



Patient-Centered Value-Based Care. Enabled by Zyter.



What is the ZyterHealth Platform?

ZyterHealth is the foundation for smart applications that enable more efficient secure collaboration between clinical care teams and care coordinators, as well as extend telehealth and remote patient monitoring services outside of traditional care venues. Zyter's modular digital health components integrate with existing systems and clinical workflows or work independently to deliver the right care, at the right time, at the right place.

From virtual video visits to at-home monitoring of chronically ill and post-surgical patients to care management collaboration, ZyterHealth integrated solutions benefit providers, patients, and payers on a single technology platform. That's how Zyter makes virtual healthcare smarter, easier and more efficient today.

ZyterHealth Platform: Secure and 5G Ready



360° view of patient clinical and population health data



5G ready and supports all major mobile platforms



HIPAA, FedRAMP and FISMA compliant with Authority to Operate (ATO) at U.S. Department of Defense facilities



Device-to-device 256-bit AES encryption as standard



End-to-end user management capabilities with secure authentication



Zyter Telehealth offers healthcare organizations of all sizes a full range of HIPAA-compliant telehealth services supported by Zyter's secure collaborative communication platform. Designed to integrate seamlessly with existing healthcare platforms and be quickly deployed and adopted,

Zyter's telehealth solutions feature:

- Virtual visit capability accessible from any web browser no special app required
- · Integration of virtual visits within Zyter RPM modules
- Vendor-agnostic technology with flexibility to customize and respond to industry changes

Zyter Remote Patient

Monitoring™ for Healthcare

Enterprises

Zyter Remote Patient Monitoring combines the near real-time wireless connectivity of RPM with telehealth services on ZyterHealth to help hospital physicians monitor those with chronic conditions and the wellbeing of post-surgical patients recovering at home. Zyter RPM offers continuous monitoring coupled with EHR integration and context-aware

collaborative communication between patients, physicians, and other care team members.

Supported Specialties:

Congestive Heart Failure

Obesity

Diabetes

Asthma

Hypertension

Sleep Apnea

Maternal Health

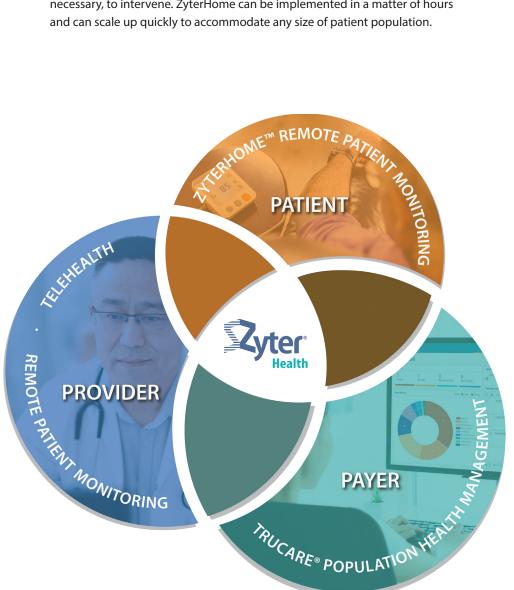
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ZyterHome[™] **RPM for Provider Practices**

ZyterHome is a remote patient monitoring solution for provider practices consisting of patient-facing, pre-configured LTE-enabled devices to seamlessly

track and transmit a patient's physiological data to the ZyterHome physician dashboard. No pairing or configuration is required, making it easy for patients to use. Physicians receive alerts if patient data drifts out of a defined range, and

can initiate a virtual visit with the patient within the ZyterHome dashboard, if necessary, to intervene. ZyterHome can be implemented in a matter of hours





Value-based healthcare demands better collaboration between providers and payers. In 2021, Zyter acquired Casenet's TruCare population health management solution, a complete enterprise solution spanning care management, utilization management, as well as appeals and grievances. The result: deep integration of patient EHR data, telehealth services, remote patient monitoring, and care coordination data on the secure ZyterHealth collaboration platform.

Now, physicians and care coordinators share and access physiological and social patient data across disparate systems to gain the same 360-degree view of each patient's healthcare experience. Working together with comprehensive patient analytics, care teams can more quickly identify at-risk patients and respond to possible emergent situations before they require ER visits or hospital readmissions. As such, they can improve patient outcomes and increase patient satisfaction, while satisfying all payer requirements for value-based care.

Learn More About Zyter Products

Visit **www.zyter.com** to learn more and request a personalized demo of any Zyter digital health product.



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Patient-Centered Value-Based Care

The Case for Integrating Telehealth and Remote Patient Monitoring with Population Health Management





Introduction

The trend towards a value-based reimbursement model in healthcare has put more emphasis on how payers and providers can work together to bring about the three goals of value-based care according to the Institute for Healthcare Improvement (IHI) Triple Aim framework: improving the patient experience of care (including quality and satisfaction); improving the health of populations; and reducing the per capita cost of healthcare. According to the IHI, the US health care system is the most costly in the world, accounting for 17% of the gross domestic product with estimates that percentage will grow to nearly 20% by 2020¹.

However, beyond cost reduction each of the IHI Triple Aim framework goals for value-based care work together as the most effective way for providers to meet payer requirements for delivering overall better care for patient populations at a lower cost. For example, improving the quality of patient care and satisfaction is especially important in light of aging patient populations with chronic conditions. Despite the strain this population puts on both medical and care management services, physicians and care coordinators alike must be aware of satisfying not only the patient's medical and social needs, but also ensure that the patient's family and caregivers are satisfied with the quality of care for their loved ones.

Specifically, value-based healthcare is driving the need for a new technology model of collaboration and secure data sharing between the clinical care team and care coordinators. This model is paramount to treating not only the disease, but also meeting the patient's social/personal needs to ensure the best outcomes as they navigate the daily tasks of post-surgical care or chronic disease management.

Treating the whole patient on this level requires a 360-degree view of patient data that is accessible to everyone on the care team. However, even though providers and payer care coordinators may work with the same patient, they typically do not use the same data platforms and systems to do their respective jobs, making it very challenging to gain the same global view of each patient.

Achieving better patient outcomes for value-based healthcare requires better, smarter collaboration between clinicians and care coordinators. This POV makes the case for a single, secure collaboration platform that integrates patient data from Electronic Health Record (EHR) systems, telehealth services, remote patient monitoring devices, and population health management systems. This next-generation solution enables seamless data accessibility and sharing between physicians and care coordinators so they have a single resource for the data they need to treat the whole patient, improve the health outcomes and satisfaction of patient populations, and ensure compliance with value-based healthcare reimbursement requirements.



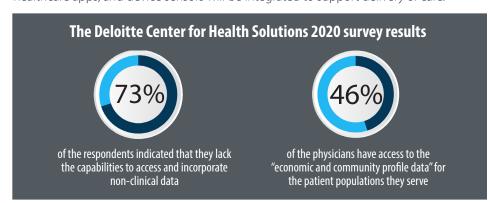
The Challenges of Value-Based Healthcare

Healthcare payers including the Centers for Medicare & Medicaid Services (CMS) define value-based healthcare as a program of incentive payments based on the quality of care physicians give to their patients. The key goals are to bring about overall better care and health for various patient populations at a lower cost. Because patient outcomes and the patient's experience of care are more important than the quantity of services provided, physicians have more incentive to continually improve the quality of care and take proactive measures for early intervention to reduce the number of post-treatment ER visits and hospital readmissions. In the end, value-based healthcare reduces the risk of poor patient outcomes, lowers healthcare costs for payers and patients alike, and improves patient satisfaction.

Improved care coordination among clinical teams and care coordinators on the payer side is yet another potential benefit of the value-based model. However, many organizations are still struggling in that area because they do not have a single, integrated collaboration platform that enables both physicians and care coordinators to make more informed care decisions and interventions based on all available patient data, not just clinical results. Better decisions lead to better patient outcomes, satisfaction, and cost savings, and ultimately to full value-based reimbursements.

However, easy accessibility to population health data is a key challenge for physicians. According to a 2020 physician survey by The Deloitte Center for Health Solutions², 73% of the respondents indicated that they lack the capabilities to access and incorporate non-clinical data, or "social determinants of health", to support their decision-making in a value-based healthcare situation. In addition, only 46% of the physicians have access to the "economic and community profile data" for the patient populations they serve.

However, survey respondents were optimistic about the future of collaborative healthcare and patient data integrations. Over the next 5 to 10 years, 84% expect that clinical care teams will be able to share health data in a more secure, streamlined, and timely way. Additionally, 83% expect that patient data generated by wearables, healthcare apps, and device sensors will be integrated to support delivery of care.



Moreover, value-based physician compensation is a slowly growing trend, but one that is shaping the future of healthcare delivery. *The Global Value-Based Care Payment Market Report*³ from The Business Research Company cites an expected compound annual growth rate (CAGR) of 49.5%, with an increase from \$1.52 billion in 2020 to \$2.27 billion in 2021. It's predicted that strategic, data-driven collaboration between payers and providers will be the key to reducing costs, improving patient outcomes, increasing patient satisfaction, and increasing profitability.



Improving Data Sharing and Provider-Payer Collaboration

Today's clinical care platforms are becoming more data-driven and collaborative thanks to recent innovations in telehealth services, remote patient monitoring (RPM) solutions, hospital EHR integrations, and secure mobile communication technology. However, they must evolve further to include integration with an enterprise population health management solution to make value-based healthcare more beneficial for payers, physicians, and patients alike.

It's a given that physicians can access patient data from the EHR, as well as from telehealth and remote patient monitoring solutions. Conversely, care coordinators typically gather and report data on the non-clinical or social side of patient recovery through personal interactions, such as phone calls and in-home visits with patients. In both cases, the missing pieces of patient data in each system causes a gap in information that could prevent care teams from making the most informed and accurate clinical decisions about post-treatment care. As a result, the risk of emergent incidents among patients and the need for post-surgical ER visits and hospital readmissions goes up, adversely affecting the patient's well-being, as well as reducing patient satisfaction with care and potentially reducing the provider's amount of value-base care reimbursement.

Therefore, the next generation of integrated healthcare technology solutions must enable care coordinators and clinical teams to collaborate, access all patient data, and extract the relevant patient analytics for decision making on a single, secure platform which includes:

- Electronic health record (EHR) accessibility
- Telehealth services and capabilities, such as virtual patient visits and context-aware video calls with care teams
- Remote Patient Monitoring (RPM) physiological data collected from medical equipment or wearables and sent to a physician dashboard from wireless LTE-enabled devices
- Population health data collected through personal, social interactions between care coordinators and patients
- Communication and collaboration with 256-bit AES data encryption and compliance with HIPAA and multiple healthcare data privacy standards

The following scenarios illustrate a few examples of how the next-generation collaborative platform described above helps providers and payers work together more efficiently for better patient outcomes and patient care satisfaction in a value-based healthcare environment.



Benefits for Payer, Provider, and Patient

- Integrates physiological and population health data for whole patient care on a single platform to help providers and payers make more informed care decisions
- Identifies patients at highest risk of relapse through either medicalbased or care managementbased analytics to initiate either provider intervention or a care management plan
- Meets value-based care requirements for better patient outcomes at a lower cost and optimal reimbursements
- Provides context-aware collaboration with EHR integration for a streamlined clinical workflow
- Enables telehealth video visits for care coordinators when in-home visits are not possible
- Helps care teams intervene on emergent situations faster to reduce post-surgery ER visits and hospital readmissions
- Improves satisfaction of care not only for the patient, but also for family members and personal caregivers

Treating the Whole Patient for Better Outcomes and Increased Satisfaction

Example 1: Ensure Compliance with Care Plans

A 66-year-old male patient is recovering at home after hip replacement surgery. His physician has prescribed daily anti-inflammatory medication and a course of physical therapy three times per week. A care coordinator from the patient's healthcare plan calls to follow up on his progress a week later. She learns that he lives alone and isn't mobile enough yet to drive himself to the pharmacy or to PT appointments. The care coordinator enters that data into the secure collaboration platform where the patient's clinical team can see the patient's problem and what actions she has taken to resolve it. Taking this social data into consideration, the physician can note in the EHR the reason why this patient had a slower start to recovery than expected, and can use this data to more accurately evaluate the patient's progress on follow-up visits.

Example 2: Avoid Possible Emergent Incidents

A woman in her fifties has been diagnosed with hypertension. Her physician prescribed medication and has enrolled her in a remote patient monitoring (RPM) program. She needs to take blood pressure readings three times a day at home using a special cuff that sends her physiological data wirelessly to an LTE-enabled device, which then sends the data to her physician's office. After two weeks, data shows a slight improvement, but still in the abnormal range. Instead of increasing the medication dose, the physician initiates a telehealth virtual visit with the patient, and asks the care coordinator on the case to join him. They learn that the patient has not been taking her medication correctly, so the care coordinator arranges for a visiting nurse to stop by to help both the patient and her husband/caregiver work out a medication schedule. Early intervention through a collaborative telehealth visit helped this patient to learn how to manage her chronic condition correctly and avoid a possible emergent incident in the future – and gave her husband peace of mind that he could help her stay compliant with medication.

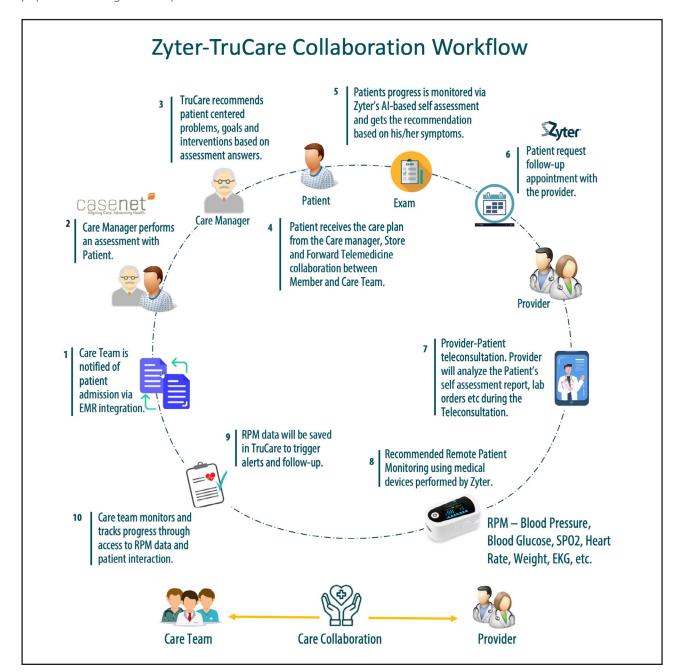
Example 3: Reduce Risk of Post-Surgical Readmissions

While reviewing cases, a care coordinator sees EHR notes that a recent post-surgical patient was readmitted to the hospital to treat an infection, despite the physician prescribing strong antibiotics. A follow-up call to the patient, a man in his forties, reveals that he did not fill the antibiotics prescription because he can't afford it since losing his job. The care coordinator shares that data with the physician on the healthcare platform, and takes action to help the patient get the prescription he needs. As a result, the physician now knows that the patient was non-compliant with medication and why, and can collaborate with the care coordinator to reduce the risk of future readmissions for this recovering patient. When surveyed later by the healthcare provider, the patient and family members alike gave the provider high marks in care satisfaction for identifying and solving his problem.



Today's Solution: ZyterHealth™ Platform with TruCare®

In February 2021, Zyter acquired Casenet's TruCare – a complete enterprise population health management solution spanning care management, utilization management, as well as appeals and grievances – to make patient-centered value-based care easier. The ZyterHealth platform gives physicians and care coordinators a global view of each patient and the ability to communicate and achieve context-aware collaboration while TruCare provides robust enterprise population management capabilities.



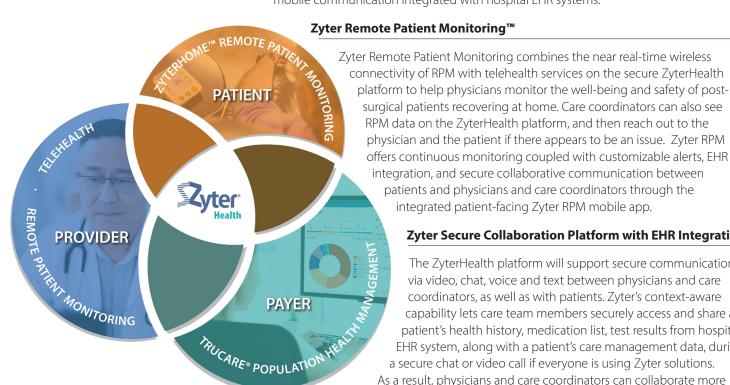


Casenet's TruCare

Integrated with ZyterHealth, the comprehensive TruCare population health management solution makes it easier and more efficient for care teams to identify opportunities to coordinate and enhance patient care. Along with advanced capabilities in the areas of case management, disease management, utilization management, the TruCare Analytics application uses machine learning to model risk, identify populations, and provide segmentation to help care coordinators make more informed care management decisions.

Zyter Telehealth™

Designed to integrate seamlessly and be quickly deployed and adopted by physicians and patients alike, Zyter Telehealth offers healthcare organizations of all sizes a full range of secure, HIPAA-compliant communication and collaboration capabilities. Zyter's telehealth solutions run on the ZyterHealth platform and enable secure virtual engagement as a way for healthcare organizations to leverage virtual visits and ER consultations. The platform also supports remote patient monitoring at home for postacute care and chronic conditions, and care team/patient collaboration through secure mobile communication integrated with hospital EHR systems.



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patients and physicians and care coordinators through the integrated patient-facing Zyter RPM mobile app.

Zyter Secure Collaboration Platform with EHR Integration The ZyterHealth platform will support secure communication via video, chat, voice and text between physicians and care

coordinators, as well as with patients. Zyter's context-aware capability lets care team members securely access and share a patient's health history, medication list, test results from hospital's EHR system, along with a patient's care management data, during a secure chat or video call if everyone is using Zyter solutions.

As a result, physicians and care coordinators can collaborate more effectively to enhance the quality of patient care, patient safety, and bring about better outcomes. In addition, care coordinators can bring the same personalized face-to-face patient interactions of traditional inhome visits to virtual visits.



Conclusion

The integration of clinical EHR data and population health data on a single collaborative platform results in better outcomes, not only for patients, but also for payers, providers, and care coordinators in terms of cost savings, improved quality of care, patient satisfaction, and job efficiency. Focusing on both the health and non-clinical challenges of the whole patient motivates everyone on the care team, regardless of function, to do their best to provide the best level of patient care at a lower cost to meet value-based healthcare requirements.

The integration of Casenet's TruCare enterprise population health management solution with ZyterHealth delivers a combined clinical and care management workflow with deep integration of patient EHR data, telehealth services, remote patient monitoring, and care coordination data on a single, secure collaboration platform. Ready now for the future of value-based healthcare, Zyter gives physicians and care coordinators alike a single, global view of the rich patient data – both physiological and social – to help them see the big picture of the patient's healthcare experience.

For more information on the next-generation ZyterHealth platform with TruCare, visit <u>www.zyter.com</u>.

References

- 1 Source: *National Healthcare Expenditure Projections*, 2010-2020, Centers for Medicare and Medicaid Services, Office of the Actuary.
- 2 Source: Equipping Physicians for Value-Based Care: What Needs to Change in Care Models, Compensation, and Decision-Making Tools?, Deloitte Insights, October 14, 2020.
- 3 Source: Government Initiatives Helped Boost the Value Based Care Payment Market During the Pandemic, In Which It Grew at a Rate of Almost 50%!, Market Report, The Business Research Company, February 11, 2021



About Zyter

Zyter delivers a wide range of cloud-based, software as a service (SaaS) digital health products for providers, payers and patients that span telehealth, home health and remote patient monitoring, as well as care, utilization and population health management. In 2021, Zyter acquired Casenet®, LLC and together the two company's products are used to manage healthcare for 11% of the U.S. population. Zyter's products improve clinical operations and patient outcomes while reducing healthcare costs by enhancing interoperability, communication and collaboration. The company's 5G-ready platform also supports IoT/smart technology and thermal imaging solutions. In 2021, the company won more than 49 awards for its products including Best Health Care and Medical Innovation; The Most Innovative Digital Health Startup; Best Product and Best Technology. Founded in 2017, the privately-held company is based in Rockville, Md. For more information, please visit www.Zyter.com.

For More Information

For more details about Zyter, please visit www.zyter.com or contact us at +1 (301) 355 7760 or sales@zyter.com to request a product demonstration.

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Integrating ZyterHealth™ with Casenet's TruCare®

Easier Provider-Payer Collaboration. Better Patient Outcomes.



"Under value-based care." physicians should adopt a population health mentality that represents a philosophical change in the care model and borrows many elements from the health insurers' playbook. It calls for advanced care-management capabilities that enable a *longitudinal and more holistic* view of the patient through use of multidisciplinary care teams, risk stratification, care navigation and site of care optimization, understanding of care variation, and influencing patients' behavior."

Equipping Physicians for Value-Based Care: What Needs to Change in Care Models, Compensation, and Decision-Making Tools?

Deloitte Insights, October 14, 2020

The move towards value-based healthcare is driving a new collaborative relationship between payers and providers to bring about better patient outcomes and satisfaction at a lower cost. Better care requires better collaboration – and that means making all types of patient data collected by clinicians and care coordinators accessible, visible, and sharable securely across disparate systems. Fortunately, the ZyterHealth platform offers next-generation care team collaboration today.

In 2021, Zyter acquired Casenet's TruCare population health management solution, a complete enterprise solution spanning care management, utilization management, as well as appeals and grievances. The integration of TruCare with ZyterHealth delivers a combined clinical and care management workflow with deep integration of patient EHR data, telehealth services, remote patient monitoring, and care coordination data on a single, secure collaboration platform. In contrast to just treating the disease, Zyter makes whole patient care possible by giving physicians and care coordinators the same 360-degree view of each patient across disparate systems. As such, care teams can more efficiently meet the shared goal of promptly identifying and addressing the full scope of the patient's healthcare needs for improved outcomes at lower costs.

A Better Way to Collaborate and Deliver Care

The ZyterHealth platform with population health integration gives physicians and care coordinators alike all of the rich patient data – both physiological and social – to help them see the big picture of the patient's healthcare experience. Working together with secure, context-aware collaboration tools, the care team can more quickly identify and respond to possible emergent situations and improve patient outcomes while satisfying payer requirements for value-based care.

• **TruCare** – The comprehensive TruCare population health management solution bridges the gap between clinical and population health systems. This makes it easier and more efficient for care teams to identify opportunities to coordinate and enhance the quality of care and patient satisfaction. Along with advanced capabilities in the areas of case management, disease management, utilization management, the TruCare Analytics application uses machine learning to model risk, identify populations, and provide segmentation to help care coordinators quickly identify patients at risk and make more informed care management decisions.

- **Zyter Telehealth™** Easily adopted by physicians and patients alike, Zyter Telehealth offers healthcare organizations of all sizes a full range of secure, HIPAA-compliant telehealth and collaborative communication services. Zyter's telehealth solutions enable secure virtual engagement as well as ER consultations, remote patient monitoring at home for post-acute care and chronic conditions, and care team/patient collaboration through secure mobile communication integrated with hospital EHR systems.
- **Zyter Remote Patient Monitoring™** Zyter Remote Patient Monitoring combines the near real-time wireless connectivity of RPM with telehealth services on the secure ZyterHealth platform to help physicians monitor the well-being and safety of post-surgical patients recovering at home as well as those with chronic conditions. Care coordinators can also view RPM data on the ZyterHealth platform, and then reach out to the physician and the patient if there appears to be an issue. Zyter RPM offers continuous monitoring coupled with customizable alerts, electronic health record (EHR) integration, and secure collaborative communication between patients and physicians and care coordinators.
- Zyter Secure Collaboration Platform with EHR Integration The Zyter DigitalHealth platform enables secure communication via video, chat, voice and text between physicians and care coordinators, as well as with patients. Zyter's context-aware capability enables care team members to securely access and share a patient's health history, medication list, and test results from hospital's EHR system, along with a patient's care management data, during a secure chat or video call. As a result, physicians and care coordinators can collaborate more effectively to enhance the quality of patient care, patient safety, and bring about better outcomes. Additionally, care coordinators can bring the same personalized face-to-face patient interactions of traditional in-home visits to virtual visits.



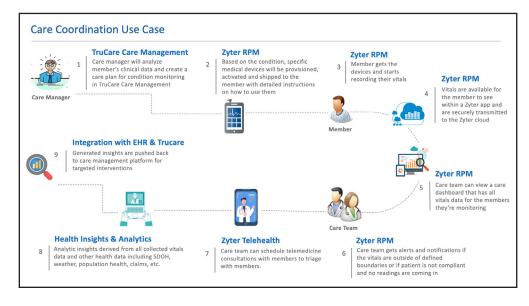
ZyterHealth with Case Management Workflow: Treating the Whole Patient

Reducing the occurrences of post-surgery infections and incidents that require ER visits or hospital readmissions is paramount for optimal patient outcomes, patient satisfaction, and optimal reimbursement for value-based care. But even the best care plan with life-saving medication or restorative physical therapy can't be effective if the patient isn't compliant with taking the prescription or has no transportation to therapy sessions. That's how population health management data is vital to treating the whole patient.



Zyter-Casenet Collaboration Workflow

The ZyterHealth platform with integrated TruCare population health management gives physicians and care coordinators the physiological patient data as well as the care management or "social" data to cover all aspects of patient recovery. When alerted to a spike in a patient's blood pressure through the Zyter RPM solution, for example, what is the cause? Does the dosage need to be adjusted, or could it be that the patient has been taking the medication incorrectly – or perhaps not taking it at all because the patient cannot afford it or cannot get to the pharmacy to fill the prescription?



Easy access to patient analytics enables everyone on the care team to quickly identify at-risk patients and then collaborate to answer key questions before the patient's situation becomes emergent. For example, using Zyter within the TruCare dashboard, a care coordinator working on the case of a member struggling with obesity can easily reach out and communicate with the patient's medical team to request a dietary consultation. In turn, physicians can easily click on the integrated TruCare app through the Zyter RPM dashboard to send secure messages or emails to the patient's care coordinator.

As a result, physicians can make more informed care decisions faster – and care coordinators can alert physicians to non-clinical patient issues – by having a global view of the patient on a single platform. It all adds up to better healthcare for the patient, reduced healthcare costs for patients and payers, increased patient satisfaction, and cost efficiencies for physicians in a value-based healthcare arrangement.

Secure and Compliant Across All Systems

All of the data sharing, collaboration, and communication features of the ZyterHealth platform are HIPAA, FedRAMP and FISMA compliant with Authority to Operate (ATO) at U.S. Department of Defense facilities. Data across all telehealth and RPM devices is transmitted via the 256-bit AES encryption standard to ensure compliance with data privacy standards.

Zyter Integration Platform: EDI, HL7 ad FHIR

EDI

- End-to-end EDI X12
 healthcare functionality
 for payers, hospitals,
 medical groups, ACOs
 and managed care
 organizations
- Connect and reconcile multiple sources of healthcare data
- HIPAA L1-L7 validation and custom rules

HL7

- Support for multiple versions of HL7
- Out-of-the-box connectivity to leading EHR and provider systems
- Patient lifecycle integration
- Highly scalable to support large volumes

FHIR

- Complete FHIR solution with FHIR server
- All FHIR resources and API available
- FHIR 4.X support
- Over 16000x12 to FHIR and HL7 to FHIR mapped API
- Provider and payer data integration
- SMART on FHIR integration

CMS INTEROPERABILITY (CURES ACT)

Patient Access API, Provider Directory API, Payer-to-Payer Exchange, Federal-State Data Exchange

Benefits for Physicians, Care Coordinators, and Patients

- Integrates physiological and care management data for whole patient care to help clinicians and care coordinators identify at-risk patients and make more informed care decisions
- Helps care teams intervene on emergent situations faster to reduce post-surgery ER visits and hospital readmissions
- Meets value-based care requirements for better patient outcomes at a lower cost
- Provides context-aware collaboration with EHR integration for a streamlined clinical workflow
- Enables telehealth video visits for care coordinators when in-home visits are not possible

Learn More

Learn how Zyter and Casenet can help you bridge the gap of secure data sharing and collaboration between clinical teams and care coordinators, improving patient outcomes, satisfaction and value-based healthcare reimbursement. For more information on the Zyter DigitalHealth™ platform with TruCare, visit www.zyter.com.

About Casenet LLC

Casenet, a Zyter company, provides a comprehensive suite of enterprise population health management products for commercial, Medicaid, Medicare, TPA, provider/ACO and specialty provider organizations that have multiple lines of business and that require comprehensive configurations for each member population. Healthcare organizations rely on Casenet's population health management products to improve care coordination and the quality and delivery of care through enhanced case, disease, utilization, and home and community-based services management. Casenet products enable organizations to adapt quickly to changing market and regulatory dynamics, and to identify and target populations with risk characteristics with specific care management programs - taking the first step toward better individual health and total population health management. For more information, please visit www.casenetllc.com.

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