

Northeast Ohio Orthopedics Network Brief

Rate variation, public quality, access, affiliations, and market need - with the assumptions and sources behind each conclusion.

MARKET Cleveland-Elyria, OH	SERVICE LINE Orthopedics	STATUS Illustrative sample
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Purpose and claims boundary

This sample demonstrates how Healthdex structures a network decision. Facility names and analytical values are illustrative or synthetic. This is not a validated market estimate, contracting recommendation, customer result, or clinical conclusion. Negotiated-rate observations are not final allowed amounts or member liability; area-level indicators are not individual risk.

THE DECISION	THE DELIVERABLE
Investigate an illustrative orthopedic access gap and identify the evidence required to evaluate facility and clinician candidates.	A reproducible brief containing the governed cohort, evidence comparison, rationale, assumptions, limitations, unresolved questions, and exact source releases.

Start with the governing question

Can the plan improve illustrative orthopedic access in western Cuyahoga County while maintaining transparent price-comparability and public-quality requirements?

Assumption	Illustrative value	Review requirement
Travel standard	45 minutes	Confirm population and regulatory context
Procedure scope	Orthopedic inpatient cohort	Validate code and setting policy
Comparison benchmark	Market median observations	Inspect payer, plan, code, and billing setting
Missing evidence	Neutral / unresolved	Do not silently impute

Comparable before ranked

Candidates enter the comparison only after identifier, geography, service capability, and evidence-availability rules are applied. Excluded records remain visible with a reason.

Illustrative candidate	Rate evidence	Public quality	Access evidence	Status
Summit Orthopedic Institute	Available	Available	Review	Included
Western Reserve Medical Center	Available	Available	Available	Included
Lakeview University Hospital	Partial	Available	Available	Included with limitation

Keep signals separate and inspectable

RATE OBSERVATIONS Comparable plan, code, setting, description, and inclusion rules remain visible.	PUBLIC QUALITY Measure source, period, denominator, and scope travel with the value.	ACCESS Travel thresholds and geography are scenario inputs, not hidden constants.
CAPACITY Approved aggregate evidence is used only under an accepted scoring policy.	MARKET NEED Area-level signals describe geography and are not individual risk.	AFFILIATIONS Relationships retain source and confidence; they do not prove employment or participation.

Illustrative recommendation record

Advance two candidate facilities for structured review; do not make a contracting recommendation until partial rate evidence, the western access calculation, facility capacity, and relationship evidence have been reviewed by the accountable decision owners.

Why this is defensible

The recommendation records what was compared, what was excluded, which evidence remains incomplete, and which source releases and policies produced the result. A later reviewer can reproduce the analytical state rather than relying on a narrative summary alone.

What the evidence does not establish

Rate interpretation

Published negotiated-rate observations may not represent final allowed amounts, utilization mix, total episode cost, or member liability.

Clinical interpretation

Public facility measures do not establish procedure-specific surgeon quality unless the underlying measure explicitly supports that conclusion.

Relationship interpretation

An observed affiliation does not by itself establish employment, privileges, referral behavior, or payer-network participation.

Market interpretation

Area-level need and supply indicators do not measure individual risk or prove causal demand.

Operational validation

The accountable team must verify policy thresholds, current source releases, capacity evidence, and market context before acting.

Reviewer checklist

Check	Status
Decision owner and intended use recorded	Required
Cohort policy and exclusions reviewed	Required
Rate-comparability diagnostics inspected	Required
Relationships interpreted within source limits	Required
Missing evidence and alternatives documented	Required
Exact source releases pinned to export	Required

Source classes and handling

Source class	Use in workflow	Boundary
CMS provider and quality data	Provider identity and public measures	Release, measure period, and scope retained
Hospital machine-readable files	Negotiated-rate observations	Parsing, comparability, and publication status visible
HCRIS and public utilization	Facility context	Reporting period and aggregation retained
Geography and area-level indicators	Access and market context	Not individual risk or causal evidence
Approved aggregate client evidence	Capacity and utilization context	No PHI; validation, suppression, and approval required

About this sample

Prepared as an illustrative public proof asset for Healthdex. It demonstrates product structure and claims discipline; it does not disclose customer information or assert a validated Northeast Ohio market conclusion.

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healthdex.com/sample-market

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