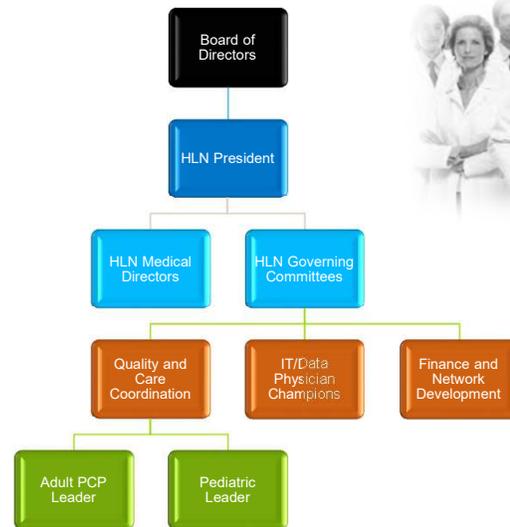
INTRODUCTION TO HEALTH LEADERS NETWORK



Hello and welcome to Health Leaders Network. My name is Ashley Ingram, and I am a Population Health Program Manager. In this presentation, I will introduce you to HLN's mission, its role in value-based care, as well as how to access available education and resources.

What is HLN

Health Leaders Network (HLN) is a physician-led organization of providers, committed to advancing the Quadruple Aim of improving population health outcomes, improving patient experience, improving provider experience, and controlling costs.



Health Leaders Network represents a collaboration among independent and employed providers who are striving to reach the Quadruple Aim of healthcare. We are focused on providing high-quality and efficient healthcare to the communities we serve. Our vision is to become the premier clinically integrated network and accountable care organization for our service areas, in order to drive population health for the betterment of our communities.

Here at HLN we are proud to be led by our president, Dr. Chris Funes along with our medical directors representing Adult and Pediatric Primary Care. HLN also has a total of three (3) governing boards. The HLN CIN Board oversees the direction and needs of the clinically integrated network and related contracts, whereas the two (2) ACO Boards oversee the direction and needs specific to both accountable care organizations and its related government contracts. There are also three governing committees: the Quality and Care Coordination Committee, the Information Technology and Data Governance Committee, and the Finance and Network Development Committee.

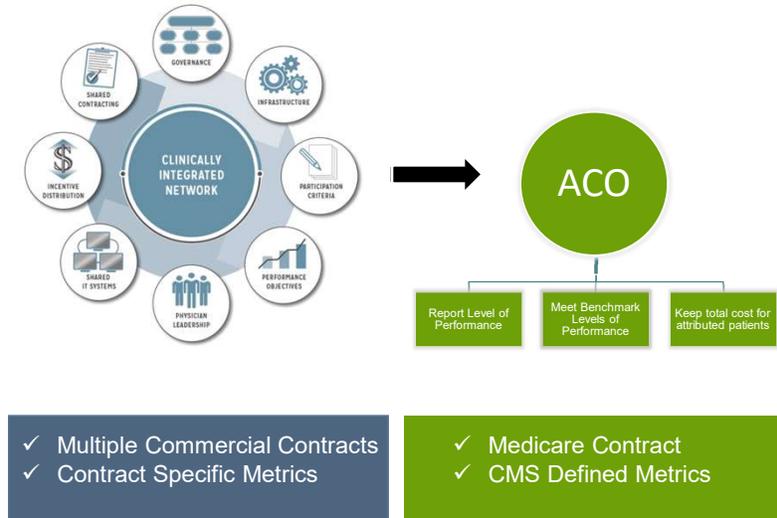
1. Our Quality and Care Coordination Committee (QCCC) assures that Health Leaders Network fulfills its commitment to provide safe, timely, efficient, effective, equitable and patient-centered care for all patients. The QCCC

oversees the strategic direction of the HLN's quality programs, measures, performance monitoring and remediation, and care coordination. The QCCC also provides oversight to HLN's two (2) working committees which include the adult primary care leader committee and the pediatric leader committee. These two committees are staffed by full-time practicing physicians within HLN with a special interest in advancing initiatives that when implemented allow HLN to reach the healthcare Quadruple Aim.

2. HLN's Information Technology and Data Governance Committee (Physician Champions) represents the interests of clinical participants of Health Leaders Network regarding the IT platform. This committee works to improve usability within clinical workflows to accelerate user uptake. Additionally, they align HLN IT initiatives with other IT initiatives in the health system and affiliated physician groups while facilitating the process of expanding metrics collection in coordination with HLN clinical priorities.
3. The Finance and Network Development Committee provides general financial oversight for HLN. This includes assisting with the strategic direction and stewardship of the network's assets, incentive payments, and contracts. They also provide strategic oversight related to participation standards, recruitment, credentialing, and onboarding of participating providers of Health Leaders Network.

CIN and ACO

Health Leaders Network (HLN) is both a clinically integrated network (CIN) and an accountable care organization (ACO). Both entities are physician lead and value collaborative care practices designed to improve quality and outcomes of care while decreasing the cost of care.



Health Leaders Network is both a Clinically Integrated Network (CIN) and an Accountable Care Organization (ACO). We are physician lead and value collaborative care practices, designed to focus on enhancing quality of care, efficiency, and patient outcomes through collaboration and shared resources while decreasing the cost of care.

As a Clinically Integrated Network (CIN), HLN is defined as a distinct legal entity with specific organizing structures that allows hospitals, provider groups, and private practices to collaborate and negotiate with various commercial payors for multiple contracts that have contract specific quality metrics. HLN often participates in value-based payment models, which reward our providers for meeting specific quality and efficiency benchmarks. This can provide financial incentives and shared savings opportunities.

Whereas, an accountable care organization, or an ACO, is a more regulated entity that can only participate in one CMS contract at a time with CMS defined quality metrics. Each year HLN participates in one CMS Medicare value-based care contract.

HLN's Role in Value-Based Care?

HLN focuses on several initiatives to achieve measurable success:

- Improving patient outcomes
- Reducing costs
- Enhancing Collaboration
- Obtaining financial incentives



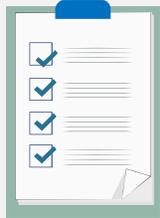
This leads us to HLN's role in value-based care. In addition to the negotiation of value-based care contracts, HLN focuses on a number of initiatives to achieve measurable success:

- Firstly, **Improving Patient Outcomes:** Value-based care focuses on the quality of care rather than the quantity (FFS). This means that, as a CIN and an ACO, we are incentivized to provide better, more coordinated care, where there is an emphasis on preventive care and effective management of chronic conditions. To achieve this, HLN has developed a number of treatment recommendations that are meant to assist providers with best practices for disease management. In addition to clinical treatment recommendations, HLN has also developed resources and educational tools to assist providers in the management of these disease processes. Some examples of these resources are HLN's adult standards for the management of chronic kidney disease, hyperlipidemia, hypertension, and type 2 diabetes.
- Secondly, **Reducing Costs:** By reducing unnecessary procedures and hospital visits or by efficiently using resources, our ACO can lower healthcare costs. Our value-based contracts often include shared savings arrangements, where we can share in the financial rewards if we meet certain cost and quality benchmarks. To accomplish this, HLN has developed a number of initiatives to guide our clinical

practices so that we can monitor our outcomes and to achieve measurable success. Some of our current initiatives include risk adjustment through HCC coding, reducing pharmacologic spending through value-based prescribing practices, identifying practices to reduce avoidable readmissions and ED encounters, as well as improving the patient experience and access to care.

- Thirdly, **Enhancing Collaboration:** HLN works to enhance collaboration among healthcare providers. We believe that patients do best when cared for by a team of physicians and caregivers working together. HLN has over 2,500 physicians and APPs across our Louisiana and Mississippi markets. HLN also supports our providers and patients with our in-house care coordination department and our pharmacy analytics and consultation services. By working together, providers can ensure that patients receive comprehensive and continuous care, which can prevent complications and reduce readmissions.
- Lastly, **Obtaining Financial Incentives:** Value-based contracts often come with financial incentives for meeting specific quality performance metrics. This can be a significant motivator for our providers to improve care quality and efficiency. To obtain these financial incentives, HLN uses data analytics to continuously monitor and evaluate the performance of our providers. This includes tracking key metrics such as patient outcomes, readmission rates, and adherence to treatment protocols. By analyzing the data, HLN can identify areas where care can be improved and pinpoint inefficiencies.

Provider Expectations



Commitment to the Quadruple Aim



Active and ongoing participation and engagement with HLN



Dedication to network integrity

What are our provider expectations? As an organization, we expect our providers to do the following things...

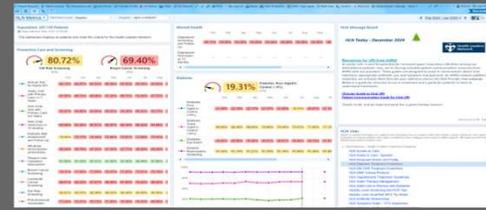
1. Commit to the Quadruple Aim of improving population health outcomes, controlling costs, and improving patient and provider experience. We want to be the provider of choice in our communities, and we want our providers to develop patient relationships that not only improve the health of our patients but our entire community.
2. Actively participate in HLN initiatives, engage with HLN staff during clinic visits, and interact with our HLN educational opportunities.
3. Utilize our network of HLN physicians when available.

Methods of Communication

HLN Essentials Newsletter



EPIC HLN Metrics Dashboard



HLN Provider Resource Hub



Health Leaders Network Website



Health Leaders Network utilizes multiple methods of communication. In order to keep our providers well informed about the most current initiatives, our monthly HLN Essentials digital newsletter is sent via email to our providers. Within EPIC, our HLN Metrics Dashboard provides a monthly dashboard message as well as provider level quality scores. To help providers achieve success with HLN, our HLN Provider Resource Hub provides easy access to all resources such as standards, best practice guidelines, as well as provider education. Lastly, our public facing website offers general information about Health Leaders Network along with the CMS required reporting page.

Population Health Program Manager

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- PHPM communicates with clinic managers / providers to share updates on HLN standards of care, educational resources, and initiatives.
- PHPM will support new providers through the HLN orientation process and be the main HLN liaison for providers.
- The level of involvement between a PHPM and a clinic and/or provider is based on providers specialty.
- PHPM will oversee the implementation, operation, and evaluation of health initiatives to ensure desired outcomes are met.

As a PHPM, I communicate with clinic managers and providers to share updates on HLN standards of care, educational resources, and initiatives. I support new providers through the HLN orientation process and serve as the main HLN liaison for them. The level of my involvement with each clinic or provider is tailored to their specialty. Additionally, I oversee the implementation, operation, and evaluation of health initiatives to ensure we achieve our desired outcomes.

New Provider Education Courses

Introduction to HLN

Value-Based Care

Patient Attribution

Hierarchical Condition Category (HCC) Coding

HLN Metrics Dashboard

Care Gaps

Pharmacy Analytics & Medication Adherence

Medicare Annual Wellness Visits (MAWV)

Adult Clinical Standards

Pediatric Clinical Standards

Intensive Case Management

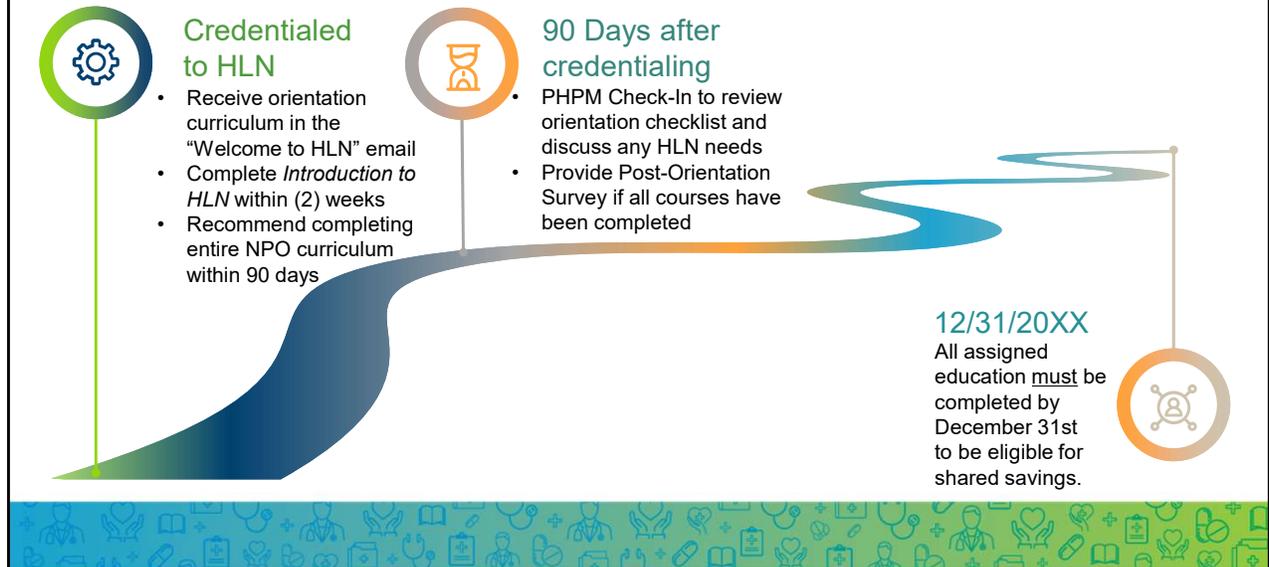
Home Health Initiative

Relationship-Centered Communication (RCC)

To achieve the Triple Aim of health care, HLN has established educational requirements for all incoming providers. Our orientation curriculum is intended to establish a general understanding of value-based care and HLN best practices. Providers are assigned specific required courses based on their EMR, their patient population, and their medical specialty.

On the next slide, we will talk about the required education timeline.

HLN Provider Orientation Education Timeline

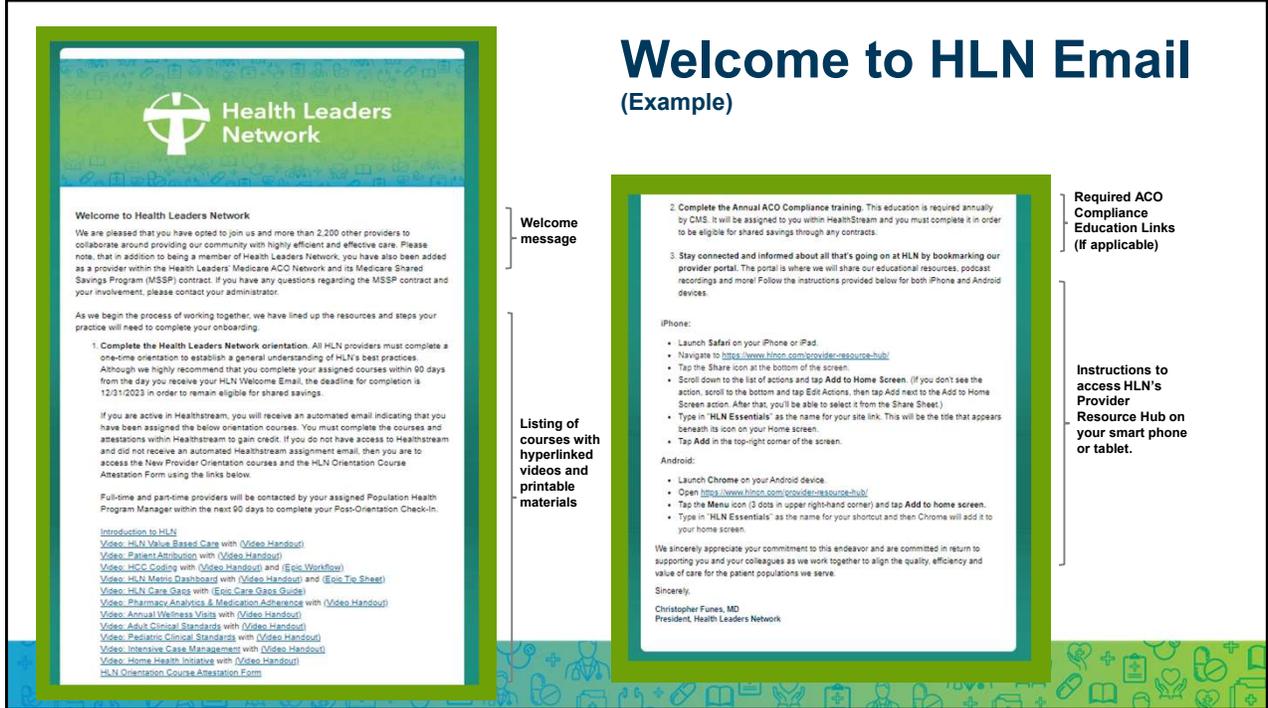


Once a provider is credentialed into HLN, a “Welcome to HLN” email is sent that will contain general information about HLN along with the assigned orientation curriculum. It is recommended that providers complete all assigned courses within 90 days to encourage the early implementation of HLN’s value-based practices.

Full-time and part-time providers will have a 90-day check-in with their assigned population health program manager. This check-in is an informal meeting that can be held in person or virtually and is intended to strengthen the relationship between providers and HLN by addressing any needs a provider may have or barriers that the provider may be experiencing.

To be eligible for shared savings, all orientation courses must be completed no later than December 31st.

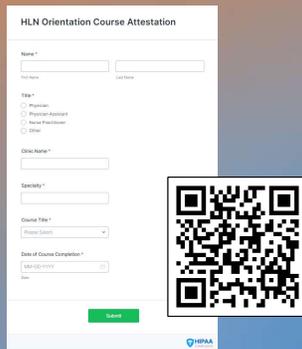
***Note** – Shared savings are dependent upon the payor contract.



This is an example of a “Welcome to HLN” email. You’ll see that there is a brief welcome message from our president, Dr Funes. This is followed by a short set of instructions and any assigned courses which can be watched by clicking on the hyperlinked text. Towards the bottom of the email, we’ve included instructions on how to access our HLN Provider Resource Hub on your smart phone or tablet.

Course Attestation

1. Take out phone
2. Select **Camera** application on phone
3. Scan below QR Code
4. Select Website banner
5. Fill out form
6. Course title is **Introduction to HLN**
7. Click **Submit Form**



The image shows a screenshot of a web form titled "HLN Orientation Course Attestation". The form includes the following fields and options:

- Name ***: Two input fields for "First Name" and "Last Name".
- Title ***: Radio button options for "Employee", "Healthcare Assistant", "Non-Professional", and "Other".
- Clinic Name ***: An input field.
- Specialty ***: An input field.
- Current Title ***: A dropdown menu with "Provider Contact" selected.
- Date of Course Completion ***: A date picker set to "12/30/2024".

At the bottom of the form is a green "Submit" button and a small "HIPAA" logo. To the right of the form is a large QR code.

Thank you.



This will conclude our introduction to Health Leaders Network. Please take out your smart phone and use the camera function to scan the QR code on the left. Complete the linked course attestation form. Please be sure to select the course title, "Introduction to HLN". Credit for course completion will only be issued if you complete and submit the form.