

RESOURCE UTILIZATION

Achieve value-based payment goals
in quality measures and variation management

Solution description

NextGen® Population Health resource utilization analyzes paid claims and clinical data and provides a dashboard to help you:

- Manage value-based payment risk successfully
- Capture shared savings opportunities and optimize revenue
- Improve clinical outcomes and quality measure performance
- Reduce referral pattern leakage

What this solution enables

Our advanced population health solution lets you measure provider performance through peer-practice pattern variation of resource utilization and clinical quality measures. The solution also gives you:

- Insights on key cost drivers and the ability to track resource utilization
- A blueprint for utilization savings through reduced variation
- A detailed map of out-of-network revenue

Solution snapshot



What does this mean for your practice?

NextGen® Population Health resource utilization allows you to achieve gainsharing-benchmark targets and quality-measure incentives under value-based payment arrangements. Get fast, accurate clinical performance analysis so you can better utilize every healthcare resource. Use a fusion of clinical and claims data analytics to stratify patient risk and better manage that risk. The insights we provide can also help you more intelligently negotiate the terms of risk-bearing contracts.

“I can gain clean insight through the HQM utility on a weekly, and now even a daily basis, as to my doctors’ performance with the quality programs.”

Aaron Higgins, EHR and Quality Programs Manager,
Savannah Vascular Institute

Better starts here.

Contact us at 855-510-6398 or results@nextgen.com.

NextGen Prioritization Matrix

Use this matrix to help you prioritize solutions that support your practice success.

	Capability	Cost	Revenue	Quality	Effort	Impact	Priority
Clinical Care	Adaptive Workflows & Specialty Content	★★★	★★★★★	★★★	High	★★★★★	
	Mobile Dictation & Virtual Scribe	★★	★★★★★	★★★	Low	★★★★★	
	Compliance	★★	★★★	★★★★★	Medium	★★	
	Care Team Collaboration	★★★	★★★	★★★★★	Low	★★	
Financial Management	Eligibility & Pre-Service Financial Clearance	★★	★★★★★	★★★	Medium	★★★★★	
	Rules-Based Charge Creation	★★★	★★★★★	★★★	Medium	★★★★★	
	Clean Claims & AR Management	★★★	★★★	★★	Medium	★★★★★	
	Contract Audit & Recovery	★★	★★★★★	★★	Low	★★★★★	
Patient Engagement	Patient Portal with Online Scheduling	★★★	★★★	★★★	Medium	★★★★★	
	Virtual Visits	★★★	★★	★★	Low	★★★	
	Secure Messaging	★★	★★	★★	Low	★★	
	Personalized Outreach	★★	★★★	★★★★★	Medium	★★★★★	
Population Health	Population Health Analytics	★★★	★★★★★	★★★★★	Medium	★★★★★	
	Risk Stratification & Gaps in Care	★★★	★★★★★	★★★★★	Medium	★★★★★	
	Care Coordination	★★★	★★★★★	★★★★★	Medium	★★★	
	Resource Utilization	★★★	★★★★★	★★★★★	Medium	★★★★★	
Connected Health	Transactional Data Exchange	★	★★	★★★★★	Low	★★★★★	
	Plug-and-Play APIs	★	★★	★★★★★	Low	★★★★★	
	Data Aggregation	★★★	★★★	★★★★★	High	★★	
	National Interoperability Framework	★	★★	★★★★★	Low	★★★★★	