

# Making Progress on Value-Based Payment



## Māhie 2020

ADVANCING THE HEALTH OF HAWAII

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An Independent Licensee of the Blue Cross and Blue Shield Association

# Māhie 2020: A Community Health System

*HMSA will serve as a catalyst to create a sustainable community system that advances the health and well-being goals of consumers, providers, employers, communities, and government.*



# A healthcare system that puts the patient at the center



**To ensure a sustainable, patient-centered healthcare system, we must partner with key stakeholders to:**

- Build an integrated network and care delivery system
- **Align incentives**
- Engage consumers in their health and well-being

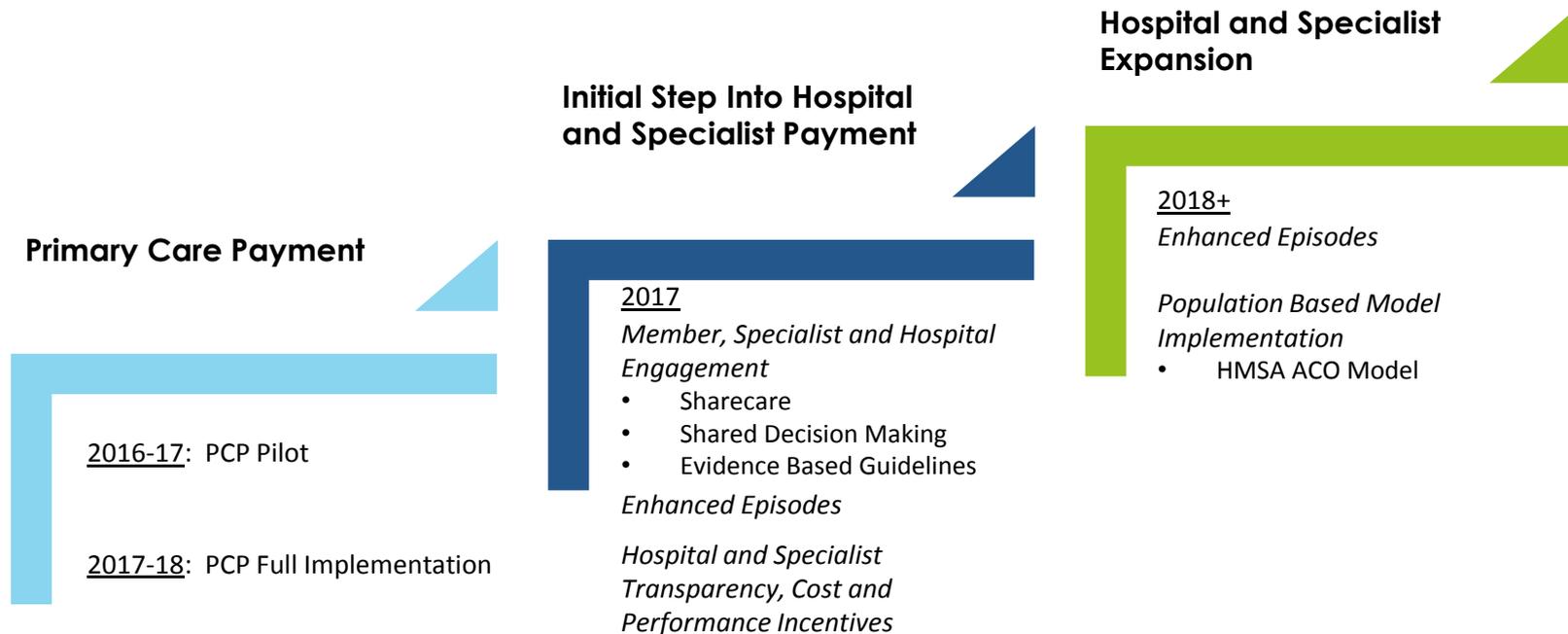
# What will this mean for patients?

- Providers proactively reach out to members about preventive care, disease management, and well-being – no longer just focused on caring for the sick
- Members benefit from **improved access to primary care & more coordinated care** across the system
  - More flexibility in communicating with providers – calls, emails, texts, online care
- Members engage in shared decision making with providers on key health care decisions and are more engaged in their health and well-being
  - All patients asked for feedback on the care received

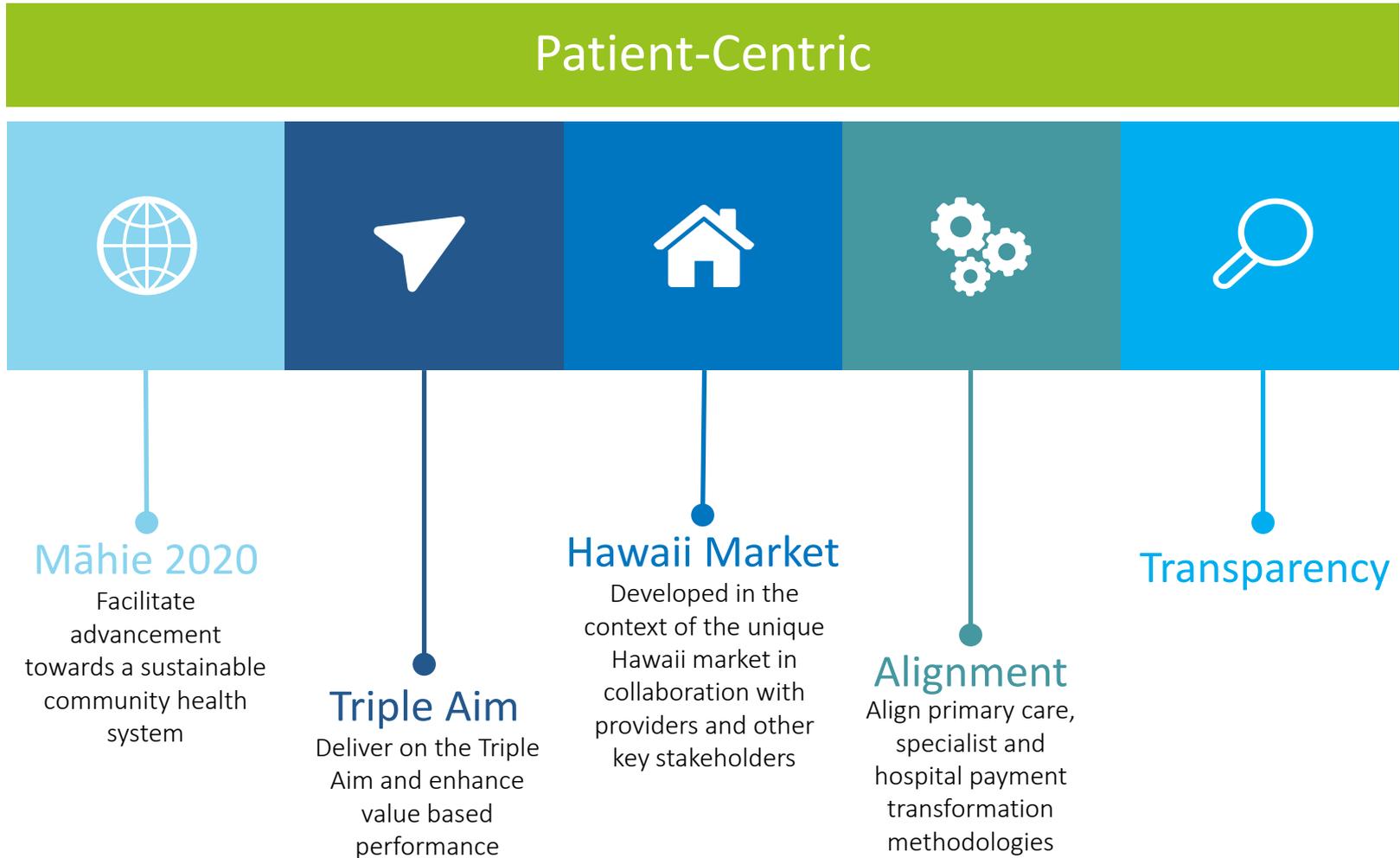
# Making Progress on Value-based Payments

A key opportunity for HMSA to leverage our role as a payer to address currently misaligned incentives for providers – PCPs, specialists, and hospitals.

*How can we use payment models to help drive improvements in triple aim, member engagement and community health?*



# Payment Transformation Principles



# A new PCP payment model

## Model Summary

- Moves Away From Fee for Service
- Providers paid a per-member-per-month payment for each attributed HMSA member
  - Rates are calculated separately for each line of business
  - Immunizations and facility-based care carved out
- Additional earning opportunities based on a streamlined set of quality measures
- Bonus potential if, at a Physician Organization level, providers are able to manage the health care cost trend of their patients
- Starting in 2018, providers' PMPM rates will be increasingly based on:
  - Panel clinical risk, age, sex
  - Quality performance
  - TCOC performance

# Primary Care Pilot Evaluation

## Member Engagement, Access and Satisfaction

- Patient satisfaction and engagement remains high
- Patient-reported access to care is good

## Quality of Care

- Payment Transformation Providers continue to provide high quality of care
- Improvements in a number of measures

## Cost & Utilization

- No significant changes for PCP payments
- Payment Transformation POs were below expected Total Cost of Care

# Improvements in access to primary care

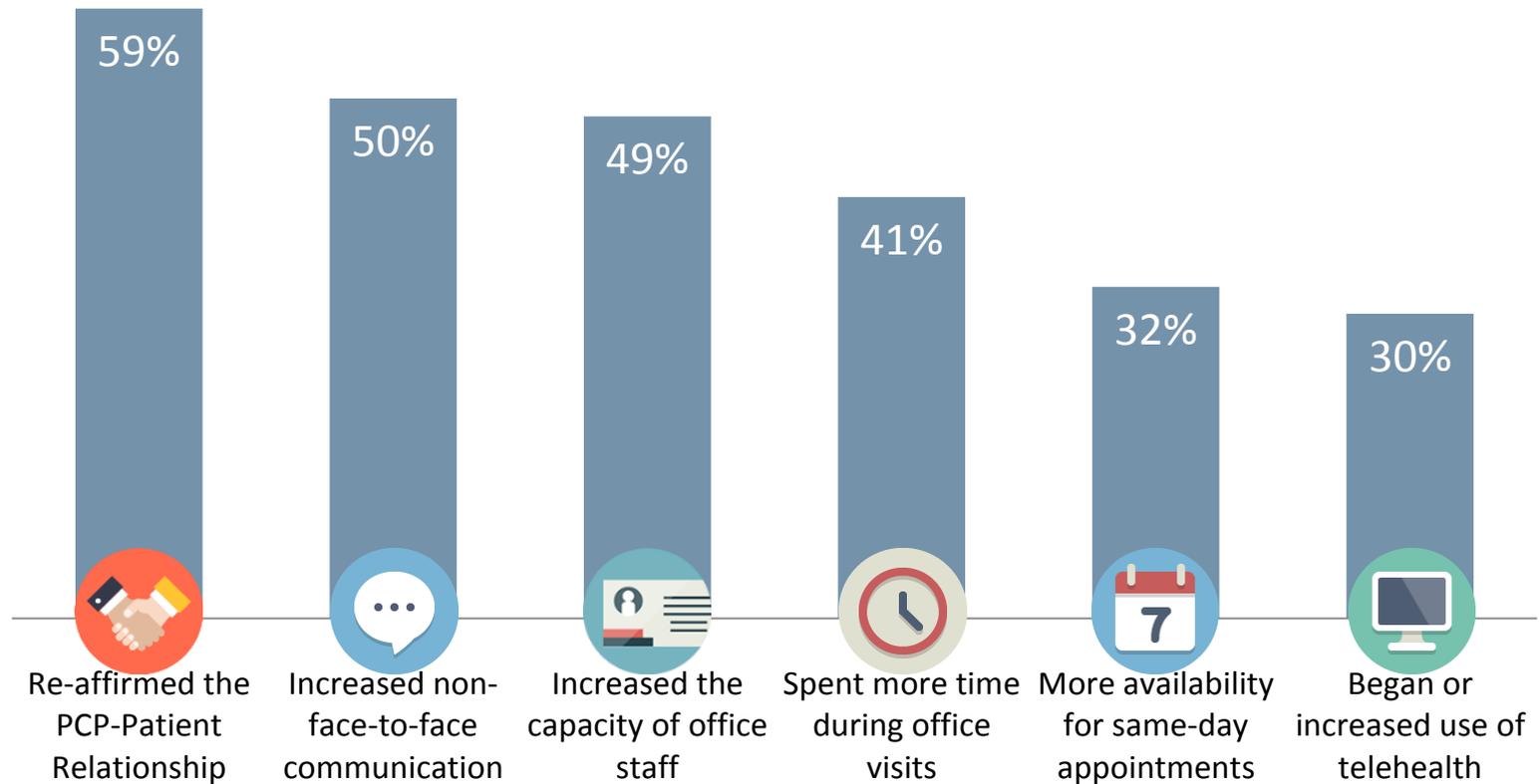
## Quarterly patient survey question:

*In the past three months, how often was it easy to get the care, tests, or treatment that you needed?*

PO Name	Q2	Q3	Q4
PO 1	82.2%	99.8%	96.4%
PO 2	81.1%	99.4%	96.1%
PO 3	82.8%	98.7%	96.3%
PO 4	85.0%	98.5%	95.7%
<b>Pilot PO average</b>	<b>82%</b>	<b>99%</b>	<b>96%</b>

# Strengthening the patient-provider relationship

## Changes in how providers engage patients



# Patient access and engagement remain strong



**96%** of members agree it was **easy to get the care, tests, or treatment** needed



**86%** of members were able to meet with his/her PCP **within 24 hours** when care was needed right away



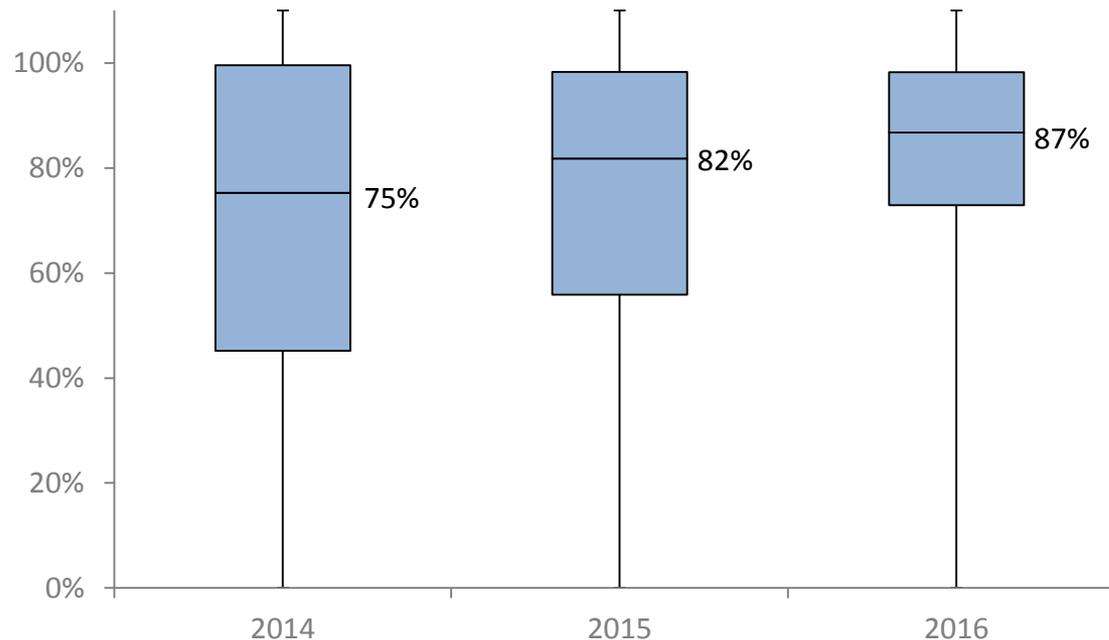
**86%** of members felt his/her **PCP was informed and up-to-date** about care received from other Specialists



**98%** of members agree **taking an active role** is the most important part in improving his/her own health

# Improvements in quality of care

**PT Providers Quality Scores Over Time**



- Median performance continues to rise
- Variance between high and low quality providers shrinking

# Provider satisfaction and patient engagement



“Having a flexible payment model allows us to reach out to patients in different ways. It could mean seeing them between office visits, perhaps home visits, and other ways that we wouldn’t be compensated for in the past.

This model enhances the flexibility for doctors to meet their patient’s individual needs.

I think the special thing about this payment model is the opportunity to have a more personalized relationship with patients.”

- Kevin Kurohara, M.D.  
(Hawaii Island)

# Next steps – the 100k foot view

- Continue to refine and advance the PCP payment model
- Advance bundled payment pilots that just kicked off at the end of 2017 (cardiology, oncology, orthopedic surgery)
- Partner with health systems and facilities to plan for larger global payment models

# QUESTIONS/COMMENTS