

## Path to Value-Based Program Transformation: A Phased Approach

### Background

Our MSO Co-Source client is a provider-led health system, physician governed clinically integrated network (CIN), and independent physician association (IPA) in the Northeast.

The IPA wanted to enable network providers to successfully perform in value-based payment (VBP) contracts with payers through strategic collaboration, powerful data & analytics, enhanced provider engagement strategies and population health programs improving quality performance, total cost of care, and revenue optimization. Its network extends across eight counties of Western New York.

### Challenge

The IPA faced a key turning point as new competitors had entered the market when CMS and payers became more aggressive and engaged around moving providers into VBP arrangements.

- Our client needed to quickly understand its population health management and VBP gaps to be successful in a transition to full risk for all lines of business.
- COPE Health Solutions (CHS) engaged an initial gap assessment and then launched an “MSO co-source” engagement that supports the IPA’s strategic roadmap of achieving growth, increasing premium access through VBP arrangements, and improving performance under those arrangements.

### Approach

- Established alignment among the IPA’s two health system owners, and the physician leaders across the IPA network on VBP contracting and network growth goals.
- Development of a detailed VBP roadmap and timeline containing key milestones needed to ensure readiness for success in full risk VBP agreements over an initial three-year build and growth period.
- Development of a Network Strategy, value proposition and engagement plan to add providers, increase membership, increase provider engagement and improve performance.
- As part of this process, a three-year financial pro forma and detailed VBP contracting playbook were developed to inform decision making around investments, expected ROI for the IPA and health plan negotiations around VBP arrangements.

## Outcomes

In the first 12 months after MSO Co-source launch, the IPA has:

- **20% Increase in Growth**  
Improved IPA value proposition attracting new physicians and growing membership by 30,000+
- **100% Increased and Improved Provider Engagement**  
Developed a comprehensive network strategy and Practice Transformation Manual and Protocol to increase provider engagement and affect positive change
- **Doubled Incentive Earnings**  
Created a strategic contract playbook/strategy that created a glidepath to risk including approval of ACO Reach Program for 2023 and nearly doubled the potential of earned incentives in year 1 and year 2
- **Improved Network Performance Management**  
Launched CHS’ Analytics for Risk Contracting comprehensive population health analytics platform, Data Analytics as a Service and our partner q, a care management workflow platform
- **Improvement in Financial Planning.**  
Built a three-year pro-forma for all payers and lines of business, including staffing and infrastructure costs and network growth models
- **Established CIN/Single Signer Authority**  
Put processes and policies in place to make the IPA a fully functioning clinically integrated network (CIN), completing process to achieve single signer authority

“COPE Health Solutions supported our IPA through pivotal leadership and business model changes, providing critical expertise, interim management, analytics and other MSO service support, helping put us on track to be the preferred IPA/CIN in Western NY for physicians and payers.”



**Paul Shields, DO**  
Chief Executive Officer &  
Chief Medical Officer  
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To learn more about how we can help you build or accelerate success for your IPA, CIN or ACO please contact [info@copehealthsolutions.com](mailto:info@copehealthsolutions.com) or call 213-259-0245.