

Empowering Performance in Value-Based Care Through an Integrated Data Ecosystem

Analytics for Risk Contracting (ARC) is a comprehensive Population Health Analytics and Care Management platform that empowers leaders to make informed decisions on clinical, operational, and financial initiatives required to succeed in value-based care contracts and front line providers and staff to perform successfully.

Seamlessly integrate disparate data from payer claims systems, HIE, EHRs, EDW, care management, closed loop referral platforms and other data sources, enabling a comprehensive view of patient information.

Take actionable insights to the point of care with streamlined workflow tools to close high value care gaps, optimizing value based contract performance.

CLIENT SUCCESS

A large New York IPA network team utilizes the ARC data outputs resulting in an **average 10% reduction in their medical loss ratio (MLR)** from 2021 to 2022.

“The COPE Health Solutions analytics platform, Analytics for Risk Contracting (ARC), has allowed us to effectively manage our VBP contracts and helps us achieve significant savings below the MLR targets.”



Jing Shui
Chief Strategy Officer
CAIPA, Inc.






ARC Platform received KLAS Research recognition for providing analytics and visualizations of population health data



ARC Platform has earned Certified Data Partner designation in the new National Committee for Quality Assurance (NCQA) Data Aggregator Validation program

CONTACT US



 copehealthsolutions.com
 info@copehealthsolutions.com
 213.259.0245

BENEFITS FOR DIFFERENT ROLES



Chief Financial Officer/ Finance Director

- Advanced value-based contract modeling, negotiations and performance enablement.
- Identify and track high value opportunities and key performance indicators, optimize cost efficiency and quality outcomes.



Chief Medical Officer (CMO)/Medical Director

- Enhance clinical decision-making through integrated, real-time data insights at the patient, provider, site or population level.
- Identify and stratify primary care and specialist performance.
- Identify care gaps and areas for quality improvement, improving outcomes.



Population Health/Quality Manager

- Real-time decision-making empowered by diverse data sets to address population health trends, disparities, and prioritized interventions.
- Seamlessly analyze integrated data to drive quality initiatives and meet value-based contract criteria.
- Integrate high value care gaps into clinical and operational workflows.



Primary Care Physician/Advance Practitioner

- Unified patient data driven dashboard and data, enabling prioritization of patient outreach and recall.
- View and close prioritized care gaps, improve patient health outcomes in value based models.



Care Manager/Medical Management

- Proactively assess, identify, and close member needs including behavior and SDOH.
- Full workflow and care management solution in supporting key programs critical in improving quality and value outcomes.



Provider Relations/Network Management

- Identify and stratify primary care and specialist performance across an entire network
- Engage providers with actionable insights and benchmarks for improvement opportunities.
- Analyze network performance, adequacy, recruitment and identify providers areas of needs.