The Four Quadrants of Network Performance Management

This infographic highlights the four quadrants that represent the continuum of health that OneCare works with to stabilize health care costs. The infographic shows a central circle split into four categories with arrows showing how individuals can move between categories. Around the circle are boxes defining the percentage of individuals in each category, the focus of OneCare for that population, and key activities performed by OneCare to maintain that population.

Category 1: This is the healthy or well individuals in the community, but does include some unpredictable or unavoidable events. These individuals represent 44% of the population. They are low risk, and the focus for OneCare is to ensure these individuals maintain health through preventive care and community-based wellness activities. Some key activities that OneCare does to ensure this group maintains health include:

- Preventive care (e.g. wellness exams, immunizations, and health screenings)
- Wellness campaigns (e.g. health education and resources, wellness classes, parenting education)
- RiseVT

Individuals in this category can move to category 2 (medium risk) and category 4 (high risk), as highlighted by arrows. Individuals cannot move into category 1 from other categories.

Category 2: This is the population of individuals that have early onset or stable chronic diseases. These individuals are considered medium risk and are 40% of the population. OneCare focuses on optimizing health and self-management of chronic disease to manage this population. The key activities OneCare does to ensure this group successfully maintains their health include:

- All of the activities in category 1
- Outreach for annual Comprehensive Health Assessments (i.e. physical, mental, social needs)
  - Disease self-management support, which is coordinated via the Care Navigator software platform (i.e. education, referrals, reminders)
  - Pregnancy education

Individuals can move between this category and category 3 (high risk).

Category 3: This is the population of individuals that have full onset of chronic illness and rising risk. They are considered high risk and represent 10% of the population. OneCare's focus for this population is to provide active skill-building for chronic condition management and address co-occurring social needs. Some key activities OneCare does to ensure this group accomplishes this include:

- All of the activities in category 2
- Outreach and engagement in care coordination (at least quarterly)
- Create and maintain a shared care plan (coordinated via Care Navigator)
- Coordinate among care team members (coordinated via Care Navigator)
- Emphasize safe and timely transitions of care
- Facilitate regular care team conferences (coordinated via Care Navigator)

Individuals can move between this category and category 2 (medium risk) and/or category 4 (high risk).

Category 4: This population is complex and represents a high cost for the healthcare system. They have acute and catastrophic health needs. They are considered very high risk and represent 6% of the population. OneCare focuses on addressing their complex medical and social challenges by clarifying goals of care, developing action plans, and prioritizing tasks. Some key activities to achieve this include:

- All of the activities in category 3
- Designate a lead care coordinator (coordinated via Care Navigator)
- Care team with at least one licensed member
- At least monthly outreach and engagement in care coordination (coordinated via Care Navigator)
- Assess palliative and hospice care needs (coordinator via Care Navigator)

Individuals in category 1 (low risk) can move into this category and individuals can move between this category and category 3 (high risk).

Category 3 and 4 represent 16% of the attributed lives of OneCare but are 60% of the spending for the ACO. Ninety-five percent of these individuals have multiple chronic illnesses and 52% have multiple health conditions.