



# Transforming Older Adult Health Through Value-Based Care



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Care Network

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There's a higher path available  
for America's seniors





The era of value-based care has arrived.  
And senior living must lead the way.





# SERVIAM

*Empowering senior living's move  
to value-based care*

We're here to be the on-ramp for senior living communities to join this system of the future — today.

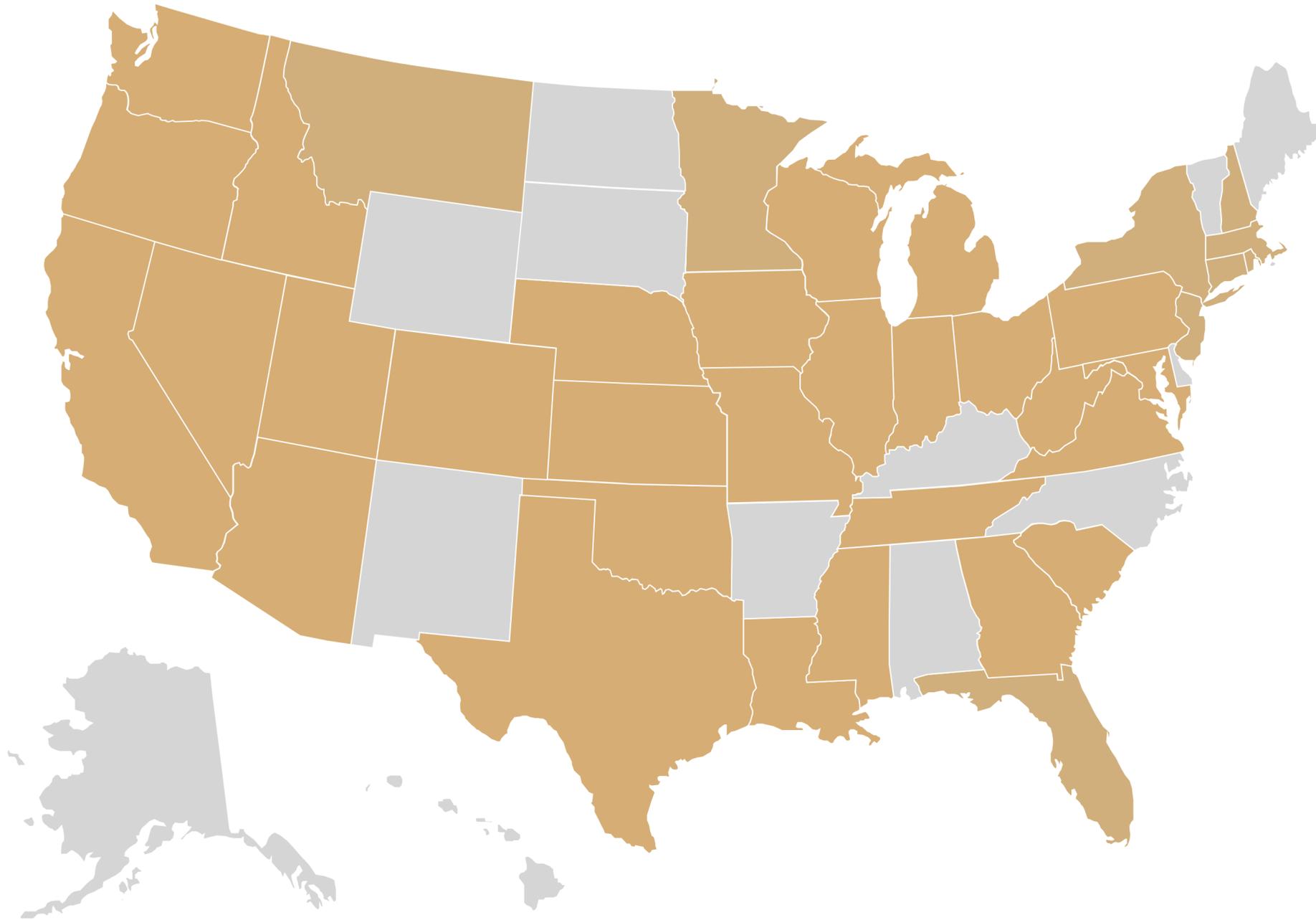
## *Our Purpose*

To be in service to the transformation of how America cares for seniors.



# We're building a movement

*Transformation won't come from one of us. It comes from all of us.*



**600+**

Communities

**37**

States

**>50k**

Seniors

# What is value-based care?

The concept that healthcare providers should get paid for keeping people healthy rather than the volume of services they deliver.

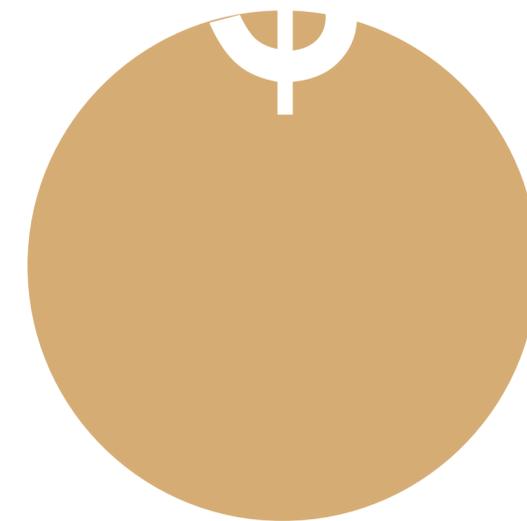
The goal is to help seniors maintain the highest possible level of wellness, rather than waiting until they get sick to provide care, which is often more complex and expensive.



Proactive  
Health Model

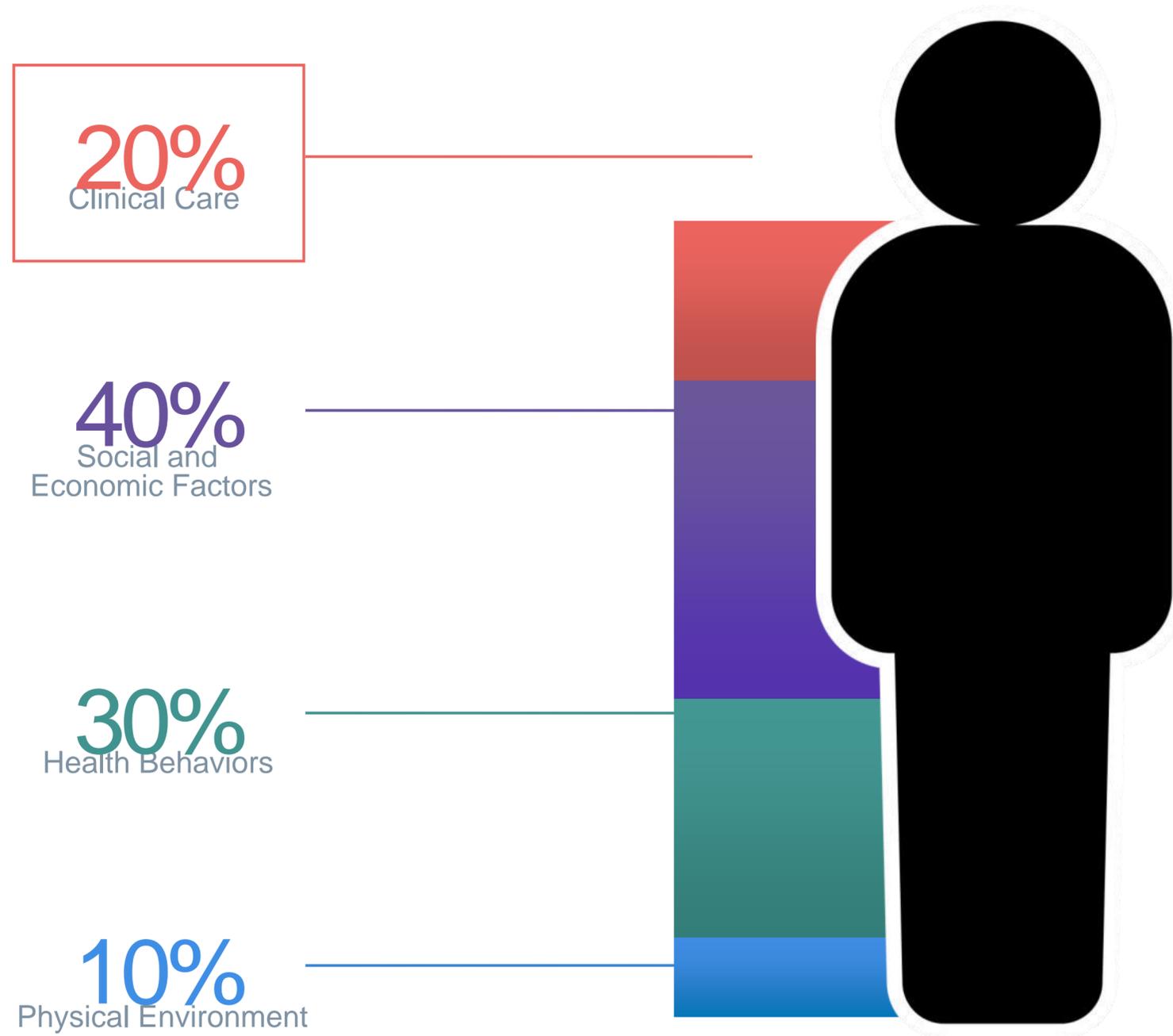


Improved Health  
Outcomes for Residents



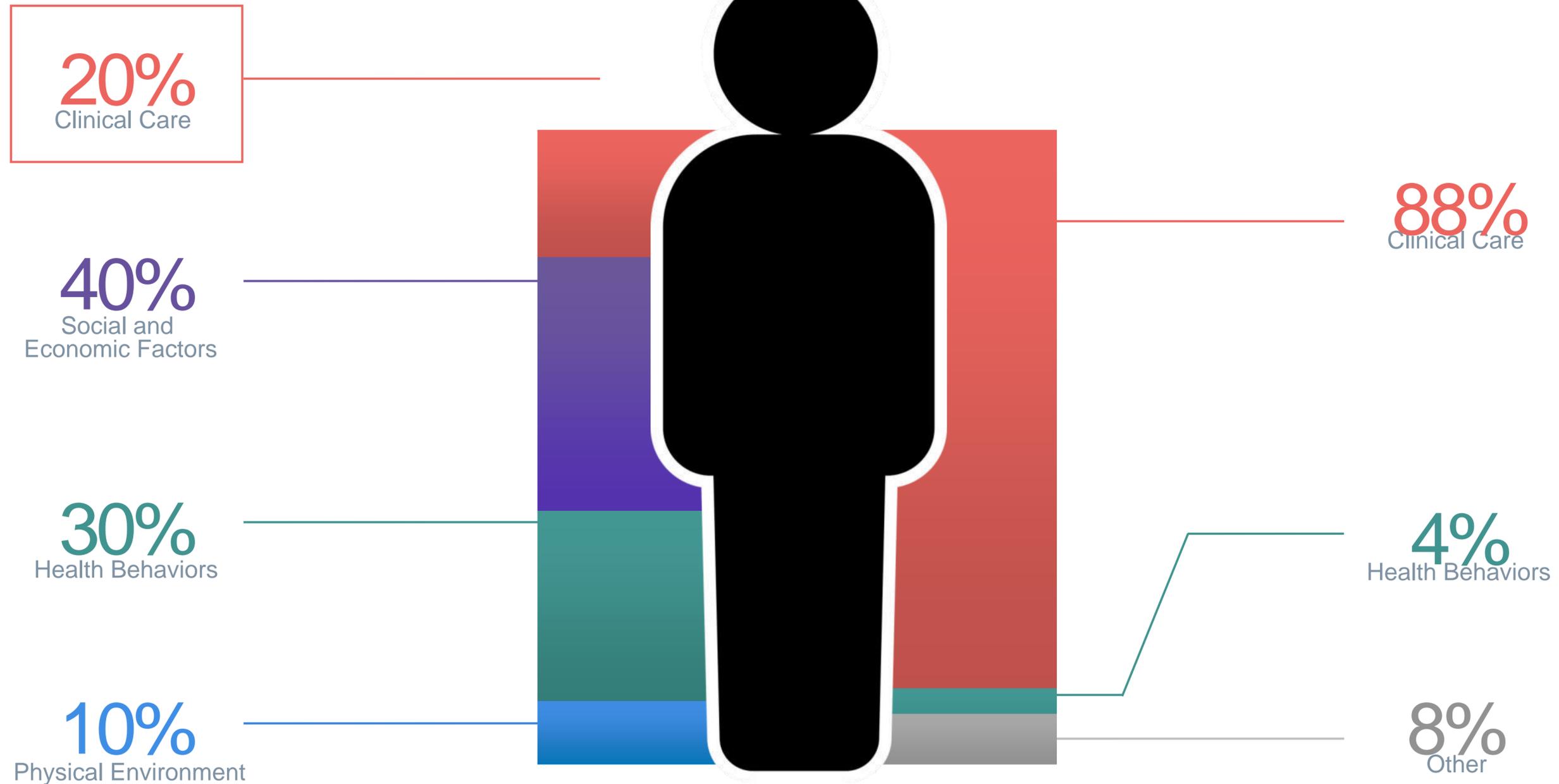
Financial Incentives  
for Operators

# What drives health **outcomes**?



What drives health **outcomes**?

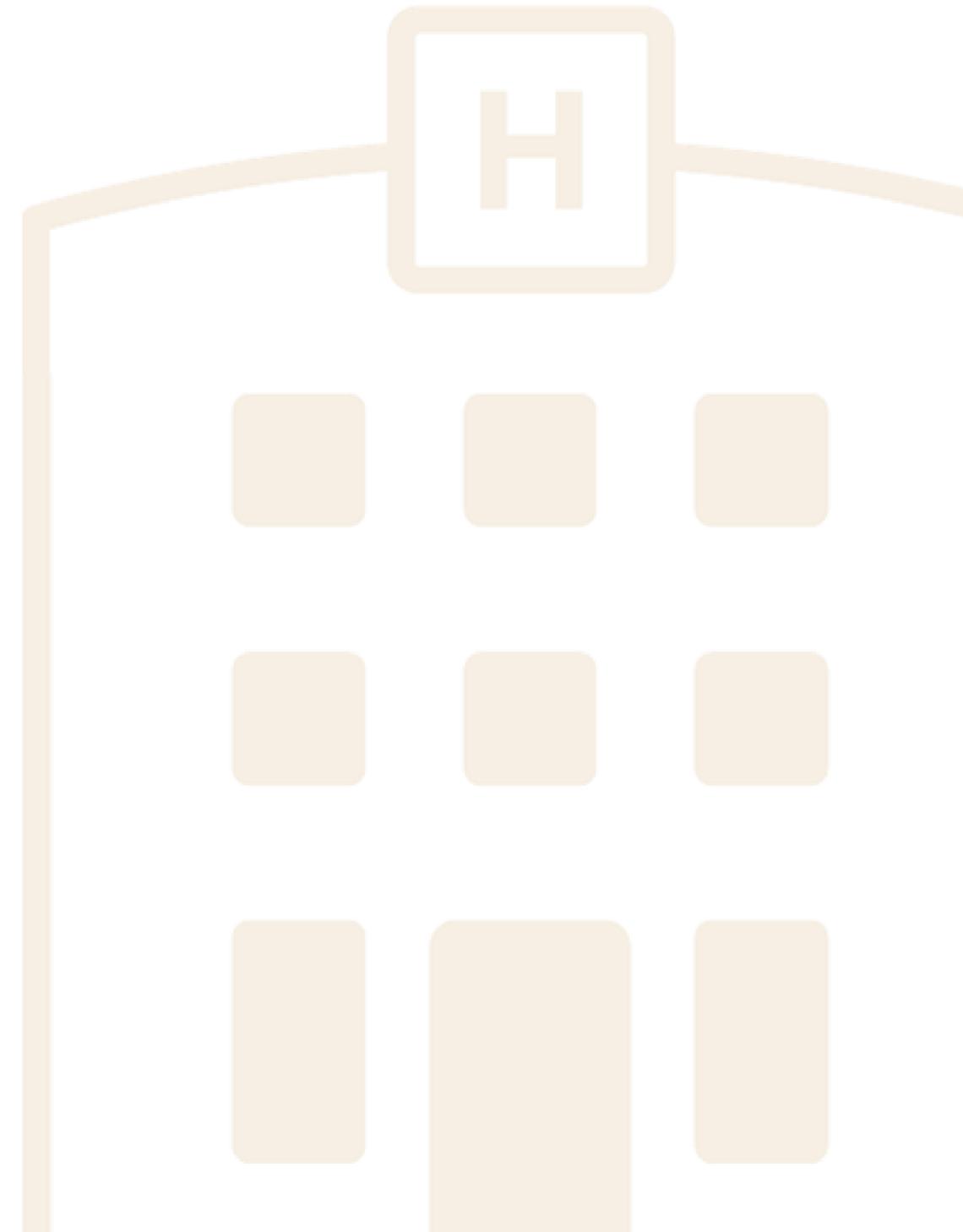
Where do we **spend** health care dollars?



# What has this created?

A hospital-centered sick care system

- Reactionary & episodic
- Fragmented & disconnected
- Creates dependence
- Expensive



# The Senior's Journey on the

# *LowerPath*



Quality of Life

Health, Dignity, Independence, etc.

Time

# The Senior's Journey on the

# *LowerPath*



Quality of Life

fall



fall with fracture



stroke



sepsis

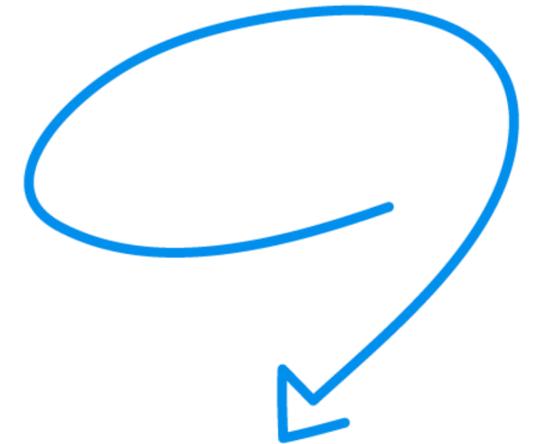


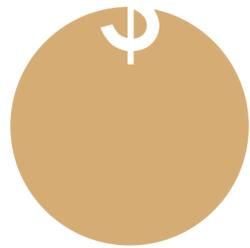
dementia diagnosis



Time

**Downward  
health spiral**





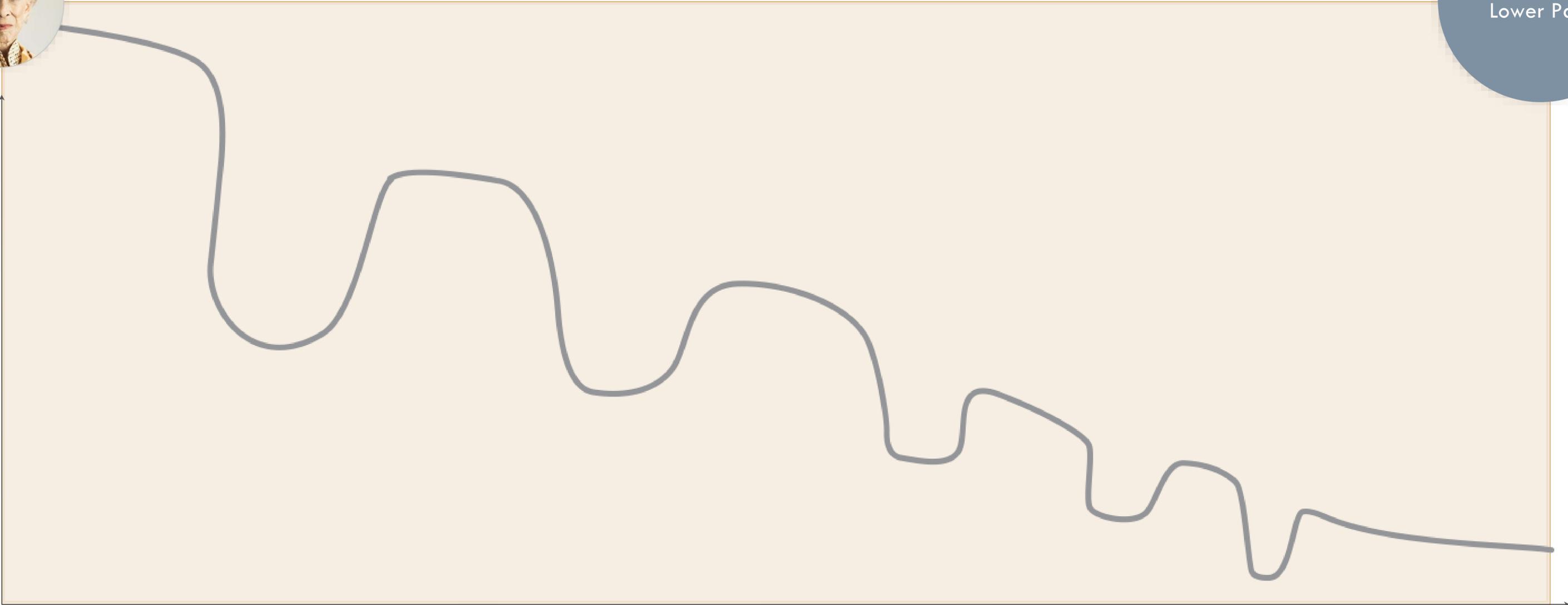
# Health Care Spending



**\$800K**  
Lower Path

Quality of Life

Time



# The Senior's Journey on the

~~LowerPath~~

HigherPath

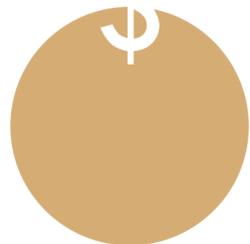
Living happier,  
healthier, longer



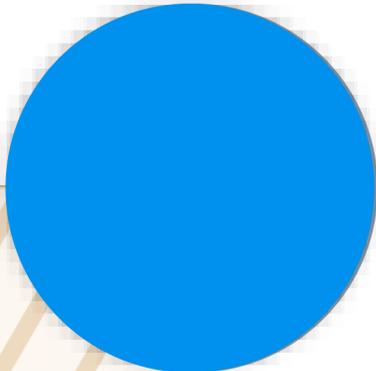
Quality of Life

Time





# Health Care Spending



Quality of Life

Time

Spending

10-30%  
Savings

\$560  
Higher



Senior Living is the key stakeholder  
in the move to value-based care



Senior living impacts ALL the factors that drive outcomes  
(i.e. environment, social, behaviors, clinical)

Captive population in a community-based setting (their home)

Trusted advisor relationship impacts:



*Physician choice*



*Pharmacy choice*



*Health insurance choice*

Exponential impact in healthcare spending

50-60% of total health care spending is on 15% of the total population (seniors)

Strategic source for development  
of health plan benefits and sales

## The Problem

Senior living communities don't have the capacity to operate within a value-based care system

### Capacity Gaps

#### Educational

Don't understand the model

#### Operational

Requires a different business/care model

#### Relationship

Don't have relationship with key stakeholders, specifically payors

#### Technology

Requires different technology solutions

#### Density

Inability to aggregate lives

#### Scale

Difficulty scaling this model across an organization

#### Incentive

Financial model is misaligned

## The Problem

Senior living communities don't have the capacity to operate within a value-based care system

## The Solution

Create a platform that allows senior living communities to thrive within a value-based care system



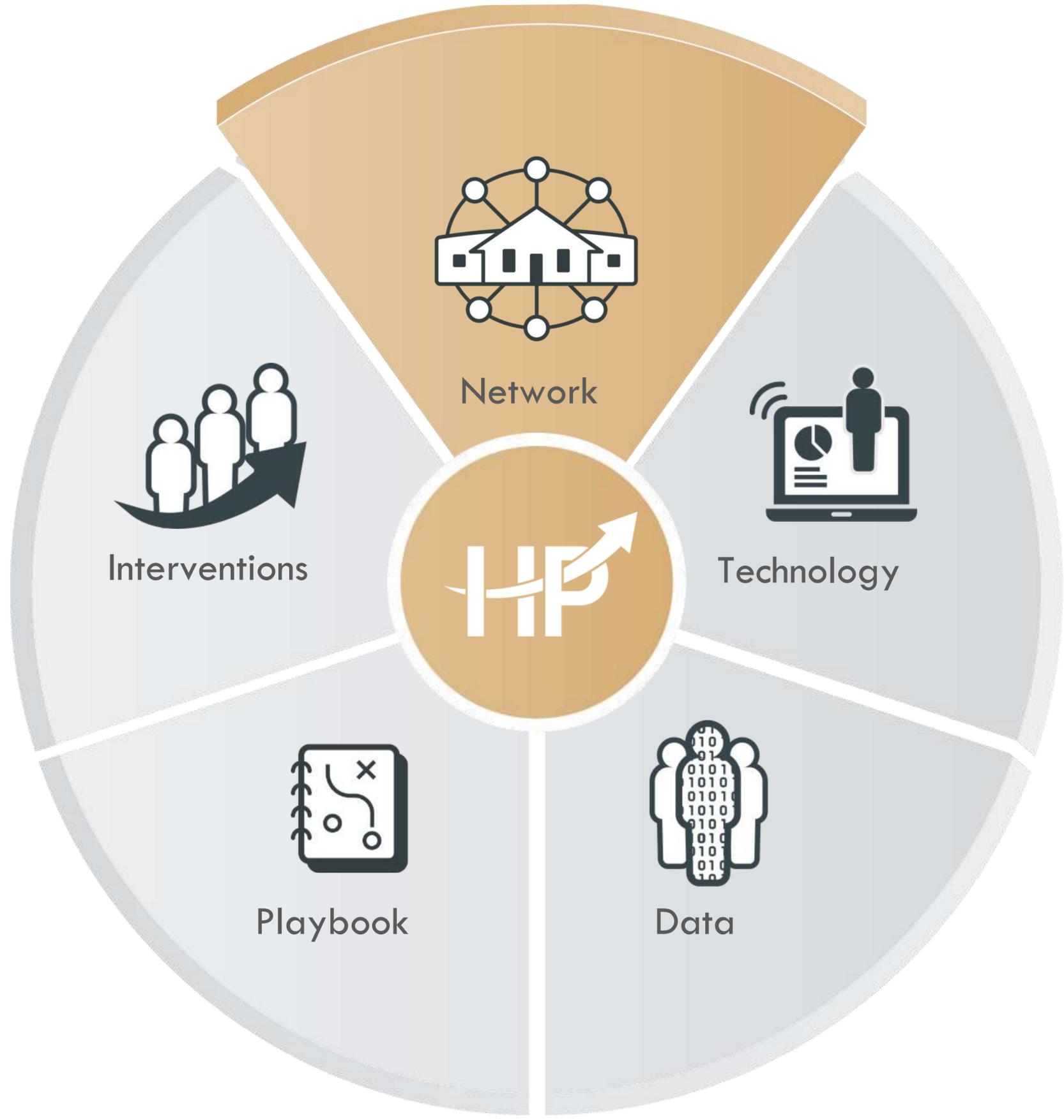
Health Model

Holistic approach  
Proactive vs reactive  
Improves outcomes



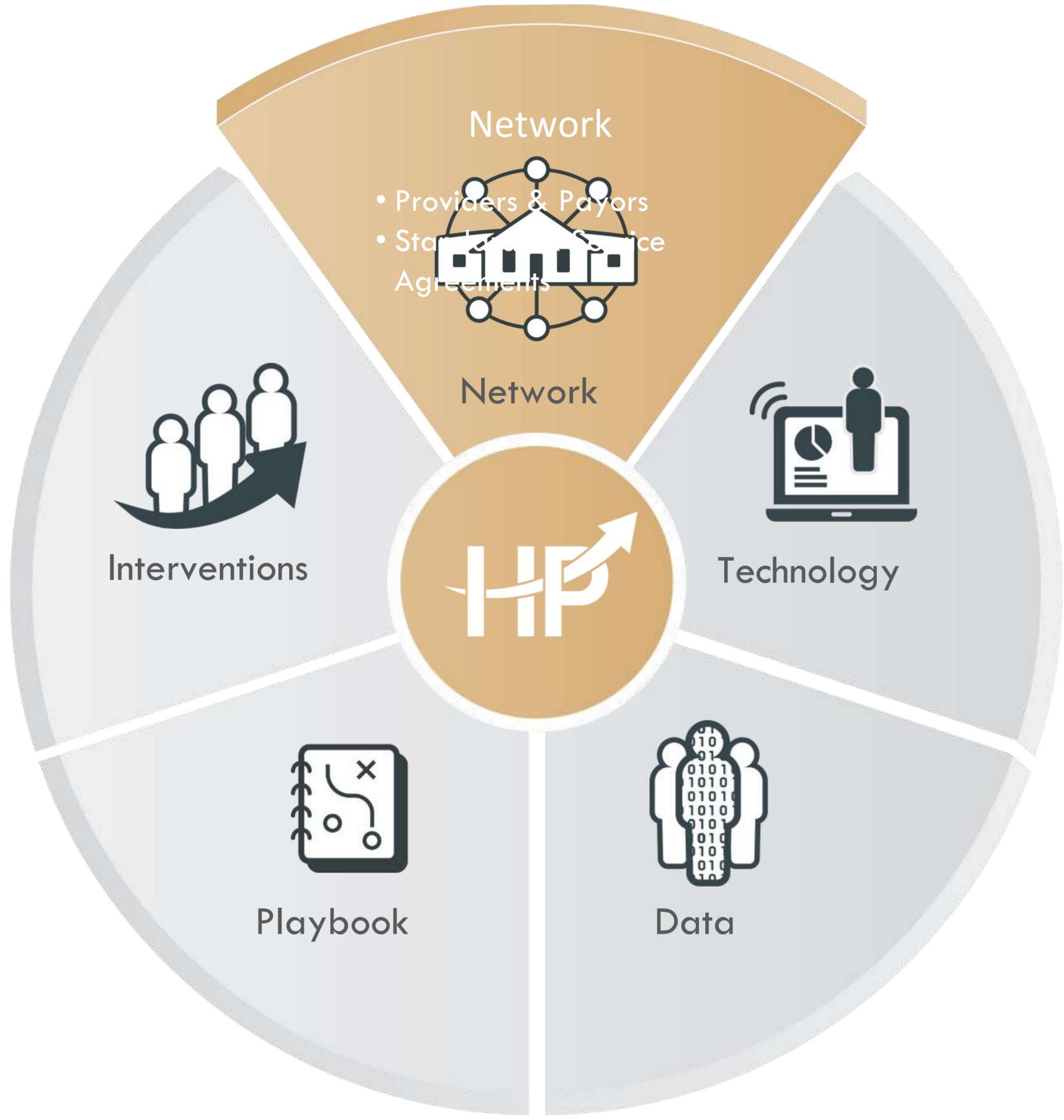
Local Value-based  
Care Alliance (MSO)

Creates scale and density  
Aligns incentives  
Manages the network



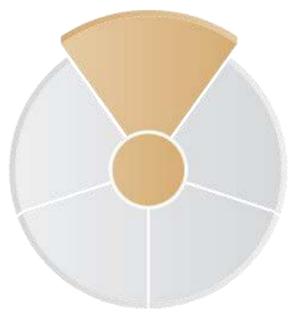
# HigherPath

Our nationally recognized approach to help seniors live happier, healthier – longer

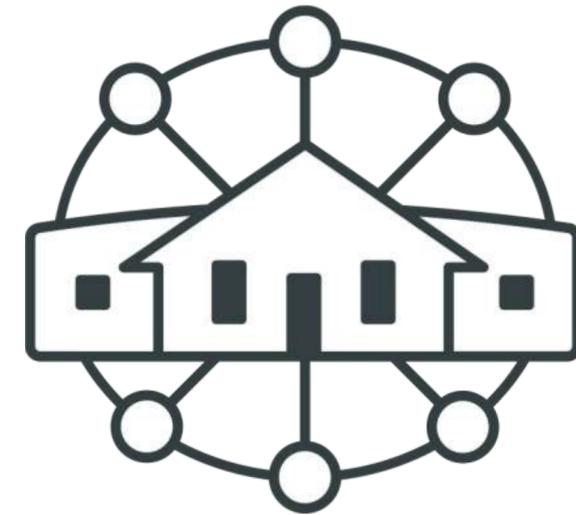
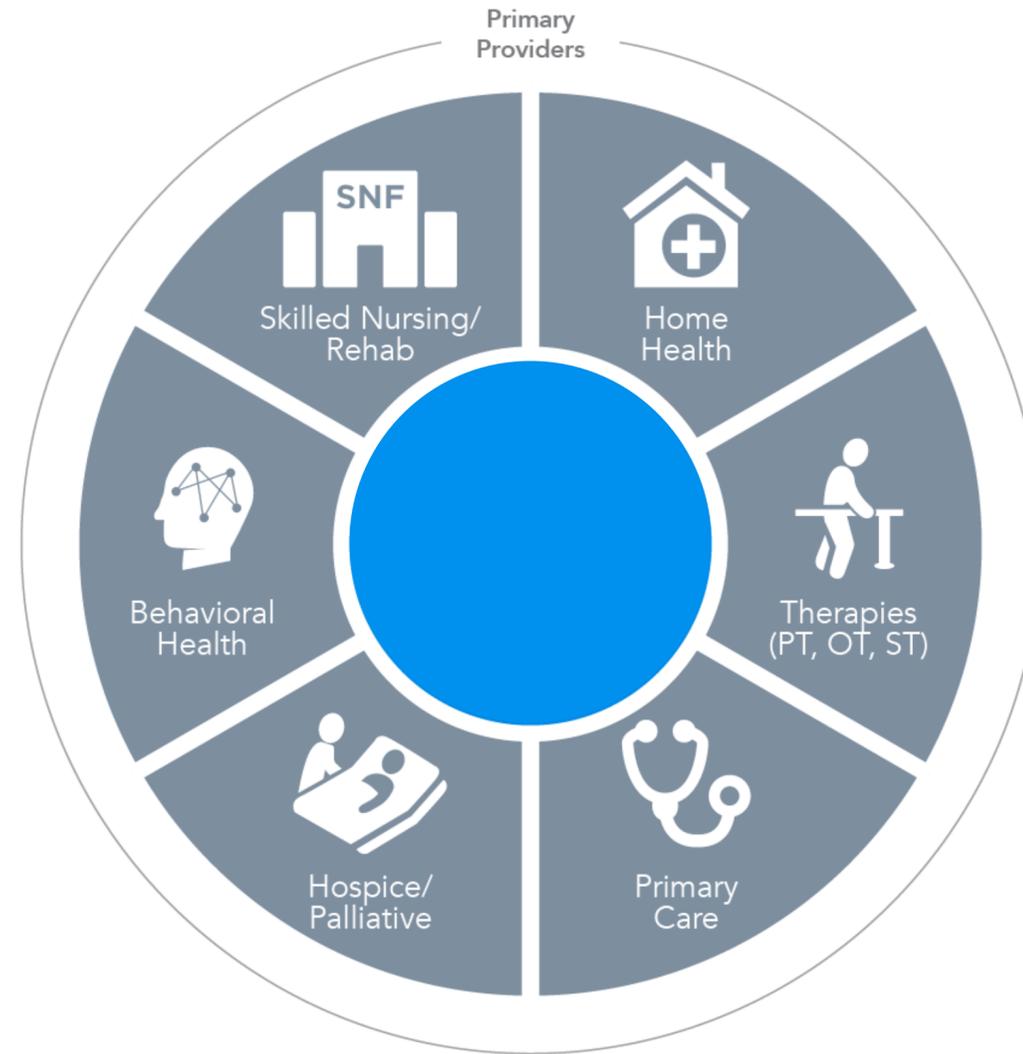


High-Performing Network

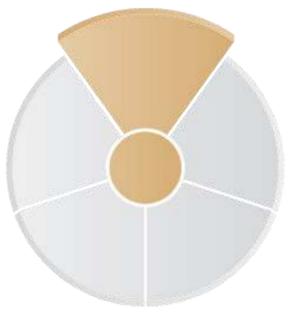
# High-Performing Network



Network

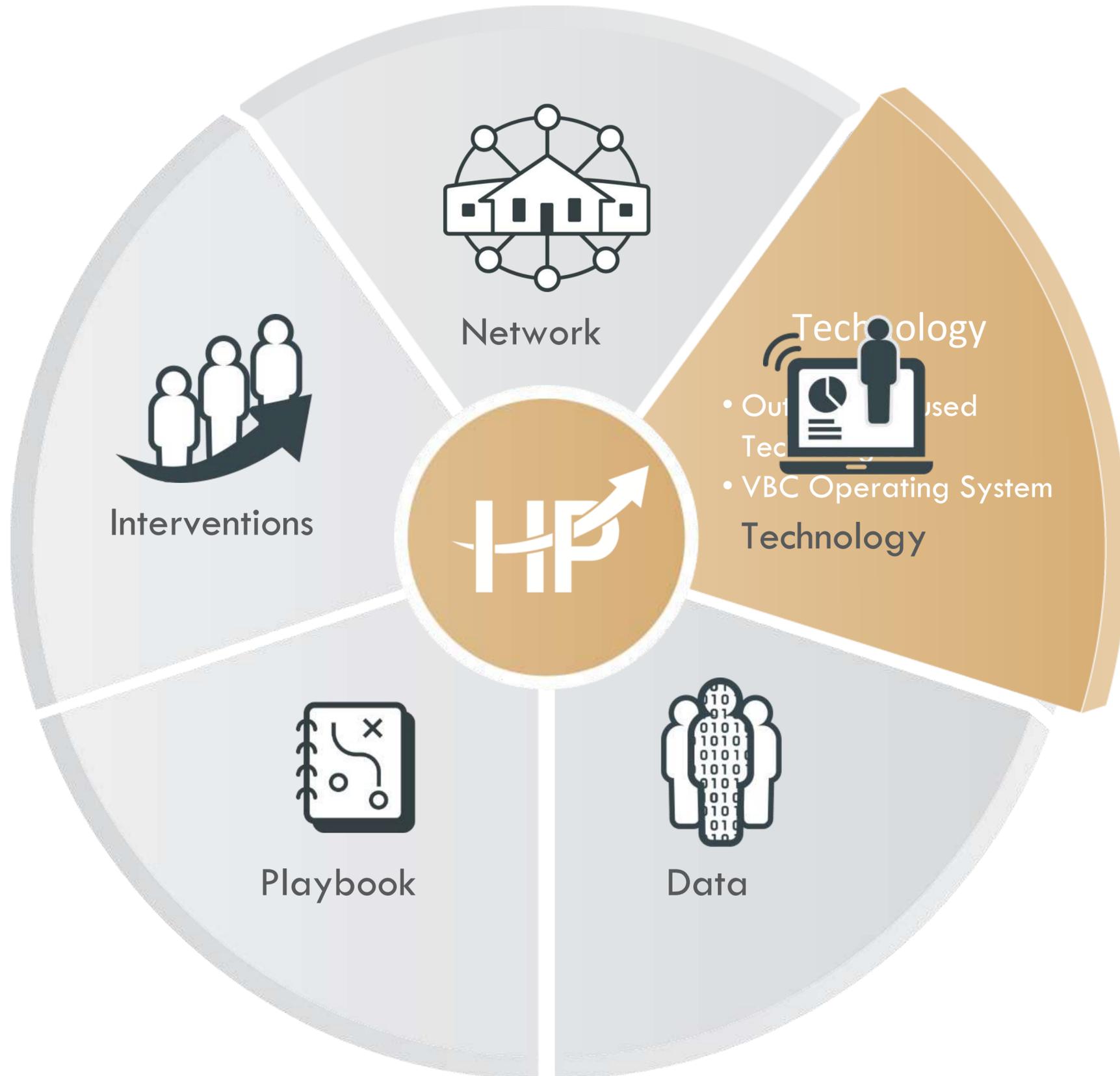


# High-Performing Network



Network

# What drives health outcomes?

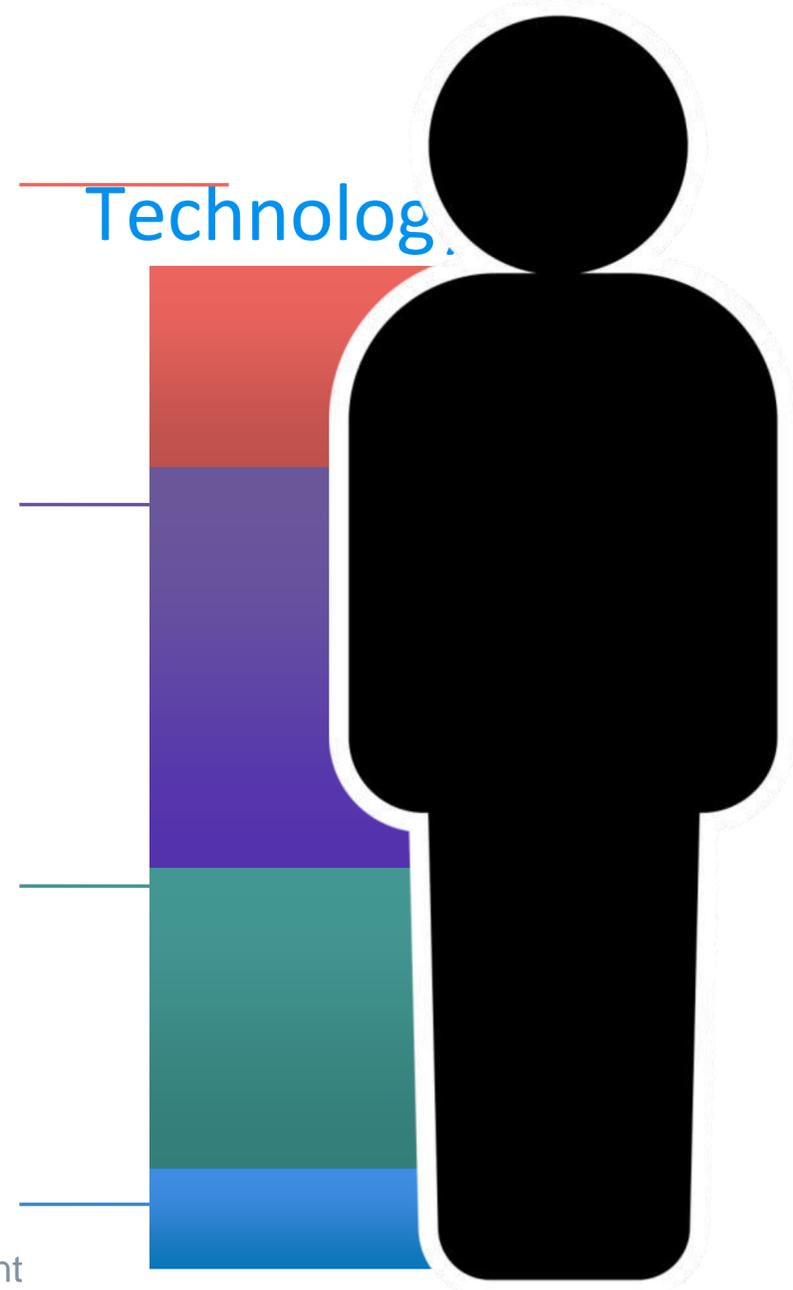


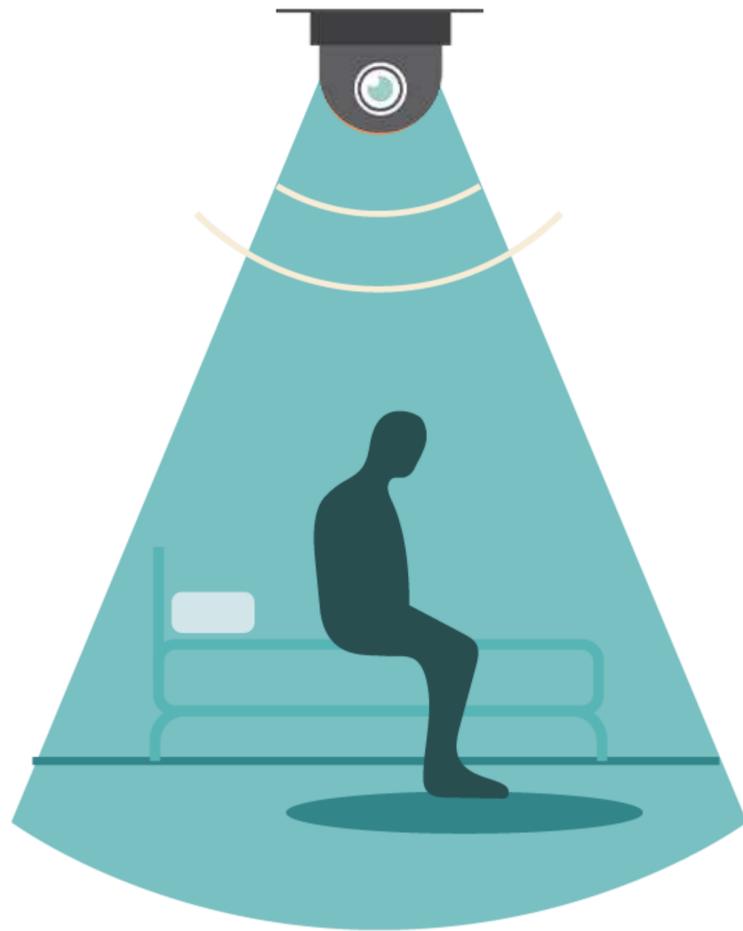
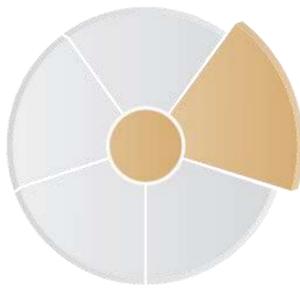
20%  
Clinical Care

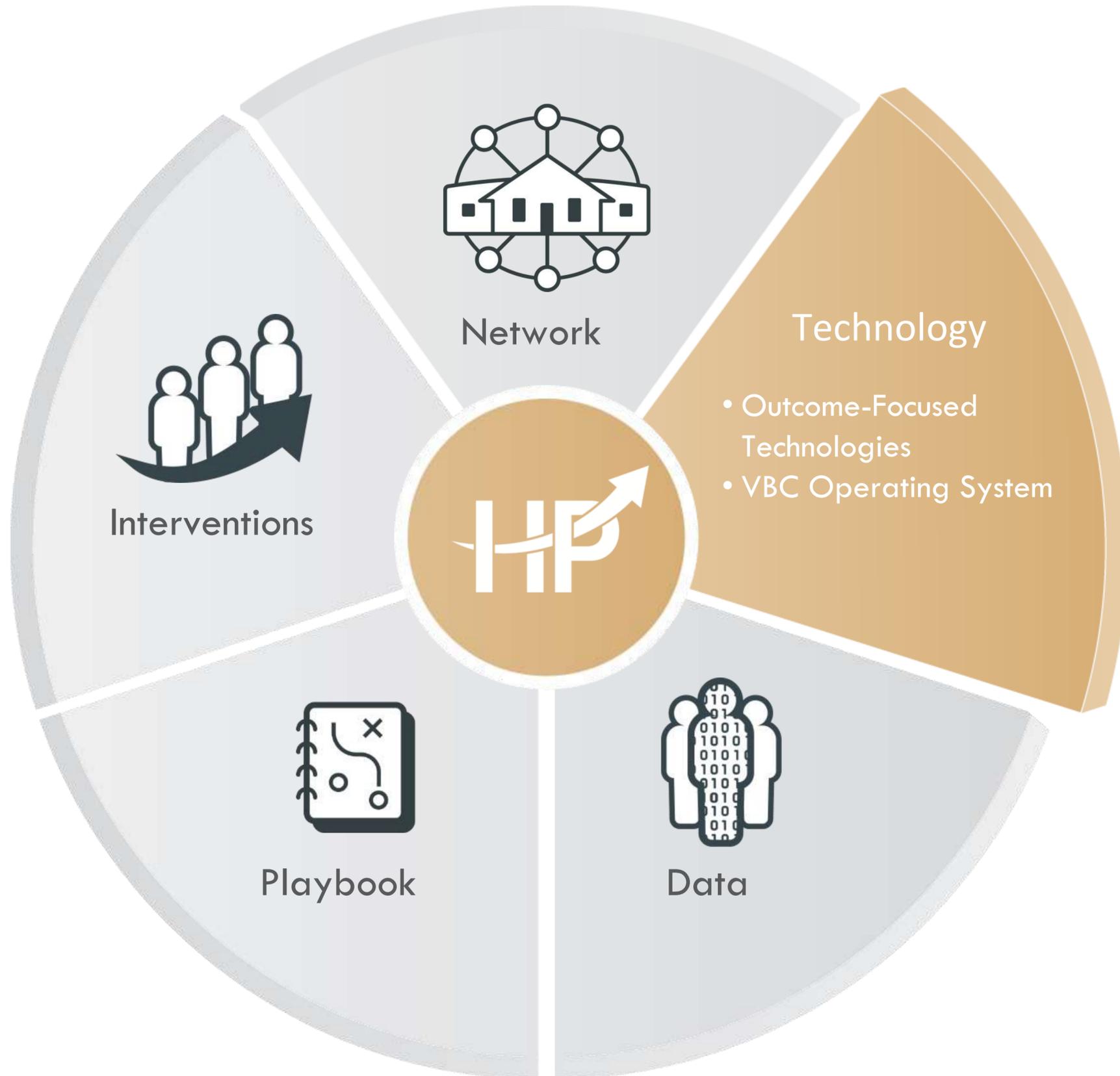
40%  
Social and  
Economic Factors

30%  
Health Behaviors

10%  
Physical Environment







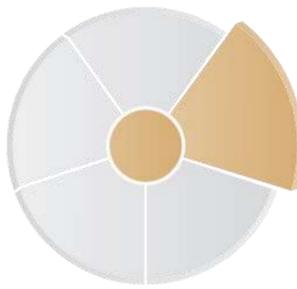
# HigherPath

Value-Based Care  
Operating System



# VIA HigherPath<sup>↑</sup>

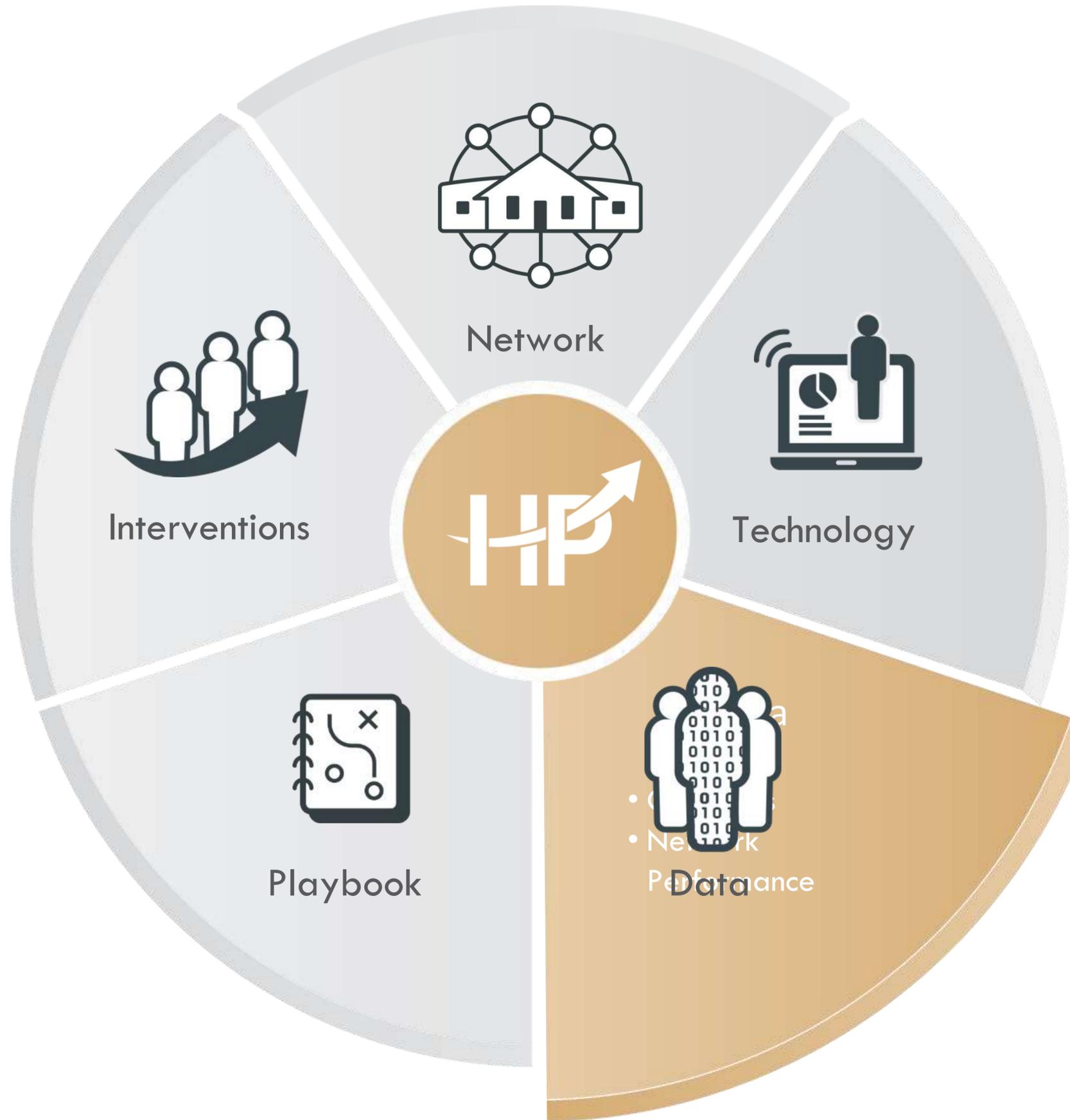
*A Value-Based Care Operating System*



Technology

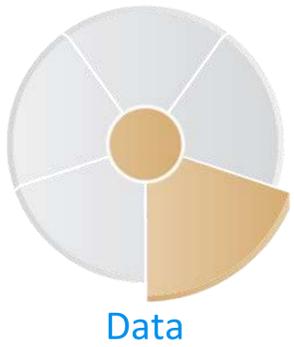
## **Transforming independent care providers into a high-performing network**

- Integrated health record
- Community-level population health
- Enrollment manager
- Network management
- Communications hub
- Workflow automations
- Actionable insights
- Committed Actions
- HigherPath Council tracker

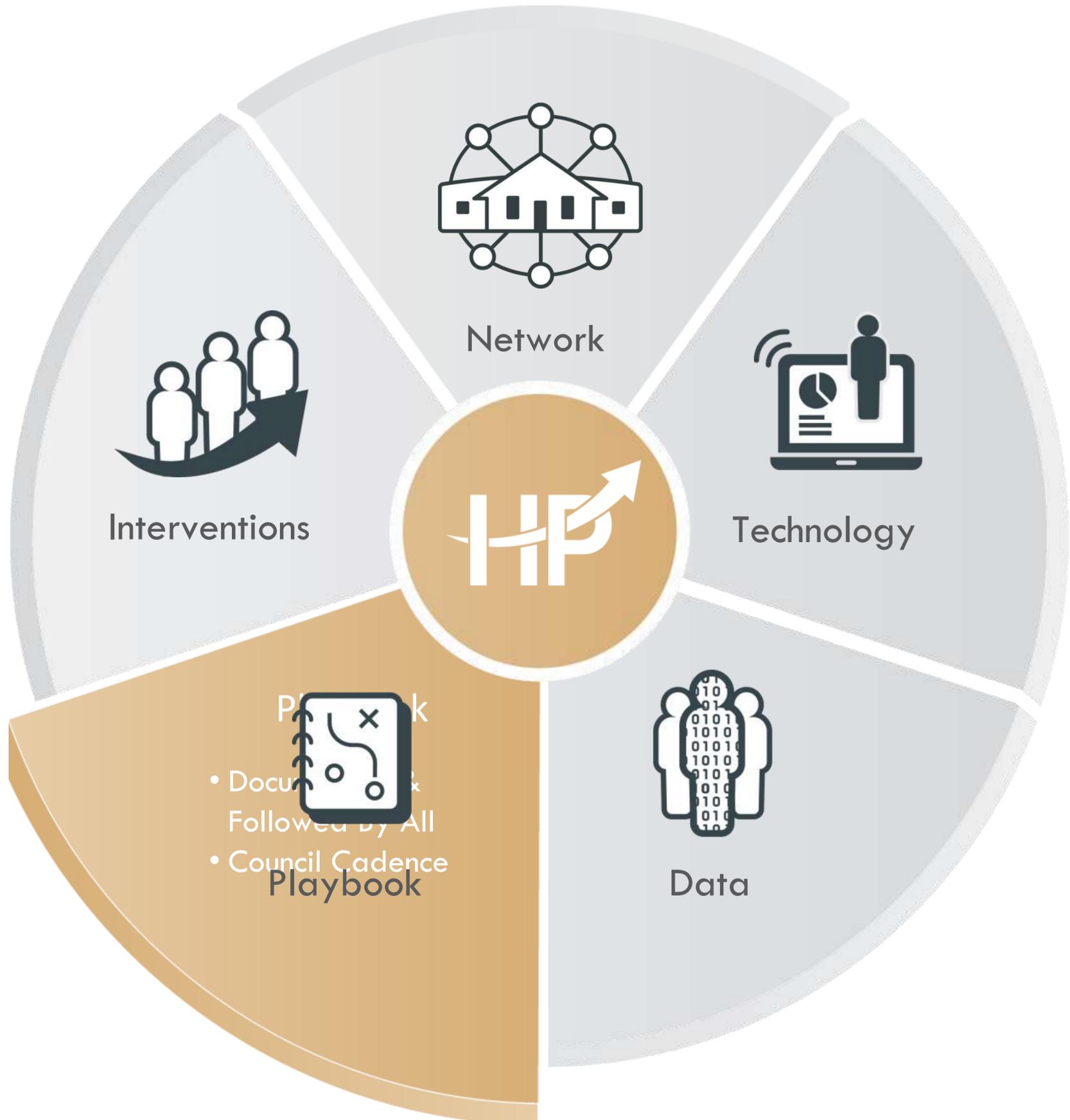


Data

# Outcomes



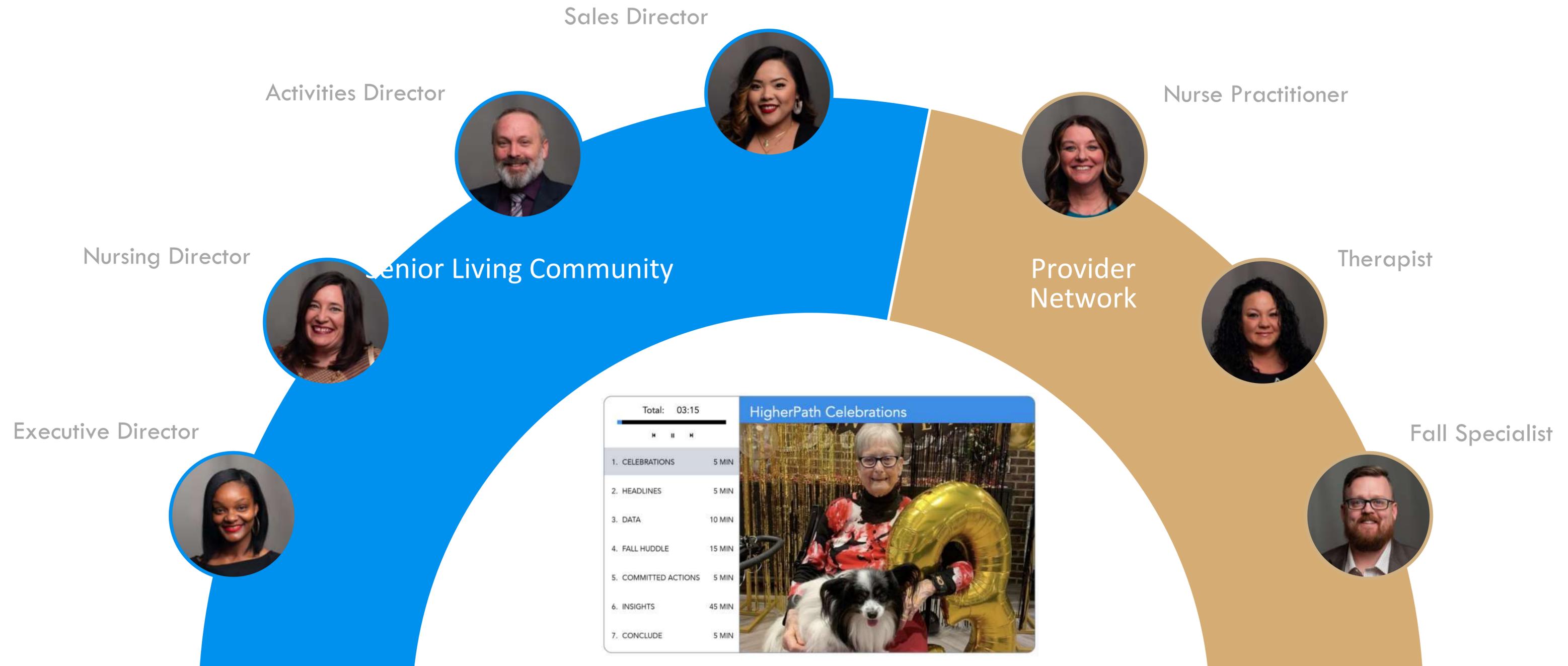
Scorecard					
Title	Goal	Dec 30 - Jan 05	Dec 23 - Dec 29	Dec 16 - Dec 22	
Physical response times - Care Predict	$\leq 5$	9	8	9	
Number of falls	$= 0$	4	2	4	
Falls with significant injury	$= 0$	0	0	1	
Hospital visits - observation only	$= 0$	0	0	1	
ER visits	$= 0$	1	0	1	
In-patient hospital admission	$= 0$	1	0	0	
Move outs / hospital discharges	$= 0$	0	0	1	
PCP assigned primary	$\geq 58$	47	45	45	
PCP assigned secondary	$= 64$	57	55	54	
Health plan enrollment	$\geq 32$	11	12	13	



Playbook

# HigherPath Council

- Weekly 90-minute in-person meeting
- Interdisciplinary care providers
- Runs in V/A HigherPath



Sales Director

Activities Director

Nurse Practitioner

Nursing Director

Therapist

Executive Director

Fall Specialist

Total: 03:15

HigherPath Celebrations

1. CELEBRATIONS	5 MIN
2. HEADLINES	5 MIN
3. DATA	10 MIN
4. FALL HUDDLE	15 MIN
5. COMMITTED ACTIONS	5 MIN
6. INSIGHTS	45 MIN
7. CONCLUDE	5 MIN

Total: 03:15

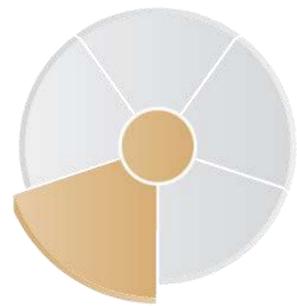


## HigherPath Celebrations



- |                      |        |
|----------------------|--------|
| 1. CELEBRATIONS      | 5 MIN  |
| 2. HEADLINES         | 5 MIN  |
| 3. DATA              | 10 MIN |
| 4. FALL HUDDLE       | 15 MIN |
| 5. COMMITTED ACTIONS | 5 MIN  |
| 6. INSIGHTS          | 45 MIN |
| 7. CONCLUDE          | 5 MIN  |





Total: 09:23



1. CELEBRATIONS 5 MIN

2. HEADLINES 5 MIN

3. DATA 10 MIN

4. FALL HUDDLE 15 MIN

5. COMMITTED ACTIONS 5 MIN

6. INSIGHTS 45 MIN

7. CONCLUDE 5 MIN

## Headlines

Title

Owner

FOX caseload - 25 patients

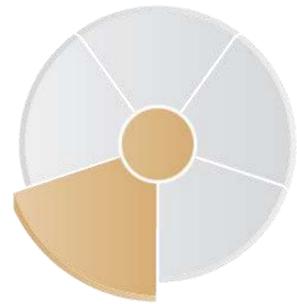


New resident - Debbie Bohi!



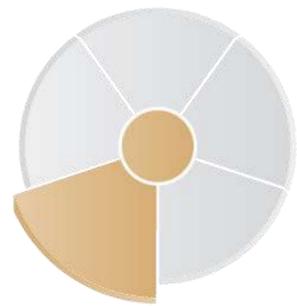
Walter Quigley - D/C from PT





Total: 14:08		Outcome Data				
		Title	Goal	Dec 30 - Jan 05	Dec 23 - Dec 29	Dec 16 - Dec 22
1. CELEBRATIONS	5 MIN	Physical response times - Care Predict	< = 5	9	8	9
		Number of falls	= 0	4	2	4
2. HEADLINES	5 MIN	Falls with significant injury	= 0	0	0	1
		Hospital visits - observation only	= 0	0	0	1
3. DATA	10 MIN	ER visits	= 0	1	0	1
		In-patient hospital admission	= 0	1	0	0
5. COMMITTED ACTIONS	5 MIN	Move outs / hospital discharges	= 0	0	0	1
		PCP assigned primary	> = 58	47	45	45
6. INSIGHTS	45 MIN	PCP assigned secondary	= 64	57	55	54
		Health plan enrollment	> = 32	11	12	13
7. CONCLUDE	5 MIN					





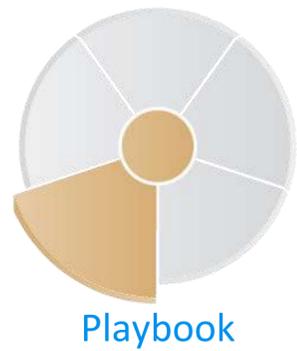
Total: 25:38



## Fall Huddle

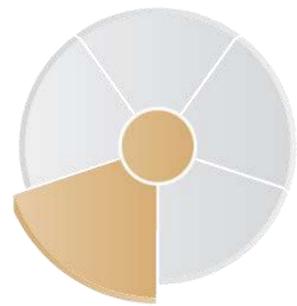
- |                      |        |
|----------------------|--------|
| 1. CELEBRATIONS      | 5 MIN  |
| 2. HEADLINES         | 5 MIN  |
| 3. DATA              | 10 MIN |
| → 4. FALL HUDDLE     | 15 MIN |
| 5. COMMITTED ACTIONS | 5 MIN  |
| 6. INSIGHTS          | 45 MIN |
| 7. CONCLUDE          | 5 MIN  |





Total: 37:13		Committed Actions		
		Title	Due By	Owner
1. CELEBRATIONS	5 MIN	<input type="radio"/> Sue Glasco - check on PRN pain medications and educate on med tech giving to Sue	Dec 8	
2. HEADLINES	5 MIN			
3. DATA	10 MIN	<input checked="" type="checkbox"/> Pem Shuler - see if home health can address different wheelchair cushion (Roho cushion)	Dec 8	
4. FALL HUDDLE	15 MIN	<input checked="" type="checkbox"/> David Wilson - check on status of UTI test	Dec 8	
→ 5. COMMITTED ACTIONS	5 MIN	<input checked="" type="checkbox"/> David Wilson - check on if he is in pain d/t being up all night	Dec 8	
6. INSIGHTS	45 MIN			
7. CONCLUDE	5 MIN	<input checked="" type="checkbox"/> Florine Clarke - reach out to her cousin to discuss Ally Senior Care plan	Dec 22	

# HigherPath Council



Playbook

Total: 37:13		Committed Actions		
		Title	Due By	Owner
1. CELEBRATIONS	5 MIN	<input type="radio"/> Sue Glasco - check on PRN pain medications and educate on med tech giving to Sue	Dec 8	
2. HEADLINES	5 MIN			
3. DATA	10 MIN	<input checked="" type="checkbox"/> Pem Shuler - see if home health can address different wheelchair cushion (Roho cushion)	Dec 8	
4. FALL HUDDLE	15 MIN	<input checked="" type="checkbox"/> David Wilson - check on status of UTI test	Dec 8	
5. COMMITTED ACTIONS	5 MIN	<input checked="" type="checkbox"/> David Wilson - check on if he is in pain d/t being up all night	Dec 8	
6. INSIGHTS	45 MIN			
7. CONCLUDE	5 MIN	<input checked="" type="checkbox"/> Florine Clarke - reach out to her cousin to discuss Ally Senior Care plan	Dec 22	

← Nurse Practitioner

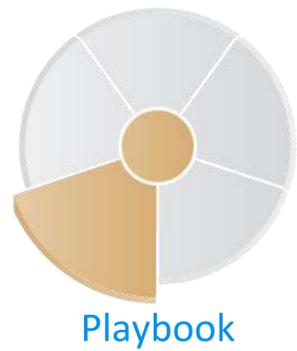
← Physical Therapist

← Executive Director

← Nursing Director

← Sales Director

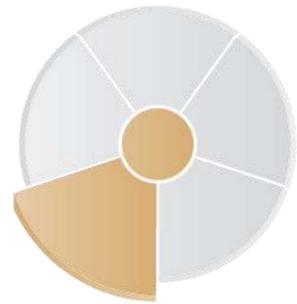




Total: 42:33		Insights	
		Title	Owner
1. CELEBRATIONS	5 MIN	<input type="radio"/> 1. Nancy Davis 12/29/22	
2. HEADLINES	5 MIN	<input type="radio"/> 2. Brigid Nelson 12/25/22 →	
3. DATA	10 MIN	<input type="radio"/> 3. Sue Glasco 1/3/23	
4. FALL HUDDLE	15 MIN	<input type="radio"/> 4. Secondary Consent for Curana	
5. COMMITTED ACTIONS	5 MIN	<input type="radio"/> 5. Response Times to Residents	
→ 6. INSIGHTS	45 MIN	<input type="radio"/> 6. Raymond Pryzborowski 1/5/23	
7. CONCLUDE	5 MIN	<input type="radio"/> 7. Mildred Shafer - New Move In	

**Brigid Nelson 12/25/22**

Having lots of hallucinations, still refusing meds and cussing at BFMs. Does not like loud noises or a lot of commotion.



Total: 89:02



## Rate the Meeting

- 1. CELEBRATIONS 5 MIN
- 2. HEADLINES 5 MIN
- 3. DATA 10 MIN
- 4. FALL HUDDLE 15 MIN
- 5. COMMITTED ACTIONS 5 MIN
- 6. INSIGHTS 45 MIN
- 7. CONCLUDE 5 MIN



Ratings (1-10)

Rating

Absent

Jennifer Gilgenhouser

8

Sheila Fritz

Bob Truman

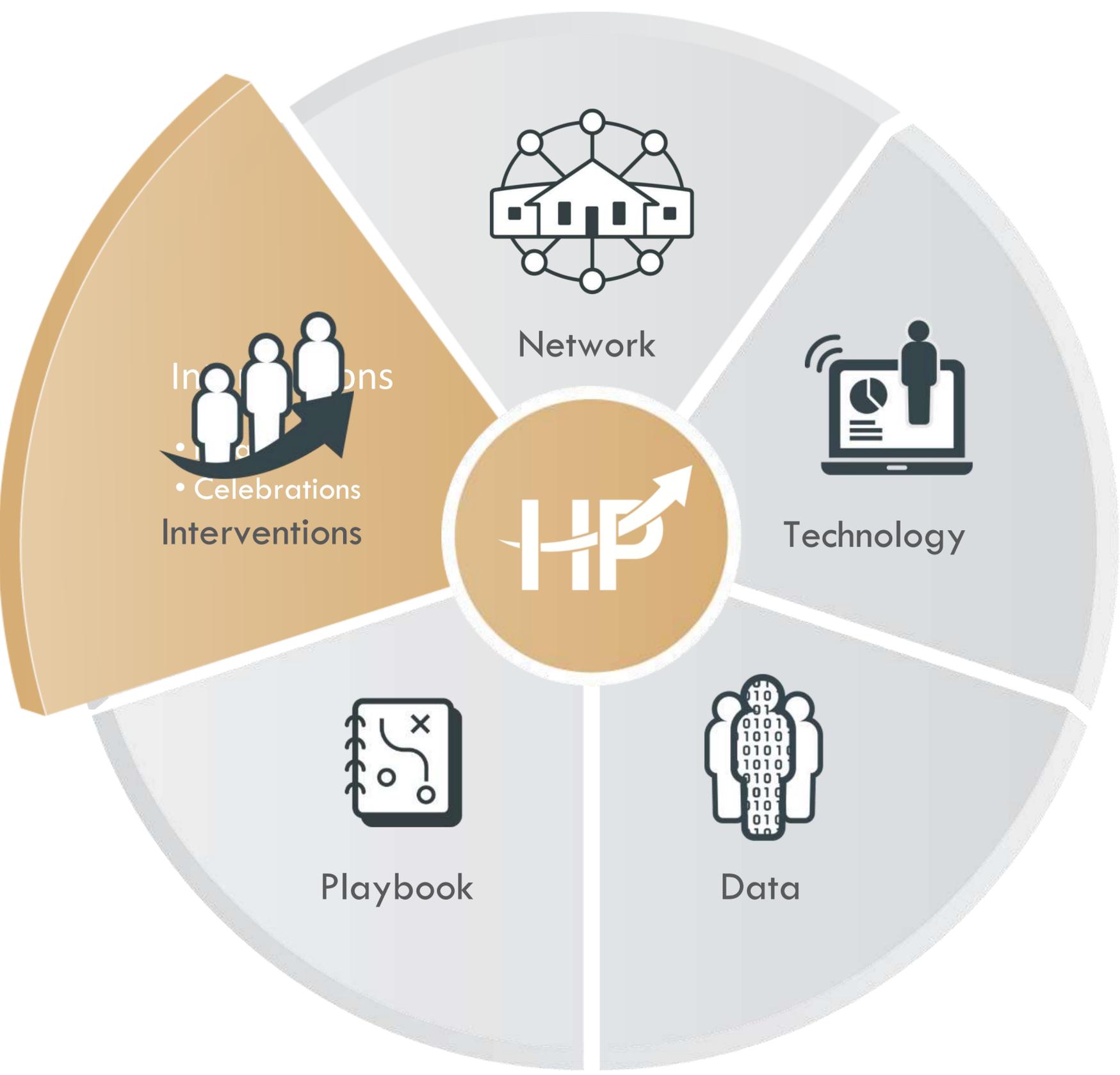
8,5

Amy Kline

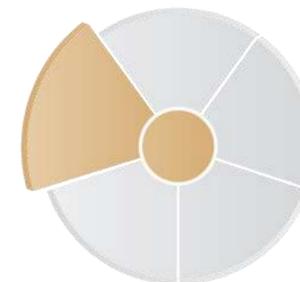
8

Max Blossom

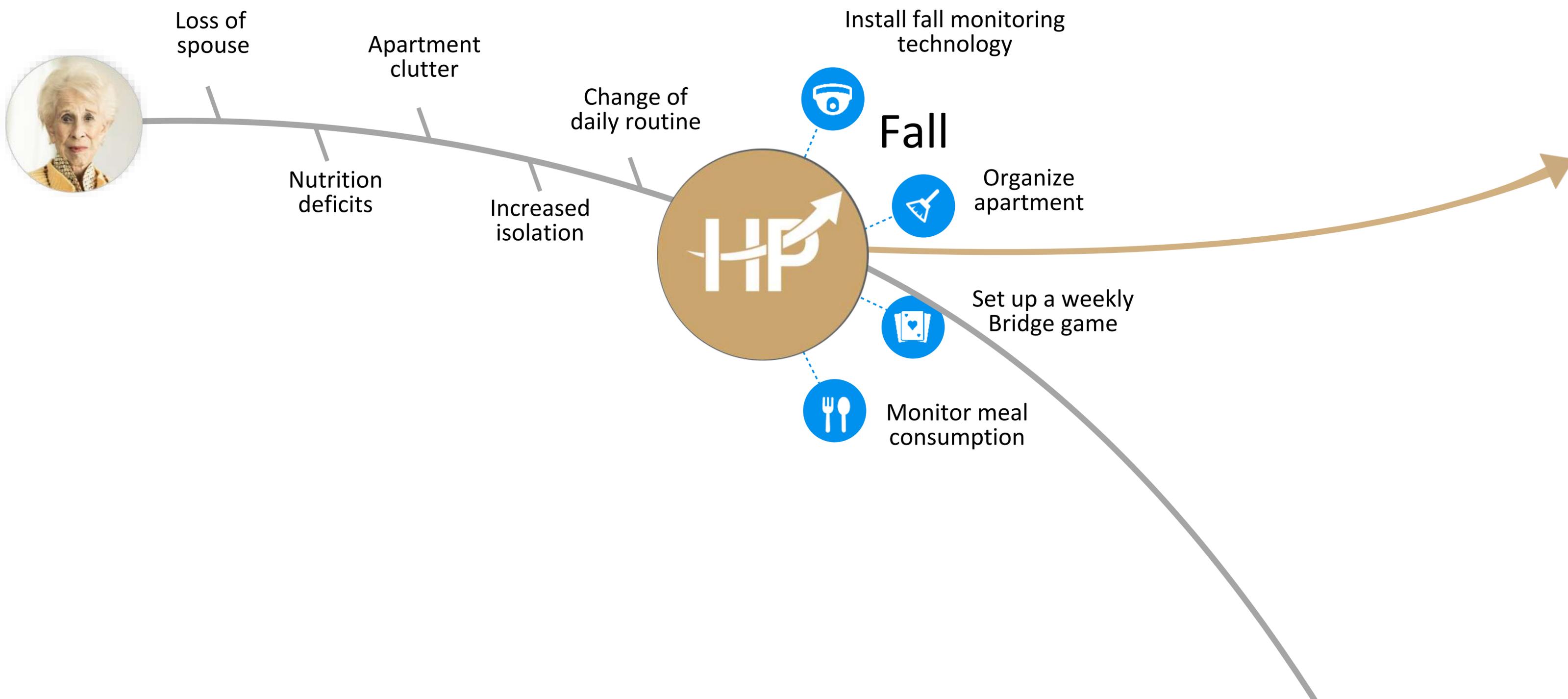
9



Interventions



Interventions





# What living happier, healthier – longer looks like

↓ 69%

Falls

↓ 54%

ER Visits

↓ 39%

Hospitalizations

↓ 49%

Re-hospitalizations

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↑ 67%

Length of Residency

Seniors are able to stay at their senior living community longer without needing to move to higher-care settings

# Value-Based Care requires payment models that align with resident outcomes

To get the attention of payors, you can't go at it alone. You have to create a local network that produces superior outcomes.



VALUE-BASED  
CARE ALLIANCE  
OF VIRGINIA



30-50



2k-3.5k

# Value-Based Care Alliance objectives



VALUE-BASED  
CARE ALLIANCE  
— OF VIRGINIA —

- On-ramp to VBC
- Create scale & density
- Implement HigherPath Senior Health Model
- Provide/align economic incentives
- Evolve to an at-risk model



# What does the Alliance do?



VALUE-BASED  
CARE ALLIANCE  
— OF VIRGINIA —

- Manages the network (data, standards, performance, etc.)
- Creates value-based contracts with payors and providers
- Identifies and integrates outcome-focused technologies
- Provides an operating system (VIA HigherPath) that supports the model
- Provides implementation support for senior living communities to operate the HigherPath Senior Health Model



# What do I get as a member of the Alliance?



VALUE-BASED  
CARE ALLIANCE  
— OF VIRGINIA —

- Access to outcome-focused technologies at no/reduced cost
- No-cost access to VIA HigherPath
- No-cost implementation support (dedicated HigherPath Guide)
- A playbook to operate as a high-performing network
- Negotiating power and influence
- Improved resident and operational outcomes
- Significant differentiation amongst your competitors
- Share in the financial savings the model creates



This is a way you can participate  
in a value-based care system without needing  
your own capital, relationships, or density of lives

# How do I join?



VALUE-BASED  
CARE ALLIANCE  
OF VIRGINIA



Sign  
the contract to  
become a member of the  
Value-Based Care Alliance



Implement  
the HigherPath  
Senior Health Model



improve  
health outcomes and share  
in the financial rewards