Genevive

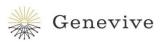
LTC Summit

October 2020



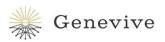
Introduction – Amanda Tufano





Agenda

- Genevive overview
 - Stats and background
 - IT and EHR history
 - Mission, values, vision
- Value driven care needs
- Medicare Advantage and SNPs
- Genevive partnerships and value metrics
- Genevive lesson learned



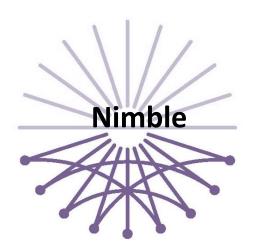
Genevive Overview

Genevive 2020 Stats	
Practice	Minnesota Geriatric Medical Group
Employees	176 (59 Providers)
ADC	~7,500 pts
Service Lines	 Long term care (LTC) Assisted Living (AL) Transitional Care Units (TCU) Independent Living (IL) Care Management Risk Adjustment



Culture









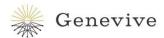












Genevive Timeline

Geriatric
Services of
Minnesota
(GSM) formed

4 Staff: MD, NP, 2 RNs GSM first
Joint Venture
formed –
health system
and seed
Physician
owned
practice

GSM renamed Genevive – launched with new branding Genevive
second Joint
Venture
formed –
health system
and senior
housing
ownership

2003

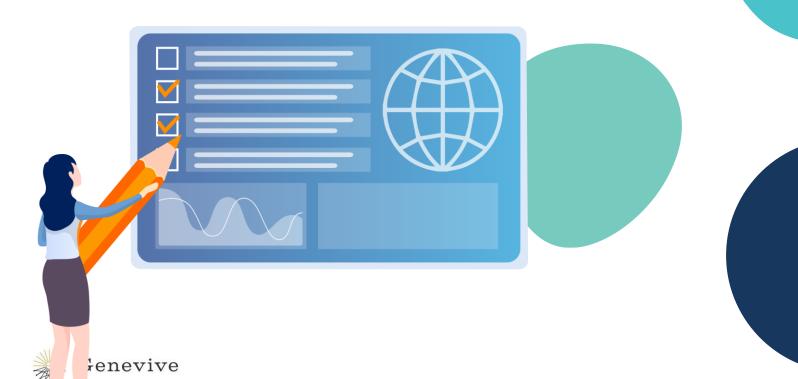
2011

2015

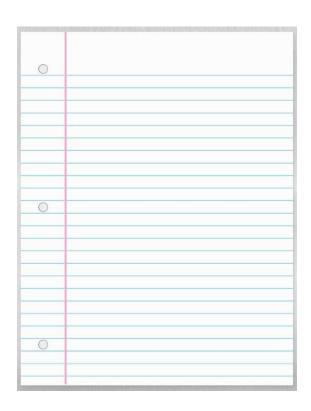
2019



Opinion Poll Thanks for your feedback!



Technology









Mission

Treat them like family.



Values

COMPASSION

We understand the difficulties our patients face. And we genuinely care about making their lives easier. By getting to know them as people, we're able to ask better questions and seek the best answers. Our standards are high. We strive to be the kind of company we'd send our own parents to.

EXPERTISE

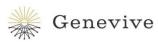
We specialize in one of the most complicated fields in medicine. Our team brings decades of experience and a commitment to rigorous, evidence-based approaches. We are truth tellers who challenge easy answers and work to deliver the most valuable care in every situation.

ACCESSIBILITY

Expertise is of limited value if it's not accessible. When patients need assistance, they need Genevive, not usual care providers under fee-forservice. We're there for our patient's 24/7 and ensure they receive the care they need at every step of their journey.

ETHICS

Trusted providers are best equipped to recognize the right care for the patient. We keep the bar high on ethics so our patients get the care they need and deserve.



Vision

 Build nationally recognized, best in class, campus-based care model paid under value driven contracting.





Campus Care

Treat Them Like Family

Patient and Family Centered Care Planning

Intentional Living – Supportive Transitions – Meaningful End of Life

Independent Living

Assisted Living

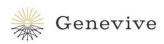
Memory Care Transitional Care

Long Term
Care

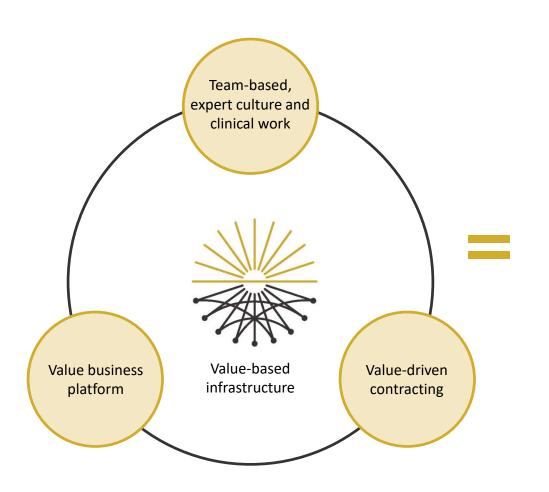
Medical Practice – Care Management – Support Services

Compassion – Accessibility – Expertise – Ethics

Value Based Contracting



Value Driven Company

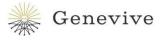


Value-based care for patients

Better quality of life for patients and family

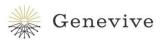
Vocationally rewarding resulting in better retention

Affordable care and lower total cost of care



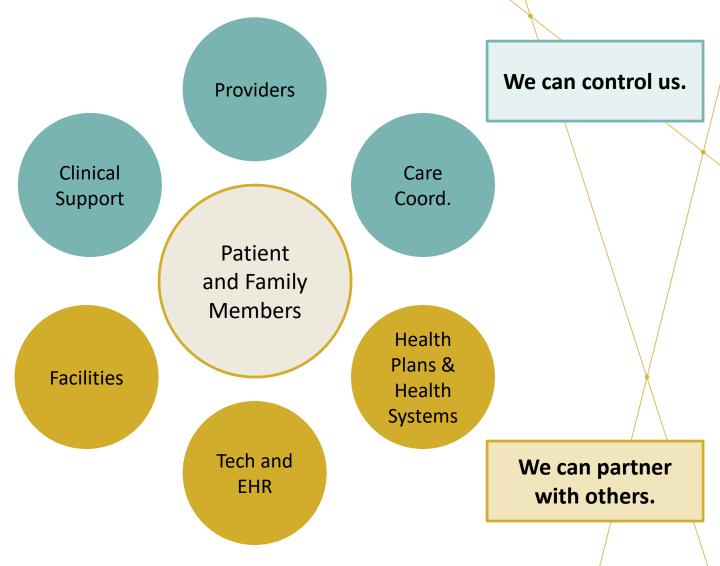
Clinical Work

- Infrastructure required to manage care:
 - Based in expert geriatric care
 - Provide different patient experience
 - Connected primary care and care management
 - Support to allow top of license work
 - Create clinical pathways that reduce cost and improve quality
 - Scalable and reproducible
 - = Geriatric Center of Excellence



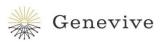
Clinical Team is Key

Genevive



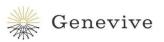
Medicare Advantage and SNPs

- Medicare Advantage
- Special Needs Plans
 - Duals (D-SNP)
 - AKA: Minnesota Senior Health Option (MSHO) in Minnesota only
 - Institutional (I-SNP)
 - Chronic Condition (C-SNP)



Current Resident Profile

- Frail and vulnerable
- Moderate to severe cognitive impairment
- More likely to be female
- Average age is 85 years old
- Unable to make independent care decisions
- Has multiple co-morbidities
- Needs assistance with activities of daily living (dressing, eating, toileting)



I-SNP Criteria and Partnership

Medicare Eligible

Individuals who need or are expected to need the level of services provided for 90 days or longer in SNF

Individuals must reside:

- LTC
- Assisted living (AL)
- Memory care (MC)

The I-SNP offers us a unique and exciting opportunity as a provider group to partner with facilities and health plans in a new way

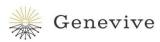
145+ Facilities in 2021



A new Medicare choice from two trusted names.



COMING: 2021



GEHRIMED Partnership

- Important foundation
 - Mobility
 - Ease
 - Flexibility
 - Integrations
- Important growth opportunities
 - Value based care
 - New clinical tools and metrics
 - = GEHRIMED is a true partner, growing with us!

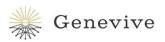


Opinion Poll Thanks for your feedback!



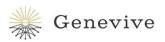
Value Contracting Metrics

- Value contracting is making us rethinking metrics we've always known
- Care coordination means more than working around the Provider:
 - Locating the patient
 - Identifying eligible benefits
 - Supplying the right care at the right time
 - Ensuring key outcomes for patient



Great Ideas That Didn't Work

- Great ideas without strong sources of revenue
 - Building our own EHR with a local IT partner
 - Geriatric hospital wing in acute hospital
 - Geriatric behavioral health wing in critical access hospital
 - Home visit program for community patients spread over large geography



Genevive EHR Lessons Learned

- First, understand your clinical model, business infrastructure, and partners
- Critical importance: which partners can deliver?
 - Evaluate your organization's readiness for change and necessary growth targets
 - Find the right partner to take risk
 - Create a meaningful relationship that allows for growth and transparency
- Deliver on results



Mission

Treat them like family.

