Care Intellect™ enables health care organizations to manage care variation across patient encounters, improving the quality and reliability of care, bettering patient outcomes, and reducing costs.

**Addressing unnecessary care variation**

There’s no doubt, the US health care system is taxed. Aging Baby Boomers are driving patient populations up with lower reimbursements. Clinicians and executives are faced with increasing pressure to improve treatment outcomes while simultaneously reducing costs. What if organizations could do both?

Administrators and health care delivery teams need visibility into what is happening in the organization if they are truly going to make strides. The challenges are aplenty. The explosion of health care data makes it difficult for people to consume it all on their own. Disparate systems and awkward policies make reports difficult to pull, and can add weeks to the process. Value-based care requires data to be captured across a patient’s life—even while they are at home.

What if care teams could see what other care teams were doing to deliver better outcomes for patients? What if those best practices were also more cost efficient? Transitioning toward a sustainable value-based care model is the key, but health care providers have to empower their care delivery teams with the right information.

**Improving outcomes and reducing costs**

With Care Intellect™, organizations can help care delivery teams be more adaptable and agile because they unlock the power and resources of a giant organization in an easy-to-use analytics solution. Reasons for treatment variation come to light in minutes, and putting transparent reporting capabilities in the hands of care delivery teams helps reenergize practitioners’ passion for caring for people, while delivering more positive outcomes to patients. The analytics solution is designed to help manage variations across patient encounters, integrating leading evidence-based practices that improve patient outcomes while discovering the related cost-saving opportunities. And complementary advisory services help organizations turn those insights into new, sustainable processes that yield better financial performance.

**How to turn data into actionable insight**

- Create transparent, easy-to-access analytics that deliver trusted, real-time answers
- Use data to examine utilization—clinical variation and the impact on outcomes
- Customize service to patient need and expectation to improve patient experience
- Facilitate objective accountability among service line leaders and department chairs
- Leverage insights from service line data to identify performance improvement opportunities
The right mix
Deloitte's powerful analytics application, Care Intellect™, puts the right information directly into the hands of business users and clinicians. In addition, Deloitte's Clinical Effectiveness subject matter specialists help providers and administrators develop new organizational processes that result from data-fueled actionable insights.
Through this tailored blend of analytics and advisory services, health care providers can improve financial margin and consistency of care with:

• **Real-time views**
  Effective, real-time management of performance, utilization, and cost to track impact and sustainability of specific initiatives

• **Guided and ad hoc analytics**
  The freedom and flexibility to create unique analyses using any of the data housed within the application

• **Tracking and monitoring**
  Customized reports to track impact from strategic/growth initiatives

• **User-driven business intelligence**
  Administrators can conduct real-time hypothesis testing during conversations with clinical teams

• **Clinical care team coordination**
  Clinical leadership takes the lead in delivering better experience for patients based on service line data

• **Service line profitability**
  Integrated data set provides single information source of truth for product and service line profitability

Creating a patient-centered ecosystem of care
Care Intellect™ puts patients at the center of care delivery by creating a sustainable environment of continuous improvement within the organization. Our approach helps achieve impact through setting up governance, building organizational capabilities, investing in enabling technology, and using sophisticated analytics to inform decision making.

Balancing greater financial risk
With the emergence of value-based payment structures that incentivize risk-sharing between payors and providers, health care providers must find ways to make the shift. Developing new organizational capabilities that focus on quality and efficiency of care can help manage increasing levels of risk beyond the traditional inpatient DRG-based system.

Success under new value-based care models will require more sophisticated approaches to clinical improvement. The opportunity to measure care variation across patient encounters within a health care organization is more important today than ever before.

Start the conversation
Contact convergehealth@deloitte.com and visit www.deloitte.com/us/careintellect for more information.

Denise Hartung
Managing Director
Deloitte Consulting LLP
dhartung@deloitte.com

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