

Data Analytics Roundtable

November 9, 2017



INTRODUCTION OF SPEAKERS



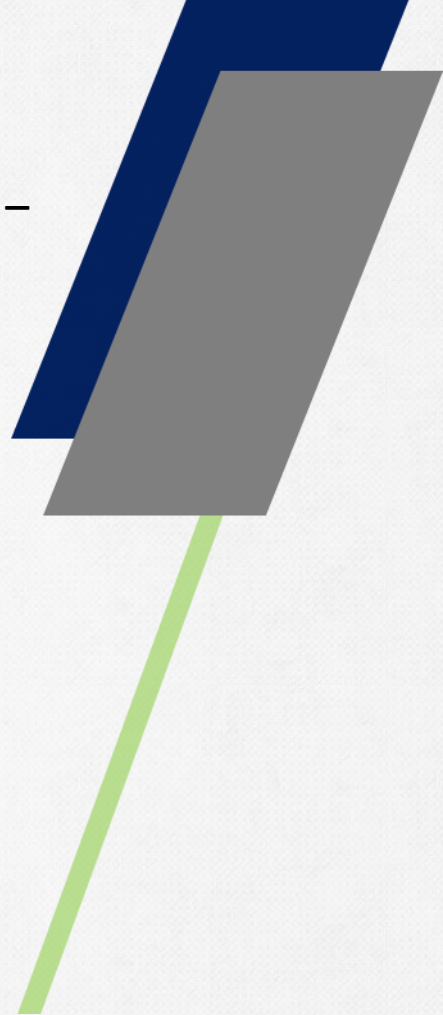
Dr. Chris Decker, Chief Transformation Officer & Professor –
Medical College of Wisconsin



Greg Stadter, MPH, Program Director –
Milwaukee Health Care Partnership

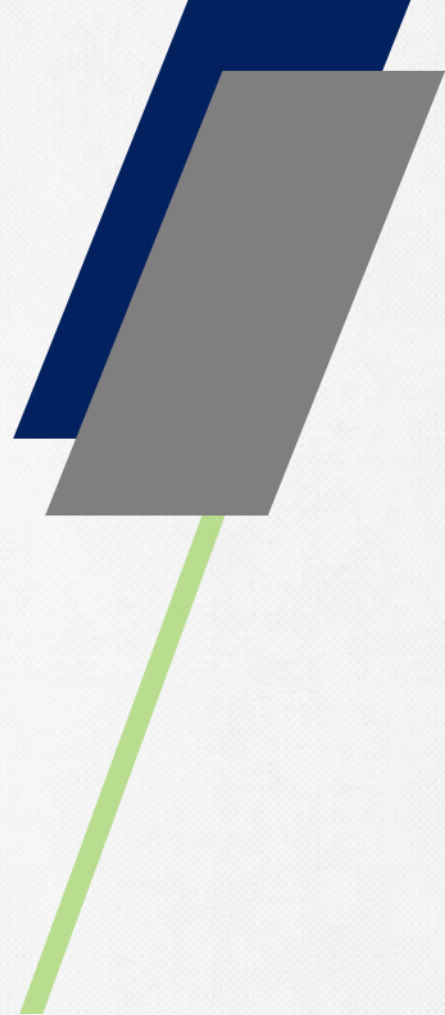


Steve Rottmann, Chief Operating Officer –
WISHIN



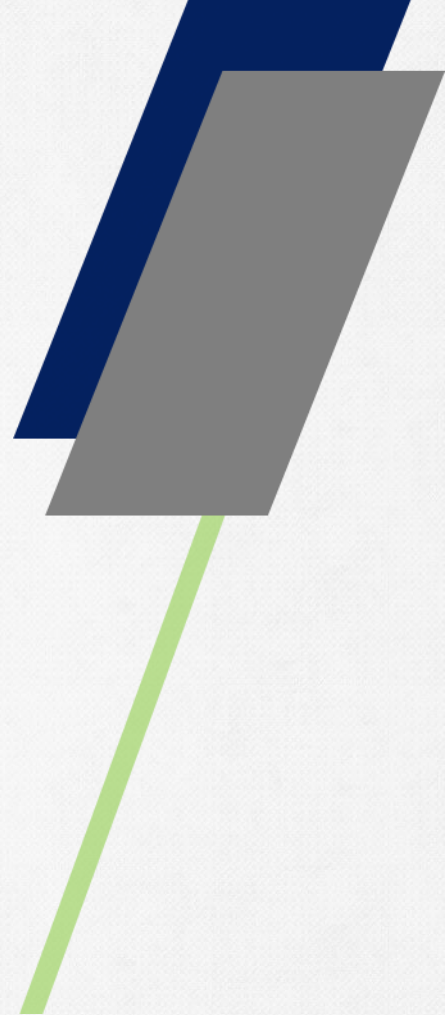
OVERVIEW

- Highlight the availability of EHR agnostic data within the WISHIN network
- Open conversation for questions and an opportunity to better understand data needs of your organization
- How can WISHIN alleviate the burden of data aggregation and analytics?
- Data-driven patient care and business decisions.



OUTLINE

- Where do we begin?
- Assumptions
- Governance
- Use Cases
- Open Conversation



Where do we begin?



ASSUMPTIONS

- Single source of EHR agnostic data
- Manage and reduce cost of care
 - Under-served
 - At-Risk
- Shared learning
- Data driven decision-making



DATA CLEANSING

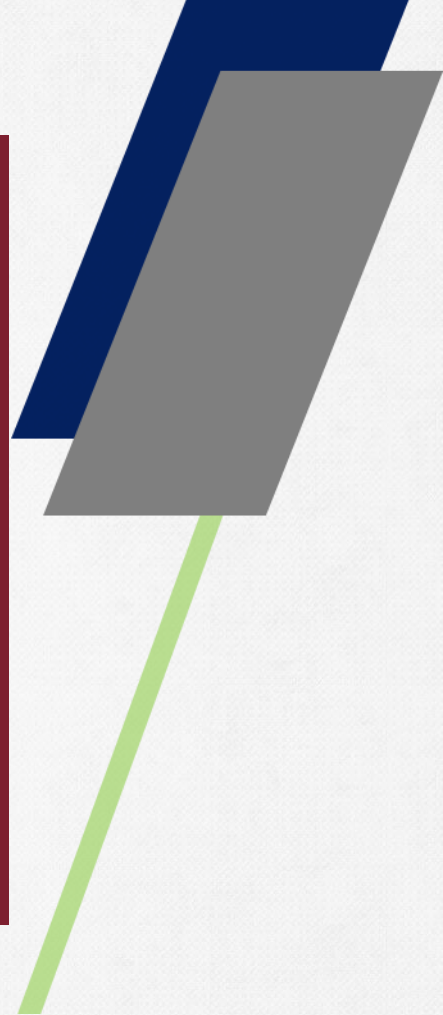
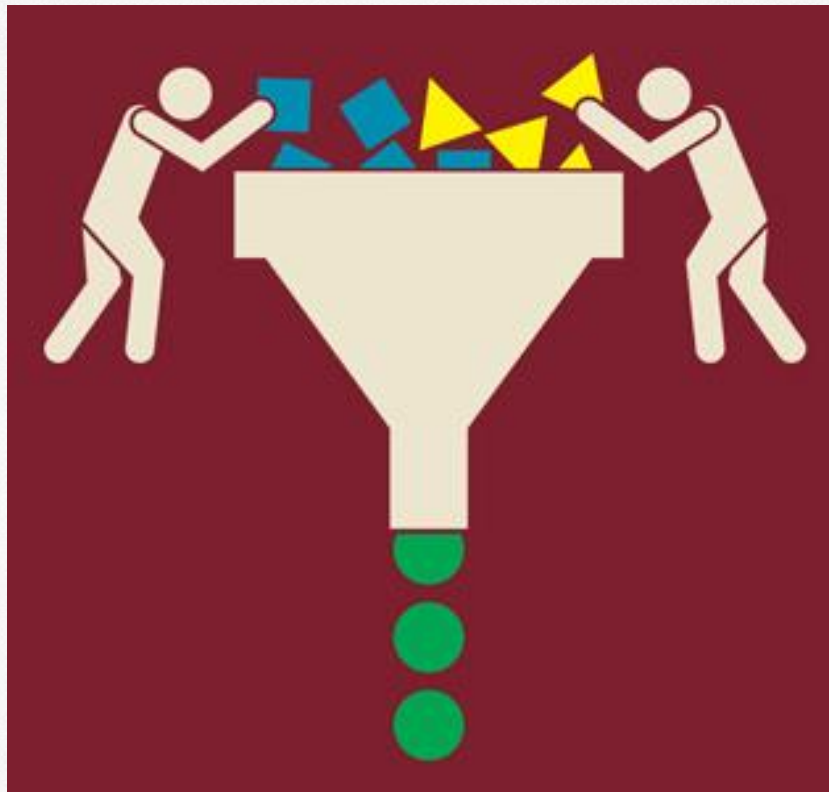
- Quality
- Analysis
- De-dup
- Standardization
- Normalization

GOVERNANCE

- Define access
- Approve WISHIN Data Use Participation Agreement

OUTPUT

- Dashboards
- Canned & Custom Reports
- Availability
- Delivery



WHAT DATA IS AVAILABLE?

- Patient Demographics
 - Problem list
 - Diagnoses
 - History & Physical (H&P)
- Encounter history
 - Admit & Discharge date/time
 - Facility & Provider
 - Procedure
 - Insurance
 - Allergies
- Order Information
 - Lab & Path results
 - Radiology reports
 - Clinical Notes
- Medication history
 - Medicaid
 - CCDA



Use Cases



TARGET PATIENT POPULATION MANAGEMENT

- Patterns & Trends
 - Disease
 - Utilization
 - Demographics
 - Social Determinants
- Care Management
 - Coordination
 - Intervention
- Visuals
 - Breakout heat maps





USE CASE #1 – FREQUENT ED USERS

- Identify cohort – 2016 Milwaukee data
 - 3+ ED visits in 30-days
 - 6+ ED visits in 90-days
 - 11+ ED visits in 1 year
- Goal – Decrease patient ED use
 - Actual reduction
 - Movement to another facility
- Next steps
 - Patient outreach
 - Appropriate use



USE CASE #2 – BLEND SOURCES

- EHR system data
- Financial system data
- State and Federal data
- QPP measures & scorecards



Other Use Cases

- Patient-sharing (leakage)
- Length of stay
- At-Risk cohorts (diabetic, heart disease, etc.)
- Public Health reporting
- Claims & Clinical data integration



Open Conversation





WHAT'S IMPORTANT TO YOUR ORGANIZATION?

- Don't know, what you don't know

- Current health care goals:
 - Care Coordination
 - Transient population
 - Quality initiatives
 - Value-based
 - Risk-Sharing
 - Data aggregation

FINAL THOUGHTS OR QUESTIONS

