

Delivering Outpatient Market Share Insights to 120+ Statewide Hospitals

KENTUCKY HOSPITAL ASSOCIATION

OVERVIEW

The Kentucky Hospital Association (KHA) has had a long-term goal of providing market share data insights into the outpatient and physician office sites of care to its 120+ member hospitals. KHA recently partnered with HSG to provide that information. Immediately following the submission of HSG's first quarterly reports, hospital member feedback was that the incremental data insights was one of the greatest data programs to come out of KHA over the past 5 years. In addition to quarterly data reporting, HSG will also provide ongoing education and data review to those member hospitals through KHA's educational forums.

CLIENT QUICK FACTS

- ✓ Kentucky Hospital Association
- ✓ 120+ Member Hospitals Throughout State of Kentucky
- ✓ General Acute, Critical Access, Long-Term Acute Care, and Rehabilitation Hospital Members
- ✓ HSG Partner Client Since 2019

“As an association, we must continue to evolve with our industry and provide value to our members. We are delighted to **develop this important data and insight relationship with HSG, and we look forward to our members reaping the benefits of this initiative.**

– NANCY GALVAGNI, KHA PRESIDENT

CHALLENGES

KHA had received constant requests from their 120+ member hospitals throughout the state of Kentucky that they would like incremental market share data insights into the outpatient and physician office sites of care for their respective service areas. KHA had tried collecting data from numerous sources (CMS Qualified Entity Programs, Medicare Part B Purchasing,

Commercial Claims Aggregation, etc.) with no success. The application processes, timelines of data delivery, and/or cost of incurring data made each of these methodologies implausible for KHA to pursue. The need for data insights was still strong from KHA member hospitals with many members seeking insights within a short 3-6 month time period.

THE PROCESS

HSG, a leader in customized healthcare claims data analytics, has significant experience and operational capability to support KHA in this area. HSG has long-term experience utilizing claims-based professional billing data to support partner clients in answering specific patient utilization questions in their markets. Leveraging data from both FFS Medicare as well as Commercial claims allowed KHA to provide a comprehensive picture of patient utilization for the patients in their hospital member's markets. For process expediency, HSG engaged with KHA directly and worked through their statewide data committee to make critical decisions to optimize reporting for hospitals across the state.

Three main decision-points that the data committee had to agree upon were:

- 1 How should each member hospital's service area be defined?
- 2 How critical was facility categorization in reporting outputs?
- 3 How should outpatient service line definitions be standardized?

While each of these decision points seems straightforward, making these types of decisions on behalf of 120+ hospitals across the state creates increased complexity.

Service areas, for example, have limitations based on how claims-based physician office data is aggregated. The data committee ultimately decided that all reporting would be completed at the patient county level with each hospital having the ability to 1) define their own custom

service area definition, or 2) a default service area would be created which would include the hospital home county and data for patients in the contiguous counties as well.

Facility categorization becomes increasingly complex due to the nature of professional billing. Each hospital organization can have hundreds of billing National Provider Identifier (NPI) numbers associated with that one organization. Data cleanup and categorization becomes an extremely time intensive effort when trying to clean data across an entire state. With the desire of having data reporting in front of them as quickly as possible, the data committee ultimately decided to not delay reporting for data cleanup. Data cleanup was identified as a potential longer-term item to address.

Last, standardizing service line definitions for all hospitals is no small feat as each outpatient procedure needs to be grouped into service line and sub service line categories. This decision-point actually became one of the simplest endeavors. Utilizing HSG expertise and proprietary service line definitions which get updated annually, main service line, sub-service line, and cross service line definitions were agreed to quickly by the data committee. Many hospitals did not have CPT-code based outpatient definitions, as the majority of the data insights were new to most facilities, thus strong service line definition opinions had not yet been developed.

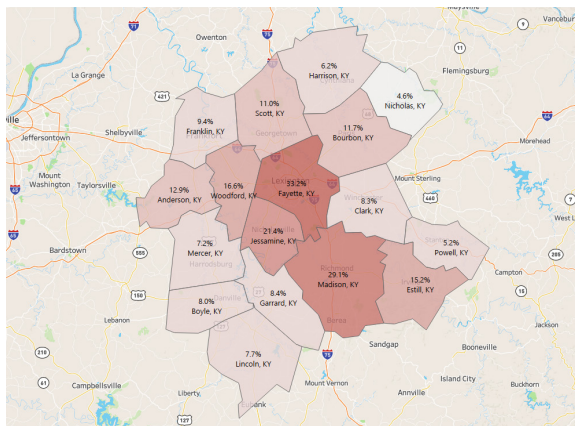
Engaging KHA's data committee in the decision-making and report approval process expedited report delivery exponentially.

THE RESULTS

The newly launched data initiative provides each member hospital with a quarterly ambulatory and physician office market share report. Details within the reports will include:

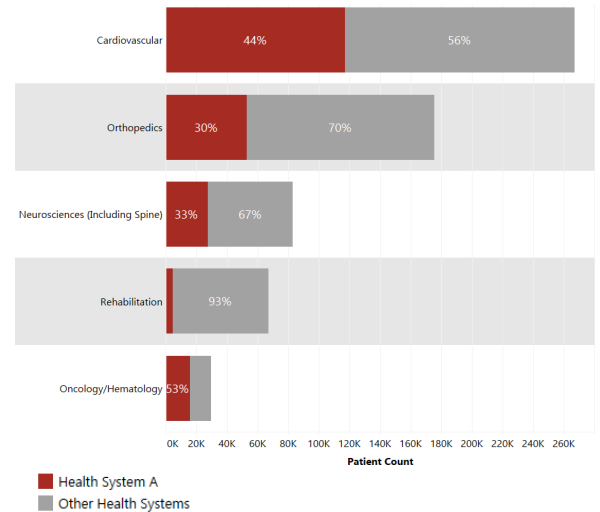
- The overall share for each hospital's defined service area.
- The market share for each hospital's service area, by patient county (Figure 1 below).
- Core service line share for six standardized service lines for all hospitals. These service lines include cardiology, orthopedics, oncology, neurosciences (including spine), physical therapy, and primary care (Figure 2

FIGURE 1: AMBULATORY & PHYSICIAN OFFICE MARKET SHARE | NEUROSCIENCES BY PATIENT COUNTY



- Cross service line reports for outpatient surgical procedures and imaging.

FIGURE 2: AMBULATORY & PHYSICIAN OFFICE MARKET SHARE | MAIN SERVICE LINES BY PATIENT COUNTY



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WHAT THE CLIENT HAS TO SAY

Addition of ambulatory and physician office data into our robust suite of data services is something our hospital members have been requesting access to for months. Our ability to now provide this as an **added value for our members is exciting and has been very positively received by executives throughout the state.**

– MELANIE MOCH, VICE PRESIDENT OF DATA AND HEALTH INFORMATION SERVICES