

OPENMINDS | ALERA HEALTH

From Good Intentions to Automatic Action

Value-Based Care Success in Pediatric and Behavioral Health Networks

PRESENTED BY

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Presented by



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Senior Practice and Network Transformation Specialist

- Licensed Clinical Social Worker (LCSW)
- 20+ years of behavioral health experience serving diverse and complex patient populations
- Oversees quality and operations for two Arizona-based ONEcare networks
- Leads practice transformation and value-based care initiatives
- Leverages data to improve HEDIS performance and quality outcomes



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Practice and Network Transformation Specialist II

- Licensed Practical Nurse (LPN) with a Master's in Public Health (MPH)
- 20+ years of clinical experience
- Certified Professional in Healthcare Quality (CPHQ)
- Translates complex healthcare data into actionable workflows
- Focuses on care delivery improvement and sustainable systems for a pediatric-focused ONEcare network in NC

Today's Learning Objectives

- Identify barriers to sustainable quality improvement.
- Apply strategies to embed quality into everyday workflows.
- Recognize how culture, collaboration, and population needs influence success.



Alera Health & the ONEcare Model

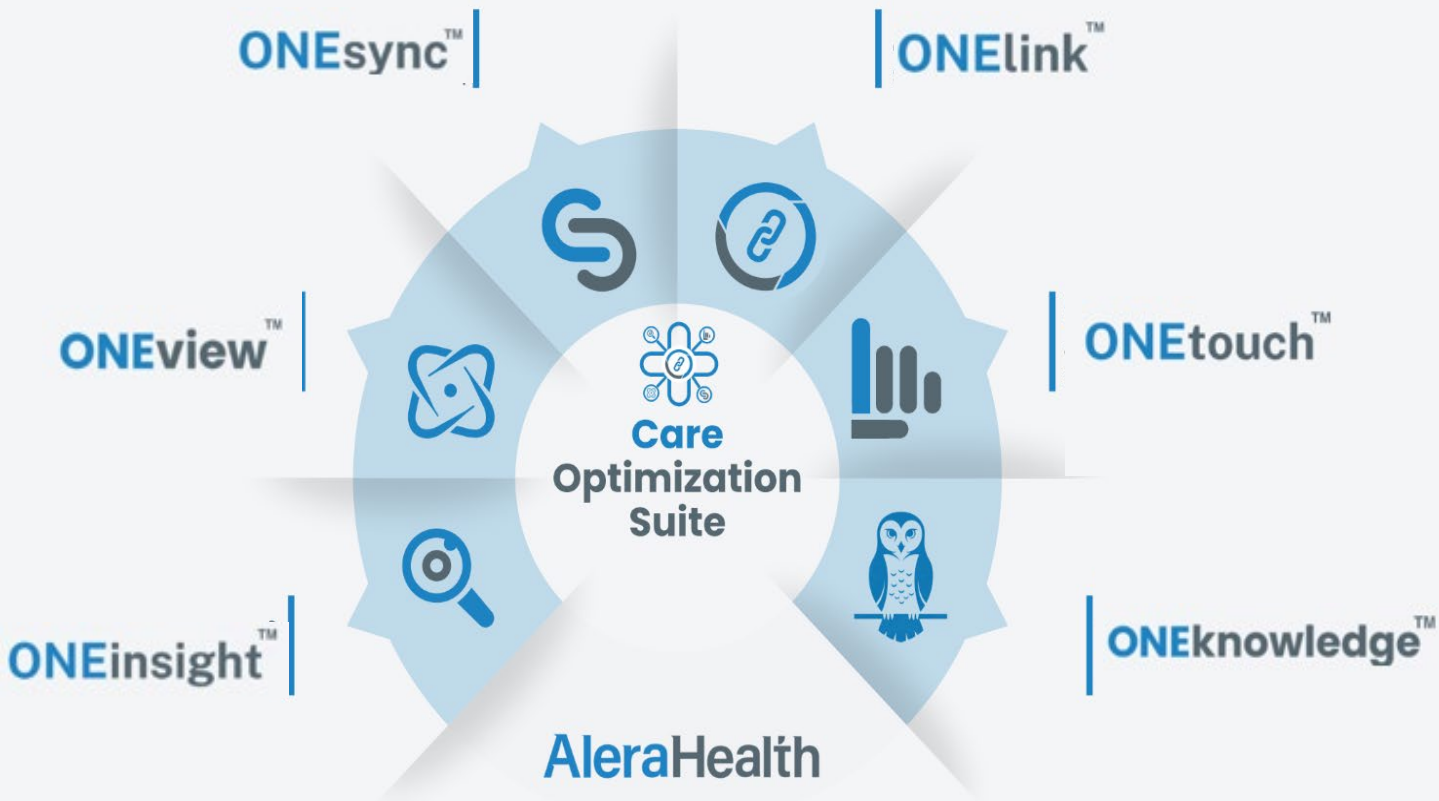
WHAT THE MODEL RESTS ON

01
Clinically integrated networks

02
Technology & analytics

03
Shared accountability

CARE OPTIMIZATION SUITE



Three ONEcare Networks, One Playbook



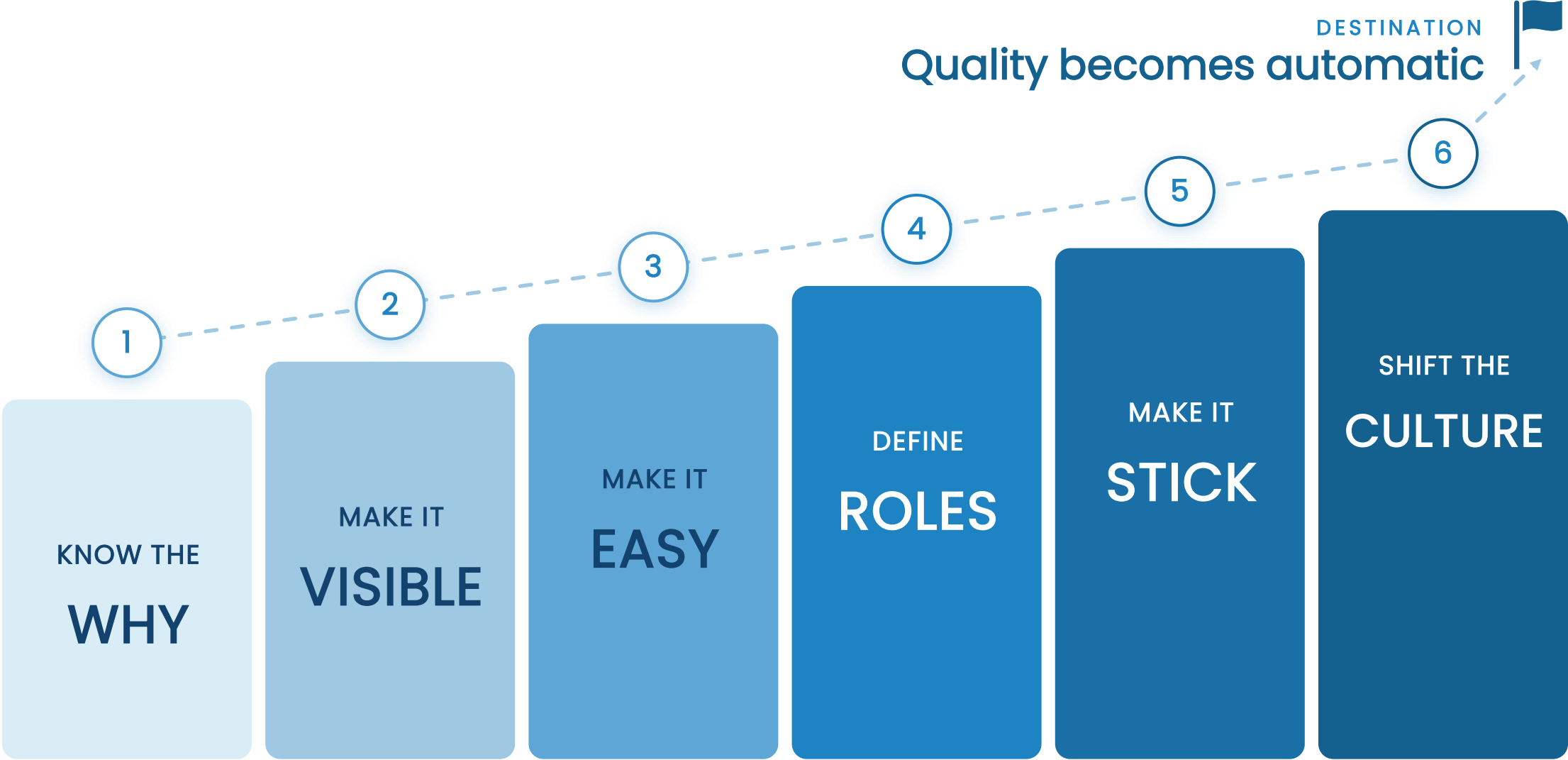
Different populations. Same challenge.
Care gaps close when the workflow makes the right action easy.

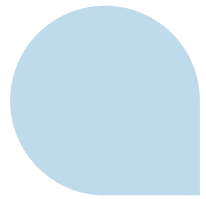
The Problem Isn't Usually Knowing What to Do



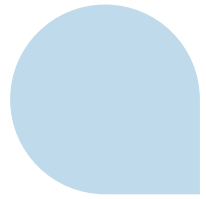
If quality depends on someone remembering one more thing during a busy clinic day, the system is too fragile.

A Framework for Making Quality Automatic





From Strategy to Routine



Alera
Health

Start With the “Why,” Not the Measure

DIFFERENT MOTIVATIONS



Quality becomes more meaningful when staff can connect the measure to a personal or clinical reason to care.

The Gap Between the Policy and the Work

Data tells you where to look.

Going to where the work actually happens tells you the “why.”



The documented workflow and the real workflow are often not the same.

Design the System, Not Just the Training

The question is not: did we train staff on this?
 The question is: what happens when no one is remembering?



Give Staff the Words, Not Just the Expectation

EXPECTATION

"Address the care gap."



OPERATIONAL SUPPORT

"Here's exactly **how** to bring it up."



The framing did the damage

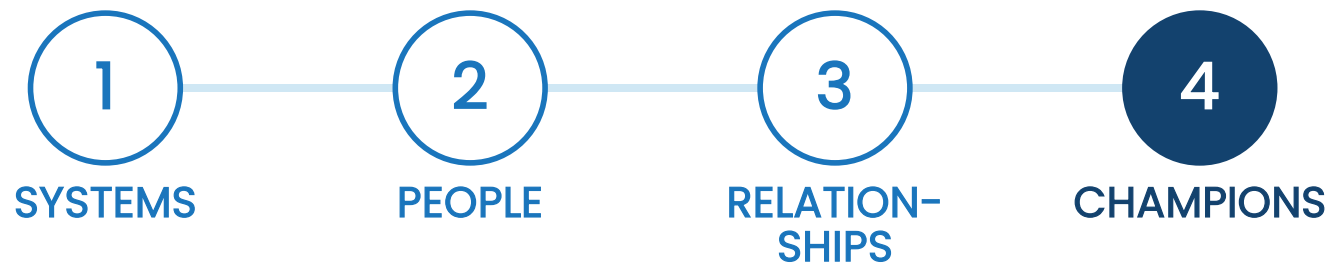


The words changed the atmosphere

Training improves knowledge. Standardized language changes behavior.

Culture Change Has a Social Component

Culture shifts when **people** move it, and the people who move it are often **NOT** who you'd expect.



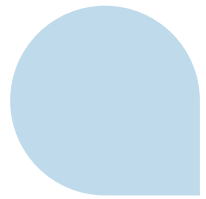
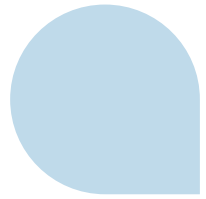
- Formal leaders
- Informal leaders
- Early adopters

From Competition to "Coopetition"

The tension is real. Use it.



Change is never overnight. It is gradual, relational — and it compounds.



What This Looks Like in a Pediatric Network

Same Principles. Different Population.

North Carolina Pediatric Primary Care Clinically Integrated Network

3

Participating
practices

~48,000

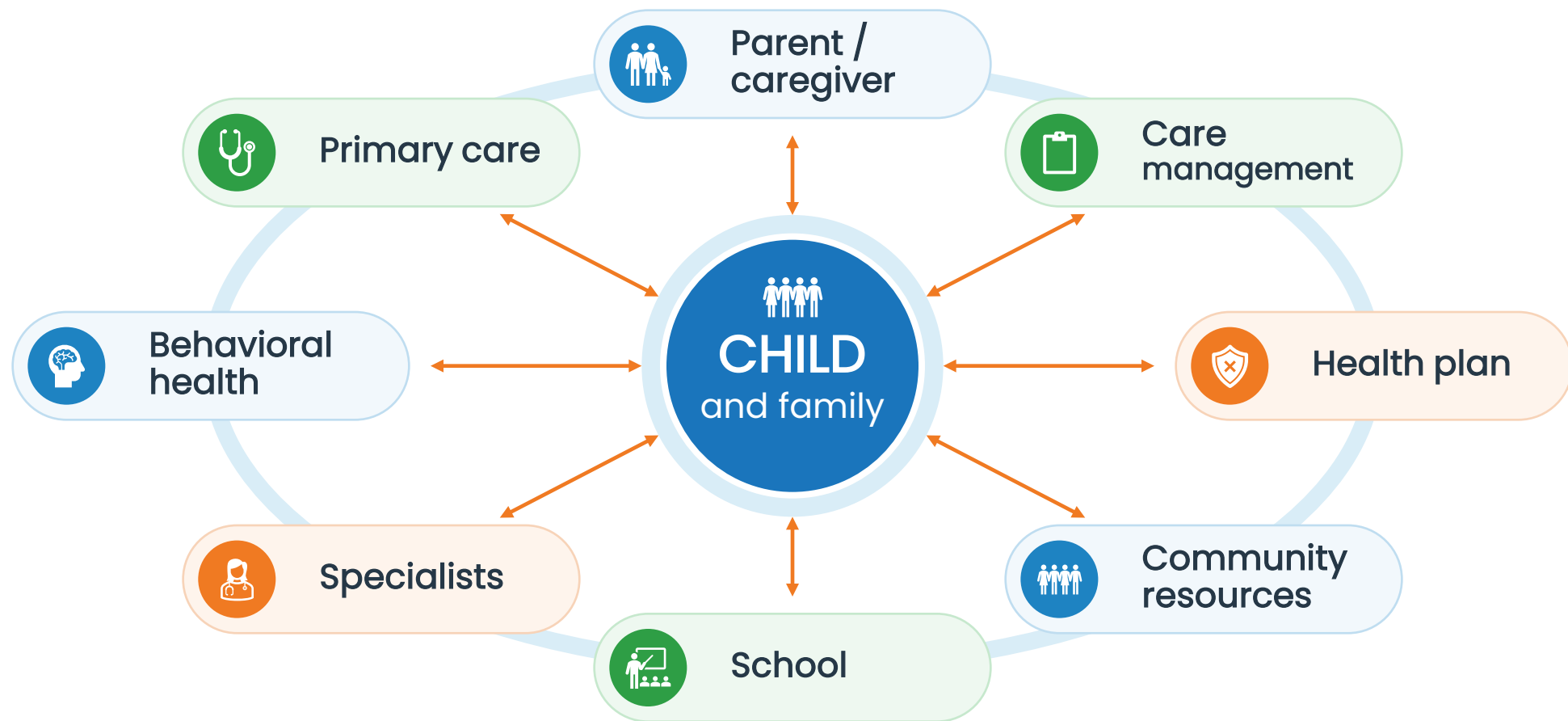
Attributed
children and
adolescents

20

Counties
served

The same quality-improvement principles apply, but the pediatric workflow has to account for who actually controls access.

In Pediatrics, the “Patient” Is Often a System



REALITIES THAT SHAPE EVERY GAP

access · transportation · caregiver availability · consent · competing needs · fragmented information

Turn Data Into Something the Front Line Can Act On



**The front line does not need more data —
they need to know who needs what, and what to do next.**

Pediatric Workflow Success



The strongest examples show how the workflow changed, not just what the final rate was.

What We've Learned From Pediatric Networks

01



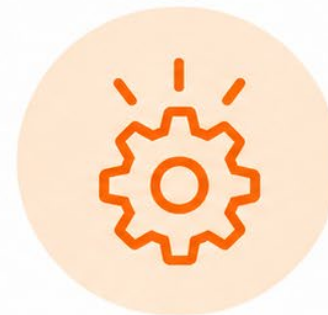
Reduce the distance
between **information**
and **action**.

02



Design around
families, not just
measure specifications.

03



Give practices
ownership without
leaving them alone.

The network adds value when it helps practices turn complex information into workable, family-centered action.

The Goal Is Not More Work



01



Observe the
real workflow

02



Replace
memory with a
system

03



Support the
champion

The goal is to make quality work require less thought , not more effort.

Takeaways: Three Things You Can Apply Next Week

01



Teach **the why**,
then show the data

02



Engineer
the **action**

03



Invest in
the **relationships**

Questions and Discussion



Questions &
Discussion



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