

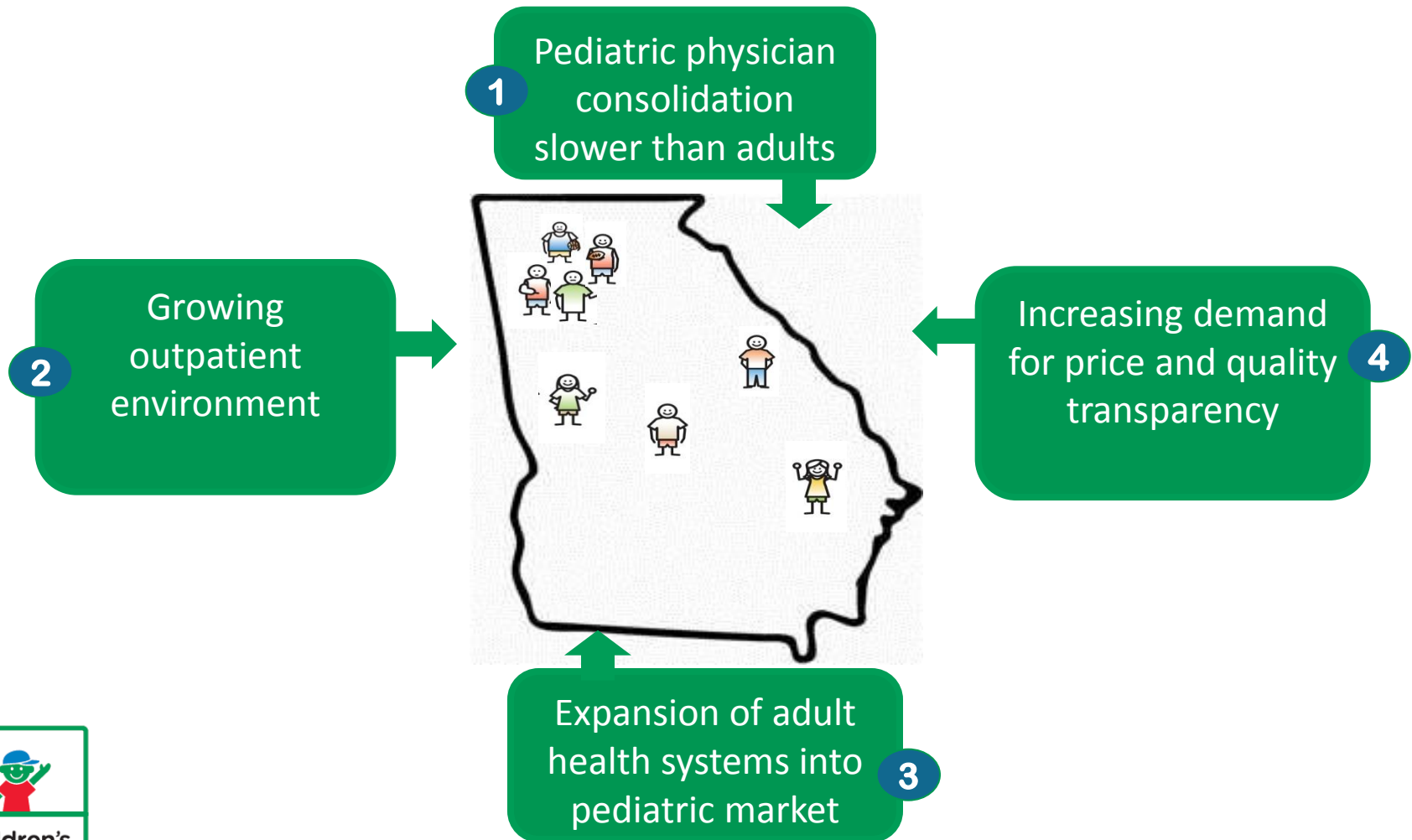
Clinically Integrating for Atlanta's Kids



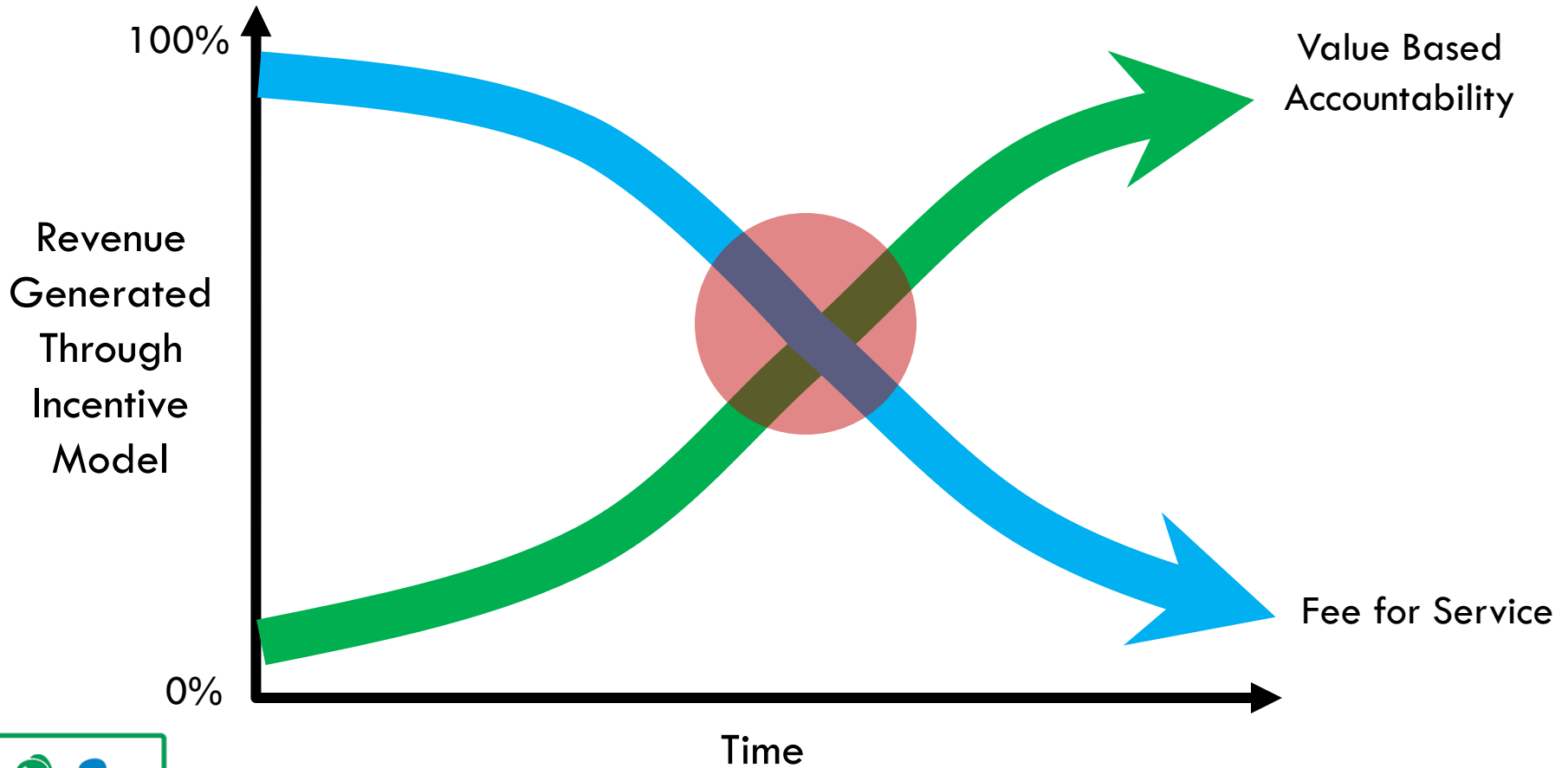
The Children's Care Network



How is the healthcare market changing?



The future will emphasize value over volume.



So, what can an independent practice do to keep up with these changes?

- Keep providing the high quality, unique care of specially trained pediatric providers.
- Build the infrastructure to keep track of and demonstrate your performance.
- Find new ways to maintain a sustainable business model.
 - Our community deserves the better outcomes pediatricians working alongside a pediatric hospital System can provide.



Across the country, clinical integration is being leveraged to deal with market changes.

Increasing financial opportunity and alignment



If we work together, we can *advance* pediatrics in our communities.

- The Children's Care Network is a **physician-led** nonprofit created to:
 - improve quality
 - increase efficiency
 - demonstrate performance and value
 - identify sustainable business models to protect the private practice model into the future



How would the network work?

Example: Asthma

Primary Care

- PCP manages more of the care
- PCP uses protocol before referring
- Utilization is monitored
- Easier access to subspecialists



Billy has asthma.

Specialists

- Knows PCP has followed protocols
- Better able to focus on more serious cases
- Reduced wait times for first-time patients

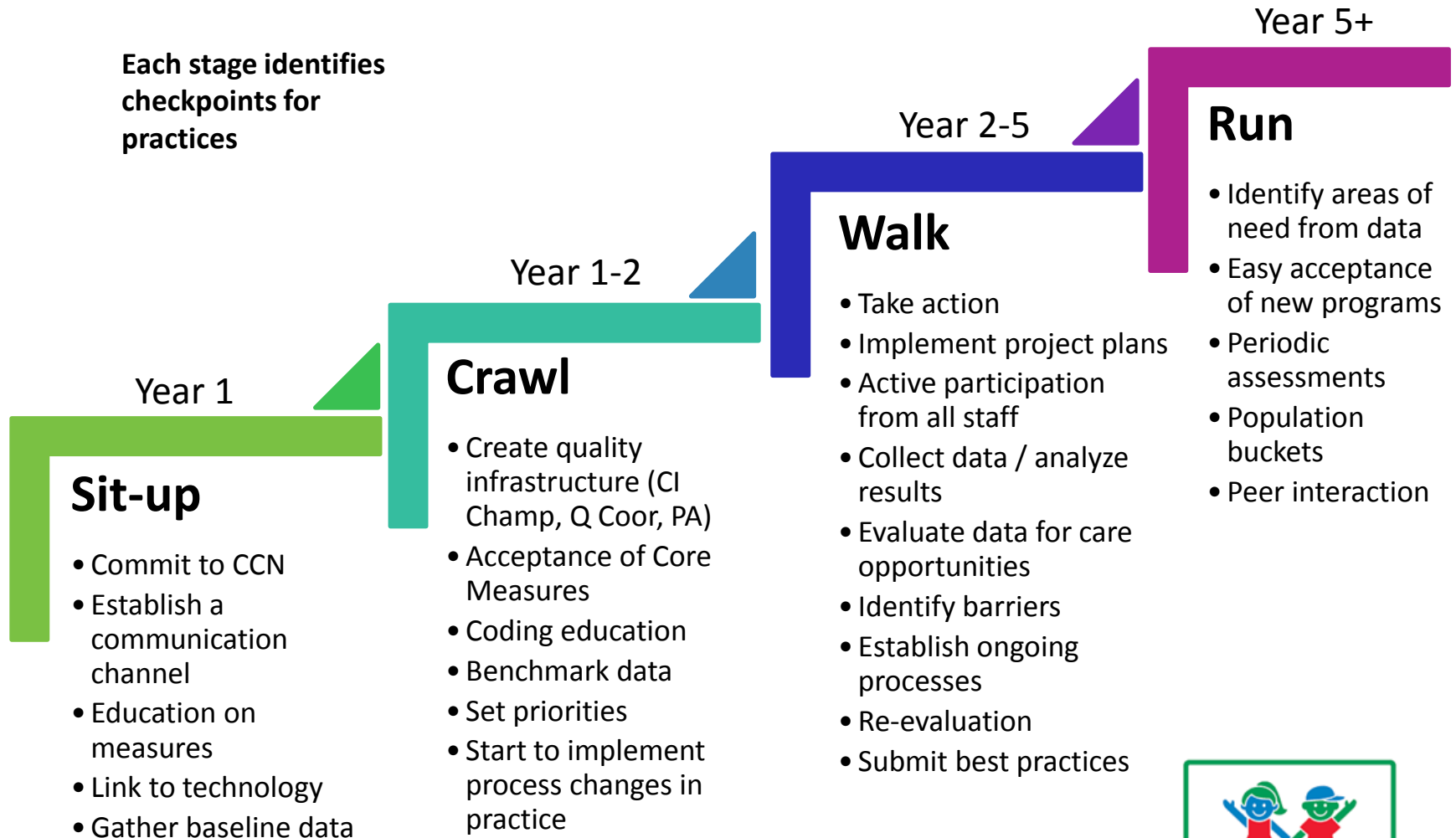


Schools

- Trained on care protocols
- Have dedicated rescue inhalers, spacing chambers, and individualized asthma plans



Developmental Milestones for a CCN Practice : “Baby Steps”



How does the contracting work?

All Members are required to participate in “Incentive-Only” contracts

Upon achievement of clinical integration and delegated authority for base contracting

Members have choice to exclude their practice from TCCN base contracts for certain payors

Two-year exclusion from those base contracts

If opt-out

if opt-in

Contract under CCN single-signature authority





Board of Directors

PRIVATE PRACTICE

EMPLOYED BY A SYSTEM (Children's or other organization)

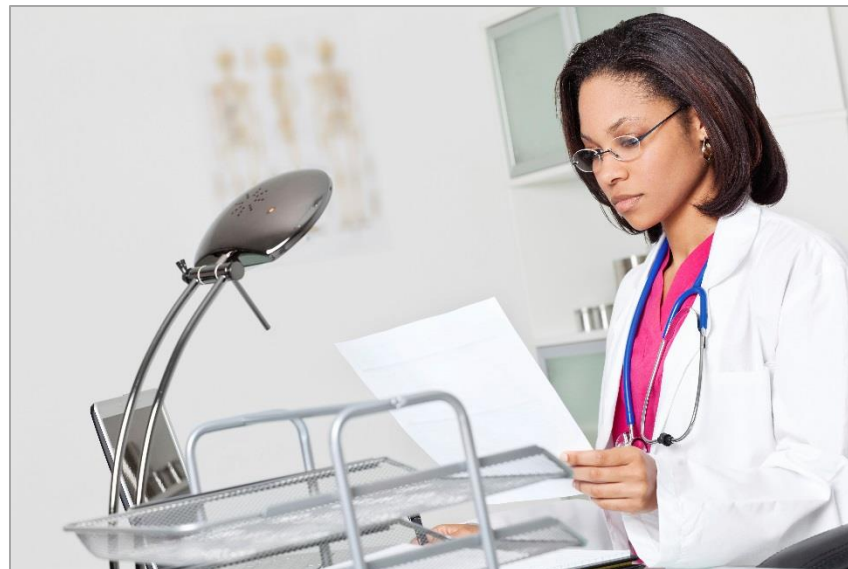
PEDIATRICIAN	<ol style="list-style-type: none"> 1. Roy Benaroch MD 2. Helena Bentley MD 3. Chip Harbaugh MD 4. Bob Licata MD 5. Rick Payne MD 6. Anu Sheth MD 7. Melinda Willingham MD 8. Bob Wiskind MD 	<ol style="list-style-type: none"> 1. Gary Frank MD 2. Vivian Lennon MD 3. Yasmin Tyler-Hill MD 4. Physician – TBD 	
	<p style="margin: 0;">SPECIALIST</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="padding: 5px;"> <p>Medical:</p> <ol style="list-style-type: none"> 1. Lonnie King MD 2. Billy Meyers MD </td> <td rowspan="2" style="padding: 5px;"> <ol style="list-style-type: none"> 1. Robert Campbell MD 2. Jim Fortenberry MD 3. Lucky Jain MD 4. Mark Wulkan MD </td> </tr> <tr> <td style="padding: 5px;"> <p>Surgical:</p> <ol style="list-style-type: none"> 3. Mike Busch MD 4. Hal Scherz MD </td> </tr> </table>	<p>Medical:</p> <ol style="list-style-type: none"> 1. Lonnie King MD 2. Billy Meyers MD 	<ol style="list-style-type: none"> 1. Robert Campbell MD 2. Jim Fortenberry MD 3. Lucky Jain MD 4. Mark Wulkan MD
<p>Medical:</p> <ol style="list-style-type: none"> 1. Lonnie King MD 2. Billy Meyers MD 	<ol style="list-style-type: none"> 1. Robert Campbell MD 2. Jim Fortenberry MD 3. Lucky Jain MD 4. Mark Wulkan MD 		
<p>Surgical:</p> <ol style="list-style-type: none"> 3. Mike Busch MD 4. Hal Scherz MD 			

Children's Representatives

1. Patrick Frias MD
2. Donna Hyland
3. Dan Salinas MD

What are the membership criteria?

- Pediatric primary care physicians and pediatric specialist physicians are eligible to join.
 - All members of a practice must join.
- Must be member of Children's Professional Staff.
- Must be board-certified or board-eligible.
- Must agree to submit practice data, but are not required to have an EMR system in their practice.



What do I have to do as a network member?

- Participate in quality initiatives.
- Adhere to performance goals.
- Share certain, defined patient data.
- Pay fair market value dues for services provided by the network.
 - \$275 per physician
- Participate in certain network contracts.



So, why should I join?

- Improve coordination across the care continuum.
- A free-standing pediatric system of care benefits everyone – especially our patients.
- Become an early-adopter of value-based care.
- Inaction doesn't mitigate risk from the changing healthcare market.
- Independent pediatricians govern the destiny of the network.
- We can share in the rewards of moving to a value-based system.



Where can I find more information?

Visit www.tccn-choa.org

Contact The Children's Care Network to request an in-person visit from a network representative or to receive an enrollment packet:
404-785-7935 or contact@tccn-choa.org.

