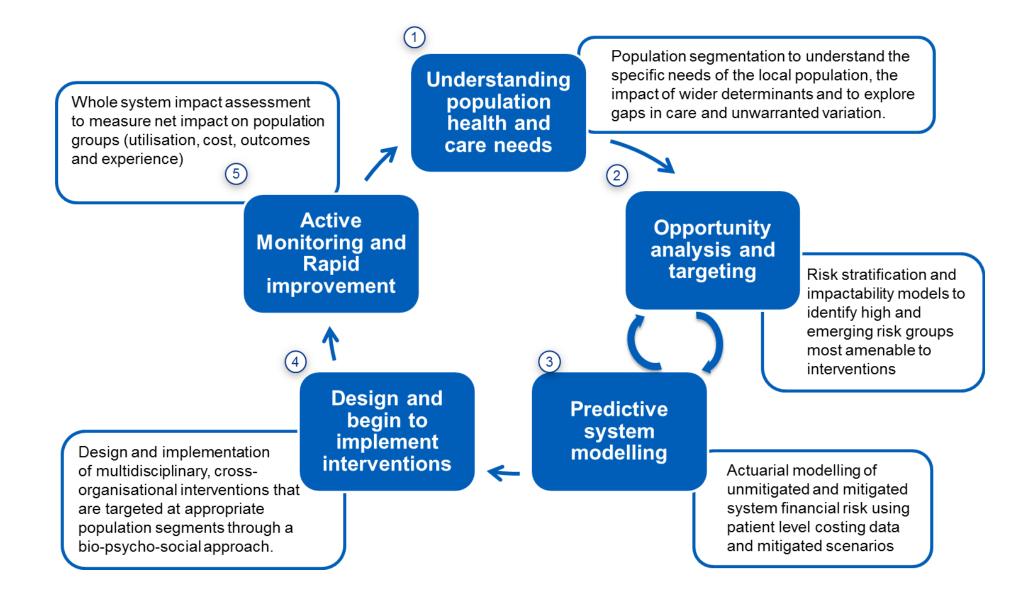
# The PHM Cycle



### Johns Hopkins Adjusted Clinical Groups ACG Segmentation

RAG	LOW				MODERATE					HIGH	
PNG	1 Non-User	2 Low Need Child	3 Low Need Adult	4 Multi- Morbidity, Low Complexity	5 Multi- Morbidity, Medium Complexity	6 Pregnancy, Low Complexity	7 Pregnancy, High Complexity	8  Dominant Psychiatric/ Behavioral Condition	9 Dominant Major Chronic Condition	Multi- Morbidity, High Complexity	11 Frailty

## Initiatives ... to bring nuance to our approach

LTC health checks earlier in the year

Targeted SMRs

Continuity

Holistic care

### The four 'I's of PHM

#### Infrastructure

The set of basic building blocks that are core for a system to manage the health and wellbeing of a population

# Interventions

Building on the learning from the analytics to make decisions; identifying effective, evidence-based interventions

### Intelligence

Understanding population need and using tools and techniques to align need with effective interventions

#### **Incentives**

Aligned payment and incentives (API) are key to supporting the PHM approach and sustaining local models

### **Key Considerations**

Bring your clinicians along on the journey – keep it locally led

Bring your community along on the journey

Evaluate

Iterate