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With Value Based Care Expanding, Ensure Data Solutions has the Solutions, Analytics Tools and Services that Health Plans and Health Care Providers Need for Better Outcomes



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“Ensure Data Solutions supports health plans and healthcare providers navigate the complexities of value-based care.”
Bruno Piquin

CEOCFO: *Mr. Piquin, what is Ensure Data Solutions?*

Mr. Piquin: Ensure Data Solutions supports health plans and healthcare providers navigate the complexities of value-based care. We provide analytics, tools, professional services, and technology to help them with those challenges.

CEOCFO: *Value-based care as opposed to?*

Mr. Piquin: Instead of a fee-for-service model, approximately 75% of healthcare services provided in this country today follow a fee-for-service or volume-based structure. Under this model, if a healthcare provider performs 5 services or procedures during a visit, they will bill for each individual procedure code and receive payment accordingly. Essentially, the more services billed, the higher the payment.

In contrast, fee-for-value or value-based care compensates healthcare providers based on the value they generate or the outcomes they achieve. Providers are reimbursed for assisting patients in improving their health conditions and achieving better outcomes, rather than solely focusing on providing as many services as possible.

CEOCFO: *Is the medical community getting on board with value-based or is it still foreign to them? Where does it stand today and where do you see it growing?*

Mr. Piquin: Today, some regions of the United States have embraced value-based care. Most notably, large portions of Florida, along with select areas in Texas, California, Arizona, Nevada, and a few other locations, have adopted and implemented value-based care models. Conversely, the majority of the country is still in the process of familiarizing themselves with these concepts or attempting to acclimate to them.

It's noteworthy that the Center for Medicare and Medicaid Services (CMS) has launched several initiatives, such as the Accountable Care Organization (ACO) program, which have gained significant recognition and have been operational for a few years now. These programs have played a crucial role in increasing the healthcare industry's understanding of value-based care. ACOs collaborate with beneficiaries of the Original Medicare program and participating healthcare providers. Consequently, awareness surrounding value-based care is expanding, with more beneficiaries and ACOs going live across the nation. However, it remains primarily associated with Medicare and primarily benefits Medicare beneficiaries.

In contrast, value-based care is not as prevalent or widely accepted within the employer group or commercial sectors, particularly in primary care settings. Instead, its application is more common in specialist care and specific procedures, such as knee replacements or other musculoskeletal procedures.

CEOCFO: *Where does Ensure Data Solutions come in; how do you help doctors in the medical community make the change and make it without a lot of technical hardship?*

Mr. Piquin: Let me provide some context about my background, which will help clarify my perspective. I spent 30 years working on the payer side, and most recently, I served as the leader of a large Medicare Advantage plan in the State of Florida. Quality in Medicare Advantage plans is assessed by CMS through its Star rating program. During my tenure, our plan consistently received a 5-star rating from CMS for four consecutive years. This achievement was not solely attributable to our efforts alone. As a health plan, we collaborated closely with the primary care groups with whom we had established value-based care agreements to attain this level of success.

I emphasize this point because, although health plans may appear to stand alone, the reality is that it's a tripartite relationship. You have the health plan, the Medicare beneficiary or member, and the provider community, encompassing care delivery specialists and hospitals—essentially, the entire healthcare system. It's crucial to recognize that health plans cannot accomplish this feat in isolation.

I personally experienced the vital importance of collaboration firsthand. Our success stemmed largely from our adeptness at sharing data with

primary care groups. Operating on a PCP-centric model, each member selected a primary care physician to oversee and safeguard their health. However, not every primary care group had the same capacity to handle data from multiple health plans for all their patients. Many lacked the resources—such as IT, analytics, or finance departments—to process such extensive data files. While some larger groups could manage, the majority struggled with this task. Recognizing this need, and mindful of my own future as a potential Medicare beneficiary, I made the transition from the payer side to Ensure Data Solutions about a year ago.

In Ensure Data Solutions, I saw a platform capable of facilitating data ingestion and processing the substantial volume of information efficiently. We provide analytics to inform care and treatment plans, presenting primary care physicians with easily digestible data points for actionable insights. Not every health plan can offer such analytics tools to their primary care physicians, which is where Ensure Data Solutions steps in to assist. We help these providers grasp their performance in terms of quality and preventive measures, ensuring the accuracy, completeness, and appropriateness of patients' clinical documentation and coding. While coding and notes are crucial, it's imperative to translate them into diagnosis codes accurately. We aid providers and health plans in ensuring that clinical conditions are correctly documented within electronic medical record systems.

Moreover, our platform facilitates the seamless transfer and sharing of information, fostering collaboration not only between health plans and primary care physicians but among all healthcare providers involved in a patient's treatment. Enhanced information exchange leads to improved health outcomes and the delivery of higher-quality care for patients.

CEOCFO: Is it the goal when a practice comes on board to do value-based healthcare?

Mr. Piquin: That's ideal, but certainly not required. There's a glide path to value-based care that can be implemented for those practices that aren't quite ready. Our professional services group assists these providers in assessing their environment, structure, and several other elements. Then, we can help them determine and understand the appropriate starting point on the value-based care glide path, based on a number of factors.

Once the leadership of a particular provider group aligns on a starting point and feels comfortable with the approach, we bring the services, expertise, and technology solutions to ensure the group's success.

All of this can be done for a new provider group or one that is already established, or even for one that may already be engaged in a value-based care arrangement today. This scenario can also be beneficial because the provider group has already been exposed to what it takes to have a successful value-based care arrangement.

The conversation about Ensure Data Solutions' value creation and proposition is easier with a provider group that has experience with value-based care arrangements.

CEO CFO: *What has changed in your approach over time and what have you learned as more and more people are using Ensure?*

Mr. Piquin: I believe that recent changes in the Medicare Advantage program and its associated regulations have prompted some adjustments. Last year marked the first significant alteration to the risk adjustment model for the Medicare Advantage program in four years. These changes were quite drastic, necessitating us to adapt and develop solutions and functionalities within our analytics platform. This was crucial to support our health plans and primary care provider clients in effectively managing these adjustments.

Additionally, our clients have approached us for assistance with another significant change: the expansion of value-based care arrangements to encompass their Medicaid Managed Care, ACA, and Original Medicare patients/members. While primary care value-based care arrangements were previously more prevalent in Medicare Advantage products, there's now a growing trend among health plans to extend value-based care initiatives to these other lines of business. This shift is driven by the positive outcomes observed with value-based care implementation.

Consequently, we've observed an increasing demand for such services and have consequently developed additional solutions. These include tools for monitoring and managing the quality of care specific to these lines of business, as well as calculations and projections for the ACA risk adjustment model. These resources are essential for assisting health plans and primary care groups in effectively managing members and patients under risk or value-based arrangements in these contexts.

CEO CFO: *What is the key to getting your foot in the door to the various stakeholders to introduce what you are doing?*

Mr. Piquin: My extensive experience and success in the payer sector lend significant credibility to our offerings. Moreover, as businesses grow more complex, the necessity for solutions like ours at Ensure Data Solutions becomes increasingly apparent to prospects. They often recognize this need either through their own experiences or through our track record as an organization supporting numerous clients engaged in value-based care arrangements. We've been able to demonstrate how our suite of services has effectively assisted these clients, further reinforcing the value we bring to the table.

CEO CFO: *What does 2024 look like for you?*

Mr. Piquin: We're currently witnessing substantial growth beyond our traditional geographic footprint, particularly in the Medicaid Managed Care, ACA, and ACO sectors, as well as in the professional services arena. Additionally, we envision partnerships with other healthcare information technology vendors where our offerings can complement and enhance their existing solutions. Whether collaborating with patient engagement platform vendors, health plan core administrator platform vendors, or revenue cycle management vendors, we believe our solutions can significantly bolster their capabilities. This collaborative

approach allows us to extend the reach and impact of our solutions while providing added value to our partners and their clients.

We also work with billing companies that have a number of provider clients needing help with quality measures or risk adjustment models and documentation of clinical conditions.

CEOCFO: *What should people remember about Ensure Data Solutions?*

Mr. Piquin: They should keep in mind two crucial points. Firstly, value-based care is not just a passing trend; it's here to stay. It's a model that is expanding rapidly, becoming more intricate, and requires significant support for health plans and healthcare providers. As mentioned earlier, health plans face immense challenges in implementing value-based care on their own. Effective implementation demands extensive collaboration with the provider community to enhance beneficiary health and achieve high-quality outcomes. As value-based care continues to expand both geographically and into other lines of business such as Medicaid, ACA, and ACO, health plans and healthcare providers will increasingly realize the need for support. Ensure Data Solutions is well-equipped to provide this assistance. We offer the expertise, range of functionalities, and capabilities required to help them successfully navigate the complexities of value-based care.

