

ValueEngine™: Evaluating Your Results

The following ValueEngine™ Evaluation Worksheet provides a cursory review process for evaluating your ValueEngine™ results. Refer to your ValueEngine™ Benchmarking Summary Worksheet and the 10 Practice Sections to answer the following questions:

■ **What is your organization’s Total Value Index (TVI)?** Your TVI is the aggregate score of your 10 Practice Sections. TVI scores are grouped within the following three categories and ranges:

- Green: If you scored between 80 and 100, your practices are **aligned** with value-based health management (VBHM) **best practices**.
- Yellow: If you scored between 60 and 79, your practices **meet** VBHM accepted practices.
- Red: If you scored below 60, your practices are **below** VBHM accepted practices.

Your TVI is your organization’s benchmarking value-marker. The higher your TVI, the closer your practices are aligned with VBHM. To improve your score, evaluate your answers to the questions below.

■ **What are your practice strengths?** Based on your assessment of the 10 Practice Sections (Foundation and Continuum), list those Practice Sections (e.g., Organizational Engagement) that strengthen the effectiveness and total value of your current health management initiatives.

■ **What are your practice weaknesses?** Based on your assessment of the 10 Practice Sections (Foundation and Continuum), list those Practice Sections that weaken the effectiveness and total value of your current health management initiatives.

■ **What are your practice gaps?** Based on your assessment of the 10 Practice Sections (Foundation and Continuum), identify practice “gaps” that may interfere with the integration of your services across the healthcare continuum.

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■ What Practice Sections/Practices will you address first?

–Can you define the problem(s)?

–What will you change?

–What are the probable causes of the problem?

–What are potential solutions?

■ What information/data do you need to facilitate the problem-solving process?

■ Are there other internal functions (e.g., benefits, wellness) and third-party stakeholders (e.g., health plan, pharmacy benefit managers, disease management) that need to be involved in the problem-solving process?

■ What is your timeline?
