



IMS Payer Solutions

Innovative services and technologies
to improve quality, cost and outcomes

To effectively navigate today's healthcare reform landscape, you need better insights on what's truly driving quality and cost performance.

IMS can help you integrate, manage and analyze the right information, so you can reduce costs while sharpening your focus on the quality of care.

New Standards of Performance Measurement

INTEGRATED DATA, ANALYTICS AND QUALITY MEASURES

In this new environment, many—health plans, accountable care organizations (ACOs), patient-centered medical home programs (PCMHs) and pharmacy benefit managers (PBMs) included—are forced to make value-based decisions that manage risks against new standards of performance.

At IMS, we address your need to innovate via proactive solutions for providers, members, pharmacists and executives. We help you employ objective information and analysis to change behaviors and create more transparent, clinically-grounded performance management initiatives.

IMS offers an integrated suite of unique healthcare data, analytics and quality measures that enable you to:

- **Address the complexities of new reimbursement and care delivery models** by aligning performance incentives with provider and plan improvements and reimbursement innovations that promote high-quality care
- **Engage, measure and incent physicians and hospitals to improve patient care** with actionable quality and cost performance analytics that provide decision support and target areas for improved clinical and financial outcomes
- **Assess the efficiency and effectiveness of pharmacy** management operations both internally and against national benchmarks
- **Monitor, evaluate and compare plan performance** based on efficiency, quality and cost performance
- **Change member behavior** by giving health plan members accurate, personalized and meaningful cost and quality information to guide better healthcare purchase decisions



IMS PAYER SOLUTIONS HELP YOU

- Improve provider cost and quality results
- Engage members in better, more informed decisions
- Optimize pharmacy spending
- Automate and scale PCMH, ACO, and provider transparency initiatives
- Simplify HEDIS reporting
- Address issues of safety and quality improvements, outcome measures, and physician and hospital performance

IMS Payer Solutions Portfolio

Data Management, Analytics and Member & Provider Engagement Solutions

Your goal is to reduce costs, drive revenue and enhance quality—to share the clinical and financial risk among providers, patients and plan organizations. To do that, IMS enables you to effectively monitor networks and readily share actionable insights with physicians and hospitals across a range of performance areas, including:

- Provider Performance Management
- Member & Provider Engagement
- Pharmacy Performance
- Plan Performance Management
- Payment Innovations (such as ACOs and PCMHs)

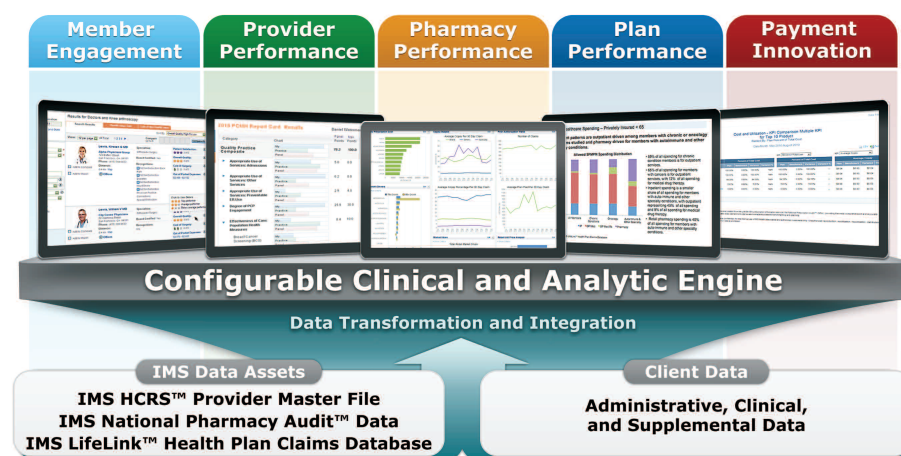
We help you integrate, manage and analyze internal and external information to create actionable views and valuable analytics. Rather than engage multiple vendors for care management, consumer transparency, provider performance and HEDIS reporting, you can make a single strategic investment that supports all of the members, providers and stakeholders within your business.

CONFIGURABLE CLINICAL AND ANALYTIC ENGINE

To provide the information and tools you need, all *IMS Payer Solutions* share a core technology platform. Its configurable structure and output allows flexible drill-down and reporting. This ensures users at all skill levels can drive improved decision-making with timely, updated information.

The platform includes an analytic engine, data intake and standardization, a wide range of quality and cost analytics and benchmarks, as well as consumer-directed clinical content to make transparency results meaningful to providers and members.

Figure 1: IMS core technology...one strategic investment for multiple needs



Healthcare data from multiple, disparate sources integrated into a single comprehensive platform and configured to fit your unique need. Sophisticated tools that put powerful, actionable business intelligence at your fingertips.

- Web-based applications
- Real-time scorecard updates
- Appeals management
- Patient registry
- Embedded algorithms and analytics
- Dashboards & interactive report views
- Integration with physician measures
- Pharmacy budget impact calculator

Provider Performance Management

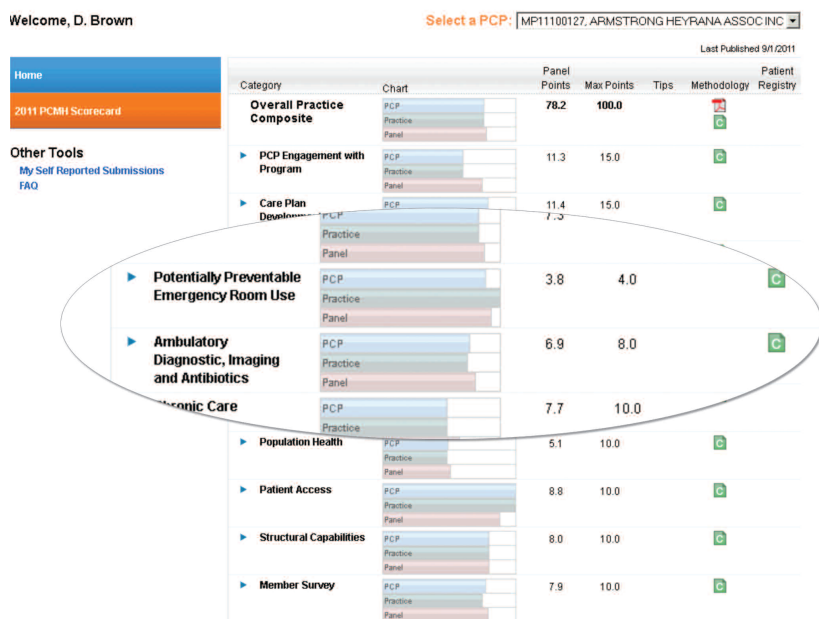
ENGAGE, MEASURE AND INCENT PHYSICIANS & HOSPITALS TO IMPROVE PATIENT CARE

Our *Physician Exchange* and *Hospital Exchange Suites* help manage provider performance with actionable analytics that engage physicians and hospitals in cost containment and quality efforts. With IMS, you can score physicians and hospitals on best practice conformance, patient outcomes and peer cost comparisons. Our clinically-defensible and robust measurements include hospital quality metrics (e.g. adverse events, re-admissions, etc.), cost-of-care metrics, performance benchmarks and scoring & ranking strategies.

With our provider performance end-to-end implementation, you leverage data analysis, reporting tools and applications from one vendor, to:

- Develop networks based on providers offering the greatest efficiency and quality
- Proactively manage providers—identifying high and low performers, and providing best practices for improvement
- Improve patient management by delivering aggregated care alerts and patient registries
- Manage referrals, and measure and benchmark specialty providers
- Gain insight into provider and hospital practice patterns with views of integrated cost results overall, or by condition, surgery and/or procedure
- Quickly create customized measures that align with your cost drivers

Figure 2: PCMH Performance Scorecard



Based on a proven program supported by online, web-based connectivity and enhanced information sharing among patients, providers, care coordination teams and the health plan that include:

- Assignment of patient cohorts
- Calculation of illness burden scores and illness profiles
- Benchmarks of global expected care costs and experience tracking
- Measurements of quality of care
- Tools to actively engage physicians



DEDICATED HEALTHCARE FOCUS

IMS Health provides the largest independent source of health plan claim and prescription data to deliver actionable insights and address emerging reform-driven challenges.

- Serving more than 60 health plans and PBMs, including some of the most prominent payers in the U.S. market in support of health reform initiatives such as PCMHs, ACOs and pharmacy analytics for cost and quality
- Over 10 years' experience in strategic positioning, development and implementation of provider performance and transparency initiatives
- Objective national, local, provider and patient information assets to measure and enhance performance
- Integrating information on 38 billion+ healthcare transactions yearly, across thousands of hospital, clinic, lab, office, pharmacy and ambulatory care settings
- Informed by dynamic, consistently updated longitudinal views of 78M de-identified patients annually, in the U.S. alone
- Capturing 80% of global pharmaceutical sales, including more than 70% of dispensed prescriptions in the U.S.
- Reference information on 5M+ healthcare professionals, 500,000 healthcare organizations and 2.4M affiliations in the U.S.
- Highly secure and HIPAA-compliant environment, NCQA and HEDIS certified

Member Engagement Solutions

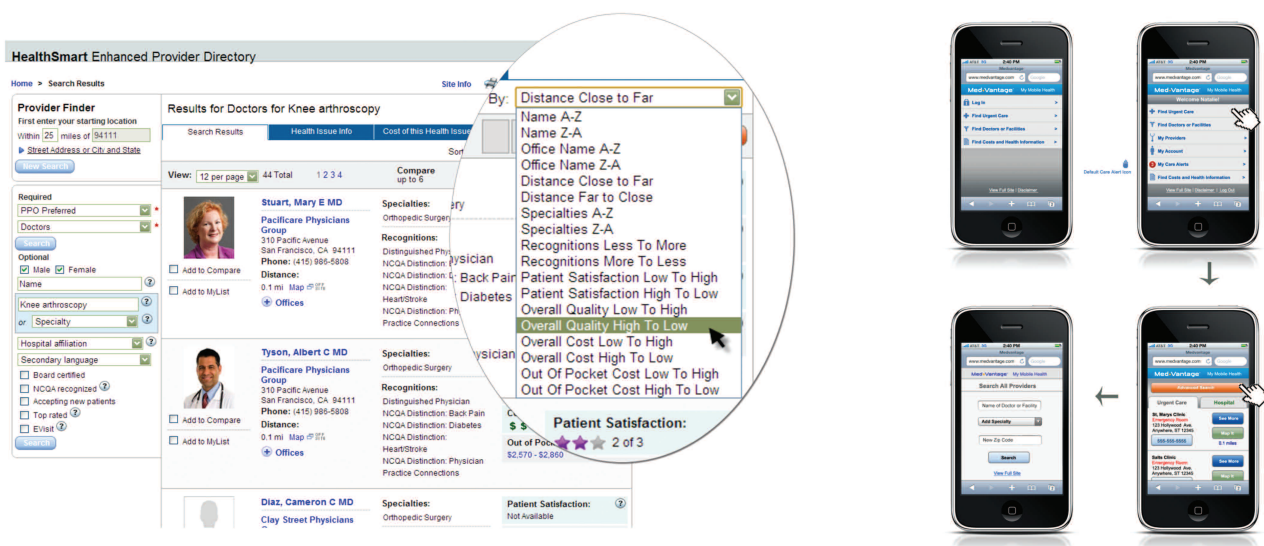
ENCOURAGE YOUR MEMBERS TO MAKE BETTER CHOICES

Give members accurate, personalized and meaningful information to guide better healthcare purchase decisions, while you drive differentiation and improve your position in a competitive landscape.

We deliver user-friendly solutions that engage your members to make appropriate and cost-effective care decisions at the point-of-choice. Our online Enhanced Provider Directory is enriched with quality and cost metrics to assist members in physician selection. Your members also receive personalized alerts on recommended care, and comprehensive statements of benefit usage with the value of their health plan products highlighted—all to help you:

- Influence members to choose the highest-quality and most cost-effective doctors by presenting quality, cost and other recognitions at the point-of-choice
- Support members in planning costs with medical cost estimates for more than 450 surgeries, conditions and procedures, using powerful, easy-to-use procedure search, at-a-glance detail and flexible drill-down tools
- Engage members with health education information from respected third-party sources
- Ensure compliance with directory, transparency and usability standards including the Patient Charter, NCQA and URAC
- Integrate seamlessly into your existing member portal using an easily customized design
- Minimize risks of displaying quality, cost or other transparency information with best practice analytics

Figure 3: Point-of-Choice Member Engagement Tools



Powerful condition and procedure search capabilities with our Enhanced Provider Directory in an intuitive, easy-to-use format.

User-friendly mobile solutions allow web access via iPhone, Android or Windows, and integrate into your mobile portal.

Pharmacy Performance

SEE HOW YOUR PLAN COMPARES USING KEY PERFORMANCE INDICATORS

By combining plan data, benchmark data and standard analytics in a single platform, IMS pharmacy management solutions provide the competitive advantage you need to drive pharmacy performance. IMS enables a comprehensive approach to pharmacy performance management that helps you:

- Evaluate the effectiveness of pharmacy management in terms of cost and quality, using a single source for standard analytics, plan data and benchmarks
- Defend against pharmacy carve-outs or grow market share by demonstrating value to key accounts using the most robust, unbiased benchmarks
- Analyze the potential budget impact of changes in key performance indicators, including pricing, benefit design and utilization
- Identify care gaps and provide actionable information to maximize the effectiveness of interventions, such as persistence & compliance or Medication Therapy Management (MTM)
- Optimize performance on drug-related CMS "Star" ratings with timely access to current and historical measurement

IMS PHARMACY PERFORMANCE SOLUTIONS

- **IMS RxSource 360:** Utilizes payer data and benchmark data to help health plan executives index pharmacy management performance in the areas of pharmacy management, medication treatment quality and benefit utilization
- **IMS RxBenchmark:** Provides overall cost, utilization and quality statistics across clinical conditions and health status levels
- **IMS RxSpecialty:** Provides insight into specialty pharmacy spend and utilization patterns and their relative contribution to total cost of care
- **IMS Designer:** Powerful desktop application that allows you to quickly build measures and detectors for any plan initiative

Figure 4: Actionable Rx Data and Analytics



IMS pharmacy insights allow you to:

- Compare MAC list pricing against actual reimbursed market averages
- Track brand & generic market share trends to inform formulary strategies
- Estimate budget impact of formulary & contracting changes
- Measure persistence & compliance with chronic medication treatment

Plan Performance Management

DRIVE ONGOING QUALITY IMPROVEMENT WITH EVIDENCE-BASED MEASURES

With buying decisions hinging on everything from network performance to cost and utilization metrics, you need to determine how your business compares to the competition. With IMS Plan Performance offerings—including Designer Suite, Total Cost and Use Benchmarks by Disease, and HEDIS Performance Suite—you’ll readily benchmark and identify cost, efficiency and quality improvement opportunities in the areas of care management, network contracting and Medicare Star Ratings.

IMS Designer Suite has unprecedented ability to create evidence-based measures—without added programming. We help you identify savings opportunities and competitive advantages by comparing plan cost and utilization to third-party benchmarks. And we integrate plan and benchmark analysis of medical and drug spending across inpatient, outpatient and pharmacy settings.

IMS clients are already using our Plan Performance solutions to:

- Create “Member 360” programs that run measures to identify conditions, care gaps and service dates
- Segment member populations for rare disease case management, with new patient detector triggers
- Prepare and deploy transparency scorecards with quality and cost metrics, as well as scoring
- Establish care gap reporting for direct-to-provider reporting and case management
- Customize measure development for utilization-based alerts

Figure 5: Designer Suite’s Major Components

Easily customize to create, manage and share robust measures for complete transparency, program flexibility and reduction of time spent on maintenance

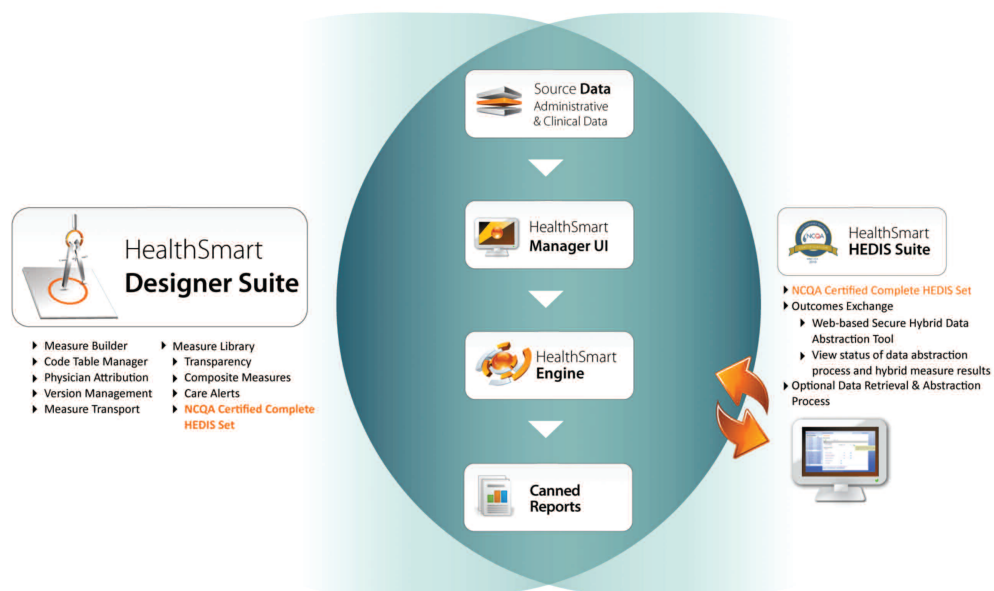
Component	IMS DESIGNER SUITE FEATURES
Measure Library	<ul style="list-style-type: none">• Ready to run, NCQA certified complete HEDIS set• Medical measure library• Composite measures and care alerts
Measure Builder	<ul style="list-style-type: none">• Re-usable code tables• Re-usable measure result sets• Event library – all the building blocks
Code Table Builder	<ul style="list-style-type: none">• Complete code universes – including FDB for NDCs• Taxonomy-driven browse• Keyword search
Physician Attribution	<ul style="list-style-type: none">• NCQA certified for AHIPF requirements• Highly flexible options for each individual measure
Version Control	<ul style="list-style-type: none">• Check in/check out and measure locking• Lineage tracking
Measure Transport	<ul style="list-style-type: none">• Share measures in a community• Design, test, disseminate

IMS Total Cost and Use Benchmarks by Disease help you measure and benchmark the total cost of disease, overall and by disease population, with in-depth analyses of plan cost and utilization performance compared to regional and national benchmarks. With this analytic solution, you're able to:

- Measure overall membership, disease populations and care settings by age, gender and risk
- Index treatment type and setting cost and utilization management against external third-party benchmarks
- Identify potential savings opportunities across medical and pharmacy spending among disease populations
- Quantify strengths with new and existing employer group accounts and other stakeholders

IMS HEDIS Performance Suite is an end-to-end solution that empowers you to manage, streamline and improve the HEDIS reporting process and results. Using your plan's data pursuit and abstraction resources or IMS Health's, you control frequency and ability to view, compare and rerun results prior to sending to NCQA. You can compare your results to prior years' or to NCQA benchmark data to drive quality improvement initiatives.

Figure 6: IMS HEDIS Performance Suite



IMS HEDIS solutions include:

- Ready to run NCQA certified administrative measures
- Add on analytics to generate Hybrid HEDIS & CAHPS sample frames
- Flexible methods to identify the most likely provider for data collection
- Automatically generated web-based, secure data collection vehicle
- Real-time viewing of data collection progress and hybrid measure results
- Results automatically populated in NCQA's IDSS format
- Reusable data intake process

The Industry's Most Trusted Source

INTEGRATE, MANAGE AND ANALYZE BEST-IN-CLASS INFORMATION

IMS Health is the industry's most trusted source for healthcare information, serving hundreds of organizations in the U.S. and around the world to drive improved cost and quality performance.

Our people understand the pressing issues you face, and we use our expertise to build solutions that address emerging and continuing challenges. In addition, we offer unique evidence-based services and consulting capabilities to help you employ best practices throughout your organization.

To learn more about IMS Payer Solutions, contact David Morris, Vice President of Business Development, at (404) 229-9571, or email us at PayerSolutions@us.imshealth.com or visit www.imshealth.com/payersolutions.

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ABOUT IMS

IMS Health is the leading provider of information services to the healthcare industry around the world. The company draws on its global technology infrastructure and unique combination of in-depth, sophisticated analytics, on-shore commercial services, and consulting platforms to help clients better understand the performance and value of medicines. With a presence in 100+ countries and more than 55 years of industry experience, IMS Health serves leading decision makers in healthcare, including pharmaceutical manufacturers and distributors, providers, payers, government agencies, policymakers, researchers and the financial community. Additional information is available at www.imshealth.com