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### **Buyer Review Transcript**

Product Reviewed	Lightbeam
Reviewer Tech Stack	
Other Products Considered	Innovaccer, ThoroughCare
Date	August 24, 2023
Expert Role	Head of Population Health
Organization Type	Value-Based Care Enablement Services
Payment Model	Value-Based Care

So today, we're chatting about Lightbeam and how it's used at your company. Before we jump into that, could you give a brief overview of the company and your role there?

We are a value-based care enablement services company. The company's main focus is on risk contracting, analytics, and care management for at-risk lives. I serve as the head of population health.

#### How long have you been using Lightbeam?

About two years.

#### What problems does Lightbeam solve for you?

It serves as our central analytics management hub for our commercial ACO lives and our Medicare Advantage lives under the same payor. This means that, through Lightbeam, we are able to access eligibility files and keep track of the at-risk lives that are attributed to our practice. We can also monitor financial benchmarks on a quarterly basis for these attributed lives. Additionally, we have access to quality reporting, allowing us to track members assigned to various quality measures and see if they are compliant. In essence, it's a central hub for managing all the lives we're responsible for.

Is it purely analytics, or are there additional workflow elements?

Yeah, it's a comprehensive care management tool for us. It not only shows us who we need to track, but it also identifies care gaps. And most importantly, it helps us take advantage of opportunities for risk coding. There's a lot of measure-specific information on how we're performing and the strategies we should be using.

#### Can you talk a little bit about what led you to look into purchasing Lightbeam?

Lightbeam was closely integrated with the payor we were partnering with, which made it easier for us to launch quickly. Instead of contracting with a different population health product like Innovaccer, we decided to go with Lightbeam. Innovaccer had not worked with our payor in that specific area before, so we felt that going with Lightbeam was a more straightforward choice for us.

### Aside from that, were there any other key requirements that you were evaluating them and other competitors against?

The main thing we were looking for in a platform was the ability to access raw data. We wanted to be able to audit what we were seeing being reported in the tool. It was important for us to track the trends in financial benchmarks and risk scores accurately, without any miscalculations, so having direct and queryable access to the data was crucial for us.

#### Did you look deeply at any other vendors?

We looked closely at ThoroughCare, and we found that it focused heavily on documenting care coordination steps in relation to quality gap closure. However, it didn't provide the complete picture that we were looking for. We weren't confident that either ThoroughCare or Innovaccer could give us the financial forecasting data that we considered crucial. Lightbeam, on the other hand, immediately showed us the number of member lives and their financials, which gave us a sense of comfort. Financial calculations in these commercial arrangements can be complicated, so we didn't feel like we had a large margin of error. The fact that Lightbeam managed this and had the sponsorship of the payor was a key factor for us.

#### Putting aside their pre-existing relationship with the payor you were working with, did Lightbeam still come out on top, relative to Innovaccer and ThoroughCare, based on your evaluation?

Despite the criticism, Lightbeam ultimately stood out for us because it provided the details that ThoroughCare was lacking. Additionally, it offered a lightweight element that Innovaccer did not have. It was a Goldilocks situation for us – not perfect, but not overwhelmingly complex either. Innovaccer is undeniably impressive in its population health analytics and insights, but it felt overly complicated. This was especially important for us, as we were implementing Lightbeam in a small practice where the staff had limited technological skills.

One example of how I used Lightbeam was in support of a multi-stakeholder group meeting where we reviewed weekly reports and monthly data true-ups. Our RCM manager, although highly capable in her role, struggled with complex technology. This is where Lightbeam proved critical to our renewal decision. If she could easily grasp it, it was a significant factor for me. Innovaccer, on the other hand, felt like it was over-engineered. When you're already dealing with a busy practice and overworked staff, introducing yet another tool that requires extensive learning is simply not feasible. That's why I consistently advocated for Lightbeam. It provides the necessary data, presents information in an accessible and understandable way for our users, and gives our practice a direct line to what we're looking at, so they can feel involved.

#### Do you have a sense of how the various options stacked up from a pricing perspective?

You know, I don't actually know. Even though I was part of the purchasing team and approved Lightbeam as the right tool, I wasn't heavily involved in the contracting logistics. From what I understood, it was a "take it or leave it" product, and any additional customization would come at a cost. It didn't feel like there were different packages or options available. If we wanted something different, we would have to negotiate a separate contract to build it.

Innovaccer felt more multi-tiered and customizable. It had depth, and we could tailor it to our specific needs. Lightbeam, on the other hand, felt one-dimensional. Once you learned how to use Lightbeam, that was it. Innovaccer was comparable to the difference of being a Mac user as opposed to a PC user. With Mac, you know what you're getting, like with my iPhone. My Android friends talk about how they can customize and do so much more, which I'm not really interested in. That's how I would compare our experience with the two tools. Innovaccer was the definitive tool, but it looked complicated and challenging. It also felt very commercialized, like I was being sold on something. Lightbeam, on the other hand, just said here's our tool, and we think it will solve 80% of your issues.

#### Do you know how the cost of Innovaccer and ThoroughCare compare to Lightbeam?

I'm pretty sure Innovaccer is orders of magnitude more expensive than Lightbeam. ThoroughCare had an interesting pricing model. They offered a couple of tiers, but with us using the plugin, the price was quite similar to Lightbeam.

#### How would you characterize the relative strengths of Lightbeam?

The main strength of Lightbeam was its simplicity, which was really important to me. When it comes to population health tools, there's often a blurry line between financials, operations, and reporting. I thought Lightbeam did a nice job organizing this complex subject into simple areas and blocks, which is not an easy task. They were able to minimize the dimensionality of the product, making it easy to understand and use.

Whenever we wanted to over-engineer a solution or brought up gaps in the tool, Lightbeam helped us refocus on what was truly important – understanding the financials, base population, and quality gaps. It was a valuable tool for our organization to come back to. Whenever we asked for certain details, they helped us assess whether they were truly needed, or if we already had the key data that was required, such as A1c scores and lab results with respect to diabetes compliance.

Simplifying the conversation made it much easier, while having too many elements in the product allowed for everyone to create their own narratives. As someone driving care coordination efforts and analytics, I constantly dealt with incorrect data and people not following guidelines, so the simplicity made my job easier.

It was really easy for me to retrieve information in Lightbeam. I didn't even have to rely on my own reports, because I could simply go back to Lightbeam and check if we were all on the same page. For instance, we could go through it line by line and see the last A1c result and the actions we took. We can connect it directly to our report. Then we can show stakeholders what the payor will actually see, identify any differences between that and their numbers, and conduct an audit. If it turned out that the Lightbeam data was accurate, we would have to go back to the stakeholders and ask why they were reporting it incorrectly. On the other hand, if the stakeholders were correct, we could go back to Lightbeam and ask why it wasn't reflected in their data, and perhaps their data hadn't been updated yet. These types of audits took a lot of time, but we had good back-and-forth communication with Lightbeam, which might not be available with a lot of big companies.

#### How about their weaknesses?

Lightbeam's strength is its visibility into what they are doing. This was also its weakness. We often discovered mistakes, which they acknowledged, and which would be corrected in the next round. So the real-time applicability of Lightbeam was its biggest weakness. I was able to build real-time tools on my end and use Lightbeam as a reference point rather than relying on it day to day. However, this created a weakness on my end, as I had to duplicate work. For example, I had a Lightbeam report for gap compliance and my own report for gap compliance, and they would never align. I always had to make sure that I was one step ahead.

From a technological standpoint, this was a glaring weakness in today's age. It didn't feel like they could provide us with near real-time data, even though they had direct access to our claims data. The only difference was the EHR and HIE data, but they had HIE access, and we had signed an agreement to give them daily batch files of our EHR data. So, realistically, we had the same set of data, but they chose to go at a slower pace. This was a major weakness, especially when compared to new startups that are API-first and talk about their ability to handle large scale data. It seems to me that a well-capitalized, well-managed company should be able to process data faster.

### Were you buying a product or a product-plus-services from them? In other words, what caused the delta - was it a technology or services problem?

I saw it as we were buying a product, a tool. But the product was not very technologically advanced, which meant that it required a lot of manual servicing on their end. Consequently, we often ran into problems where the files were not loaded correctly, resulting in their team having to go in and check them. I'm not sure how this kept happening and why it took two weeks to get the data loaded. It didn't make sense to me as a user. From an engineering perspective, I can understand the argument that this could help to improve data validity, but we were still regularly dealing with error rates ranging from one to five percent. Whether the issue lies with the product or the team, I can't say for sure. In this day and age though, when we are relying on the data and analytics provided by this product to impact our shared savings, it's frustrating to constantly worry about the accuracy of the numbers and if we are targeting the right people during our weekly calls. I didn't enjoy waiting for Lightbeam to inform us that they messed up the file load and needed to refresh it. It meant potentially wasting two weeks' worth of work.

#### Are there other things about Lightbeam that you think can be improved?

First, it's very one-dimensional. While it consolidates multiple dimensions, we couldn't customize how we used it. It rendered data and information for us but didn't make it interactive. I ended up redoing the same tasks with their data over and over again. I believe that, if I have to do something more than a few times, I should be able to build a package or product to automate it. This just wasn't possible with their reporting tool.

It would have been convenient to build custom reports that I could then snapshot or email out. However, I always had to download the data and then send it out because they wouldn't give me API access to their query tool. I ended up directly querying the database, which was helpful (and not a lot of vendors will let you do that). I would then use that capability to pull the data out and create my own automated reports. Unfortunately, they often changed things with their data structure without communicating these updates. For example, status types could change, causing my hard-coded queries to no longer work.

So overall, for being such a big company, I felt like they were really dropping the ball.

#### How did you find the sales and account management process?

I really enjoyed the process because it wasn't overwhelming. It didn't feel aggressive or pushy. When I talked to Innovaccer, I had this feeling that they would come knocking on my door, trying to convince me to sign up. But I knew they were too much for our company. I would have said yes if it was any other company. But with Lightbeam, it was more like, "Sure, if you want us, that's cool. No pressure." It had a laissez-faire feeling.

Honestly, one thing I should have mentioned earlier is that the challenging part about being a startup in the value-based/enablement services space is that everyone claims to be doing value-based care and enablement services with a tech solution. So it's easy to get lost in the crowd. It's understandable and reasonable that they scoff when I reach out to them and ask why we can't get this or that. They don't even know who we are. We're just a company that started a year ago with a small seed investment. So other companies didn't always take us seriously as a customer. But Lightbeam was willing to engage with us. That being said, from an account management perspective, I never felt like we were at the top of the food chain.

#### How was the onboarding and setup process?

I found the implementation process to be incredibly easy. It was so seamless, because our account was already aligned with the payor we were connecting with. We simply signed to confirm that we were an account, and the payor confirmed it, and Lightbeam acknowledged and verified our eligibility files. From that point on, they took care of everything.

#### What features of Lightbeam do you use?

We rely on the financial part of their product as our main source for reporting and updates. We did continuous monitoring of our financial benchmarks, which are updated on a quarterly basis. This provides us with valuable trend data. The person responsible for reporting financial data also uses the same financial tool to track risk scoring. This allows them to understand how the risk scores have changed between financial benchmark updates, which helps with projections.

We also used Lightbeam for identifying gaps and verifying closures. The care management teams use this tool to confirm and verify that the gaps they had closed are indeed recognized in the data.

We also extract data for more summary-level analysis.

### Do you use it for gap identification and the actual closing of those gaps, or was that then fed into your EHR or some separate tool to manage?

Within the quality module, we had the option to select a contract, commercial or MA, where we could view a reporting period. Once the reporting period was displayed, we could choose a measure, let's say A1c control. It listed all the members eligible for that measure, along with a column indicating their compliance status. Unfortunately, we couldn't mark them as compliant within that module. Instead, we were able to transmit supplemental files and flag the payor to indicate that we had closed the gap. This information would then be updated in the Lightbeam portal. We then had to check whether the update actually happened within the Lightbeam portal as expected.

#### Was the platform generally stable and usable?

Yeah. So there were instances where the system would go down unexpectedly, resulting in unscheduled downtime, but it was very infrequent. The worst downtimes usually happened when a file failed to load correctly, requiring us to come back in two weeks to reload it.

#### Did they expose APIs that you could build against?

They never actually did for us. We toyed around with the idea quite a bit. I don't think it was actually attainable, so we just stuck to doing the FTP transfers.

### What other solutions did you guys integrate Lightbeam with, and how did you find the process?

We dumped all the FTP output into a data lake and stored it there. Technically, we placed it in some buckets, and from there, we loaded it into a data warehouse using Snowflake. Finally, we accessed that data through Tableau. Lightbeam was never integrated into our EHR.

#### How did you get data into Lightbeam?

We relied on the payors to upload the majority of the data. We were sending the data to the payors, and whenever we noticed discrepancies or needed to upload data to Lightbeam, we would simply share that information directly with them. There wasn't any automated or scheduled process for this.

#### How was the support from Lightbeam?

I felt like the support was pretty average overall. There wasn't anything outstanding or terrible about it. It seemed like they were only able to do a limited amount for us. Once we understood that, we were able to manage our expectations accordingly.

# Do you think you made the right choice with Lightbeam? And if you were making a decision about one of these products today, would you go with Lightbeam, or would you go with someone else?

If I could go back in time, knowing what I know now, I would still choose Lightbeam. I think the best tool really depends on the organization's specific needs. Sometimes people tend to over-engineer their tool selection, and I think that's a big mistake. Starting with something simple and lightweight definitely has its advantages.

#### Any other general advice for buyers of a product like this?

I think a small product can have a lot of potential. While there are numerous flashy and appealing products available in the market that may offer great features, in the realm of value-based care, some of the largest players are still resorting to printing patient lists and taping them to doors. I feel that, to become a successful company, you don't really need a high level of technology. Ultimately, you'll find yourself spending more time in the in-between space. It's important to minimize the time spent on managing, maintaining, and learning tools. If the tools seamlessly integrate into your daily routine, that's all the better.