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## Vision Monday Global Leadership Summit

### *EyeHome Network: The Emerging Eye Care Delivery Model*

*March 13, 2013*

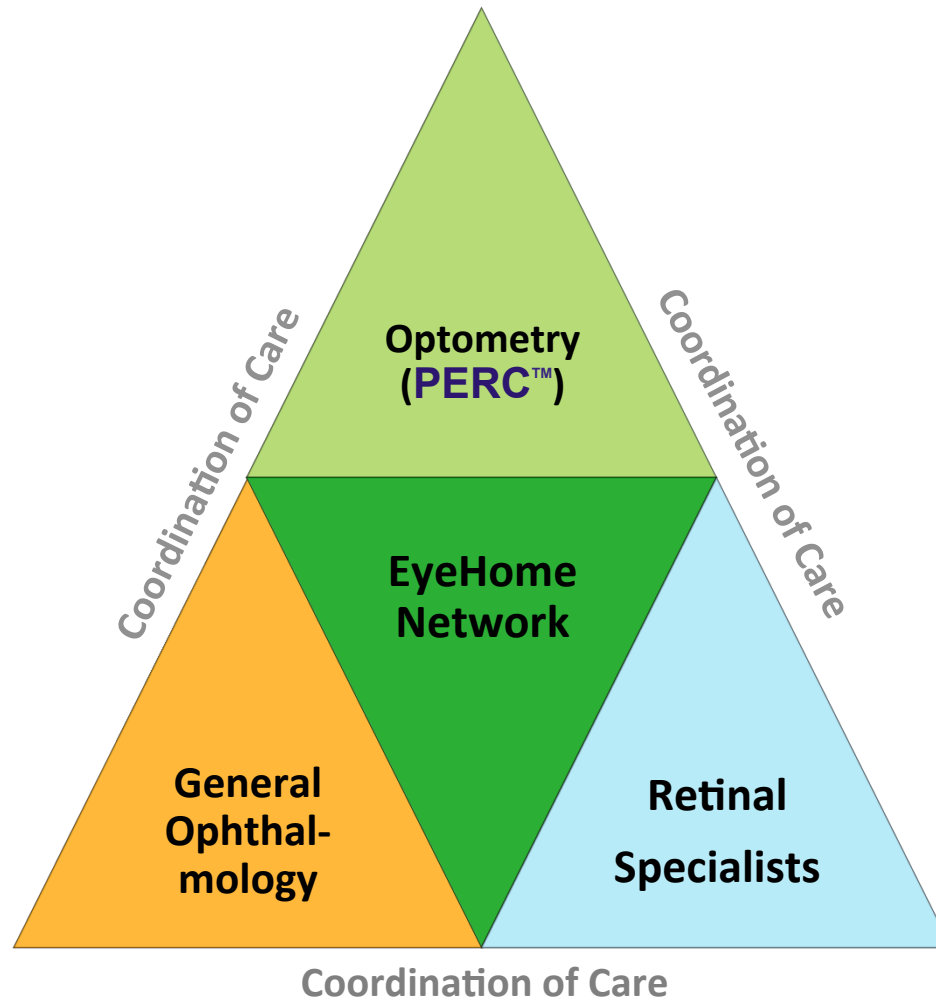


# Challenge or Opportunity?



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# EyeHome Network's Delivery Model



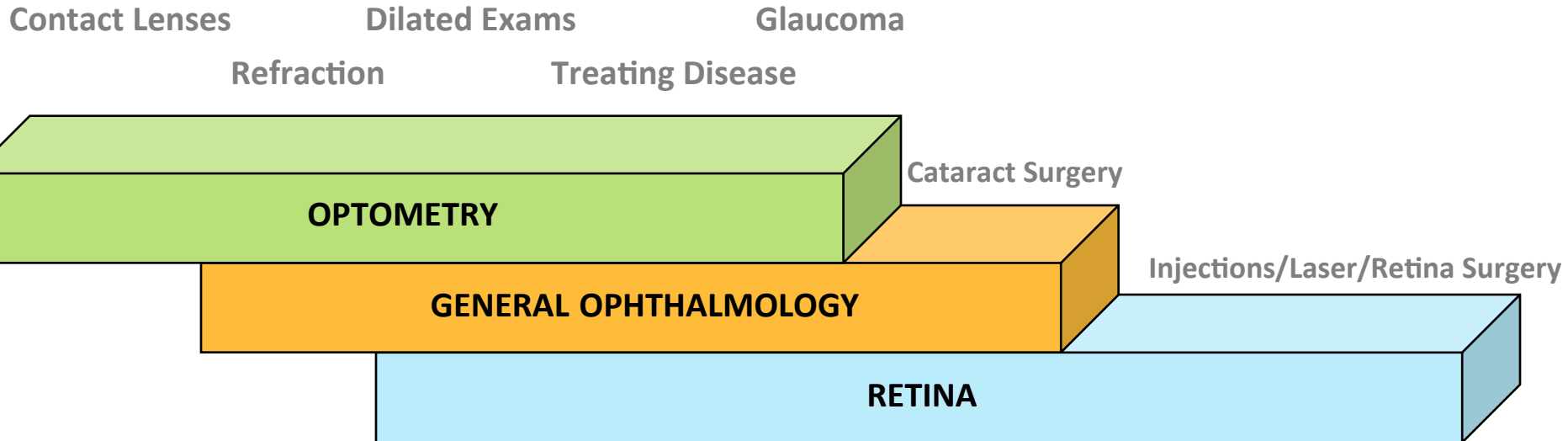
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# EyeHome Network Delivery Model

## Keys to Success

1. Care Coordination – Optometrist as the “Gatekeeper”
2. Access to Care
3. Eye Care Professions Performing at the Highest Level of their Scope of Practice
4. Leverage Technology

# EyeHome Network's Keys to Success

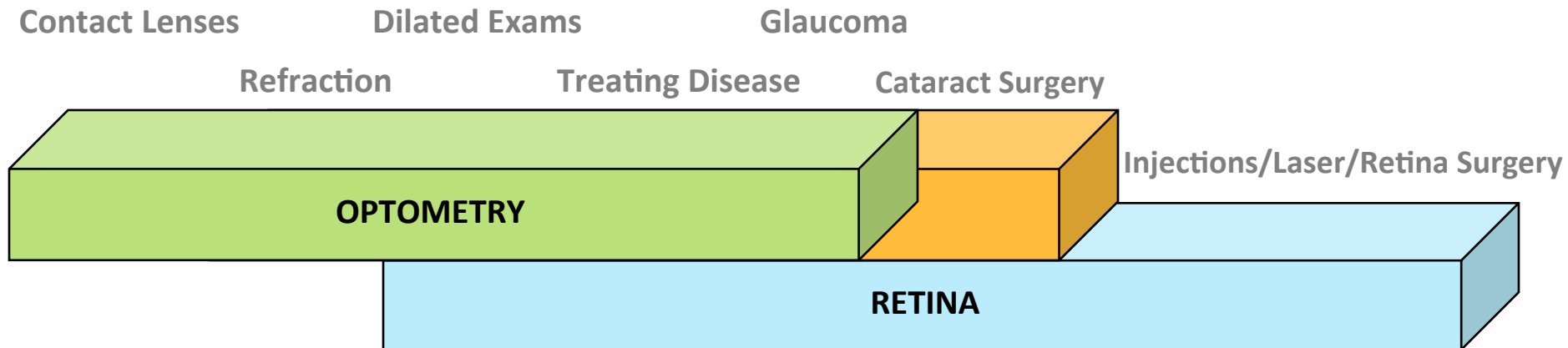


Eye Care Professions Performing at the Highest Level of their Scope of Practice



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# EyeHome Network's Keys to Success

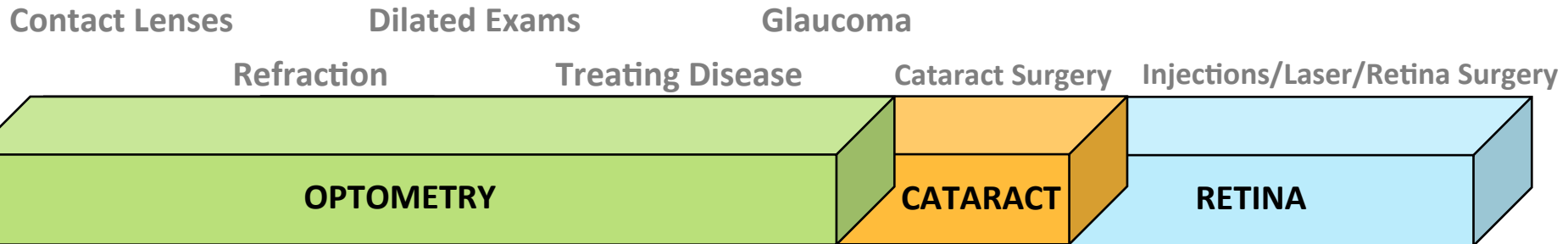


Eye Care Professions Performing at the Highest Level of their Scope of Practice



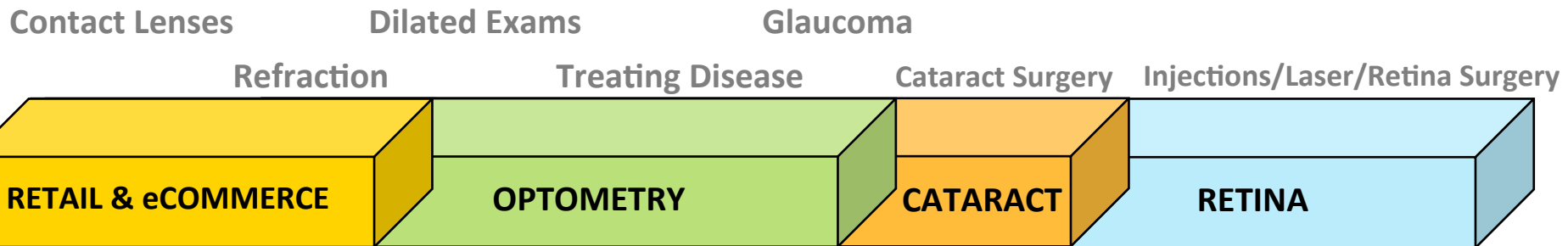
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# EyeHome Network's Keys to Success



**Eye Care Professions Performing at the Highest Level of their Scope of Practice**

# EyeHome Network's Keys to Success



**Eye Care Professions Performing at the Highest Level of their Scope of Practice**



# EyeHome Network's Keys to Success



## Leveraging Technology

1. Reduced Cost
2. Reduced Administrative & Staff Burden
3. Increased Quality & Accuracy
4. Mobility
5. Clinical Applications

# Medicare Advantage Pilot

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## Key Outcomes

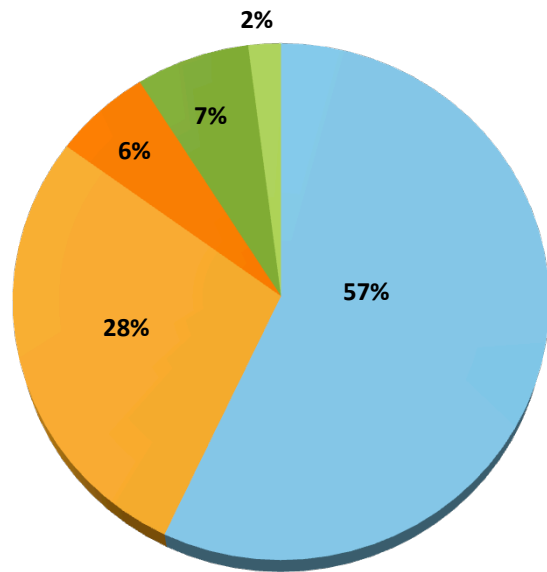
- ✓ Cost Effective Care
- ✓ Clinical Outcomes
- ✓ Improved Patient Satisfaction



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# Medicare Advantage Pilot

## Membership Distribution



- Single Optometric Visit
- Remained in Optometric Care
- Referred to Retina Specialist
- Referred to Cataract Specialist
- Referred to Glaucoma Specialist

## Pilot began March 2012

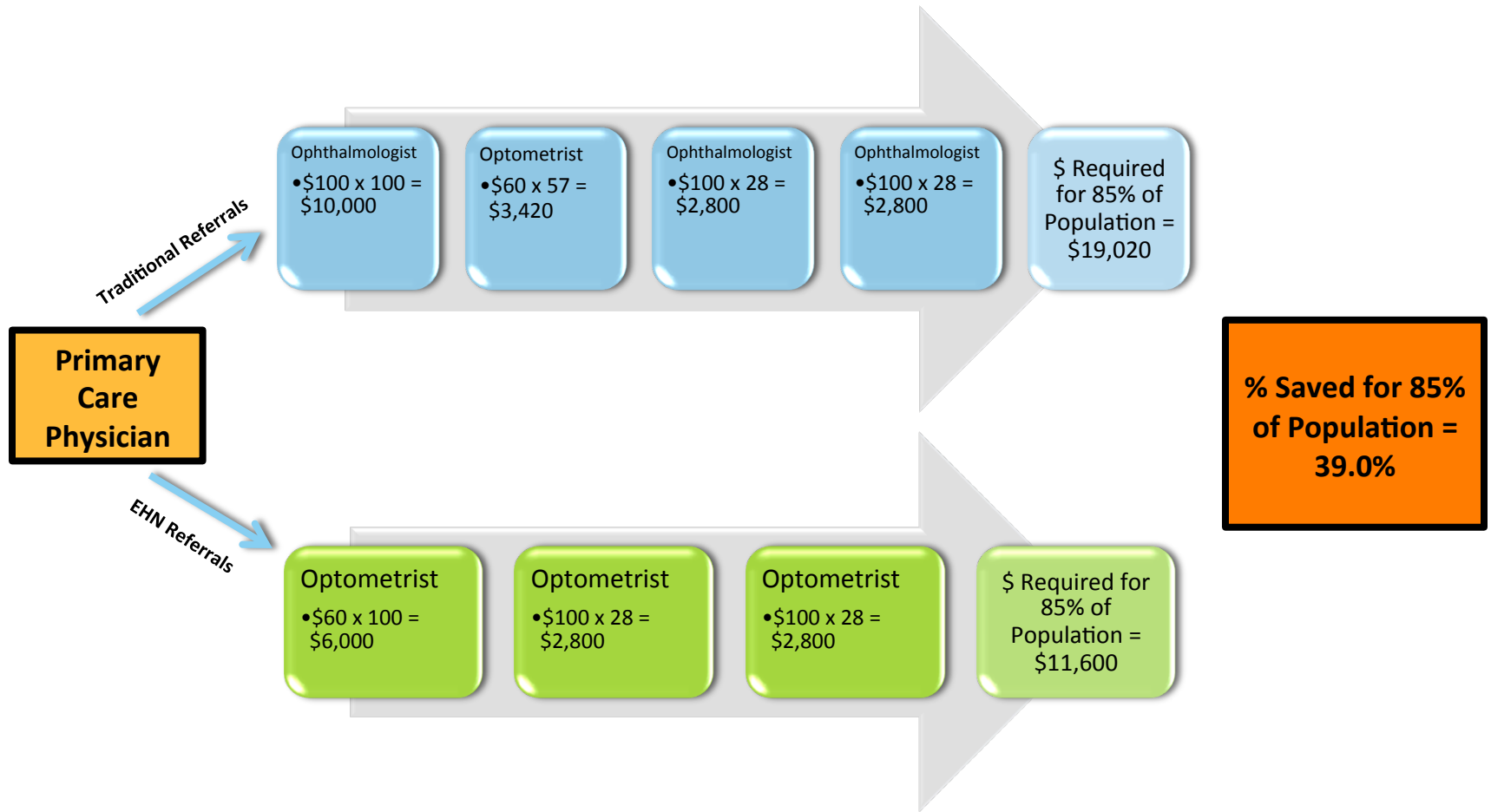
The pilot consists of 997 eligible members that reside within the community of West Covina, and select an eye care professional (ECP) from the Golden Optometric Group.



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# Medicare Advantage Pilot

## Referral Pattern Impacts to Cost, Quality Outcomes, & Patient Satisfaction



# Medicare Advantage Pilot

	Excellent (%)	Very Good (%)	Good (%)	Fair (%)	Poor (%)	Excellent /Very Good (%)
1. Ease of making your appointment	73.87	18.92	6.31	0.90	0.00	92.79
2. Promptness with which you were seen by the doctor	68.47	26.13	5.41	0.00	0.00	94.59
3. Clarity of doctor's explanations	78.38	16.22	5.41	0.00	0.00	94.59
4. Doctor's friendliness and courtesy	87.39	11.71	0.90	0.00	0.00	99.10
5. Thoroughness of care you received	78.38	18.92	1.80	0.90	0.00	97.30
6. Productive use of my time during my visit by doctor and staff	70.27	27.93	1.80	0.90	0.00	98.20
7. Staff's friendliness and courtesy	78.38	19.82	1.80	0.00	0.00	98.20
8. Help with understanding your insurance coverage	66.67	26.13	6.31	0.90	0.00	92.79
9. Knowledge/assistance with your visit	66.67	27.03	5.41	0.90	0.00	93.69
10. Overall satisfaction with your visit	73.87	21.62	4.50	0.00	0.00	93.69
11. Would you return to us for future eye care?	Yes 99.10	No 0.90				
12. Would you recommend us to others?	Yes 100.00	No 0.00				

*Patient surveys captured from March 2012 through October 2012; statistics are representative of data from 138 out of 234 survey opportunities (58.7%).*



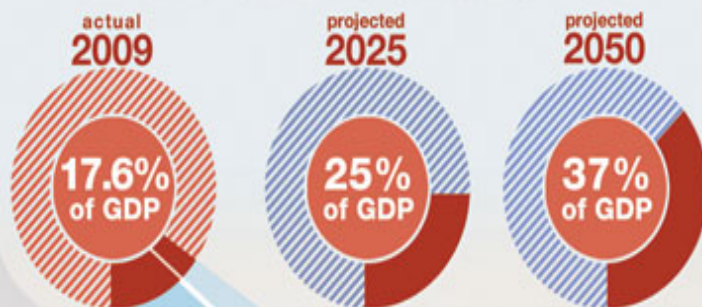
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# Health Care Landscape

## THE REALITY OVERALL SPENDING

**\$2.5 Trillion**  
(2009)

### HEALTH CARE AS SHARE OF GDP



### PER CAPITA SPENDING



## THE DRIVERS

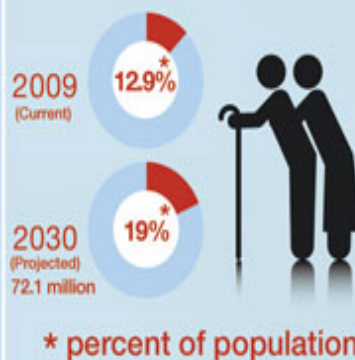
Chronic Disease  
**\$1.875 Trillion**  
Annual Cost (2009)

\$3 out of every \$4 of  
U.S. health care spending



### Aging Population

People Ages 65+ 1 in 8 Americans



### Hospital (2011) Readmissions

Nearly 1 in 5 patients  
readmitted in  
30 days



Estimated  
Preventable Cost Burden  
**\$25B annually**

### Physician Shortage Projected Shortages by Year



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# Health Care Landscape

## PolitiCal

ON POLITICS IN THE GOLDEN STATE

Facing doctor shortage, lawmakers want to redefine healthcare roles



Nearly 30% of California's doctors are nearing retirement age, the highest percentage in the nation, according to the Assn. of American Medical Colleges. (Katie Falkenberg / For The Times)

*"We have got to change the overall delivery system. We can't succeed doing business as usual," she said. "I don't think there's any stone that can be left unturned. We have to look at every possible way to make the delivery of care better for patients and less expensive."*

Diana Dooley

Secretary of the State Health and Human Services Agency



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# Improving HEDIS, Star Ratings, & CAHPS Metrics

**Glaucoma testing – 1x**

**Diabetes care - eye exam – 1x**

**Controlling blood pressure- 3x**

**Adult Body Mass Index (BMI) assessment – 1x**

**Diabetes care – blood sugar controlled (HbA1c) – 3x**

**Diabetes care – cholesterol (LDL-C) – 3x**

**Part D medication adherence for oral diabetes medications – 3x**

**Part D medication adherence for hypertension (ACEI or ARB) – 3x**

**Part D medication adherence for cholesterol (statins) – 3x**

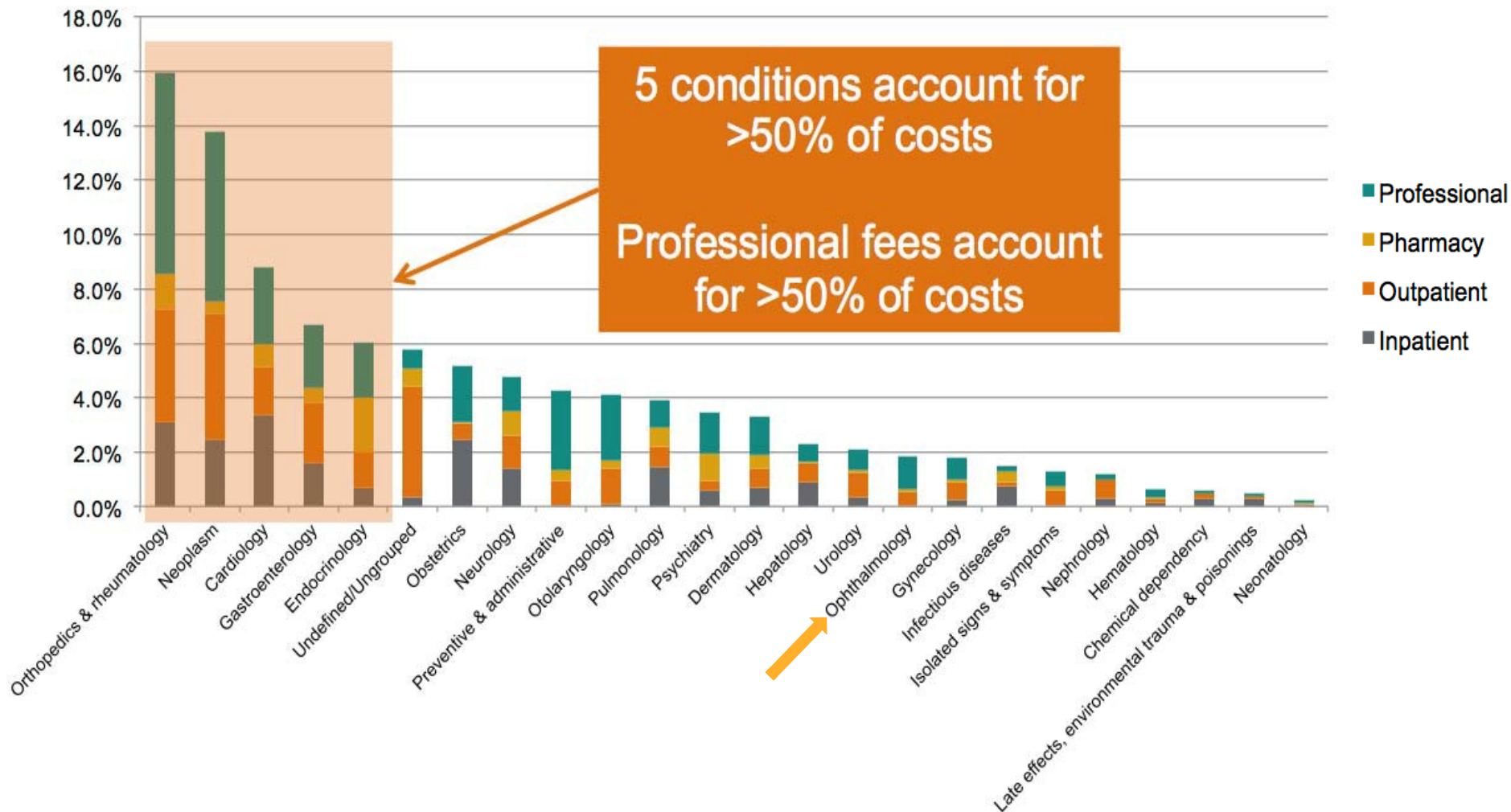


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# Cost & Utilization Distribution by Claim Type

Commercial Population  
October 1, 2009 – September 30, 2010



# Am I Providing Optimal Value to My Patients?



The Train is leaving the Station ...



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# Thank You

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# PERC<sup>TM</sup>

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