

Maternity and Newborn Care Bundled Payment Pilot

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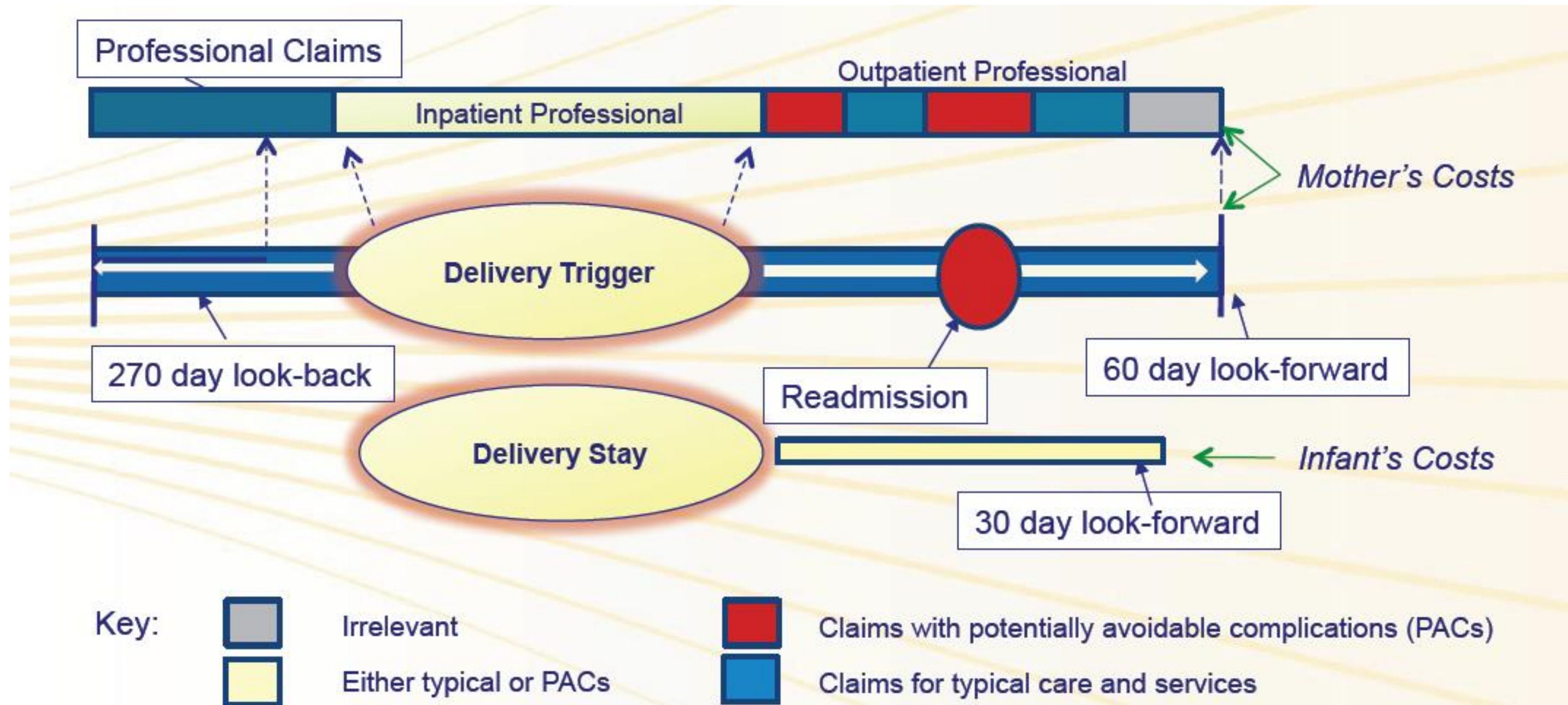


Karen Love
Executive Vice President and
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Community Health Choice

Our Maternity Pilot

- Area of highest opportunity for expense savings and quality improvements
 - 22k deliveries/year
 - \$155M total annual related medical expenses
- A multi-year pilot beginning March 1, 2015
- Two separate academic provider groups
- Includes all relevant costs for mothers & babies
 - Professionals (OB, MFM, Pediatrics, Neonatology)
 - Hospitals
 - All ancillary services

Maternity and Newborn Episode



- *Episode is triggered by delivery*
- *Services for the Mother are evaluated as typical (e.g. ultrasound, anesthesia, office visits, etc.) or complications (obstetrical trauma, fetal distress, c-section in low risk pregnancy, etc.)*

Budgets

- Using patient specific budgets based on historical average costs
- Budgets are individually adjusted based on risk factors collected from claims data and clinical records
 - Patient demographics – age, gender
 - Patient comorbidities - diagnosis code-based
 - Clinical severity markers (e. g. gestational diabetes, multiple gestation, etc.)

Quality Scorecard

Term Babies	GA>or equal to 37 completed weeks	Points
Pre-natal Care	Prenatal Care Visit (HEDIS)	0
	Risk-appropriate screenings during pre-natal care visits	10
	Shared-decision making on mode of delivery	10
Delivery Care	% of early elective deliveries prior to full gestation	20
	% of eligible patients who receive intrapartum antibiotic prophylaxis for GBS and/or Antenatal Steroids	5
Postpartum Care	Postnatal Care Visit (HEDIS)	0
	BP Monitoring	15
	Random fingerstick testing; patients with results that exceed a certain threshold required to have a 2 hour fasting glucose test	10
	Depression screening	10
Baby Care	% of babies who were exclusively breast fed during stay	10
	% of babies receiving Hep B vaccine prior to discharge	10
Total Points		100

Category	Data Field	Format	Member 40										
	Member ID	Alphanumeric											
	Member Last Name	Alphanumeric		Measure	Numerator	Denominator	Ratio	Threshold	Points	Score		Notes	
Pre-natal care	Was the patient identified as at Risk for Gestational Diabetes	1=YES; 0=NO;	1			135							
Pre-natal care	Did the patient receive gestational diabetes pre-screening testing	1=YES; 0=NO;		Pre-natal Gestational 0diabetes screening	91	135	0.6741		5	3.3704		Denominator: all patients (per providers); Numerator: sum of 1's (yes); Points: Achieve all points for ratio of 1 (all screened), receive points according to ratio (% screened times points)	
Pre-natal care	Date of Gestational Diabetes Screening	MM/DD/YYYY											
Pre-natal care	Did patient participate in documented shared decision making discussion(s)	1=YES; 0=NO		Shared decision making	129	135	0.9556		5	4.7778		Denominator: all patients (per providers); Numerator: sum of 1's (yes); Points: Achieve all points for ratio of 1 (all screened), receive points according to ratio (% screened times points)	
Pre-natal care	Date of shared decision making in patient record/patient refusal	MM/DD/YYYY											
Delivery care	Was the delivery an elective delivery	1=YES; 0=NO; N/A		% elective deliveries (of babies between 037 and 39 weeks)	0	55	0.0000	20%	15	15.0000		Denominator: Babies >=37 and <39 weeks gestation; Numerator: sum of 1's; Points: Receive all points for 0 elective deliveries, receive points according to inverse of ratio (number not elective) on a scale within the threshold of 00% = 15 points and >20% = 0 points	
Delivery care	Was the delivery a c-section	1=YES; 0=NO; N/A	1										
Delivery care	If C-Section delivery, was the delivery a primary c-section	1=YES; 0=NO; N/A		Primary c-section 0rate	17	135	0.1259	20%	13	4.8148		Denominator: All patients; Numerator: sum of 1's; Points: Receive all points for 0 primary c-sections, receive points according to inverse of ratio (number not primary c-section-- includes vaginal deliveries and c-sections (not primary)) on a scale of 0% = 13 points and >20% = 0 points.	
Delivery care	Patient at risk for pre term delivery?	1= YES; 0=NO	0										
Delivery care	Intrapartum antibiotic prop. For GBS and/or Ante steriods	1=YES; 0=NO; N/A	N/A	% of patients receiving antibiotic prophylaxis	24	28	0.8571		5	4.2857		Denominator: patients "eligible" to receive antibiotics (not N/A); Numerator: sum of 1's; Points: receive all points for 100% compliance, receive points according to ratio (% with antibiotics times points)	
Delivery care	Obstetric Trauma: with Instrument	1= YES; 0=NO	N/A	Obstetric trauma with instrument	0	2	0.0000	10%	5	5.0000		Denominator: vaginal deliveres with instrument; numerator: sum of 1's; Points: Achieve all points for no trauma; receive points according to inverse of ratio. On a scale of 0% = 5 points to >10% = 0 points.	
Delivery care	Obstetric Trauma: without Instrument	1= YES; 0=NO		Obstetric trauma 0without instrument	1	88	0.0114	10%	7	6.2045		Denominator: vaginal deliveres without instrument; numerator: sum of 1's; Points: Achieve all points for no trauma; receive points according to inverse of ratio. On a scale of 0% = 7 points to >10% = 0 points.	



Patient Reported Outcome Measures

- PROMs and how they differ from Patient Satisfaction Surveys was first discussion
 - How was the food in the hospital or how long did you wait for your appointment in the physician office?
 - VS.
 - Were you given enough time to ask questions during office visits or do you feel you were involved enough in decisions about your care?
- Modified Childbirth Connection PROM Survey
 - Birth Information
 - Prenatal Care
 - Birth Experience
 - Postpartum Care

Key Year 1 Takeaway

- Nursery level determination may be less objective than previously thought and may not be best indicator of ultimate cost
 - Significant differences in level distribution across providers and over time
 - Correlations of LBW and/or preterm with nursery level is uneven
 - Birth defects can be costly but are not necessarily dealt with in Level 4 nursery.
- Recommendation: to protect both provider (from extreme outlier episodes) and plan (from arbitrary placement), keep all babies in but use stop loss aimed at true outliers

Devil in the Details

Year 1

- Upside only

Year 2

- Downside risk added using quality metrics set based on year 1 scorecard benchmarks

Year 3 and beyond

- Move away from current contractual payments to flat dollar payments with periodic reconciliation

Year 2 Draft Risk Sharing

% Share in Loss (over budget)	Change in Score (PPT)	% Share in Gain (under budget)
... 0.50	... -0.20	... 0.0
0.45	-0.05	0.35
0.44	-0.04	0.37
0.43	-0.03	0.39
0.42	-0.02	0.41

Scalability

- No other bundle comes close to Maternity bundle for our Medicaid line of business
- 40,000 Marketplace lives in 2015 – only now getting enough data to see where opportunities lie
- What other alternative payment plans make sense for us?

QUESTIONS & ANSWERS

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