Clinical Practice Solutions Center

The only solution that focuses on the provider practice and physician organization to help build a patient focused, data-driven organization

Drive change with the right analytics, technology and expertise

Academic and community physician and provider organizations face a unique set of challenges as they balance patient care with rising costs, restrictions on government funding and new payment models. A comprehensive solution that helps transform margins, innovate financial performance and maximize efficiency is the key to success.

The Clinical Practice Solutions Center (CPSC), developed by the Association of American Medical Colleges (AAMC) and Vizient®, resulted from member input regarding the burdensome nature of duplicative data collection and survey activities related to provider practice patterns and performance. Designed to meet critical gaps in data management needs and provide insightful analytics, the CPSC provides physicians and medical groups with the clarity to inform and improve areas such as physician productivity, coding and compliance, charge capture, collections, denials, contract rate management, patient access and quality of care specific to physician billing activity.

In today’s value-based care environment, to improve outcomes, academic and community practice organizations need two elements: visibility and clarity. Visibility helps easily identify performance gaps and clarity creates connections to understand causes and drive change. CPSC provides essential analytics to help physicians and medical groups understand their practices and their impact on performance.

Powerful analytics tools, peer collaboration and advisory services

Ensuring better care with improved outcomes requires a partner and solution with the scale, breadth and depth of experience, and proven expertise to deliver exponential impact across the continuum of care.

Key benefits

- Enhances management of clinical practice and revenue cycle performance
- Provides productivity data for insights into department, specialty and provider performance
- Academic and community benchmarking at the department, specialty, provider level and key analytic methodologies
- Drives innovation in the design and implementation of strategies, tactics and management tools
- Annual Medicare fee schedule impact analysis to quantify potential impact on bottom line
- Analyze patient access trends and provider efficiency
Drive performance improvement

Improve clinical operations

Specialty-specific comparative benchmarking data delivers invaluable insights to help organizations maximize clinical performance. With this solution, Academic and community practice organizations can measure and manage clinical activity, monitor coding compliance, maximize charge capture, track visit mix, and optimize practice yield. Members can view data by provider, location and by payer, allowing deep insight into each specialty’s performance.

Enhance quality and safety

Resources to help interpret and succeed under the Medicare Access and CHIP Reauthorization Act (MACRA) by providing programs and services that support quality improvement as well as highlight how organizations are responding to quality and safety measurement changes.

Optimize revenue cycle

CPSC members can use tools and analytics capabilities to assess performance and identify opportunities. These resources help manage clinical practice and revenue cycle performance to understand and manage third-party payer contracts, reduce and prevent denials and improve collection timeliness and efficiency. To be eligible to participate in the revenue cycle module of the CPSC, participants must submit their invoice level transaction data.

Actionable, comparative data to drive performance

Access and Throughput analytics

This dashboard is powered by ambulatory scheduling data and provides members with comparative data to help assess ambulatory efficiency examining new patient access, non-arrival rates and clinic throughput domains. There is multilevel performance drilldown capability to the specialty, location and provider levels.

Members of CPSC who provide scheduling data are eligible for this module. Access and Throughput syncs clinical operations data with patient access data for a more comprehensive view around patient satisfaction, revenue, clinic and provider efficiency.

Opportunity dashboard

This online dashboard leverages data from the CPSC to highlight and summarize areas of top performance improvement opportunities within an organization.

Key features:

- Opportunity assessment across five key performance indicators: new patient visit percentage, evaluation and management coding distribution, physician productivity, net collection rates and denial rates
- Multi-level drilldown capability to specialty and provider levels (and by location where applicable)

Accelerate improvement through collaborative intelligence

Peer networking and best practice sharing provides information and relevant collaborative support. Many of these organizations participate in the Centers for Medicare & Medicaid Services’ quality programs — presenting prime opportunities for collaborative information sharing to improve performance. CPSC is more than a database. It’s a full-service solution that fosters continuous collaboration, and drives innovation in strategy design, operational efficiency and revenue enhancement.
**Annual conference**

With more than 200 attendees, the annual conference provides valuable information and networking opportunities for all staff levels — from analysts to senior administrators. Attendees hear keynote presentations from peer leaders in the field as well as an array of topics covering operational, financial and quality-related issues.

**The Advisory Group**

This group serves as the voice of our members and helps drive improvements and value in the tools we offer. Group members include administrators and practice organization executives who collaboratively provide CPSC staff with feedback and input, helping to ensure the CPSC solution continues to meet the needs of our members.

For more information about the CPSC, visit www.clinicalpracticesolutionscenter.org or contact Jeff Lerman at (312) 775-4243 or jeff.lerman@vizientinc.com

As the nation’s largest member-driven health care performance improvement company, Vizient provides network-powered insights in the critical areas of clinical, operational, and supply chain performance and empowers members to deliver exceptional, cost-effective care.

The Association of American Medical Colleges is a not-for-profit association dedicated to transforming health care through innovative medical education, cutting-edge patient care, and groundbreaking medical research. Its members are all 151 accredited U.S. and 17 accredited Canadian medical schools; nearly 400 major teaching hospitals and health systems, including 51 Department of Veterans Affairs medical centers; and more than 80 academic societies. Through these institutions and organizations, the AAMC serves the leaders of America’s medical schools and teaching hospitals and their more than 173,000 full-time faculty members, 89,000 medical students, 129,000 resident physicians, and more than 60,000 graduate students and postdoctoral researchers in the biomedical sciences. Additional information about the AAMC and its member medical schools and teaching hospitals is available at www.aamc.org