



Scaling Value-Based Care with Technology and Collaboration

TriHealth & Premier Inc.

Today's conversation

- Intro / Welcome / Purpose
- Overview of Premier's approach to Population Health partnerships
- Utilization and value of HCC technology
- Q & A / Adjourn



Seth Edwards
Managing
Director of
Population Health
and Value-Based
Care



Dr. Raymond
Metzger
President,
TriHealth
Population Health
Organization



Scan to connect with
Seth on LinkedIn:



The 2026 Reality Check: The Top Trends Shaping Value-Based Care

TREND	IMPACT ON VALUE-BASED CARE
Aging & Slowing Population Growth	Rising demand with constrained labor and funding
Regulatory and Policy Hurdles	Accelerating payment reform
Continued Financial Headwinds	Short- vs. long-term decisions
Growth of Two-Sided Risk	Higher accountability and operational complexity
Insurance Market Upheaval	Bad news for providers
Specialist VBC Expansion	Bringing Specialists back into VBC
Provider Gaps	Shortfalls Growing (and AI to the rescue?)
Commercial Affordability	Employer-driven benefit redesign and risk shift



Premier's Value-based Care Advisory And Collaboratives

BEST IN KLAS 2024, 2023 AND 2022



“Premier is our go-to expert around anything healthcare related, especially value-based care. We view them as the experts on healthcare policy. Premier consultants are always very responsive to questions, and they really get to know our organization. We have been working with some of the same people for several years. They understand our organization, so when we talk about things, it is more of a collaboration.”

– Customer Executive who responded to the survey

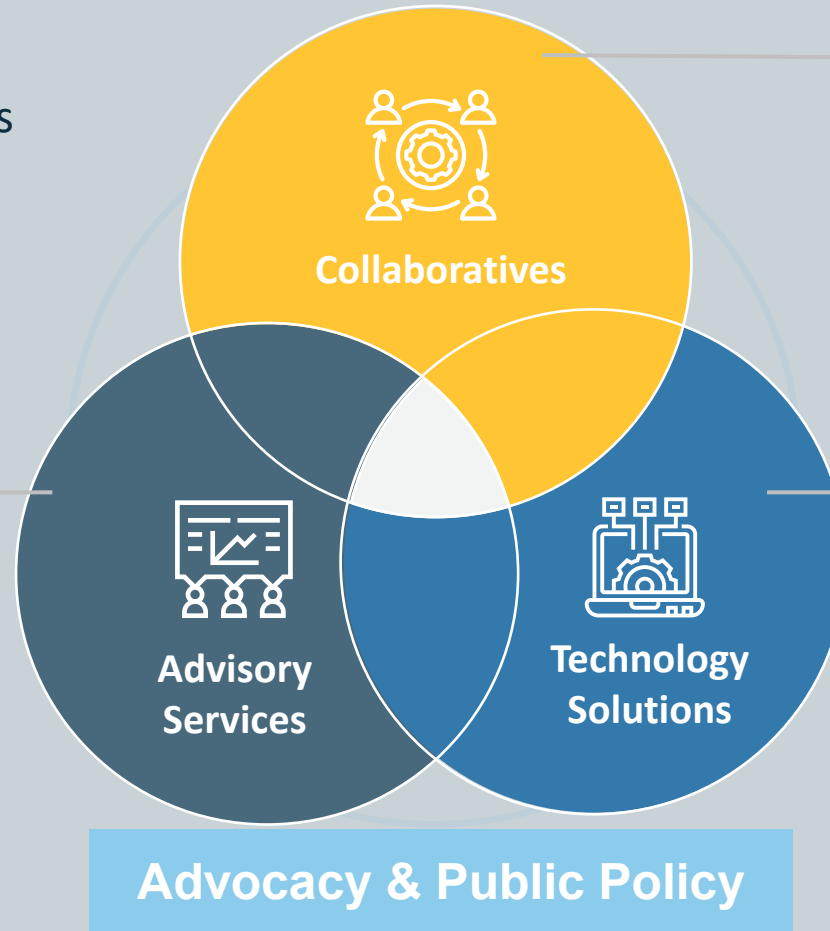


MULTIPLE PARTNERSHIP MODELS TO SUPPORT SUCCESS IN POPULATION HEALTH
Premier leverages collaborative, consulting and technology solutions paired with Advocacy/ Public Policy insights to meet members where they are in their journey.



Multiple Partnership Models to Support Success in Population Health

Premier leverages collaborative, consulting, and technology solutions paired with advocacy/public policy insights to meet members where they are in their journey.



- Provider Network Strategy
- Clinical Operations & Care Optimization
- Value-Based Transformation
- Physician Enterprise

- Population Health Management
- Bundled Payment
- 100 Top Hospitals Collaborative
- Physician Enterprise
- Perinatal Improvement
- Health Equity
- Workforce Innovation Network

- ACO Intelligence Solution
- Bundled Payment Intelligence Platform
- Stanson Health
- 100 Top Hospital Dashboard
- MA/ACO Intelligence Solution™

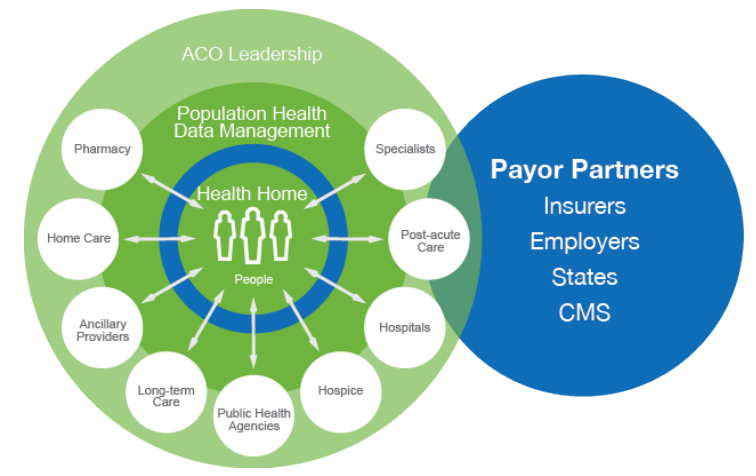
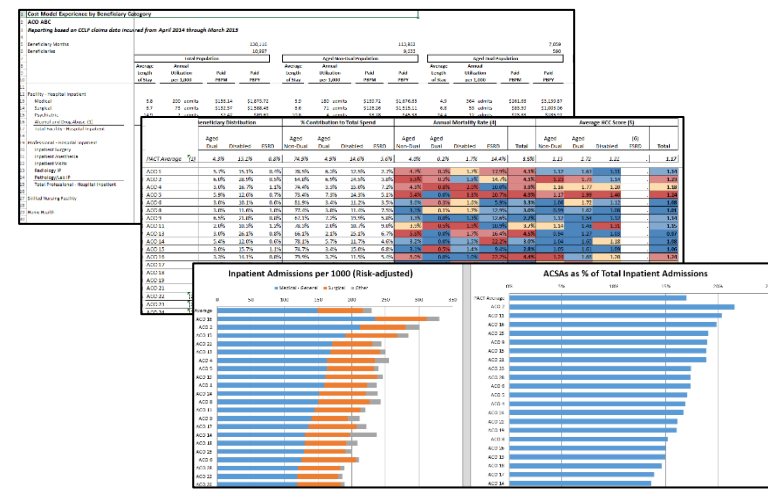
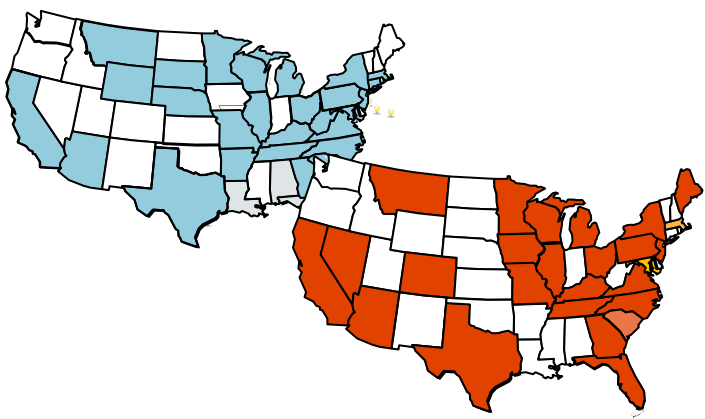


Enabling success in population health management

**Connecting People:
National Population Health Management Collaboratives**

**Connecting Data:
Population Health Analytics**

**Connecting Knowledge:
Operational Deployment**



Population Health Management Collaborative

65+ members collaborating on best practices and performance improvement

Population Health data management

Advanced benchmark reports supporting performance improvement initiatives

Resources to build capabilities

Cohorts, best practices portal, guidebooks, tools, subject matter experts

Driving results: Collaborative members outperform the nation

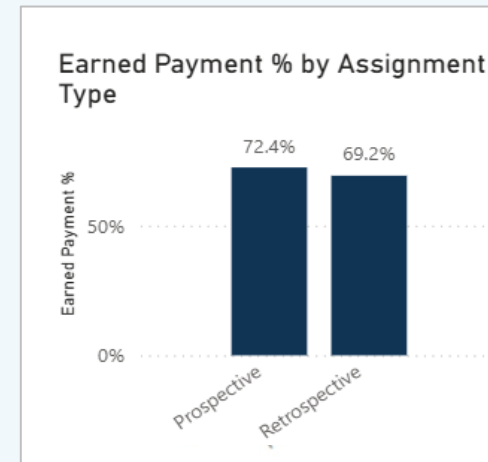
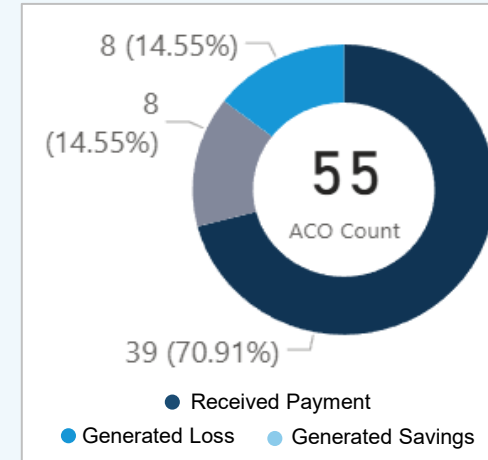
PY24 Performance Results

- A record number of PHMC members - 71 percent - achieved shared savings in 2024, equating to more than \$504 million in performance payments.
- PHC members earned shared savings at a higher rate than other hospital/health system (high revenue) ACOs, 71 percent compared to 61 percent.
- Overall, 85 percent of PHMC members contributed to MSSP program savings, generating more than \$919 million for Medicare.

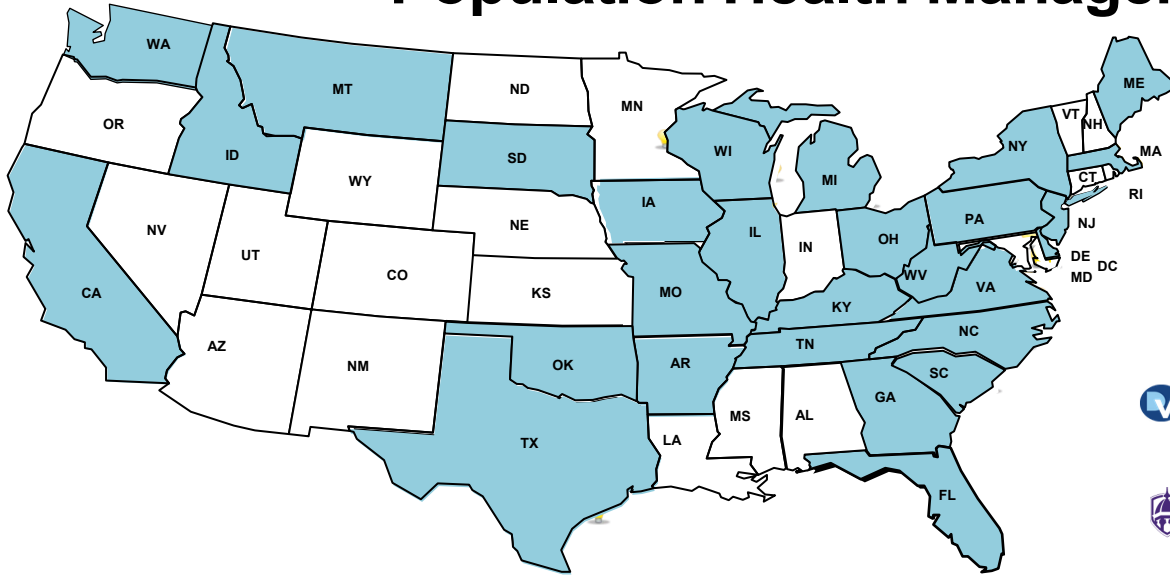
\$504.23M
Net Earned Performance
Payment (\$)

1.7M
Assigned Beneficiaries

84.76%
Average ACO Quality
Performance Score (%)



Population Health Management Collaborative Members



PHMC Key Deliverables Summary



NATIONAL MEETINGS

Bi-annual meetings with member success stories, organization best practice sharing, and industry-leading speakers

Annual topic-specific meetings focused on value-based care and payer capabilities, leading practices



GROUP LEARNING

Live webinars, many available on-demand focus on specific VBC transformation topics, structured as podcasts, learning series, and presentations

Learning and networking with other collaborative members is curated and facilitated by Premier as connections, discussion cohorts, and affinity cohorts



ONE-ON-ONE SUPPORT

Dedicated Partners and/or Subject Matter Experts, bring a wealth of expertise to answer questions, make member connections and advise individually

Assessments offer insight into the identification of gaps in organizational capability and highlight leading practices to use for improvement



RESOURCES & COMMUNICATIONS

PINC AI™, Premier's platform for knowledge sharing connects with PHMC content

Week-at-a-Glance email keeps you informed on upcoming activities

Sunday Night Insights, highlighting the week in Washington D.C., is distributed by Premier's Government Affairs Office



DATA-DRIVEN PERFORMANCE IMPROVEMENT

Data driven insight through unblinded benchmarking and analytics for ACO performance

One-on-one data reviews and facilitated group data discussions are offered for members to share successes and talk through challenges

Available to 'Advanced Members'



Population Health Services | Strategy, Operations and Analytics

Examples of Offerings

Strategy and Revenue Maximization

Population Health Strategic Roadmap

Revenue Enhancement and Payer Contracting

External Collaboratives

Board and Leadership Education

Community Health Needs Assessment

Performance Improvement

Care Management Redesign

Advanced Population Health Operations

Readiness and Operational Assessments

Interim staffing

Value Based Care and Hospital Integration

Analytics

Enhanced Claims Analytics and Benchmarking

Analytical Support Services and Custom Dashboard Design

Shared Savings Distribution Modeling

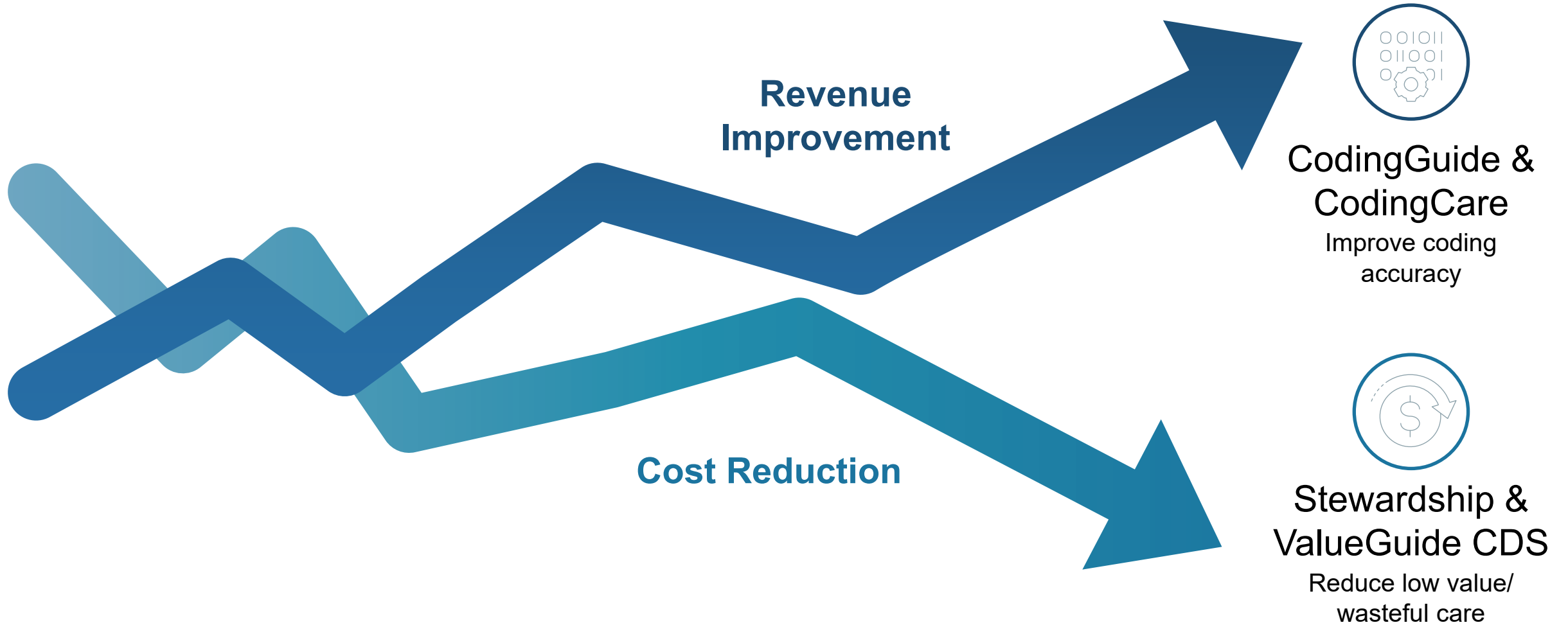
Bundled Payment Selection

Comprehensive Actuarial Service



Reducing Low Value Care and Improving Coding Accuracy

Our modules can help with revenue improvement and reductions in low value care.



End-to-End HCC Solutions for Smarter Risk Adjustment

 CODINGCARE

 CODINGGUIDE

 CODINGCARE



Efficient Pre-Visit Prep



AI-assisted pre-visit
CMS-HCC conditions review



Direct push of actionable
guidance to providers

Streamlined Provider Workflow



“Always On” opportunity checklist



Automatic suggestions &
Safety Net

Post-Visit HCC Efficiencies



AI-driven HCC Code Compliance
Review



Code Addition Opportunities

Premier's Stanson Health cloud-based HCC product line increases the value of the current offering with a full recapture and inference CDS, AI capabilities and in-EHR tools for teams that support providers (nurses, coders)



Premier's Stanson Health CDS Members



395,000+ providers | >1,250 hospitals



HCC Documentation Excellence

TriHealth's Value-Based Care Journey with AI-Powered
Clinical Decision Support

Raymond Metzger, M.D.

President,

TriHealth Population Health Organization

About the Speaker



Raymond Metzger, M.D.

[President, TriHealth Population Health Organization](#)

President of the TriHealth Population Health Organization, leading systemwide value-based care initiatives since 2021. TriHealth is an early adopter in shifting from fee-for-service to value-based care, advancing this work for more than a decade.

Oversees more than 1,700 physicians and APPs in delivering coordinated, outcome-driven care that improves quality and reduces unnecessary costs.

Board-certified internist with over 25 years of clinical experience, physician leader at TriHealth since 2001.

Medical degree from the University of Cincinnati, 1998.



Agenda

Overview of TriHealth & Population Health Organization

Population Health Background: The Journey to Value-Based Care

Partnering with Stanson Health: Clinical Decision Support for HCCs

Implementation Success & Lessons Learned

Results & Value: Metrics and Revenue Impact

Future Roadmap & Q&A



TriHealth Population Health At a Glance

Providers		
Physicians:		1,227
APPs:		555
<hr/>		
TPP	TOTAL:	960
TriHealth	PCPs:	328
Physician	Specialists:	459
Partners	APPs:	233
<hr/>		
TPHO	Total:	762
Affiliated	PCPs:	11
Providers	Specialists:	501
	APPs:	250



17
Value Based
Contracts



4.0+
Star Rating on
Top 3 Contracts



300k+
VB Lives under
management



~\$300M
Value based
revenue generated
since 2017

~700,000 Served annually

~300,000 Lives in Value-Based Arrangements

~66,000 Lives in Significant downside risk
(25K MSSP Advanced Track, 13K Anthem MA, 13K Humana MA, 16K EHP)



Greatest number
of general
pediatricians



Treats the
most cancer
patients



Largest
primary care
footprint



Delivers the
most babies
each year



Performs the most
cardiovascular
surgeries



Initial Journey to Value



Network Optimization

- Provider Network and Performance Management
- Facilities/ Sites of Care
- Community Partnerships
- Attribution
- Provider Compensation
- Improve care coordination between PCPs and Specialists
- Providers and Facilities



Financing Models

- Innovative payor contracting
- Bundled products
- CMS Product Offerings- Medicare Advantage
- Capitation models
- Direct to Employer



Care Transformation

- Centralized Resources: care managers, pharmacists, diabetes educators, Behavioral Health consultants
- Innovative Programs- Advanced Illness, PRIMARY CARE at HOME
- Clinical Pathways (Specialists)
- Health Disparities
- Post Acute Care

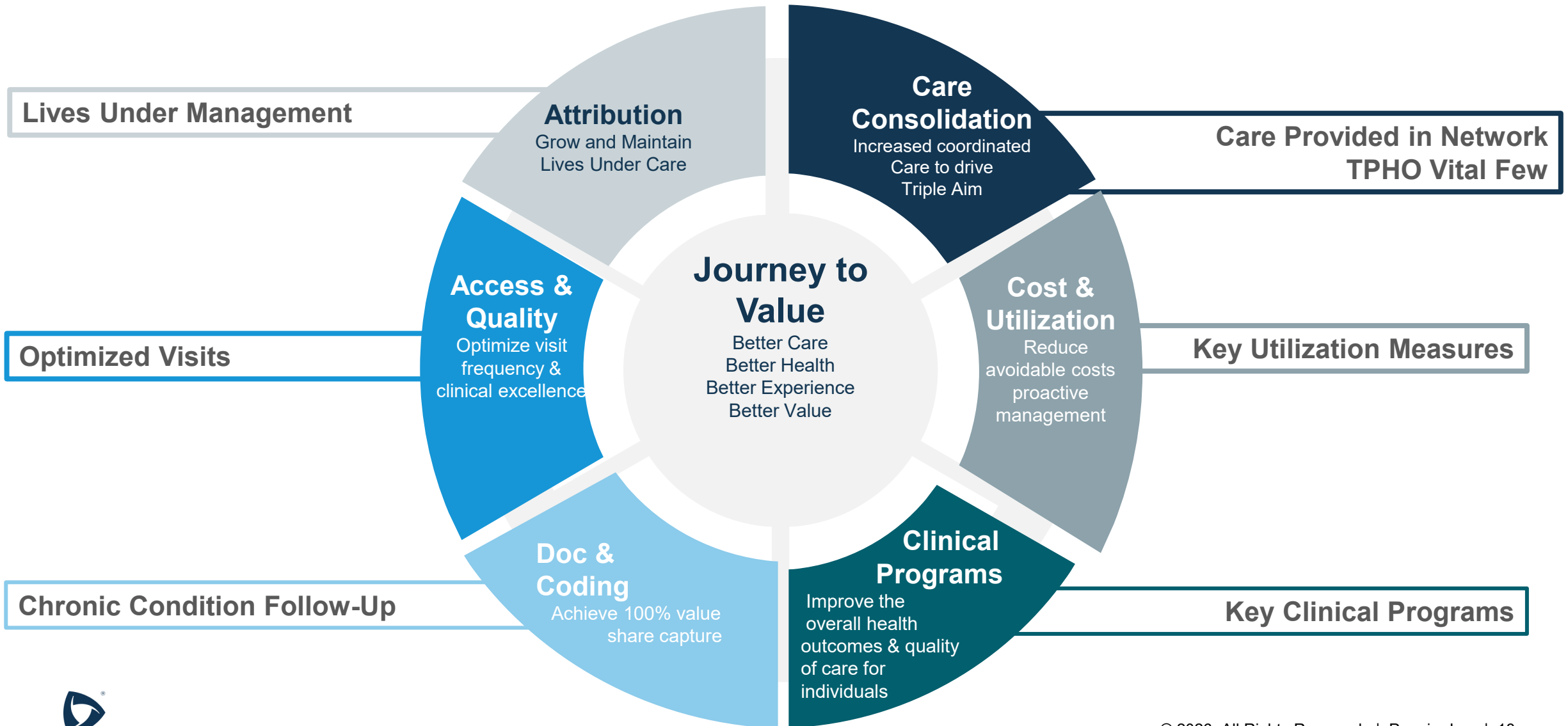


Data & Technology

- Detailed Data Analytics and Insights
- Risk Stratification
- Digital Health - Telehealth, remote patient monitoring, wearables, healthbots, artificial intelligence



TPHO Population Health Flywheel





Partnering with Stanson Health

AI-Powered Clinical Decision Support for HCC Documentation

Why Clinical Decision Support for HCC Documentation?

The Challenge

RAF scores trending flat despite provider efforts and previous partner engagements
Care variation and missed HCC documentation opportunities across 1,700+ providers
Need for scalable, workflow-integrated solution that engages providers meaningfully

Why Stanson Health

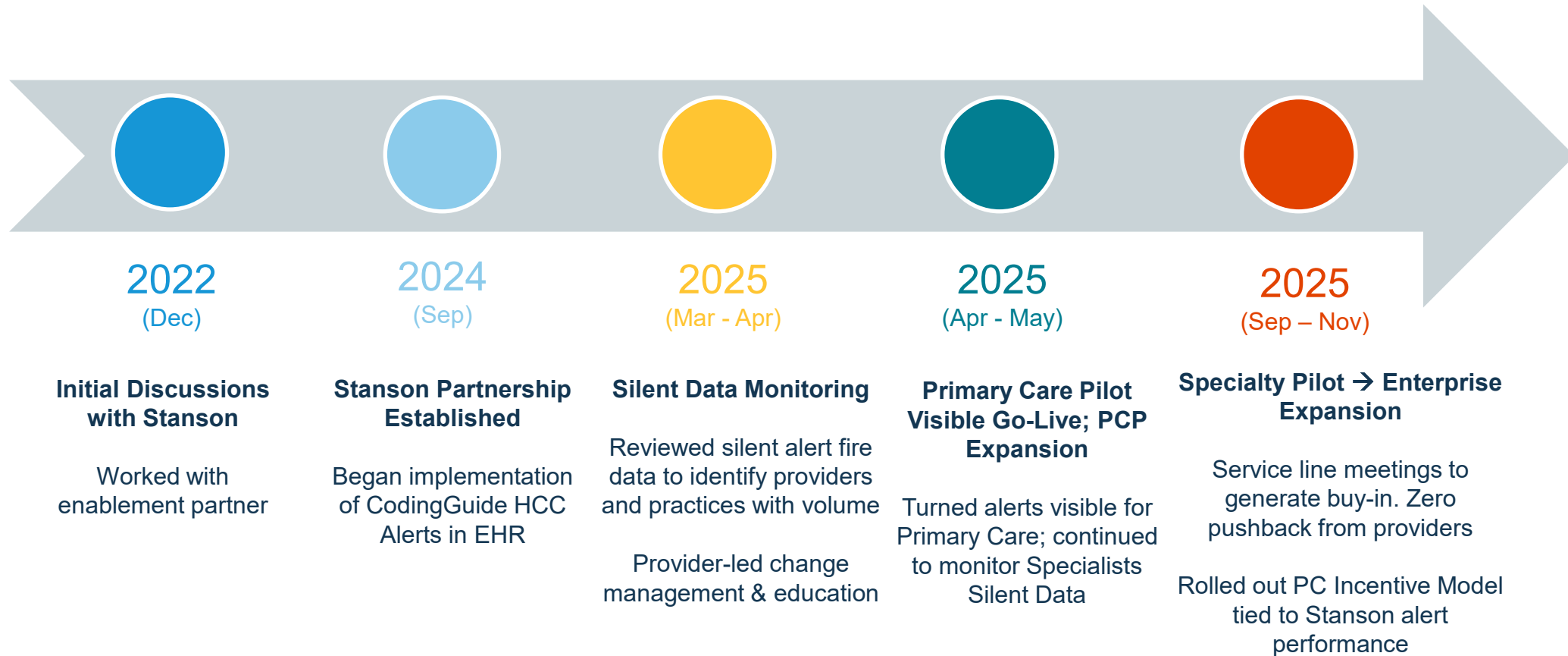
Deep integration with EHR workflow - nudges appear at the point of care
HCC-specific AI alerts aligned with CMS V28 coding guidelines
Transparent, evidence-based recommendations that build provider trust
Real-time and post-encounter workflow support for comprehensive documentation

Partnership Goals

Increase Risk Adjustment Factor (RAF) scores through improved documentation
Engage providers in a meaningful, non-burdensome way



TriHealth and Stanson HCC Partnership Timeline



Primary Care Incentive Alignment: Linking Provider Behavior to Outcomes

Stanson Metrics Embedded in Provider Compensation Model

- Risk-Adjusted Coding Bonus Structure (25%–30% total): 25% for Epic recertification + 5% Stanson engagement rate component
- Minimum alert threshold set — low-volume providers not penalized for low denominator
- Incentive linkage signals organizational trust — you only tie compensation to tools you believe in

Building Toward Specialty Scorecards

- PCP incentive model is live and functioning — specialist scorecard integration is on the roadmap
- Population Health scorecard being developed to incorporate Stanson performance data

Key Message for This Audience

- Governance structures determine whether technology gets used — incentive alignment is governance



Implementation Approach & Success Factors

Implementation Approach

- Phased deployment beginning April 2025 across primary care and specialty practices
- Close partnership with clinical informatics and physician champions
- Integrated directly into existing EHR workflows - minimal disruption to clinicians

Key Success Factors

- Strong clinical engagement from department leads and physician champions
- Workflow alignment: alerts surface at the right time in the encounter
- Provider education and regular performance feedback loops
- Transparency and trust: providers understand the evidence behind each alert

Barriers Overcome

- Initial provider skepticism addressed through education and champion advocacy
- Alert fatigue managed through OPA (Override with Peer Acknowledgment) suppression logic
- Skip logic and work queue filtering to surface only true documentation gaps



Revalidated & Inferred Diagnosis Code Integrated into Provider Workflow

Provider opens patient's encounter



FHIR API call to gather clinical details at order entry



Provider signs order in EHR



CDS logic evaluates chart elements

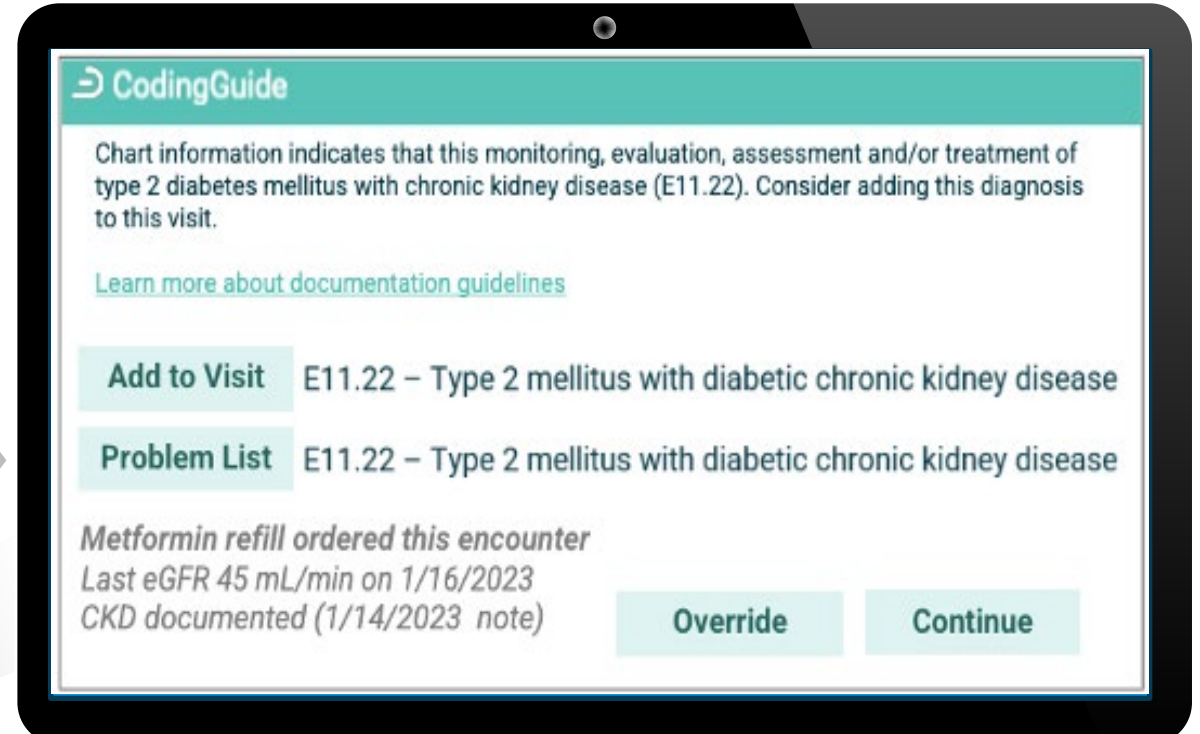


Revalidate & Inferred diagnosis identified

Order placed



Code added to **visit diagnosis** and **problem list**





Results & Value

Measuring Impact: April 2025 - December 2025

Stanson Analytics Platform & Tracking

HCC CKD/ESRD/Dialysis Status V28

Caden Guideline

316

alerts

57%
followed (181)

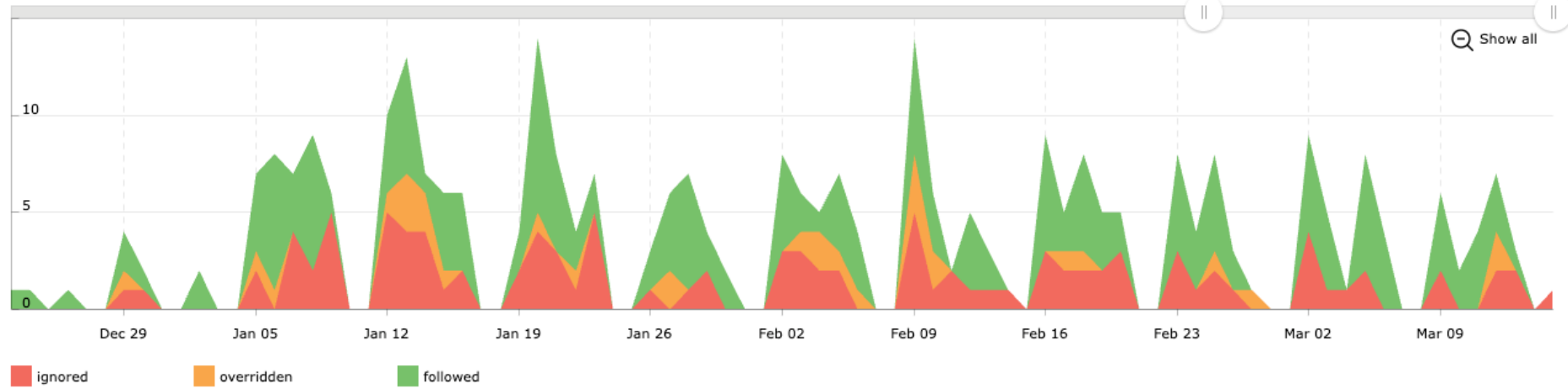
9%
overridden (30)

33%
ignored (105)

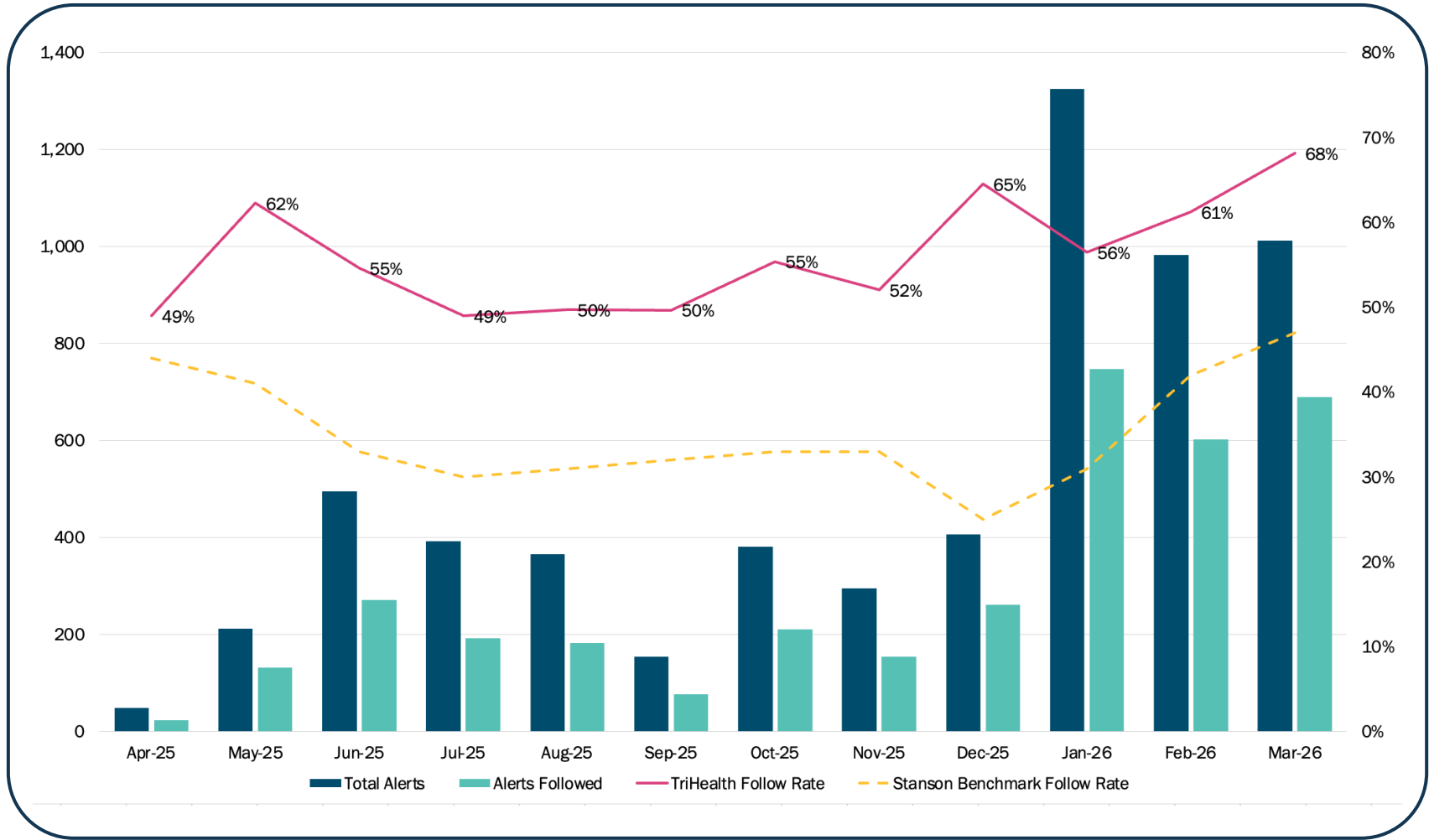
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chart options



Stanson Analytics Platform & Tracking



Provider Engagement & Adoption

Provider Adoption Highlights | April – December 2025

Top primary care providers achieving 70–90%+ follow rates. Cardiology and oncology specialty engagement growing month-over-month.

100+

Primary Care Providers
Actively Engaged

<10%

Ignore Rate
Top Performing Providers

↑ MOM

Alert Volume Growth
Month-Over-Month



Revenue Impact Models

Revenue Impact Model | Key Inputs

\$800 PMPM applied to all visible alerts with documented follow action (April–December 2025).
MSSP reimbursement adjustment capped at 3% per year. As provider adoption grows, revenue impact compounds.

Excluding contract specifics, model applies PMPM to Category RAF Weight and opportunity closed.

\$2.6M

2025 Potential Revenue Impact | April – December 2025



Future Engagement & Continuous Improvement

Continuous Improvement Roadmap

Monthly operations meetings to review performance and guideline benchmarks

Provider education sessions targeting departments with high ignore rates

Expanding alert coverage to additional HCC categories and V28 updates (content updates)

Scaling Value-Based Care Enablement

CMS Access Model launch: July 2026 - preparing population and attribution review

Growing direct-to-employer and Medicare Advantage attribution

Expanding Stanson partnership to additional populations

Looking to add pre-visit coders

2026 Priorities

Achieve >65% network-wide HCC alert follow rate

Target \$3M+ revenue impact through expanded provider engagement

Continue building AI-driven clinical intelligence infrastructure



Key Takeaways

For Health System Leaders

Value-based care success requires clinical decision support embedded in workflow - not added on top.

Provider engagement is the most critical success factor - technology alone is not enough.

For Population Health Teams

HCC documentation at the point of care drives RAF improvement more effectively than retrospective coding.

Systematic performance feedback loops accelerate provider adoption.

Results Achieved

\$2.6M potential revenue impact in first 9 months of deployment.

Growing provider follow rates across primary care and specialty departments.

The Path Forward

Continuous improvement through data, education, and clinical partnership.

AI-powered clinical decision support is the foundation for sustainable VBC performance.





Thank You

Questions & Discussion

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Organization

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