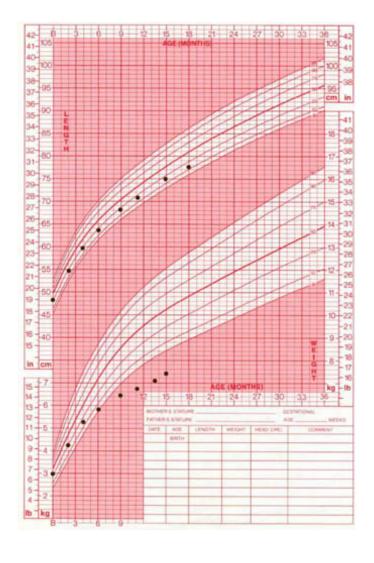
Failure to Thrive



- Disproportionately affected by social, environmental and behavioral factors
- Care delivery model that:
 - integrates social determinants of health
- Will result in:
 - reduced time to recovery
 - improved patient experience
 - lower cost of care, and
 - stronger health outcomes over time
- Possible payment model Shared savings

Clinic Based

- Screen for social determinants of health
- Acute home care
- Ambulatory home care

Community/Policy

- Streamline WIC eligibility and enrollment processes
- Increase community access to formula

Transitioning from fee-for-service

Implications for Pediatric Population Management





- Kids are generally well
 Don't cost as much
- Relevant measures differ from adult incentives
 - Readmission rates
- Health outcomes
 - Influenced by adults
 - Social influences not reflected in risk methodologies
 - Long time to ROI



Kids deserve the best.

Payment Reform and Pediatric-Focused versus Adult-Oriented Organizations

Alyna T. Chien, MD, MS Boston Children's Hospital / Harvard Medical School

Health Care Payment Learning & Action Network 2016 LAN Fall Summit October 25, 2016



Boston Children's Hospital

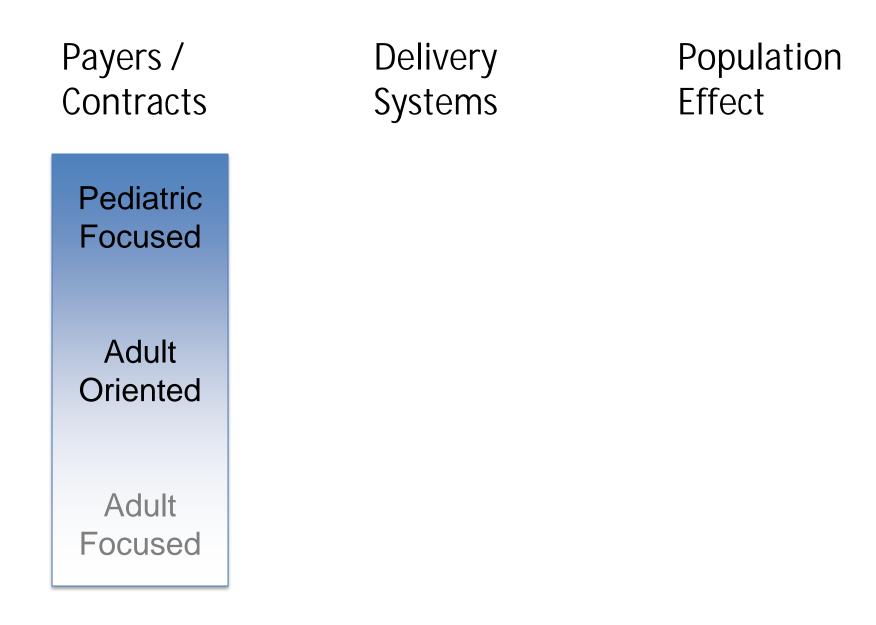


Payers / Contracts

Delivery Systems Population Effect











"Pediatric-ness" of Payers

2013-2015		0-18 or 21 year olds		
		Commercial	Medicaid	Medicare
Total		42M	30M	22K
	% of Total Insured	49%	38%	<1%
	% of Insurance Type	23%	51%	

Chien AT, Chin MH, Alexander GC, Tang H, Peek ME. Am J Manag Care. 2014;20(2):121-129.





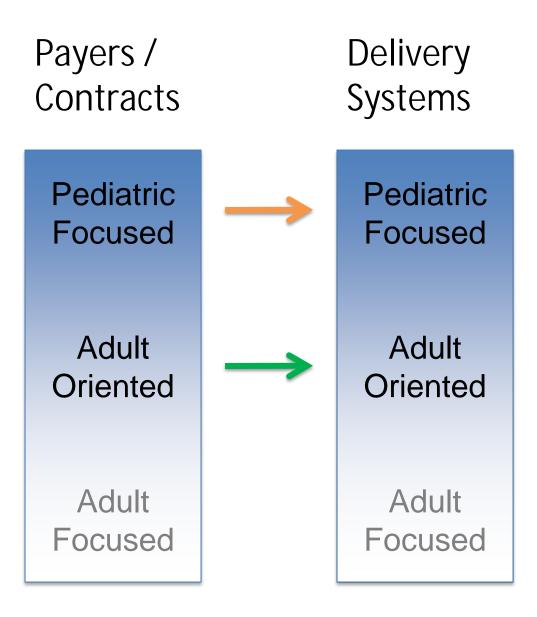
"Pediatric-ness" of Healthcare Contracts

Incentives	Pediatric- Focused	Adult-Oriented
To Reduce Pediatric Spending	YES	MAYBE
To Improve Pediatric Quality	YES	YES

Chien AT, Coleman M, Friedman-Ross LS. Acad Pediatr. 2009;9(3):185-91.



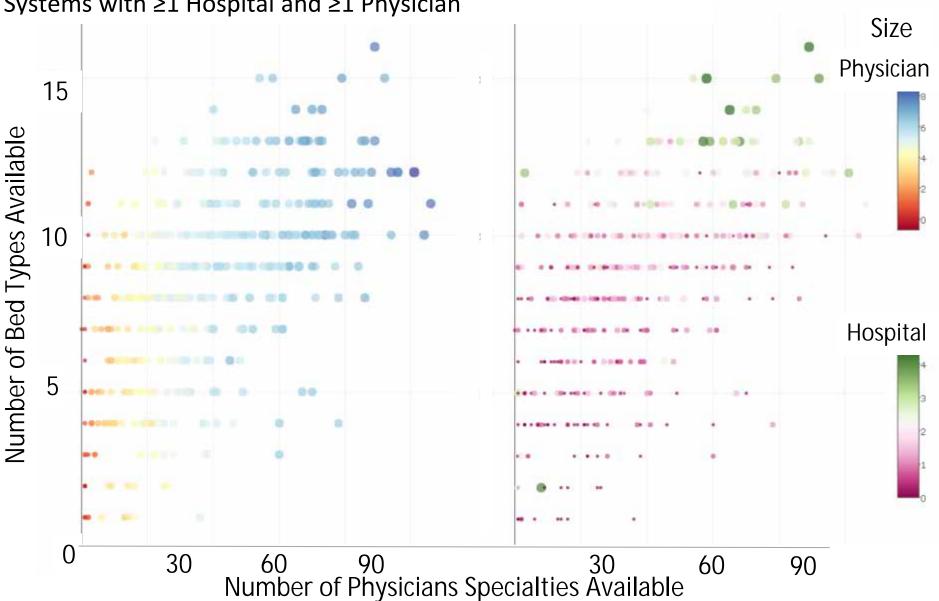




Population Effect







Systems with \geq 1 Hospital and \geq 1 Physician





