

### 3M Introduces the 3M Health System Performance Suite

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As hospitals and health systems navigate the journey from volume- to value-based health care, 3M Health Information Systems is applying the analytic power of its extensive clinical and claims database to help providers assess the costs, outcomes and effectiveness of care delivery. The new 3M Health System Performance Suite offers advanced analytic tools to manage the health of populations, measure provider performance, determine total cost of care and succeed under value-based payment.

The latest addition to 3M's population health management toolkit, the 3M Health System Performance Suite provides the type of business intelligence that health care organizations need to participate in an Accountable Care Organization (ACO), state initiatives such as Delivery System Reform Incentive Payment (DSRIP) programs, or to understand market share dynamics and address issues such as patient outward migration or network "leakage."

The web-based 3M Health System Performance Suite is built on 3M's industry-leading risk stratification methodologies, including the 3M APR DRG Classification System and 3M Potentially Preventable Events (3M PPEs) software, which identifies hospital readmissions, complications, admissions, and other events that may be avoidable. The first modules of the new system are now available, offering easy-to-navigate interactive dashboards and powerful internal, state and federal data reporting tools:

- **State Compare** – Developed from public data sets, this module provides risk-adjusted analytics about hospital efficiency and quality, physician performance and volume, and length of stay as measured against statewide benchmarks with year-to-year comparisons. State Compare can help provider organizations identify profitable market share opportunities and capture out-migrating revenue by service.
- **Patient Compare** – Offers a patient-level review of length of stay and mortality, costs and charges, and peer-to-peer performance using 3M benchmarks. Comprehensive exception reporting makes it possible to quickly identify cases that fall outside of the norm, such as mortality in low-risk cases; high costs and long stays; readmissions; and cases flagged with a patient safety indicator, a quality issue or complication.

Four additional modules of the 3M Health System Performance Suite are scheduled to be released over the next several months, and will provide incremental risk adjustment and further insight into provider performance, quality, population cost of care and risk, and a risk scenario modeling tool.

3M technology and analytics are used throughout health care in prospective payment systems, quality outcomes measurement, risk stratification and analysis, and population health management. State Medicaid agencies, hospital associations, and payer-provider collaboratives in more than 30 states use 3M patient classification methodologies for comparative reporting of hospital quality and as the basis for determining outcomes-based financial incentives and designing new healthcare payment models.

Source credit: [3M Health Information Systems](#)

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