

E2SSB 5930-1
PURCHASING TO IMPROVE
HEALTH CARE

5 Year Quality Purchasing Plan

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PROJECT CHARGE

- ❖ HCA & DSHS shall develop a five-year plan to change reimbursement within their health care programs to improve health care quality.
- ❖ Submit plan to Governor and Legislature upon completion.
- ❖ Report to the Legislature by September 1, 2007.

Blue Ribbon Commission Bill

HCA & DSHS 5-year purchasing plan goals:

- ❖ Reward quality health outcomes
- ❖ Pay for patient preference care that is of proven value
- ❖ Require use of evidence-based standards of care where available
- ❖ Tie provider rate increases to measurable improvements in access to quality care
- ❖ Direct enrollees to quality care systems
- ❖ Support primary care and provide a medical home to all enrollees
- ❖ Pay for email consultations, telemedicine, and telehealth where it reduces the overall cost of care

STAGE 1: 2007-2009

Health Care Authority Initiatives -

- ❖ HCA Self-Insured Portfolio
 - PEBB Co-pay Plan
 - UMP Third Party Administrator
- ❖ Puget Sound Health Alliance partnership
- ❖ UMP Disease Management and Chronic Care Management initiatives
- ❖ Shared Decision Making/Patient Decision Aid
- ❖ UMP Data Warehouse Upgrade
- ❖ Washington Wellness

STAGE 1: 2007-2009

DSHS Initiatives -

Medical Home Goal:

Better support primary care and provide a medical home to all enrollees through reimbursement policies that create incentives for providers to enter and remain in primary care practice and that address disparities in payment between specialty procedures and primary care services.

Current Examples.

- Increased DSHS primary care and prevention rates for children and adults to support medical home for clients in managed care and fee-for-service delivery systems.
- Managed care pilots for DSHS elderly and disabled clients – Pilots (WMIP, MMIP, and GAU) provide a medical home and integrate and coordinate medical, mental health and long-term care services.

2007-09 Initiatives.

- Foster care health care pilot to provide medical home for foster care children and “Center for Foster Care Health Services” to provide specialty care support for medical home providers.
- Mental health pilot program to support primary care providers in the assessment and provision of appropriate diagnosis and treatment of DSHS children with mental health and behavioral disorders.
- DSHS funded to develop models designed to provide a medical home for elderly and disabled clients in conjunction with chronic care management program.

STAGE 1: 2007-2009

Interagency Joint Initiatives -

Evidence-Base Purchasing Goal:

Require the use of evidence-based standards of care where available.

Current Examples.

- Preferred drug list (PDL) program – Joint HCA, DSHS and DL&I program that uses evidence-based standards to select preferred drugs and competitive purchasing to obtain price discounts on preferred drugs. 25 PDL classes in place today.
- State health technology assessment (HTA) program - Joint HCA, DSHS, DL&I, DOC and DVA program that uses evidence-based reports to make informed and consistent coverage decisions for their medical programs. Six technologies in first year and 8 technologies in second year for study and coverage decision.
- Medicaid adoptions of medical necessity coverage decisions based on evidence-based standards from HTA, agency medical director's projects, and agency initiatives (e.g., bariatric surgery).

AUG 7TH GROUP DISCUSSION

- Purpose is to share ideas - not to define details of specific projects
- Early in the Purchasing Quality planning process – much more discussion to come as we move forward
- Broad discussion about purchasing strategies to improve quality – not just a discussion of reimbursement

DISCUSSION TOPIC 1

How can we effectively utilize Primary Care Providers to improve quality health outcomes?

DISCUSSION TOPIC 2

What constitutes
“Rewarding for Health Outcomes” ?