

COPE Health Solutions Launches First Population Health Analytics and Network Management Platform Integrated with National Medicare and Medicaid Benchmark Datasets in Partnership with CareJourney

COPE Health Solutions' Analytics for Risk Contracting platform powers success in value-based payments for providers and health plans

NEW YORK, NY, March 15, 2022—[COPE Health Solutions](#) and its [Analytics for Risk Contracting](#) (ARC) subsidiary have partnered with [CareJourney](#), a fellow pioneer in value-based healthcare analytics, to provide the first health analytics platform and solutions that integrate a health care organization's claims, electronic health records, lab, social determinants and other data with CareJourney's suite of cost and utilization benchmarks derived on Medicare and Medicaid datasets. Health care providers and payers working with ARC can leverage this one-of-a-kind analytics capability to identify opportunities to enhance quality and care, reduce costs, develop products and enter new markets.

"By combining our leading data analytics cloud platform and services with CareJourney's data, ARC is taking analysis and benchmarking to an unprecedented level of performance, ease and usefulness," said Yomi Ajao, ARC President and Principal and Chief Consulting Officer for COPE Health Solutions. "For the first time on a single health analytics platform, providers can access detailed data for all their attributed members in value-based Medicare programs and commercial contracts while health plans can see this data on their own members--as well as Medicare fee-for-service information for beneficiaries outside of their attribution."

Payers and providers can derive valuable, actionable insights from this information, including:

- Evaluate, stratify and optimize network performance using both internal and external benchmarking and physician performance data based on both actual enrolled/attributed/assigned members and non-aligned members in Medicare fee-for-service for all lines of business to drive network performance, growth and acquisitions.
- Develop financial models of current and future-state risk-based arrangements and fee-for-service business, particularly Medicare risk programs such as Medicare Advantage, Medicare Shared Savings Program and the new ACO REACH program.
- Benchmark unit level costs using internal and external data to create targeted contracting opportunities by contract, product, market, physician and at the member level.

"We're thrilled to partner with an organization that shares our values and deep commitment to enabling the success of value-based care," said Aneesh Chopra, CareJourney President and previously the First Chief Technology Officer for the United States. "Through our partnership, COPE Health Solutions and its ARC platform will equip health care organizations with an even more comprehensive suite of tools and data assets to manage growth, design networks, identify and address care gaps and social determinants, resulting in better management of at-risk populations."

With ARC, COPE Health Solutions offers a range of flexible and high-value solutions to both payers and providers looking to succeed in risk arrangements. The options include:

- ARC Software as a Service, with clients accessing the data analytics cloud software, custom configured with their claims data and other data sources, to do their own analysis.

- Data Analytics as a Service (DaaS), with ARC and COPE Health Solutions' clinical and data analytics experts producing trend insights, identifying opportunities and outliers, and suggesting targeted initiatives to improve financial performance and care.
- Network Adequacy, Analytics and Development Support to grow and optimize networks.
- Managed Services Organization (MSO) co-source, a collaborative approach in which COPE Health Solutions brings to bear:
 - ARC and DaaS
 - An integrated care management workflow platform
 - A set of toolkits, staffing models, workflows, pro forma model and VBP contract deal points/best practices
 - Team of clinicians, operators, and finance and actuarial experts
 - Proven workforce training and recruitment solutions to fill both MSO roles and personnel needed to grow network panel capacity such as medical assistants, care coordinators and navigators and advanced practitioners (NPs and PAs)

Through the MSO co-source model, COPE Health Solutions is able to rapidly build or optimize MSO infrastructure for a health plan or provider risk-bearing entity and provide on the ground co-management for all or part of the operation.

About COPE Health Solutions

COPE Health Solutions is a national health care consulting, implementation and co-management leader in population health management, value-based care and payments, workforce development and data analytics. We offer the experience, tools, services and advice that health plans and providers need to meet strategic goals and thrive in the complex and uncertain health care environment. Our team is driven by our passion to help transform healthcare delivery, align financial incentives to support population health management and build the workforce needed for value-based care.

About CareJourney

CareJourney is the healthcare industry's best source of clinically-relevant Provider performance and profile data for ACOs, health systems, payers, and HCIT vendors alike, working with partners to supercharge their solutions and internal data lakes with high-value insights out of expansive population claims data. CareJourney's Data-as-a-Service offering enables partners to integrate data insights into their own solutions to help enhance their product, technology, and customer services. CareJourney's mission is to empower individuals and organizations they trust with open, clinically-relevant analytics and insights in the pursuit of the optimal healthcare journey.

Media Contacts:

Lois Padovani
 For COPE Health Solutions
 Padovani Communications Inc.
 773-501-8744
lois@padovanicomunications.com

Deepika Kumar
 Chief Marketing Officer
 CareJourney
info@carejourney.com