

Healthier Washington Quarterly Webinar

The Health Care Authority's Value-based Purchasing Roadmap Transforming Health Care in Washington State

Wednesday, October 12, 2016



Any questions?

To ask for technical support:

- If you have difficulty with your connection to the webinar, first try refreshing your browser.
- If that fails, you can click on the "Support" option in the upper right hand corner of your screen for online troubleshooting.

To ask about today's topic:

We will have a question and answer session after the panelists complete their presentations. However, you can text your questions at any time.

Click the green "Q&A" icon on the lower left-hand corner of your screen, type your question in the open area and click "Submit."



Today's presenters

- Laura Zaichkin, Healthier Washington Deputy Coordinator, Health Care Authority (HCA)
- Rachel Quinn, Special Asst. for Policy and Programs, HCA
- Kali Klein, Medicaid Transformation Project Health Policy Project Manager, HCA
- Mary Beth Brown, Practice Transformation Support Hub Director, Department of Health



Today's agenda

- Review Healthier Washington objectives
- The 2016 Paying for Value Survey Results
- HCA's Value-based Purchasing Roadmap
- How value-based purchasing intersects with the Medicaid transformation demonstration
- The role of practice transformation in value-based purchasing
- Questions and Answers



Healthier Washington





Transforming the system with many public and private partners





Accountable Communities of Health



Paying for value



Shared decision making



Analytics, interoperability and measurement



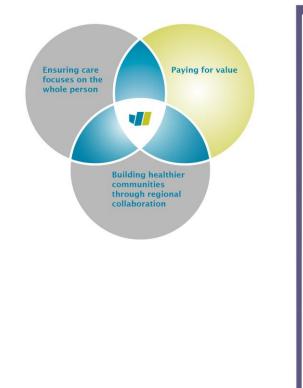
Integrated physical and behavioral health



Practice transformation support hub



Paying for value







Payment drives system transformation

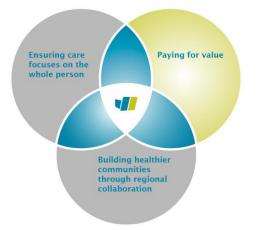
Status Quo (Volume-Based) System	Transformed (Value-Based) System
Fragmented clinical and financial approaches to care delivery	Integrated systems that pay for and deliver whole person care
Uncoordinated care and transitions	Coordinated care and transitions
Unengaged members left out of their own health care decisions	Engaged and activated members who are connected to the care they need and empowered to take a greater role in their health
Variation in delivery system performance (cost and quality) with no ties to clinical or financial accountability and transparency	Standardized performance measurement with clinical and financial accountability and transparency for improved health outcomes







Paying for value



Today...

- New payment models operating:
 - Fully integrated care in Southwest Washington
 - Accountable Care Program for state and other public employees

Moving forward...

- Encounter to Value for Federally Qualified Health Center and Critical Access Hospitals
- Practice Transformation Support Hub



Paying for Value Survey



- 1. To gauge payers' and providers' progress towards implementing Value-Based Payments (VBPs) and to identify barriers impeding desired progress
- 2. To inform HCA's current and future health care payment and delivery transformation initiatives
- Target respondents:
- Washington State providers and payers



Summary of results

 Quantitative Providers' revenue:

82% in Fee-For-Service18% in Value-based Purchasing

Payers' payments:

70% in Fee-For-Service30% in Value-based Purchasing

Qualitative:

- Top values:
 - Willingness to learn/transparency
 - Willingness to move toward risk and alternative payment models
 - Spirit of cooperation and shared governance

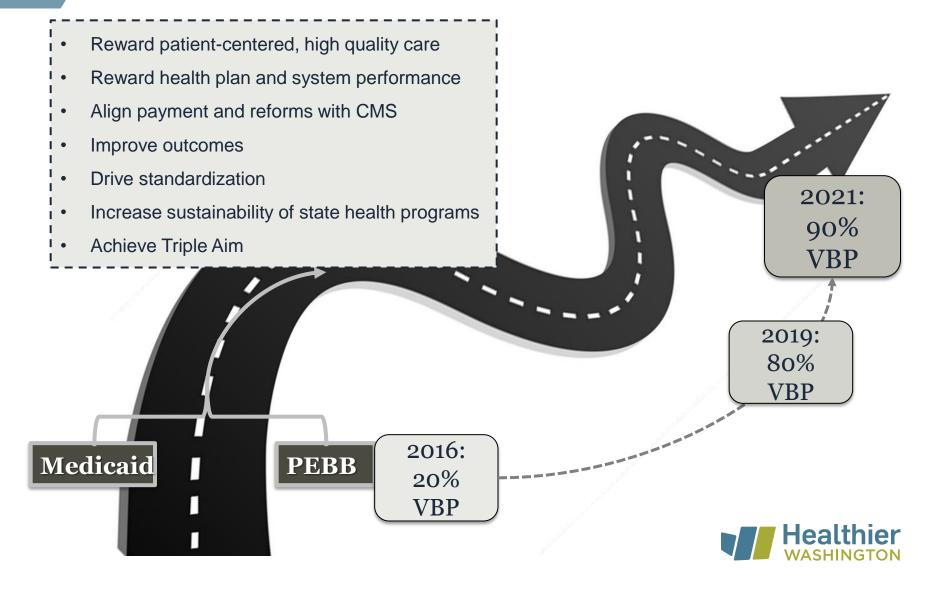
Key barriers:

- Disparate data systems
- Timeliness of data
- Patient attribution



The Value-based Purchasing Roadmap

HCA Value-Based Roadmap

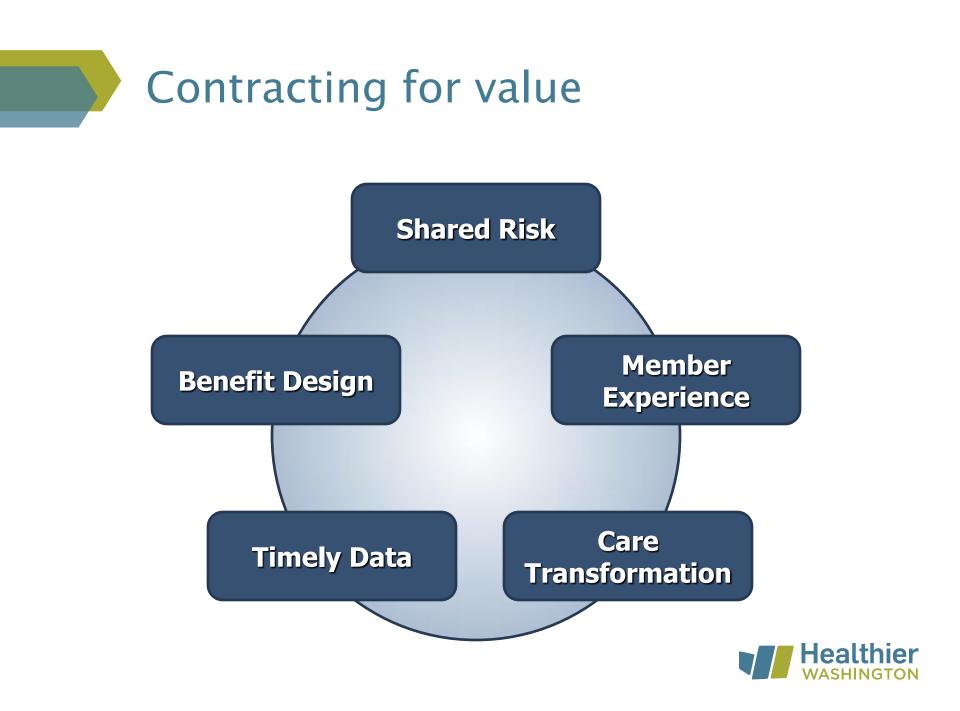


HCA purchasing goals

By 2021:

- 90 percent of state-financed health care and 50 percent of commercial health care will be in value-based payment arrangements (measured at the provider/practice level).
- Washington's annual health care cost growth will be below the national health expenditure trend.





Medicaid Transformation Demonstration

Washington's Medicaid Transformation goals Achieving the Triple Aim

- Reduce avoidable use of intensive services and settings
- Improve population health
- Accelerate the transition to value-based payment
- Ensure that Medicaid per-capita cost growth is below national trends



Medicaid Transformation = VBP

The movement toward value-based payment models is critical to the success and sustainability of Medicaid Transformation.



Practice Transformation Support Hub

Hub strategies and resources

- Intensive coaching to advance behavioral health integration for enrolled practices
- Regional trainings, technical assistance and referrals for other targeted small and medium sized practices
- Web-based Resource Portal to curate resources to support practice transformation



Hub's approach

- Prioritize coaching resources for regions stepping up as early and mid-adopters of fully integrated managed care
- Prioritize coaching resources for practices that pilot Healthier Washington payment models



Hub Alignment with other Practice Transformation initiatives

- Many coaches are active throughout the state
- Washington has multiple Transforming Clinical Practice Initiatives (TCPI)
 - National Rural Accountable Care Consortium
 - Pediatric TCPI: led by the Department of Health
 - Peace Health
 - University of Washington
- The Hub is proposing to CMMI that practices access Hub resources to fill any gaps not met by other initiatives



Hub timeline and roll out

- November: Qualis Health begins recruitment into intensive coaching services
- November: Qualis Health begins roll out of Regional Connectors by Regional Service Areas
- January 31, 2017: Release of the Hub's Web Based Resource Portal, version 1.

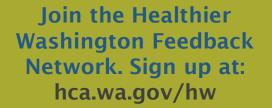




Click the green "Q&A" icon on the lower left-hand corner of your screen, type your question in the open area and click "Submit."







Send questions to: healthierwa@hca.wa.gov



The Healthier Washington initiative is supported by Funding Opportunity Number CMS-1G1-14-001 from the U.S Department of Health and Human Services, Centers for Medicare & Medicaid Services. The contents provided are solely the responsibility of the authors and do not necessarily represent the official views of HHS or any of its agencies.