

Paying for Value Webinar Series

# Value-based purchasing and Medicaid Transformation

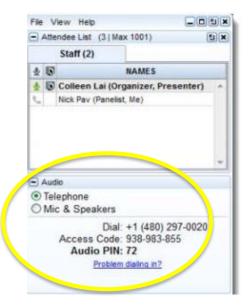
March 28, 2018



# Before we get started, let's make sure we are all connected

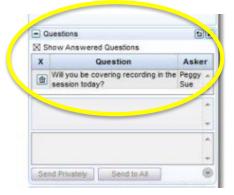
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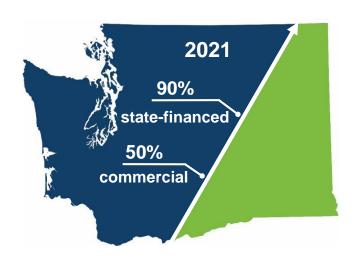
# Today's presenters

- JD Fischer, Medical Program Specialist
- Marc Provence, Director, Office of Medicaid Transformation
- Chase Napier, Healthier Washington Community Transformation Manager
- Moderator: Kennedy Soileau, Health Transformation Communications Manager



# HCA: purchaser, innovator, convener

HCA purchases health care for over 2.2 million people, with a \$10 Billion annual spend.



- Medicaid (Apple Health)
  - 1.9 million clients
- Public Employees Benefits
  - 370,000 covered lives
- School Employees Benefits (2020)
  - 144,000 more covered lives coming

#### Tools to accelerate VBP and health care transformation

- 2014 legislation directing HCA to implement VBP strategies
- SIM Round 2 grant (Healthier Washington), 2015-2019
- Medicaid Transformation, 2017-2021





# Designing for better results



Shifting focus



Population health

Rewarding the most effective models of health care delivery



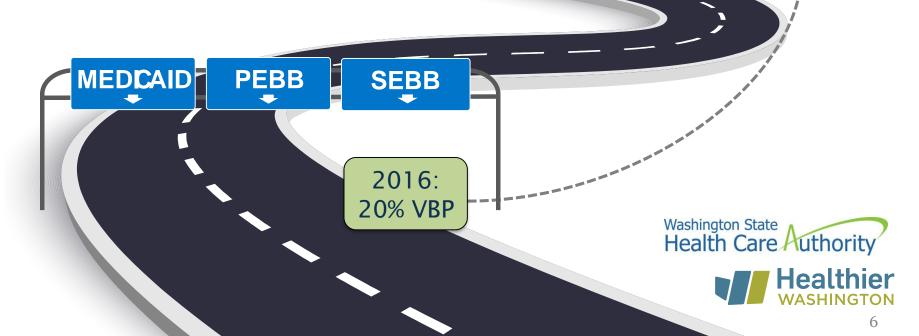


# Value-based purchasing roadmap Using incentives to drive change

2021:

90% VBP

- Reward patient-centered, high quality care
- Reward health plan and system performance
- Align payment and reforms with CMS
- Improve outcomes
- · Drive standardization
- Increase sustainability of state health programs
- Achieve Triple Aim



# Examples of state VBP efforts

#### **PEBB - State Employees**

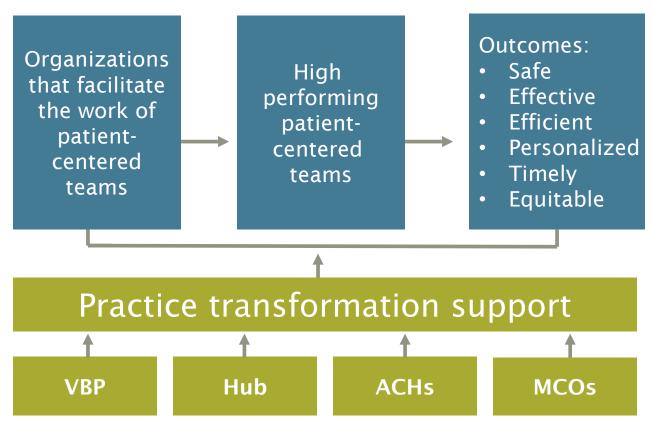
- Accountable Care Program, ACO model with up and downside risk to incentivize clinical and quality accountability
- Total Joint Replacement Bundle and Center of Excellence
- Contracts with HCA require bidders to offer substantially similar ACO program (risk sharing and care transformation approaches) to spread VBP in the marketplace

### **Apple Health - Medicaid**

- 1% MCO premium withhold based on quality and provider VBP arrangements
- Behavioral and physical (financial) health integration in Southwest WA, statewide by 2020
- Exploring a value-based model for rural settings
- Medicaid Transformation: regional
   VBP goals tied to incentive payments



### Practice transformation





### Efforts to advance VBP in Medicaid

- State Innovation Model (SIM) grant
  - Establishing the Accountable Communities of Health
  - Moving to integrated managed care
  - Building out the Practice Transformation
     Support Hub
- 1% withhold in MCO contracts
- Convened the Medicaid Value-based Payment (MVP) Action Team



# **Medicaid Transformation**



### Medicaid Transformation = VBP

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





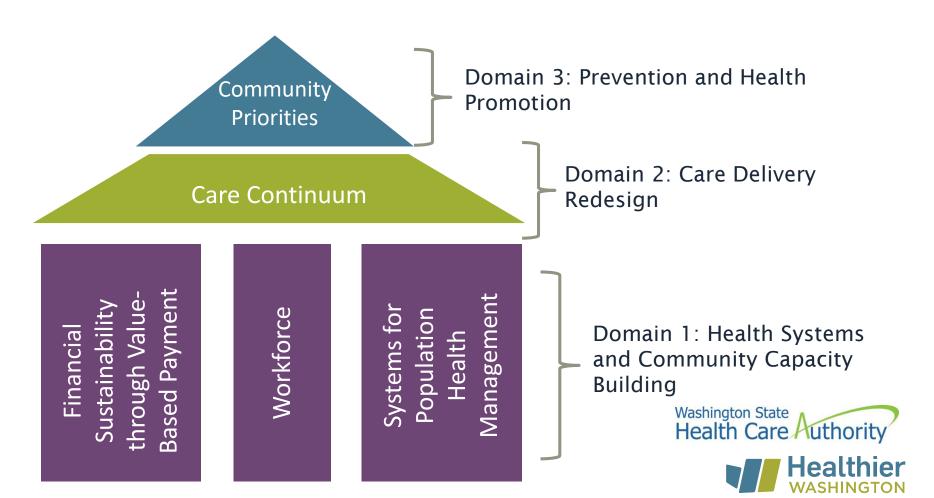
# Medicaid Transformation goals Achieving the Triple Aim

- 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



# Addressing VBP

A foundation of Medicaid Transformation



# **ACH** projects

Project	Better Health Together	Cascade Pacific Action Alliance	Greater Columbia	Healthier Here	North Central	North Sound	Olympic	Pierce County	SWACH
2A: Bi-directional Integration of Care	✓	$\checkmark$	$\checkmark$	✓	✓	✓	✓	$\checkmark$	✓
2B: Community- based Care Coordination	✓	✓			✓	✓		✓	✓
2C: Transitional Care		✓	✓	✓		✓			
2D: Diversions Interventions					$\checkmark$	✓	$\checkmark$		
3A: Addressing Opioid Use	✓	✓	✓	✓	✓	✓	✓	$\checkmark$	✓
3B: Reproductive and Maternal and Child Health		✓				✓	✓		
3C: Access to Oral Health Services						✓	✓		
3D: Chronic Disease Prevention and Control	✓	✓	✓	✓	✓	✓	✓	✓	✓



# Delivery System Reform Incentive Payment (DSRIP) and Value-based payment (VBP)

#### Existing Health Care System

Fee-for-Service-Based, Largely Fragmented & Uncoordinated Time-Limited DSRIP Incentive Payments in Support of Health System Transformation

Longer-Term Payer, Provider, Member & Community
Partnerships & Investments in Population Health
Management

Transformed
System of
Health &
Wellness

Value-Based
Payments with
Coordinated Care



# Four key ingredients

- 1. An attributed and identifiable population
- 2. An accepted and measurable definition of "value"
- 3. A means of collecting and reporting information/data on those measures for the attributed population
- 4. A means of influencing behavior (e.g., timely feedback, quality assessments, financial incentives)



# Roles

# **VBP Support Roles**

- Health Care Authority: Advancing VBP through incentives (Medicaid Transformation) and contracting (MCOs)
- Managed Care Organizations: Contracting with providers and establishing payment methodologies to support quality and outcomes.
- Providers: Engage in negotiations and execute on quality programs, including improving performance according to contract expectations.

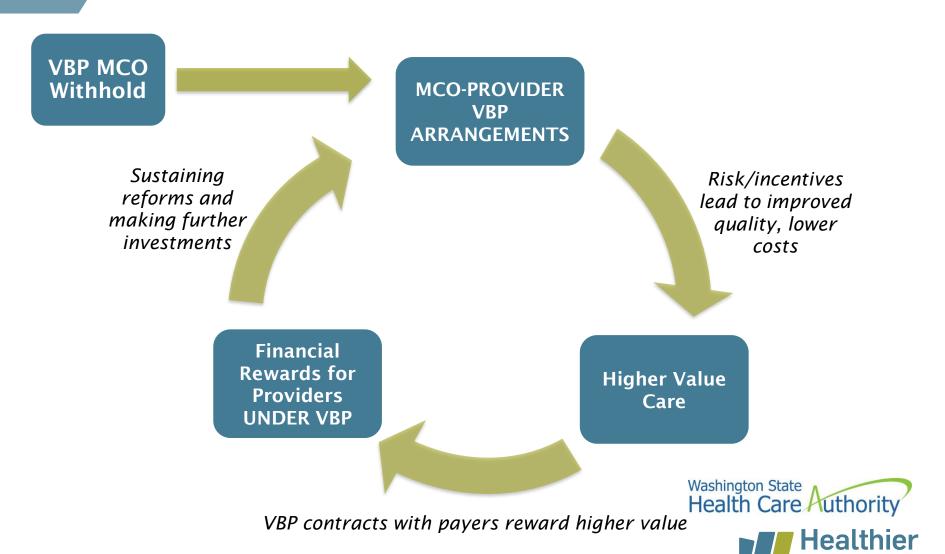
Health Care Authority

# **ACH Support Role**

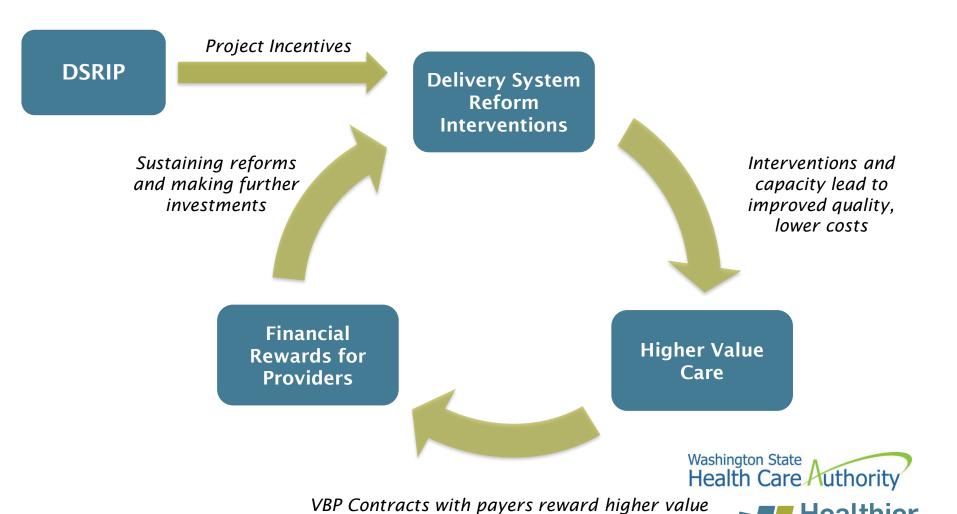
- DSRIP activities must support sustainable transformation, including supporting providers to take on VBP arrangements.
- ACHs help to facilitate conversations that are better addressed at a multi-sector level rather than in isolation.
- ACHs do not interfere with MCO-provider contracting but can address barriers and promote enablers.



# VBP example: MCO Role

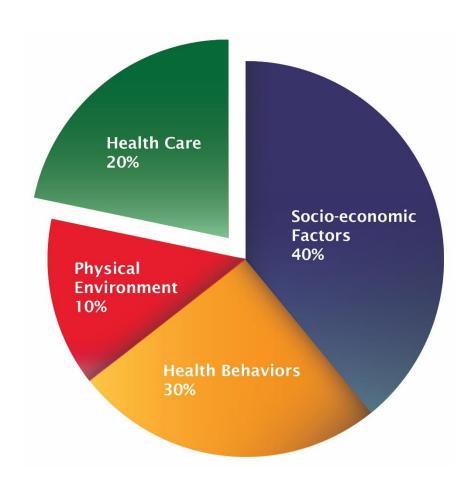


# ACH support role



# Where we go from here

# The 20/80 rule



Health is more than health care.



# **Takeaways**

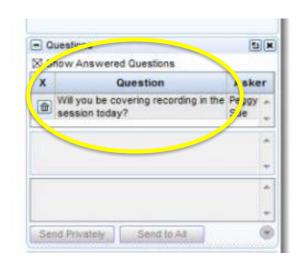
- Washington state is transforming the way it purchases health care.
- HCA is aligning its business with national movement away from fee-for-service to payments based on value.
- Medicaid Transformation continues through 2021.
- End result is better care, healthier people, and lower costs for Washington residents.



# Q&A

Have questions?

Please use the "Questions" section in the webinar panel to submit any questions for our panelists.







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