



**HCP LAN**

Health Care Payment Learning & Action Network

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## When APMs Intersect: Implementing Episode Payment in a Population-Based Payment Environment

April 25, 2016  
2:45 pm – 4:00 pm

# WELCOME



## **Mark D. Smith**

Co-chair, LAN Guiding Committee

Visiting Professor, University of California at Berkeley

Clinical Professor of Medicine, University of California

San Francisco

# SESSION OBJECTIVES

- ✓ Offer a variety of perspectives on the opportunities and challenges involved in integrating Population-based Payment models and Clinical Episode Payment models
- ✓ Discuss the effects of integrated payment models on patient care and outcomes; providers; payers; purchasers; and other players in the marketplace
- ✓ Provide opportunity for audience questions and discussion with the panelists

# PANELISTS



**Lewis Sandy**

Executive VP  
Clinical  
Advancement

*UnitedHealth Group*



**Paul Casale**

Executive Director  
*New York Quality Care*



**Alexandra Clyde**

VP, Global  
Health Policy,  
Reimbursement and  
Health Economics

*Medtronic*



**Scott Sarran**

Divisional Sr. VP  
and CMO for  
Government  
Programs

*Health Care Service  
Corporation (HCSC)*



**Jordan Asher**

Chief Clinical  
Officer and Chief  
Innovation Officer

*MissionPoint  
Health Partners*

# Setting the Stage: Defining PBP and CEP

- **Population-Based Payment**: A provider organization accepts accountability for the overall costs of care for a population, payment is either prospectively paid capitation or a shared savings retrospective reconciliation process occurs.
- **Clinical Episode Payment**: A provider takes accountability for an episode of care for a defined condition or procedure, time period, and set of services. Payment is either prospectively paid for the entire bundle of care, or a shared savings retrospective reconciliation process occurs.

# Issues to Grapple with

- Why would – or wouldn't – a payer or provider want to integrate two APMs? What are the benefits? Risks?
- What impact does the market environment have on integration?
- How does integration get operationalized from the provider perspective?
- Are there certain conditions or procedures that are better managed using an integrated APM strategy?
- **Bottom Line: What is the impact on the patient?**

# Panel Discussion

# CONTACT US

We want to hear from you!



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