

PHILADELPHIA BUSINESS JOURNAL

August 22, 2014

Number-cruncher gets 'pushback'

John George

Philadelphia Business Journal

In some ways, Bryan Wellens' job is like those of the new wave of number-crunching data specialists reshaping the front offices of professional sports teams.

As senior director of clinical informatics for Continuum Health Alliance, a Marlton, N.J., population health and practice-management services company, Wellens is the guy who analyzes the data and tells doctors how they are doing.

He said the reactions he gets from physicians are mixed.

"When you show data to doctors who are good performers, they'll have no problem with it," he said, "but there are others who will say the data is no good. You put data in front of them and there will be some pushback."

In other instances, he said, a doctor will react with genuine surprise when he learns, for example, that 20 percent of his patients are diabetic.

Earlier this week I had a story posted on pbj.com about how CHA and a large commercial payer have had success sharing data to better manage the health of 20,000 members at 23 Advocare internal medicine and family practices with 27 offices around New Jersey. Using a lot of data analysis, the two organizations work together on strategies to improve care and lower costs. The two organizations are splitting the savings.

In the first year of the program, they achieved a 13 percent reduction in the overall cost of care, a 12 percent reduction in 30-day readmissions, a 9 percent reduction in inpatient admissions, and an 8 percent reduction in emergency department visits.

When asked for an example of how the use of clinical informatics is improving care, Wellens brought up colonoscopies for detecting colon cancer.

He said CHA, to meet Horizon's standards for colorectal cancer screenings, identified male patients over the age of 50 who had not received colonoscopies.

Those who had not gotten a colonoscopy, a test that averages about \$1,000 to \$1,500, were sent a FIT (fecal immunochemical test) kit in the mail - at a cost to CHA of \$7 per test kit. The kit allowed a patient to mail a stool sample to a lab for analysis. Results from those tests were then used to identify patients that warranted additional screening.

In the first year, 2,343 test kits were distributed and 11 percent, or 263, were returned. From that total, 19 members received positive indicators that said more testing should be done, and 10 were ultimately diagnosed and treated for precancer or cancer.

"The test, which arrived at their door one day, ended up making a big difference in their lives," Wellens said.

This year, with the campaign still ongoing, 1,518 test kits were distributed and 16 percent, or 210, were returned. From that group, nine members received positive indications.

