

The Direct Primary Care Research Database

A robust and comprehensive approach to data collection for the DPC community

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Milliman Direct Primary Care Research Database

More than ever, the time is now



Background / Business Case

- Direct Primary Care continues to grow
- Self-funded employer groups are key target market for growth
- Employers are increasingly looking for proven ROI
- Robust studies are required to prove DPC's value
- The data is out there....



Challenges

- Data is scattered across many different stake-holders
- Quality, standardized formats sometimes lacking
- Existing studies are smaller, less sophisticated, creating a credibility gap
- Requires expertise across a data handling and analytics skillset

Direct Primary Care Research Database (DPC-RD)

Proposal



DPC-RD is a Milliman designed and managed data base created and maintained to serve the research needs of the DPC community

About Milliman

Positioned to Fill the Gap

Quality, trusted analysis



We are one of the world's largest independent consulting, analytics and actuarial firms, and have served our clients for 75 years.



Deep industry knowledge: TPAs, vendors, employers and providers all rely on Milliman in varying capacities to provide objective advice.



Data, technology, and analysis tools that transform data and information into actionable insights for clients.



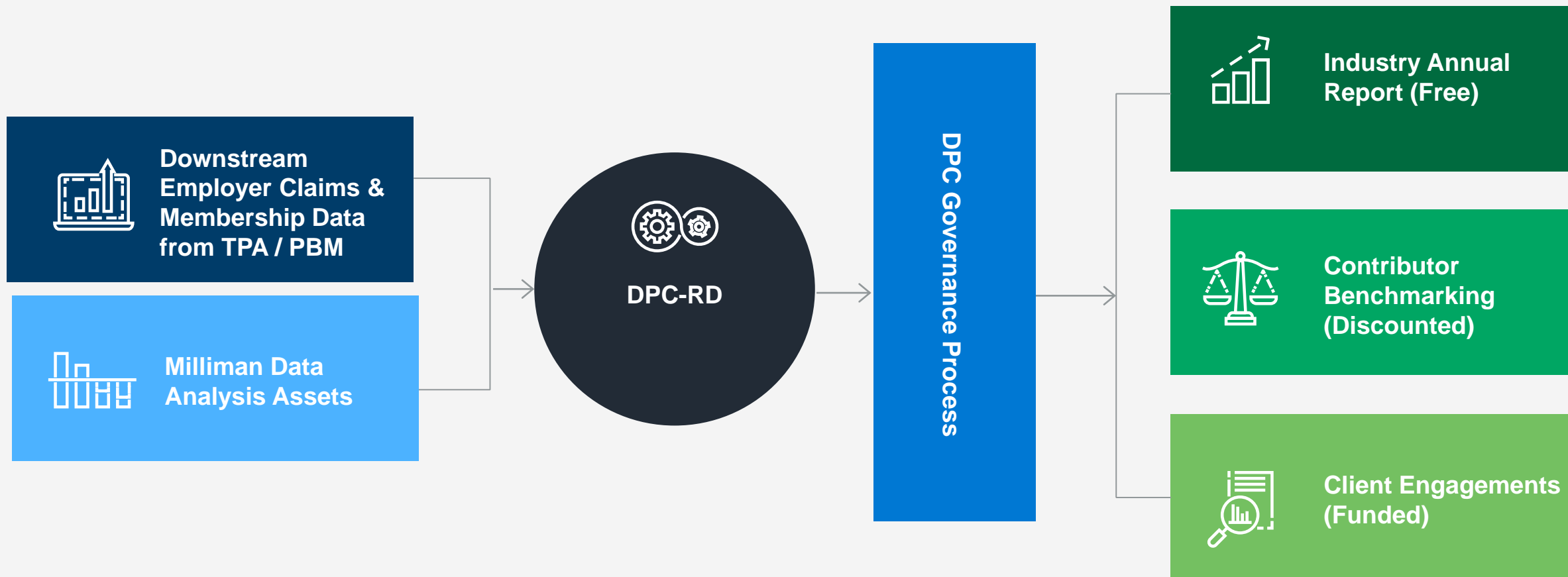
Uniquely positioned to help the DPC movement grow, thrive and improve. Involved and invested in the DPC movement for years with a commitment to seeing the concept spread.



Deeply embedded in our culture is the idea of *quality*. We employ a rigorous internal peer-review process on all projects to ensure we deliver the very best in advisory services.

Direct Primary Care Research Database (DPC-RD)

Overview



Direct Primary Care Research Database (DPC-RD)

Built from DPC Contributor Data

Detailed downstream medical and pharmacy claims data from employers enrolled with DPC providers

1

DPC practices with 50+ enrolled employer lives can contribute

- Less becomes inefficient
- Exception could be multiple under 50 providers with the same TPA

2

Standard payer claims formats that most (if not all) TPA's can handle

- ICD10, CPT, DRG codes etc.
- Monthly eligibility files with complete demographic information
- Focus is on downstream payer data initially. EMR data is out of scope initially.

3

Annual contribution cadence

- Initial contribution would include previous history
- Move to quarterly once processes are efficient and the need presents itself

4

Security

- Use secure file transfer protocols (FTPS), data stored securely
- Deidentified and HIPAA compliant
- HITRUST certified
- BAAs and DUAs will be signed with all contributors

Direct Primary Care Research Database (DPC-RD)

Milliman's Role

Leverage or deep data analysis and data management capabilities

- **Host and maintain data servers**
- **Build the database**
- **Direct annual / quarterly data collection process**
- **Inclusion criteria, data scrubbing and ensure data quality, integrity**
- **Addition of Milliman analysis tools required for quality, informative analysis**
 - Health Cost Guidelines Grouper (categorizes claims data and counts utilization)
 - Milliman Advanced Risk Adjusters (measures patient acuity)
 - Health Waste calculator (identifies prevalence of low-value care based on Choosing Wisely)
 - Other
- **Added fields such as practice size, region, type of DPC, etc.**

Direct Primary Care Research Database (DPC-RD)

Governance

Design a collaborative process to deliver the best results from the data for all stakeholders

1

Steering Committee

- Data contributors
- Milliman
- Other DPC leadership

2

Establish Community Priorities

- Annual industry reporting
- Other (funded) studies
- All studies are “non-branded”

3

Review

- Review findings, publications
- Contribute / peer review
- Expertise and insights

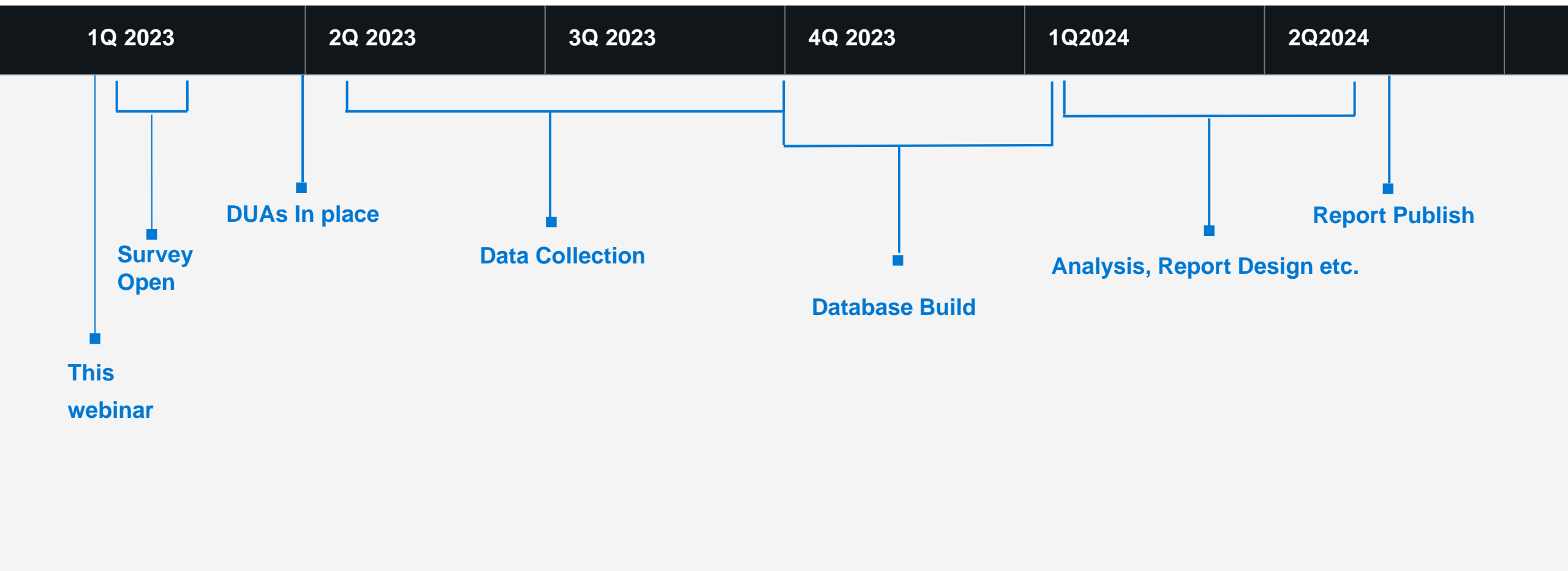
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Funding

- **Contributors**
 - No charge for public annual industry report
 - Contributors would be acknowledged in the report
 - Access to discounted contributor-level benchmarking
 - Access to funded studies
- **Non-contributors**
 - No acknowledgement in annual report
 - Charged a flat per study fee in addition to time and expense
- **Milliman**
 - Upfront investment fronted by Milliman
 - We amortize start-up costs and pay for ongoing expenses with paid client engagements

Next Steps

Timeline



Direct Primary Care Research Database (DPC-RD)

Survey Info

- **Focusing on DPC providers that:**
 - **Employer arrangements (no retail, walk-ins)**
 - **More than 50 enrolled patients from a single employer / TPA combo**
 - **Data accessible via claims system or data warehouse**
 - **Willing to contribute**
- **If you do not fulfill these criteria, we are interested in your thoughts about this initiative in general.**

Survey Link: <https://www.surveymonkey.com/r/DPCResearchDatabase>

Q&A



Thank you

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