

New Care Models



Clinically led and exclusively healthcare focused, Optum® is built on the foundational pillars of clinical care insight, technology, data and information.

Our mission is to help make the health system work better for everyone.

We are both a commissioning and provider support organisation and have supported the NHS for more than 10 years. We have built one of the **largest population health businesses in the world**, working with and providing services to risk-bearing groups. We operate primary-care led accountable care organisations across 24 markets in the US, teaching and enabling clinicians and health systems to take on financial risk for the populations they serve.

Based on our experience, Optum is uniquely placed to understand the challenges health and social care systems face, as well as the capabilities required to successfully design, implement and scale new care models (NCMs). We are one of the few companies in the world that provides **fully integrated solutions** to deliver NCM requirements, from back-office transactional support to front-line clinical delivery.

We support local care providers to build and deliver population health models, focusing on **prevention**, **early identification and care management**, **and delivery of services closer to home**. We help providers transition to risk-bearing models with confidence. We bring practical, hands-on experience, strengthened by leading population health analytics and data tools.

What sets us apart



People Unmatched healthcare expertise



Technology Comprehensive solutions



Data Insights that drive decisions



Action Scale to mobilise and achieve results

Optum population health capabilities

Infrastructure

- Data aggregation and normalisation
- Health Information Exchange
- Claims/payment systems
- Care management platform

Analytics

- Actuarial consulting
- Predictive modelling
- Quality measurement
- Patient reported outcome measures (PROMS) tools
- Risk stratification

Engagement

- Wellness tools and portals
- Patient activation and self-care tools
- Shared decision-making support
- Tele-health

Network management

- Value-based contracting
- Contract management/provider management
- Evidence-based medicine (EBM) clinical protocol development
- Variation management
- Financial reconciliation and reporting
- Specialty network development
- Financial protection

Population and care management

- Pathway re-design
- Single point of access/care navigation
- Referral facilitation
- Wellness and care management, including high-risk, complex care management
- Clinical workforce development
- Utilisation management

System transformation and organisational development

We also provide wraparound business support services to support the successful delivery of NCMs. Optum offers these services as an approved supplier on **NHS England's Lead Provider Framework**.

How Optum can help

Based on our experience, we have outlined key steps that provider groups must undertake to successfully transition to a risk-bearing model.

Understanding of clinical and financial risk landscape

- Aggregate the data.
- Measure the total cost of care for a population (at the patient, GP population and full population basis).
- Stratify the patients to understand which patients need the most attention and proactively outreach based on needs, access and risk.
- Stratify the providers in the community (both GP and contracted providers) to understand the variation related to quality outcomes, utilisation and cost.

Risk delegation and value-based contracting

- Generate an appropriate riskadjusted budget for your population aligned with total costs of care, including as many services in scope as possible.
- Set up contracts with providers that align incentives and drive behaviours to achieve per registered population per month outcomes. Support clinical redesign to allow clinical teams to work flexibly across settings in order to achieve shared outcomes.
- Put in place financial protection for outliers.

Establishment of systems, process and infrastructure to support risk

- Establish case and condition management programmes proactively outreach to high-risk individuals.
- Establish utilisation management
 — set up utilisation targets and controls (most importantly in the A&E and the acute facilities) for incorporation into subcontractor contracts and goals.
- Improve patient engagement and self-management to reduce use of inappropriate services. Identify gaps in social care services and support that drive inappropriate utilisation.
- Measure, engage and adjust constantly — set up a population health office to provide data and projections around financial performance against the risk contract.

Working to support health and social care systems, we provide a range of services to support this transition period. We help health and social care systems to:

- Evaluate the current and projected clinical and financial risk landscape across their local system.
- Negotiate the transfer of financial responsibility from the CCG (or responsible funding body) to the health and social care system.
- Develop local provider networks, including the transition to value-based contracting models to support flexible working across care settings.
- Establish the appropriate systems, processes and infrastructure to support the transition to a risk-bearing model (including care management and utilisation management).

Monitoring and evaluation

Optum can support health and social care systems to measure success. We also support shared learning and knowledge transfer across our national and global network.

For more information on how Optum can help, please email: info@optum.co.uk or call +44 (0)20 7121 0560.

To learn more, visit our website at **optum.co.uk**



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