

Annual Report 2021



EASTSIDE HEALTH
NETWORK



EASTSIDE HEALTH
NETWORK

A year in review

2021 was another challenging year for our industry.

We were equipped for the pandemic in many ways that we weren't in 2020. We entered the year with vaccines. We were adapted to work-from-home. Hospitals and clinics had social distancing procedures in place. But by in large, world events did not lessen their pressure on the health care industry. Despite the enduring pressure, our community rose to the challenge in inspiring ways.

We executed patient care to some of the best outcomes we have ever seen. This is evidenced by our success in our Medicare Advantage contracts, which translates into strong financial impacts for our network. Our Medical Director, John Nelson, MD, continued his work supporting providers through regular Covid-19 calls and provider wellness groups. In many ways, what we did in 2021 was the same work that we have always done—supporting patient care, reaching goals on our value-based contracts, helping clinics and providers any way we can—but we did it in a world that was anything but normal. We did the ordinary but under extraordinary circumstances. And for that, I could not be more proud.

If I could, I would take a moment to call out the employee who has made this success possible. But our success in 2021 would not be possible without every single member of our team putting out maximum effort. This level of application is the only way we perform this well under these types of circumstances. Everyone at EHN is dedicated to our network thriving. We truly have a great team.

One more note that I'd like to share. If the providers were the heroes of 2020, we need to add clinic managers to that callout for 2021. Clinic managers kept practices running through uncertainty, staffing challenges, and waxing and waning Covid-19 strains. We cannot give them enough credit for the work they do. Next time you interact with a clinic manager, give them a little appreciation.

As we move into 2022, health care is undoubtedly facing challenges. Staffing shortages remain an issue. Covid-19 is still a looming uncertainty that hovers over everything. Given that we have to operate in this challenging world, I am confident that EHN has the best team to handle the work.



David LaMarche, MBA
PRESIDENT
EASTSIDE HEALTH NETWORK

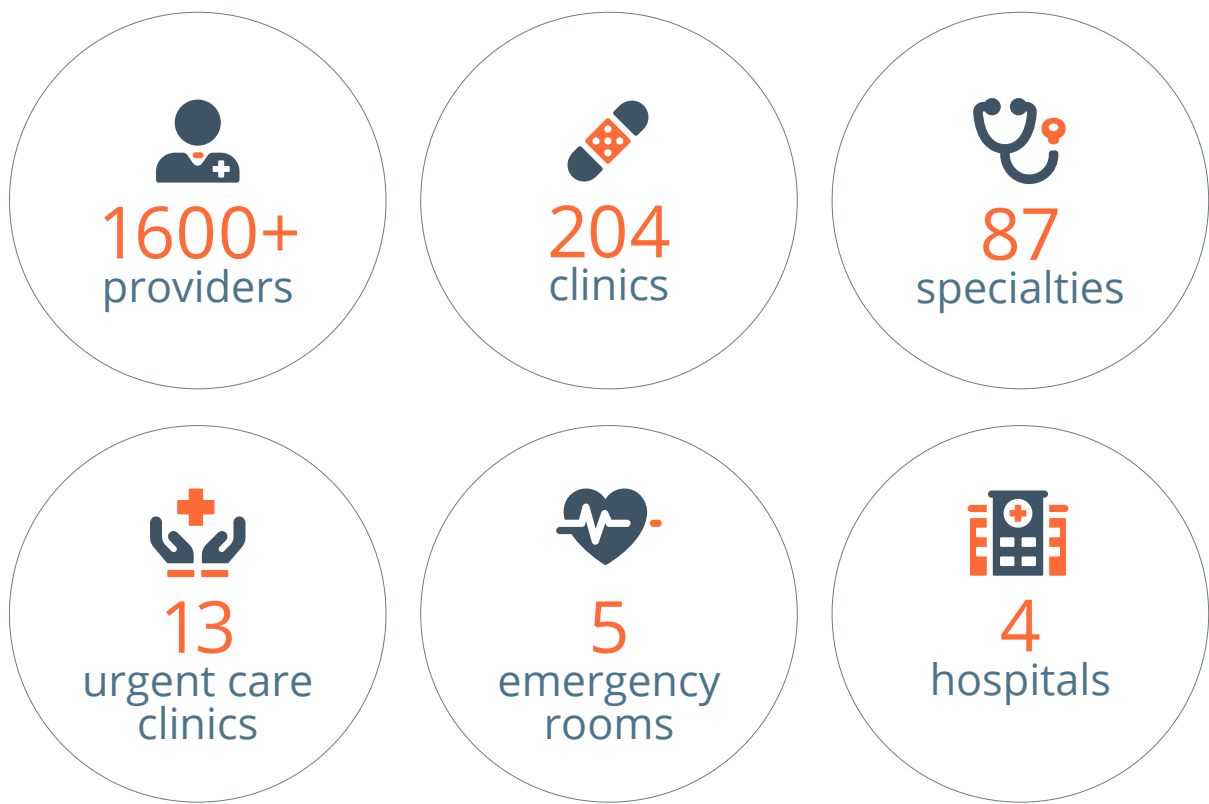
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EHN by the numbers

Eastside Health Network (EHN) is a clinically integrated network bringing together EvergreenHealth, Overlake Medical Center & Clinics, and 100+ independent clinics. Our goal is to empower and support our members to build a healthier community.

As a physician-led organization, EHN members share data to implement evidence-based clinical initiatives. This data-sharing helps us improve outcomes, increase efficiency, and reduce costs. EHN strives to enhance the health and well-being of the community across the continuum of care through excellence in primary care and inpatient services and specialty services. We are accountable to deliver quality and value, while collaborating on best practices through evidenced-based guidelines and a robust technology solution. We also focus on improving access to health-care providers and services and are committed to care coordination. Patients who utilize the providers of EHN have access to a depth and breadth of services unrivalled on the Eastside.



2021 At-a-glance

Growing in 2021

In 2021, Overlake Medical Center & Clinics and Snoqualmie Valley Hospital employees were added to the EHN direct to employer initiative through a partnership with First Choice Health. These additions brought over 3,000 new lives to EHN's membership population.

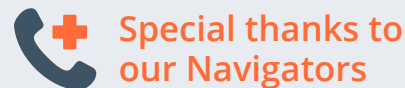
We continued to expand our work with direct-to-employer plans, work that we initially piloted with our Microsoft Health Connect plan. In 2021, we developed new relationships with the Public Employees Benefits Program and the State Employees Benefits Program, as well as the Master Builders of King and Snohomish Counties. Employees in both organizations were offered EHN as an option during their annual enrollment for 2022.

Overcoming challenges in 2021

Like most health-care organizations, EHN itself, and the hospitals and clinics in our network struggled to fill vacant positions in 2021. These shortages had several noticeable impacts on operations.

Employees at EHN and our member organizations took on more responsibilities to accommodate work that would normally be done by people in roles that were waiting to be filled. We all did our best to maintain balance, spread out the workload, and find creative solutions, but the extra strain was undeniable.

Perhaps most unfortunate, staffing shortages provided a challenge with access to care. At times, patients experienced increased wait times for appointments with primary care providers.



Special thanks to our Navigators

None of our success would be possible without our Navigators.

Danica Pernel, Autumn Ta, and Claire Young reach out to our members by phone, helping them schedule appointments, scheduling with PCPs, reminding them of care gaps, and talking to them when things go wrong.

It's not an easy job, but they make it look easy!

The demand on providers was only compounded by the end of 2021 when patients began to feel less nervous about seeing providers in-person, and we saw increased demand for preventative appointments and elective procedures. Add in periodic Covid-19 surges, and you have a very challenging situation.

Our staff and our network members did an outstanding job managing this crisis. First, they managed their own self-care, recognizing that we all must take care of ourselves before we can help anyone else. Second, we all moved quickly to find and implement creative solutions to these challenges.



At the clinics, we saw lots of innovation in the way things were handled. Many clinics scheduled special telemedicine hours and set parameters for which types of patients they would see via telemedicine. Hospitals kept in communication with clinics about capacity of emergency departments and when elective procedures were being allowed. Our Medical Director, John Nelson, MD, continued the Covid-19 calls he established in 2020 through

which he updated in-network clinics on Covid-19 numbers and brought in expert guest speakers. One lesson we have taken from this pandemic is the importance of knowing the data from your specific community, and EHN works to make sure our network has access to that information.

Internally to EHN, we supported patients to find appointments during difficult scheduling windows. We worked to get them to schedule early so they could get an appointment by the end of the calendar year. We coordinated with payors on Fecal Immunochemical Test kits sent by mail to provide colorectal screening for people who were not comfortable going into a provider's office. When applicable, we let patients know that scheduling would be a struggle.

Scheduling and access issues meant it was harder to meet some of our organizational goals. To address this challenge, we reached out to members who were missing important points of care. Our navigators helped patients find appointments that were difficult to come by. We collaborated as a team to create success whenever possible, given the difficult circumstances.

We do not wish for another year with access challenges like 2021, but we are proud of the way we met the challenge.



Thank you for what you do!

We'd like to thank our staff and our network partners for their efforts. We are doing the same work we have always done, but we are doing it under extraordinary circumstances. And as you will see later in this report, our numbers are improving. This is a testament to the people of EHN — all of the people, at all levels. We could not do this work without you, and we are so grateful.

Provider wellness

The field of medicine has become increasingly aware of the need for addressing the health of its employees. One of EHN's goals is to support the wellbeing of clinicians in the network.

Thankfully, we are moving away from the past model that saw providers as super humans who didn't need sleep and could work infinite hours into a model that recognizes providers' need to take care of themselves and prevent burnout for their own health. Providers with wellbeing provide better patient care (Shanafelt, 2021).

Experts in provider wellness recommend we embrace vulnerability and self-compassion, recognizing mistakes will happen and knowing that no one is perfect (Shanafelt). Providers have strengths but they also have weaknesses, and we need each other and our teams to build on our strengths and compensate for our weaknesses.

It's hard enough to embrace such shifts during normal times. It's even harder in the midst of crisis. But we have to think about these issues because so many providers are at or beyond the point of burnout. At Eastside Health Network (EHN), we are dedicated to helping with provider wellness, and our efforts are led by our Medical Director, John Nelson, MD.

In 2021, we continued our provider small group support meetings. Providers met once a month for a series of six months, to discuss issues related to wellness. In 2022, we are starting our third round of these sessions. Providers who have participated in these meetings find them helpful for a variety of reasons.

Here is a testimonial from past participant Darshana Shanbhag, MD, Internal Medicine, Overlake:

"Meeting in small groups has let me meet colleagues from different specialties and clinics in a very different setting, letting me know them more as individuals. In these stressful times in health care, it helps to foster a sense of community and connection. It has also expanded my perspective in the issues faced by others and has made me appreciate much more of the special support my clinic provides. Above all, it has been a lot of fun, with happy memories, and funny anecdotes."





This program is modeled on one at the Mayo Clinic. Through a randomized controlled trial, the Mayo Clinic found that its effort had positive effects on physician wellbeing, meaning and job satisfaction.

Dr. Nelson has personally participated in both previous sessions and even played pickleball at a small group reunion on Bainbridge Island last September.

Shanafelt, T.D. (2021). Physician well-being 2.0: Where are we and where are we going? Mayo Clinic Proceedings. 96(10), 2682-2693.



For more information

To be added to the list for future provider wellness groups, contact EHN Senior Communications Specialist, Jessica Knapp.

And if you have thoughts on other ways EHN can support providers, we would love to hear from you.

JKnapp@eastsidehealthnetwork.com

Awards

EHN values and appreciates all of our network members—clinics, providers, administrators. The exceptional care and support our members provide to the patients in our community is unparalleled. For 2021, EHN would like to recognize a few members who have gone above-and-beyond, providing extraordinary care and services.

Outstanding Practice Manager Award



Kelly Pfeiffer
BELLEVUE FAMILY MEDICINE

We are so grateful for the work Bellevue Family Medicine does to see patients on time and keep EHN members current with important preventative care visits. The clinic is a model for best practices, and it is even more impressive that they performed so well during such a challenging year.

Outstanding Partner Award



Casey Smith
PARKER, SMITH, & FEEK

Casey oversees our medical malpractice insurance plans for in-network providers. She helps save money for EHN providers and has made their lives easier moving forward by removing the continuing-education requirement for our malpractice insurance discount.

Clinical Process Improvement Award



Andrea Turner
OVERLAKE MEDICAL CENTER & CLINICS

Working under Andrea, the Overlake Medical Center & Clinics coding team has been proactive helping the Overlake Primary Care clinics improve pre-visit planning and the accuracy of documentation and coding for some of the most complex visits. This work is amongst the most challenging that we engage in at EHN, and Andrea's team makes a significant difference. Additionally, Andrea has distinguished herself as an individual who is action and solution oriented and has a deep understanding of process and supports her team to perform at the highest level.

Quality Leadership Award



Elisa Vila, Katelin Brooks, and Christopher Dibble
EVERGREENHEALTH PHARMACY

EvergreenHealth's pharmacy team is instrumental to the success of EHN. They guide us in our efforts to lower prescription costs for our network and our patients, without sacrificing quality treatment to our members. We are so lucky to have this particular team at the helm of our generic prescription efforts.

Staff Recognition Award



Terri Keltner
SUPERVISOR OF NAVIGATORS,
EASTSIDE HEALTH NETWORK

Terri supervises our navigators. Together, Terri and the navigators ground all the work we do at EHN. It is beyond comforting to know that we can always count on them for outstanding quality when patients contact us with questions and when we need to reach out to patients.

Provider Contribution Award



Theresa Platz, MD
EVERGREENHEALTH

Theresa is the chair of our Cost and Utilization Committee and participates on our Contracting Committee, but her support for EHN extends so far beyond that. To put it colloquially, "she has our back." She reaches out to us to help before we even think to ask her. We could not ask for a better partner.

Delivering better value to Eastside employers

Eastside Health Network (EHN) believes that health care benefits can be a strategic advantage in recruiting and retaining the best team versus simply an ever-growing expense line on an employer's P&L. To that end, in 2020 EHN, in conjunction with First Choice Health (FCH), a leading provider-owned health care administrator in the Northwest, launched a progressive, first-in-the-market, direct-to-employer contracting initiative.

This initiative gives self-funded employers on the Eastside direct access to health care providers, offering quality and comprehensive care at an affordable cost. The partnership is a departure from the traditional health insurance model and offers unique integration between employers and health care providers. EHN's primary care providers (PCP) work directly with EHN care coordinators and nurse care managers to partner with patients and help them navigate the complex landscape of health care. For patients with chronic health and wellness conditions, this means they have a dedicated partner in creating health goals, managing their complex care needs with different physicians across specialties and practices, and tracking their progress. This elevated, personalized approach helps ensure patients utilize and experience the best possible care and outcomes.

Uniquely, the program engages employers in the design of the plan, while focusing on their key objectives of success. Through our combined work with FCH, we have added a direct-to-employer model with the covered employees of Snoqualmie Valley Hospital, effective January 1, 2021. We also added Overlake Medical Center & Clinics employees to this plan.

Other contract updates

EHN joined the Puget Sound High Value Network (PSHVN) for 2022 to participate in the Washington State Healthcare Authority's Public Employees Benefits Board (PEBB) and School Employees Benefits Board (SEBB) plan offering. The plan, administered by Regence, provides a more robust care model across the clinically integrated networks of the PSHVN. EHN anticipates approximately 5,000 members participating in this product in 2022.



"Eastside Health Network is the leading clinically integrated network in the greater Puget Sound area, and we're thrilled to be working with such a forward-leaning organization."

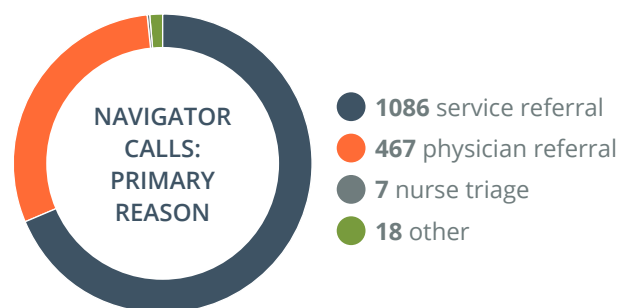
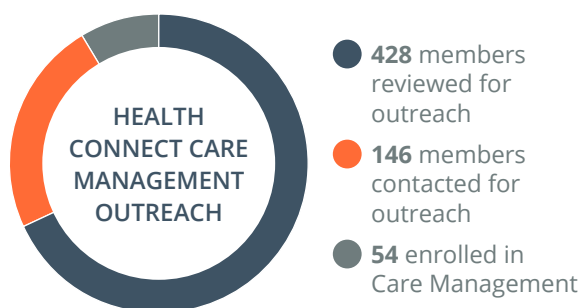
JAJA OKIGWE, FIRST CHOICE HEALTH CEO AND PRESIDENT

Microsoft Health Connect utilization

When designing the Health Connect Plan, Microsoft and Premera focused on cultivating strong, effective patient-provider relationships. Health Connect utilization patterns demonstrate shared success in engaging patients in their health and ongoing care within EHN. The Health Connect plan is designed to foster patient engagement and enhance communication among the patient's personalized care team—helping to ensure collaboration is streamlined across the full continuum of care for the best possible experience and outcomes. 2021 brought some challenges in member outreach and access of health care. EHN enhanced focus on Health Connect members who were not engaging with their health care team or were not utilizing care in the least costly manner. In 2022, we will continue to encourage these members to improve engagement and to build a robust relationship with their care team, including their primary care provider. EHN is also working to schedule as many patients as possible for appointments to close care gaps earlier in the year to ensure easy access.

Health Connect quality metrics help demonstrate the strength of our patients' relationships with their care providers, as well as their ability to access care when needed. Established patient and provider relationships with high degrees of trust generally lead to better adherence to preventive and chronic care management. Offering convenient, expanded appointment options, and maintaining ongoing communication with patients through education and timely reminders for recommended wellness visits, cancer screenings, and chronic condition maintenance contribute to patient engagement, satisfaction, and industry-leading quality performance.

The table on page 12 provides quality measures tracked for Health Connect patients in calendar year 2021. This table specifically presents those patients who have received their care from an EHN provider, allowing EHN's care management and population health staff to provide any needed support.



Health Connect member performance by measure

CONTRACTUAL QUALITY SCORE							
MEASURE	NATL 75 TH %	TOTAL DEN	TOTAL RATE	# TO TARGET	% ENGAGED	ENGAGED RATE	# TO TARGET
Adult							
Avoidance of antibiotic treatment for acute bronchitis/ bronchiolitis	48.9%	10	50.0%	–	90.0%	44.4%	1
Breast cancer screening	74.1%	142	70.4%	6	69.0%	80.6%	–
Cervical cancer screening	77.4%	1,084	75.0%	27	67.2%	81.3%	–
Colorectal cancer screening	77.4%	420	66.4%	47	65.5%	78.5%	–
Comprehensive diabetes care – eye exams	55.3%	140	63.6%	–	74.3%	67.3%	–
Comprehensive diabetes care – HbA1c control (< 8%)	60.1%	140	60.0%	1	74.3%	69.2%	–
Kidney health evaluation	–	140	57.1%	–	74.3%	59.6%	–
Pediatric							
Appropriate testing for pharyngitis	80.4%	38	47.4%	13	65.8%	44.0%	10
Appropriate treatment for upper respiratory infection	86.8%	163	96.9%	–	69.3%	96.5%	–
Asthma medication ratio	84.3%	33	84.8%	–	81.8%	88.9%	–
Child and adolescent well-care visits	60.8%	634	55.7%	33	52.1%	69.7%	–
Immunizations for adolescents	34.8%	32	43.8%	–	53.1%	41.2%	–
Childhood immunization status	66.6%	31	67.7%	–	51.6%	68.8%	–
BH							
Antidepressant medication management	77.5%	135	83.0%	–	67.4%	83.5%	–
Follow-up after hospitalization for mental illness	56.4%	11	18.2%	5	54.5%	16.7%	–
PHQ2 depression screening rate (over age 12)	90.0%	662	18.7%	472	96.5%	19.4%	452

“Engaged” defined as members with at least one visit to an EHN clinician during the period.

- Meets or exceeds the NCQA National 75th percentile.
- Meets or exceeds the NCQA National 75th percentile but does not meet membership credibility threshold.
- Measures do not meet the minimum denominator credibility threshold (30 members).

Medicare Advantage

EHN ended 2020 with strong performance across all four Medicare Advantage contracts and distributed a total of \$1.7M to providers and practices through care coordination payments, incentives, and shared savings settlement.

In 2021, some of the operational challenges that began in 2020, due to the pandemic, continued. Certain appointments were difficult to schedule due to Covid-19 demands and staffing challenges, specifically Annual Wellness Visit (AWV) completion, chronic condition re-documentation, and preventive screenings such as breast cancer screenings, colorectal cancer screenings, and diabetic eye exams.

Despite these challenges, we have seen strong progress in practice engagement. Additionally, process improvements, enhancements to data reporting and practice education helped us move the needle on these measures through 2021 (in comparison to 2020), despite it being the second year of a pandemic.

2020 Performance

MEASURE	AETNA	HUMANA	PREMERA	UNITED	GOAL
Annual Wellness	54.6%	44.7%	51.3%	56.2%	65.0%
STAR Ratings	4.0	4.19	3.67	4.13	4.0
Chronic Condition Re-assessment	63.0%	73.0%	63.0%	54.8%	70.0%

2021 Performance

MEASURE	AETNA	HUMANA	PREMERA	UNITED	GOAL
Annual Wellness	59.5%	48.4%	56.8%	63.1%	65.0%
STAR Ratings	4.38	4.04	3.9	4.14	4.0
Chronic Condition Re-assessment	66.1%	75.3%	57.0%	67.2%	70.0%



Looking ahead to 2022, EHN adds Regence Medicare Advantage to its already established group of plans. This offer provides an additional alternative to Medicare beneficiaries who are currently receiving or would like to receive care from EHN providers.

Generic prescribing

EHN has a strong generic prescribing program that positions us as a leader in the field.

Generic prescriptions cost less and often offer the same benefit to patients as their branded counterparts. It's important for us as a network to keep vigilance on our use of branded prescriptions because branded drugs can significantly increase cost for the network and for patients.

EHN's Quality Committee has identified frequently used drugs that have generic or therapeutic equivalents. Three times a year, EHN sends a generic prescription scorecard to providers, through their clinic managers, to share their performance on generic prescribing and show how they compare to other EHN providers.

We ask providers to consider switching prescriptions to generics when appropriate. We recognize there are times when a branded drug is the most appropriate for a specific patient. But many times, a generic works, and using the generic might be a good step because of the money saved.

Our generic prescribing is better than the benchmark. But we do not believe that it is enough. According to EvergreenHealth Clinical Pharmacy Specialist and EHN Quality Committee Member, Elisa Vila, "[Generic prescribing] is one of those measures you have to keep working at. If you lose attention, it will sink back below where you want it to be. So we are always vigilant. We stay focused so we don't backtrack," she says.

This work is not without challenges. It can be difficult to get our scorecards into the hands of the actual providers. Our Payor/Provider Relations Liaison, Amanda Dorman, is working with clinic managers to ensure providers see unique provider scorecards. We also find that some specialists have lower generic prescribing rates, but there are medical specialties that do not have a lot of generics available.



Our performance

EHN's overall generic dispensing rate in 2021 was 83.6%, down slightly from our 2020 rate of 86.4%. Breaking that down further, our commercial plan generic dispensing rate was 83.62%, and our Medicare Advantage rate was 87.15%. Yet the program yielded lower costs. The Per-Member Per-Month (PMPM) payout for commercial plans was \$90.21, down from \$93.41 in 2020. The Medicare Advantage PMPM was \$155.09, down from \$168.66 in 2020.*

**Data not provided by payor.*

Looking at biologics

The next big challenge that EHN will face in terms of generic prescribing involves specialty drugs, or biologics. These drugs are very expensive and represent an area that is driving up costs. Their use is also becoming more and more common. EHN's Cost/Utilization Committee is currently examining what we can do as a network to manage costs from this drug category. According to Elisa, "We do not have a plan yet, but we are having discussions and looking at things like: Do we need to push bio similars when they are available? Do we need to add biologics to our prescribing scorecard? How do we move into this area in an intelligent way?" The answer EHN arrives at will have to be a partnership between payor and provider and is something that remains in process for 2022 and maybe beyond.

EHN Cost/Utilization Committee Chair Theresa Platz adds that cost does not just come from biologics but any new medication that is the latest and greatest: "It's the American way to think 'I want this new amazing thing. Forget the cost!' That may be our education process, too. Helping providers have these hard conversations with patients."

Next steps for cost/utilization

EHN's performance is very strong on generic prescribing, but we remain vigilant to ways we can improve.

Next steps for the Cost/Utilization Committee and EHN employees are to look at maximizing the amount of EHN members who see EHN providers. We are strategizing best ways to target them—by age and reason for not seeing EHN providers. For example, some are spouses of people who selected EHN providers because an EHN provider is covered by their employer. Every member moved to an EHN provider will decrease overall costs for the network.

Average prescription cost for EHN vs. Non-EHN providers*

EHN providers	\$195
Non-EHN providers.....	\$500



**Data from Health Connect patients*



Our generic prescribing is above the benchmark. But we do not believe that it is enough to just hit or exceed the benchmark.

Improving patient outcomes

Dedicated nurse care managers partner with primary care providers to support patients with one-on-one outreach—proactively addressing a patient’s health care needs and identifying any potential issues based on personal family history or existing chronic conditions.

In addition, EHN’s social workers help patients who need community and medical resources and help them manage and coordinate care. This work is the heart of what we do at EHN.

Building trust when a patient experiences trauma



Eastside Health Network Nurse Care Manager **Neelam Kaur** was first connected with her patient more than two years ago, and the pair are still working together.

When Neelam first reached out to this patient, a woman in her 70s, she and her family had just experienced a traumatic event. As a result, the patient’s overall anxiety was very high, and she wasn’t leaving her house. The woman had PTSD from childhood, and recent trauma had given her flashbacks to previous experiences. In addition to the diabetes and trauma, the patient had multiple comorbidities, including COPD and a heart condition.

Initially, the patient was not taking her medication and was not following up with her doctors. Shortly after her traumatic event, the patient went to see a provider who marked in her chart that she was a threat to herself, which caused her to lose trust in that relationship and all medical relationships. She also was not tolerating her medication well, and without trust in her providers, her solution was to discontinue all medication.

Neelam was able to slowly build trust with the woman and show her that she genuinely cared. Neelam got her a consult with a pharmacist, and together, they found medication that the patient could tolerate better. Slowly, they also worked on diet education and lowering the patient’s blood sugar levels. Eventually, the patient was graduated from case management ... a success story.

Earlier this year, the woman was diagnosed with lymphoma. Her insurance provider offered to set her up with oncology case management, and she refused to work with anyone but Neelam because Neelam was who she trusted.

Neelam is now working with her again to help with continued health issues. The case feels like a success because she truly saw the benefit of working with EHN. When Neelam and the patient reconnected, the patient said she felt better instantly just hearing Neelam’s voice. The patient is now in remission from lymphoma and has been diagnosed with Parkinson’s disease. Neelam can help give a big picture view of her health care management and answer questions for the patient.

A prescription leads to long-term care

Social Worker **Peter Norkus** was called to assist with the case of a 77-year-old woman who went to the emergency room for an infection and was prescribed an antibiotic.

The woman and her son were distressed because they couldn't afford an antibiotic. Insurance wouldn't cover it, and it was going to cost over \$1,000. Immediately, Peter was able to find a coupon that dropped the price to around \$100, which the son felt he could afford, but Peter wasn't satisfied and wanted to speak to insurance to get the prescription covered. The woman's son wanted to take ownership of addressing the situation himself, so Peter coached him on what to say, explaining the prior authorization process and what language to use. With Peter's help, the son was able to get the prescription covered. So the story has a happy ending. But Peter wanted to delve deeper.

Not just happy with stopping a crisis. Peter wanted to set up the family for future success, too. The mother needed ongoing support for home health services. Her ability to live at home wouldn't last forever. She was losing energy, and her ability to complete Activities of Daily Living (ADL) was

decreasing. Yet, the son shared, she was resistant to moving into assisted care. Peter worked with the son to get a plan in place for a care facility when it became necessary.



Peter set up regular phone calls with the mother to discuss the idea of assisted living, and the son continued to discuss the topic with her between calls. The mother eventually decided she was willing to go to assisted living when she was no longer able to complete ADL. Shortly after that decision, Peter received an email from the son that his mother had moved into a long-term care facility covered by Medicare.

The son was grateful for Peter's help and also wanted to know how to donate some equipment they had used for home health. Peter says his story is a reminder that health care decisions often involve the whole family, not just one individual. The story is also a reminder that the truly great providers think beyond the immediate crisis and look at the entire life of the patient.



With Peter's help, the son was able to get the prescription covered. So the story has a happy ending. But Peter wanted to delve deeper.

Implementing Arcadia

In late 2021, Eastside Health Network (EHN) implemented a new data management program called Arcadia. The program replaces our previous software, which was scheduled to become obsolete.

Arcadia offers new functionality beyond what EHN could do with our prior vendor. With Arcadia, we can extract data from a variety of sources, for example, claims data from payors and clinic data from hospitals. We can also take data from different data programs, which is necessary for EHN because not all our hospitals and clinics use the same IT systems.

Additionally, our data analysts can work with the data within Arcadia's own system. Previously, analysts had to download out of our data collection system before they could do any analytics. Arcadia lets us stay inside the system to do this work.

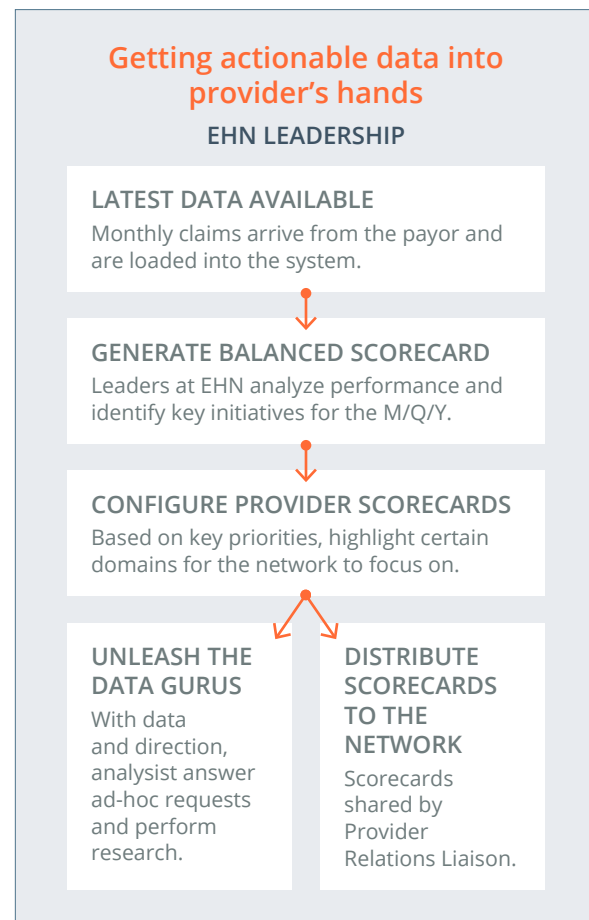
On the clinical side, Arcadia expands our ability to achieve our quality targets (STAR/HEDIS). Our Quality Specialists can pull appointment data to know when a patient is coming in for their next appointment, enabling the closing of care gaps at the visit. Additionally, Arcadia has robust clinical patient registries, allowing us to target specific cohorts.

"While the Arcadia implementation process has opportunities for improvement, EHN remains excited about Arcadia's enhanced data capture, querying, visualization, and outreach functionalities that our historical tool lacked—for example, better control of data and access to what we want, when we want it."



LEON CHAN, EHN POPULATION
HEALTH SYSTEMS ANALYST

Currently, we are in the process of integrating all our data with the Arcadia tool. It has been a lengthy implementation because EHN is a complicated organization and Arcadia has struggled to integrate some of our data. The tool will expand our capabilities related to improving cost and quality. It will also make us more efficient at this work, both of which will help us grow into a stronger and more nimble organization.



Our committees, working for you

Eastside Health Network has established four committees comprised of individuals who are devoted to the transformation from volume to value. We are honored to share highlights of the great work accomplished by these teams in 2021.

Executive Committee

Allen Geltzer, MD

SECRETARY, OVERLAKE MEDICAL CLINICS –
INTERNAL MEDICINE

Steve Marshall, MD

PAST CHAIR, PUGET SOUND PHYSICIANS

Tina Mycroft

CHIEF FINANCIAL OFFICER, EVERGREENHEALTH

Lloyd Stambaugh, MD

CHAIR, RADIA

Andrew Tokar

CHIEF FINANCIAL OFFICER, OVERLAKE MEDICAL
CENTER & CLINICS

John Whittington, MD

VICE CHAIR, MATRIX ANESTHESIA

Board of Directors

Steve Marshall, MD

PAST CHAIR, PUGET SOUND PHYSICIANS

Allen Geltzer, MD

SECRETARY, OVERLAKE MEDICAL CLINICS –
INTERNAL MEDICINE

Thomas Amidon, MD

OVERLAKE MEDICAL CLINICS – CARDIOLOGY

Tom Chi, MD

PROLIANCE SURGEONS

Chad Crystal, MD

EVERGREENHEALTH MEDICAL GROUP

David Koh, MD

WOODINVILLE PEDIATRICS

Tina Mycroft

CHIEF FINANCIAL OFFICER, EVERGREENHEALTH

Mitch Nudelman, MD

BELLE GROVE OB/GYN

Amy Numrych, MD

BELLEVUE FAMILY MEDICINE

Jonathan Paley, MD

OVERLAKE OB/GYN

Pratima Sharma, MD

MEDICAL DIRECTOR, EVERGREENHEALTH
MEDICAL GROUP

Lloyd Stambaugh, MD

CHAIR, RADIA

Jeff Stickney, MD*

EVERGREENHEALTH MEDICAL GROUP

Scott Stuart, MD

MEDICAL DIRECTOR, EVERGREENHEALTH HOSPITAL
MEDICINE

Andrew Tokar

CHIEF FINANCIAL OFFICER, OVERLAKE MEDICAL
CENTER & CLINICS

John Whittington, MD

VICE CHAIR, MATRIX ANESTHESIA

Rachel Thompson, MD

CHIEF MEDICAL OFFICER, SNOQUALMIE
VALLEY HOSPITAL

**Board/Committee member departed in 2021.*

BOARD OF DIRECTORS SUPPORT STAFF

David LaMarche

PRESIDENT, EASTSIDE HEALTH NETWORK

John Nelson, MD

MEDICAL DIRECTOR, EASTSIDE HEALTH NETWORK

Contracting Committee

The Contracting Committee's purpose is to support EHN's Board of Directors with recommendations regarding contracting strategy, as well as present specific contracts that the committee believes are prudent to execute. Additionally, the Contracting Committee is responsible for creating an ongoing review of contracting guidelines to support the evaluation and negotiation of contracts on behalf of EHN. Finally, the design and implementation of the provider incentive payment program is under the purview of the Contracting Committee.

2021 HIGHLIGHTS

- Negotiated plan for Public Employees Benefits Board and School Employees Benefits Board, offering plan in conjunction with Puget Sound High Value Network, adding almost 5,000 covered lives to EHN.
- Negotiated structure and product offering for Master Builders of King and Snohomish Counties in conjunction with Regence.
- Completed Medicare Advantage RFP round 2, yielding significantly improved alignment with five (5) Medicare Advantage payors (United, Premera, Regence, Humana & Aetna) and more robust financial reward structure recognizing the work that EHN's primary care providers do.
- Supported First Choice's work to add Overlake and Snoqualmie Valley Employees to a tiered product focused on EHN for 2022.

COMMITTEE MEMBERS

Scott Price, MD

CHAIR, PROLIANCE SURGEONS

Greg Aeschliman, MD

EVERGREENHEALTH MEDICAL GROUP – PRIMARY CARE

Tom Chi, MD*

PROLIANCE SURGEONS

Theresa Platz, MD

EVERGREENHEALTH MEDICAL GROUP – PRIMARY CARE

Chad Crystal, MD

EVERGREENHEALTH MEDICAL GROUP

Sean Kincaid, MD

EVERGREENHEALTH MEDICAL GROUP

Tina Mycroft

CHIEF FINANCIAL OFFICER, EVERGREENHEALTH

Eric Shipley, MD,

PUGET SOUND PHYSICIANS

Andrew Tokar

CHIEF FINANCIAL OFFICER, OVERLAKE MEDICAL CENTER & CLINICS

Andy Turella, MD

MATRIX ANESTHESIA

Mark Zobel, MD

RADIA

CONTRACTING COMMITTEE SUPPORT STAFF

Gregg Aoyama

COMMITTEE LEAD, DIRECTOR OF PAYOR, EMPLOYER & D2B CONTRACTING, EVERGREENHEALTH

David LaMarche

PRESIDENT, EASTSIDE HEALTH NETWORK

John Nelson, MD

MEDICAL DIRECTOR, EASTSIDE HEALTH NETWORK

Dave Gainer

SENIOR POPULATION HEALTH ANALYST, EASTSIDE HEALTH NETWORK

Sahana Ingale

MANAGER, GOVERNMENT PROGRAMS, EASTSIDE HEALTH NETWORK

Julie Keeffe

DIRECTOR OF PAYOR CONTRACTING, OVERLAKE

Rachel Lam

FINANCIAL ANALYST, EASTSIDE HEALTH NETWORK

**Board/Committee member departed in 2021.*

Network Development and Nominating (ND&N) Committee

ND&N oversees the strategic direction of recruitment, onboarding, and retention of participating clinical providers and practices. The Committee reviews all applications for new EHN provider members and subsequently makes recommendations to the Board of Directors (BOD). ND&N is responsible for recruiting and nominating BOD and Committee members, recommending provider participation standards and credentialing verification policies and procedures. The Committee develops physician recruitment strategies based on EHN's goals. ND&N is central to the establishment of policies and procedures that help to govern EHN.

The Committee also identifies opportunities to improve provider satisfaction, such as defining value-added services for independent practices and their associated providers.

2021 HIGHLIGHTS

- Simplified EHN's medical malpractice agreement with Physicians Insurance. Starting in 2022, providers no longer need to complete a continuing education requirement to receive a premium discount.
- Helped support continuation of Provider Wellness Groups, led by Medical Director, John Nelson, MD.
- Recommended for approval to Board of Directors four new practices: Meadowbrook Clinic, Skin Cancer Center, Kirkland Rheumatology, and Olympia Allergy & Asthma.
- Recommended for approval to the Board of Directors 20 doulas to join EHN to support our Microsoft Health Connect contract.
- Recommended 11 new members to EHN Committees in 2021.
- Continued to host Covid-19 calls throughout 2021.



Total of
\$195,835
saved

147
providers
participated in
the program

COMMITTEE MEMBERS

Lloyd Stambaugh, MD
CHAIR, RADIA

Olabode Akinsanya, MD
OVERLAKE MEDICAL CLINICS

Preetha Ali, MD*
OVERLAKE MEDICAL CLINICS – COLON AND RECTAL

Chris Bredeson, MD
CHIEF OPERATING OFFICER, EVERGREENHEALTH

Monique Gablehouse
CHIEF OPERATING OFFICER, EVERGREENHEALTH
POST-ACUTE CARE

Joseph Hall, DPM
MILL CREEK FOOT & ANKLE CLINIC

Midori Larrabee, MD
CHIEF MEDICAL OFFICER,
EVERGREENHEALTH MONROE

Venkat Mohan, MD
WASHINGTON GASTROENTEROLOGY

Ken Nishino, MD
OVERLAKE MEDICAL CLINICS – SENIOR HEALTH

Jonathan Paley, MD
OVERLAKE OB/GYN

**Board/Committee member departed in 2021.*

ND&D COMMITTEE SUPPORT STAFF

David LaMarche
PRESIDENT, EASTSIDE HEALTH NETWORK

John Nelson, MD
MEDICAL DIRECTOR, EASTSIDE HEALTH NETWORK

Amanda Dorman
PAYOR & PROVIDER RELATIONS,
EASTSIDE HEALTH NETWORK

Cost & Utilization Committee

The Cost & Utilization Committee is responsible for overseeing the financial performance of EHN's value-based contracts and providing reporting and education to the practices and providers of EHN. Additionally, the committee is tasked with developing initiatives to meaningfully reduce the cost of health care and increase value for beneficiaries of the clinically integrated quality program.

2021 HIGHLIGHTS

- Continue to study cost reduction opportunities related to medications and other cost-heavy areas. EHN excels in this area but can always improve.
- Extending prescription scorecard program from primary care to specialty practices.
- Held quarterly combined Cost & Utilization and Quality committee meetings.
- Led work related to pre-visit planning, coding, and documentation and provider 1:1 education.

COMMITTEE MEMBERS

Theresa Platz, MD

CHAIR, EVERGREENHEALTH MEDICAL GROUP – PRIMARY CARE

Neal Perlmutter, MD

VICE CHAIR, OVERLAKE MEDICAL CLINICS – CARDIOLOGY

Preetha Ali, MD

OVERLAKE MEDICAL CLINICS – COLON AND RECTAL

Gregg Aoyama

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Daniel Burdick, MD

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Abhineet Chowdhary, MD*

OVERLAKE NEUROSCIENCE INSTITUTE

Chester Gall, MD

OVERLAKE MEDICAL CLINICS – PRIMARY CARE

Julie Keffe

DIRECTOR OF PAYOR CONTRACTING, OVERLAKE

Ann Peterson

EVERGREENHEALTH MEDICAL GROUP

Scott Stuart, MD, Medical Director

EVERGREENHEALTH HOSPITAL MEDICINE

Lennart Tan, MD

INCYTE PATHOLOGY

Elisa Vila, RPh

EXECUTIVE DIRECTOR, EVERGREENHEALTH PHARMACY SERVICES

COST & UTILIZATION COMMITTEE SUPPORT STAFF

David LaMarche

PRESIDENT, EASTSIDE HEALTH NETWORK

John Nelson, MD

MEDICAL DIRECTOR, EASTSIDE HEALTH NETWORK

Dave Gainer

SENIOR POPULATION HEALTH ANALYST, EASTSIDE HEALTH NETWORK

Sahana Ingale

MANAGER, GOVERNMENT PROGRAMS, EASTSIDE HEALTH NETWORK

**Board/Committee member departed in 2021.*

Quality and Patient Experience Committee

This committee is responsible for defining quality metrics and performance thresholds for providers and practices as a requirement for EHN network participation. The committee reviews payor-reported quality data for the network, designs strategies to optimize the analysis of data, and addresses quality gaps and opportunities. The committee also identifies clinical areas to build care pathways and best practices for network-wide patient management to achieve defined network and payor quality outcomes. EHN Medical Director, John Nelson, MD identifies two primary roles for Quality Committee members: Proactively looking for issues in the local health care community and actively bring them to the committee; engaging with that entire community, not just their subspecialty.

2021 HIGHLIGHTS

- Focus on diabetes care—formed subgroup with representatives from EHN, Overlake Medical Center & Clinics, EvergreenHealth, and independent clinics, and pharmacy to leverage diabetes playbook. Converted to several bite-sized components can use to make easier for primary care clinics to engage with.
- Improving efforts around treatment protocol for statins for patients with diabetes—particularly for patients with historically normal LDL. In a diabetic, we no longer treat to LDL. We're working on spreading this message and improving treatment protocol.
- Lowering spend over expensive medications, like biologics—we're having success at lowering total spend, but gains could be chipped away by expensive medications. Having conversations about how to handle new, rapidly increasing drug prices.

COMMITTEE MEMBERS

Paul Mayeda, MD

CHAIR, EVERGREENHEALTH MEDICAL GROUP – PRIMARY CARE

Allen Geltzer, MD

VICE CHAIR, OVERLAKE MEDICAL CLINICS – INTERNAL MEDICINE

Greg Aeschliman, MD

EVERGREENHEALTH MEDICAL GROUP – PRIMARY CARE

Bassim Dowidar, MD

EVERGREEN EMERGENCY SERVICES

Sadia Habib, MD

OVERLAKE MEDICAL CLINICS – PRIMARY CARE

Semonti Hossain, MD

EVERGREENHEALTH MEDICAL GROUP

David Koh, MD

WOODINVILLE PEDIATRICS

Ettore Palazzo, MD

CHIEF MEDICAL OFFICER, EVERGREENHEALTH

Amy Richardson, MD

REDMOND FOOT AND ANKLE

Sara Sherwin, ARNP

EVERGREENHEALTH PREOPERATIVE SERVICES

Kylie Smith, MD

BELLS GROVE OB/GYN

Rachel Thompson, MD

SNOQUALMIE VALLEY HOSPITAL

Ben Tibbals, MD

CHIEF FINANCIAL OFFICER, MATRIX ANESTHESIA

Linda Van Hoff, ARNP

OVERLAKE MEDICAL CLINICS – PRIMARY CARE

Eunjoo Yoo, MD

OVERLAKE MEDICAL CLINICS – URGENT CARE

**Board/Committee member departed in 2021.*

QUALITY AND PATIENT EXPERIENCE COMMITTEE

SUPPORT STAFF

David LaMarche

PRESIDENT, EASTSIDE HEALTH NETWORK

John Nelson, MD

MEDICAL DIRECTOR, EASTSIDE HEALTH NETWORK

Arkady DeRoest

QUALITY PROGRAM MANAGER, EVERGREENHEALTH MEDICAL GROUP

Dave Gainer

SENIOR POPULATION HEALTH ANALYST, EASTSIDE HEALTH NETWORK

Elisa Vila, RPh

EXECUTIVE DIRECTOR, EVERGREENHEALTH PHARMACY SERVICES

Current EHN team

David LaMarche

PRESIDENT

Alicia Quaco

DIRECTOR OF OPERATIONS

Heather Sellers

DIRECTOR OF CARE MANAGEMENT

John Nelson, MD

MEDICAL DIRECTOR

Layla Abdirahman

CODER II

Evan Boog-Scott

QUALITY SPECIALIST

Leon Chan

POPULATION HEALTH SYSTEMS ANALYST

Amanda Dorman

PROVIDER & PAYOR RELATIONS

David Gainer

SENIOR POPULATION HEALTH DATA ANALYTICS

Sahana Ingale

MANAGER, GOVERNMENT PROGRAMS

Bonnie Jeanice

RN CARE MANAGER

Riaz Kanji

RN AMBULATORY CARE MANAGER

Neelam Kaur

RN CARE MANAGER

Jessica Knapp, PhD

SENIOR COMMUNICATIONS SPECIALIST

Rachel Lam

FINANCIAL ANALYST

Monica MacDonald

RN CARE MANAGER

Christine McClurg

SUPERVISOR QUALITY

Peter Norkus

AMBULATORY SOCIAL WORKER

Yilien Perez

CODER II

Danica Pornel

NAVIGATOR

Chandni Raj

QUALITY SPECIALIST

Jennifer Riley

RN CARE MANAGER

Lynette Simkins

CODER II

Laurie Sperry

QUALITY SPECIALIST

Autumn Ta

NAVIGATOR

Briana Taylor

AMBULATORY SOCIAL WORKER

Miranda Tomuro

SENIOR POPULATION HEALTH DATA ANALYTICS

Cindy Trettevik

EXECUTIVE ASSISTANT

Claire Young

NAVIGATOR



Eastside Health Network (EHN) is a clinically integrated network bringing together EvergreenHealth, Overlake Medical Center & Clinics, and 100+ independent clinics. Our goal is to empower and support our members to build a healthier community.



EASTSIDE HEALTH
NETWORK

eastsidehealthnetwork.com
(425) 906-7800