What's in it for physicians?

- Real influence with payors defining value-based purchasing metrics
- Income opportunity through quality and value-oriented contracts
- Assistance with EMR and IT solutions
- Clinical data feedback to help manage patients
- Care management support for complex disease management to improve care and reduce unnecessary admissions
- Better clinical outcomes
- Better connections with providers across the continuum (intra-network hospital and physician information transfer)
- The ability to define and objectively demonstrate quality
- A meaningful role for physicians in governance and determining one's own future
- The critical mass necessary for participation in certain government and private initiatives

KootenaiCareNetwork

Questions?

Visit us online at **kh.org/kootenaicarenetwork** 208.625.6611 kcn@kh.org

KootenaiCareNetwork



Bringing the health care community together to improve patient care

The Kootenai Care Network is a "Clinically Integrated Network." Through clinical integration, physicians, hospitals and payors can work together in a more coordinated way to improve clinical outcomes and provide more cost-effective care. Network members maintain their independence, but work together in a mutually-accountable way to develop and implement clinical protocols and monitor clinical performance. This helps achieve high quality care in a more efficient manner than can be achieved independently.



As quality metrics among network members improve and measurably better patient care is established, the network is able to engage in value-based contracting with both payors and employers.

Both Kootenai Clinic and independent physicians are encouraged to participate in Kootenai Care Network. Here are a few of the benefits:

Kootenai Care Network Member Benefits

- Supports community physicians' ability to comply with government and commercial payors' emerging value-based payment mandates
- Increases collaboration among providers and across specialties by rewarding teamwork and efficiency
- Creates the critical mass needed to participate in certain government and private initiatives while maintaining independent practices
- Provides outcomes feedback which can then be used to define and objectively demonstrate quality
- Rewards patient health
- Builds sustainability and financial strength in emerging payment systems
- Creates market differentiation which can preserve and build a patient base

- Large employers and government payors will look to network providers to care for their employees and beneficiaries
- Provides assistance with EMR and IT solutions
- Care management support for complex disease management to improve care and reduce unnecessary admissions
- Opportunity to participate in governance and play a meaningful role in determining one's own future

