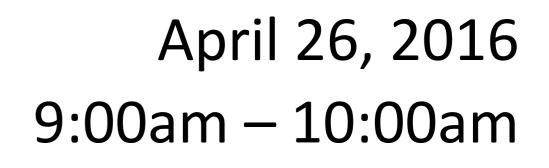
Accelerating to Value Health Care Payment Learning & Action Network

Accelerating and Aligning Clinical Episode Payment Models: Opportunities and Challenges

APRIL 25-26, 2016

SHERATON TYSONS HOTEL

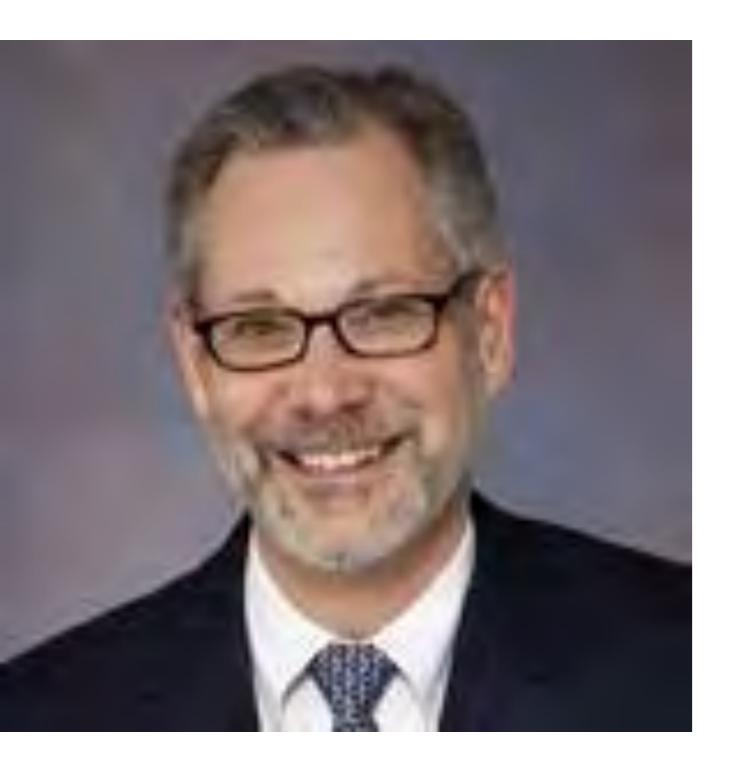








Welcome



Lewis Sandy Member, LAN Guiding Committee Chair,



HCPLAN Clinical Episode Payment (CEP) Work Group Executive Vice President, UnitedHealth Group

Session Objectives

- Provide a broad overview of the why's and how's of episode payment
- Highlight the variety of conditions and procedures for which episode payment is being designed and implemented
- Describe the CEP work group's aims and the principles used to develop the group's recommendations on maternity, cardiac care, and joint replacement
- Hear from panelists about the biggest opportunities and challenges they see in implementing and getting results from episode payment





Time (ET)	
9:00 am – 9:15 am	Clinical Episode Payme Lew Sandy
9:15 am – 9:45 am	 Panelist Reactions Dorothy Teeter, Was Alan Balch, Nationa William Jiranek, Am
9:45 am – 10:00 am	Facilitated Discussion



Topic & Speaker

ent Overview

ashington State Health Care Authority al Patient Advocate Foundation nerican Association of Hip and Knee Surgeons

Clinical Episode

A clinical episode or episode of care is a series of temporally continuous healthcare services related to the treatment of a given spell of illness or provided in response to a specific request by the patient or other entity.



Clinical Episode Payment

Clinical episode payment is a bundled payment model that considers the quality, costs, and outcomes for a patient-centered course of care over a longer time period and across care settings.



Purpose of Episode Payment

Episode Payment Can:

- Create incentives to break down existing siloes of care
- Promote communication and coordination among care providers
- Improve care transitions
- Respond to data and feedback on the entire course of illness or treatment

Goal: The treatments the patients receive along the way reflect their wishes and cultural values.



Episode Payments Reflect How Patients Experience Care:

- A person develops symptoms or has health concerns
- He or she seeks medical care
- Providers treat the condition
- The patient receives care for his or her illness or condition

CEP Work Group Clinical Episode Payment (CEP)



Chair

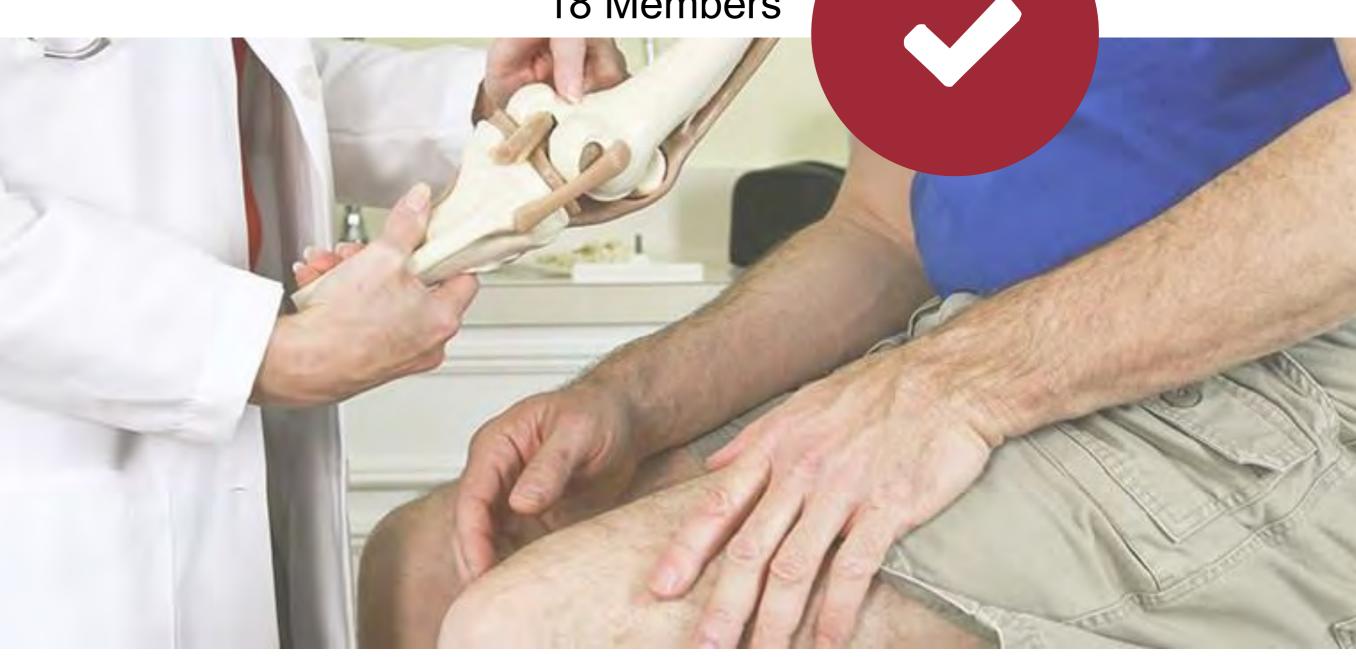
Lewis Sandy

Senior Vice President, Clinical Advancement, UnitedHealth Group

The group will identify the most important elements of clinical episode payment models for which alignment across public and private payers could accelerate the adoption of these models nationally. The emphasis will be on identification of best practices to provide guidance to organizations implementing clinical episode payment models.



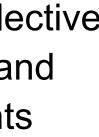
18 Members



Key Activities

- Identifying the elements for elective \checkmark joint replacement, maternity, and cardiac care episode payments
- ✓ Identifying best practices for implementing clinical episode payment models





CEP MEMBERS Member Roster



Lewis Sandy, MD, MBA Executive Vice President, Clinical Advancement, UnitedHealth Group

Amy Bassano, MPP Director, Patient Care Models Group, Centers for Medicare and Medicaid Services

Edward Bassin, PhD Chief Analytics Officer, Archway Health

John Bertko, FSA, MAAA Chief Actuary, Covered California

Kevin Bozic, MD Chair of Surgery and Perioperative Care, Dell Medical School at the University of Texas at Austin

Alexandra Clyde, MS Corporate Vice President of Global Health Policy, Reimbursement and Health Economics, Medtronic, Inc



Brooks Daverman, MPP Director of the Strategic Planning and Innovation Group, Tennessee Division of Health Care Finance and Administration

François de Brantes, MS, MBA Executive Director, Health Care Incentives Improvement Institute, Inc.

Mark Froimson, MD, MBA Executive Vice President and Chief Clinical Officer Trinity Health, Inc.

Rob Lazerow Practice Manager, Research and Insights The Advisory Board Company

Catherine MacLean, MD, PhD Chief Value Medical Officer, Hospital for Special Surgery

Jennifer Malin, MD, PhD Staff Vice President, Clinical Strategy, Anthem, Inc. Cara Osborne MSN, CNM, ScD Chief Clinical Officer, Baby+Co.

Dale Paton Reisner, MD Maternal Fetal Medicine Specialist Swedish Medical Center

Carol Sakala, PhD, MSPH Director of Childbirth Connection Programs National Partnership for Women & Families

Richard Shonk, MD, PhD Chief Medical Officer, the Health Collaborative

Steve Spaulding Senior Vice President, Enterprise Networks Arkansas BlueCross BlueShield

Barbara Wachsman Chair, Pacific Business Group on Health

Jason Wasfy, MD Director, Mass General Heart Center



Episode Selection Criteria

Empowering Consumers

Conditions & procedures with opportunities to engage patients and family caregivers through the use of decision aids support for shared decision-making; goal setting and support for identifying high-value providers.

High Volume, **High Cost**

Conditions & procedures for which high cost is due to non-clinical factors such as inappropriate service utilization and poor care coordination that correlate with avoidable complications, hospital readmissions, and poor patient outcomes.

Conditions & procedures for which there is high variation in the care that patients receive, despite the existence evidenced based "best" practices.



Unexplained Variation

Care Trajectory

Conditions & procedures for which there is a wellestablished care trajectory, which would facilitate defining the episode start, length and bundle of services to be included.

Availability of **Quality Measures**

Conditions & procedures with availability of performance measures that providers must meet in order to share savings, which will eliminate the potential to incentivize reductions in appropriate levels of care.

ELECTIVE JOINT REPLACEMENT

Elective hip and knee replacement for CEP models

The draft white paper titled Accelerating and Aligning Joint Replacement Episode Payment: Considerations and Recommendations describes bundled payment for episodes of elective hip and knee replacement. The white paper reviews previous and existing joint replacement episode payment efforts in order to develop a set of recommendations that can potentially pave the way for broad adoption of bundled payment in a way that has not yet occurred.

Key Components

- Design Elements
- Recommendations
- **Operational Issues**



Development Dec. 2015–Feb. 2016

Draft Release Feb. 26, 2016

Public Comment Feb.–Mar. 2016

Revise April-May 2016

Final Release June 2016



MATERNITY

for CEP models

The draft white paper titled Accelerating and Aligning Clinical Episode Payment Models: Maternity Care, describes design recommendations for using bundled payment to pay for patient-centered prenatal, birth, and postpartum care as one comprehensive episode. The white paper reviews existing maternity care episode payment efforts in order to develop a set of recommendations that can potentially pave the way for broad adoption of bundled payment in a way that has not yet occurred.

Key Components

- Design Elements
- Recommendations
- Operational Issues



Development

February – April 2016

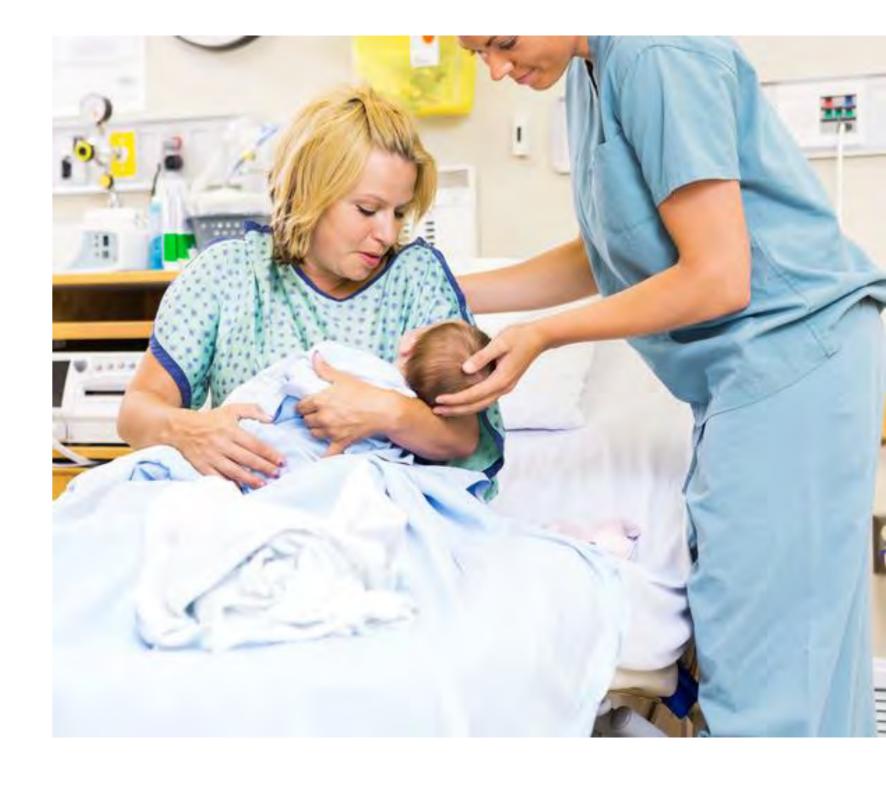
Draft Release April 22, 2016

Public Comment April – May 2016

Revise May-June 2016

Final Release

June 24, 2016



CARDIAC CARE for CEP models

The draft white paper titled Accelerating and Aligning Clinical Episode Payment Models: Coronary Artery Disease describes goals for using episode payment to deliver high quality, person-centered care to patients living with coronary artery disease. The white paper reviews previous and existing CAD episode payment efforts – mainly related to CAD procedures -- in order to develop a set of recommendations that can potentially pave the way for broad adoption of bundled payment in a way that has not yet occurred: namely, at the condition level.

Key Components

- Design Elements
- Recommendations
- Operational Issues

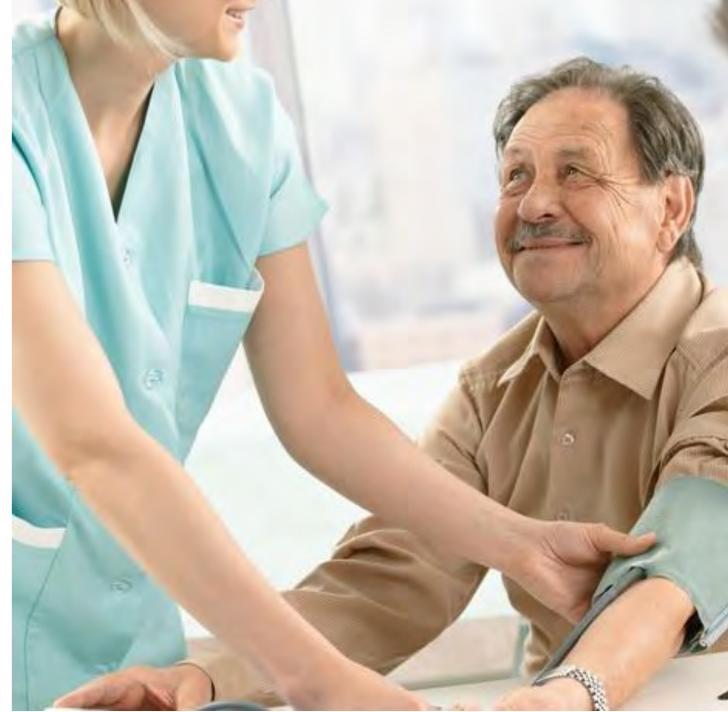


Development February -- May 2016

Draft Release Mid-May, 2016

Public Comment May - June 2016

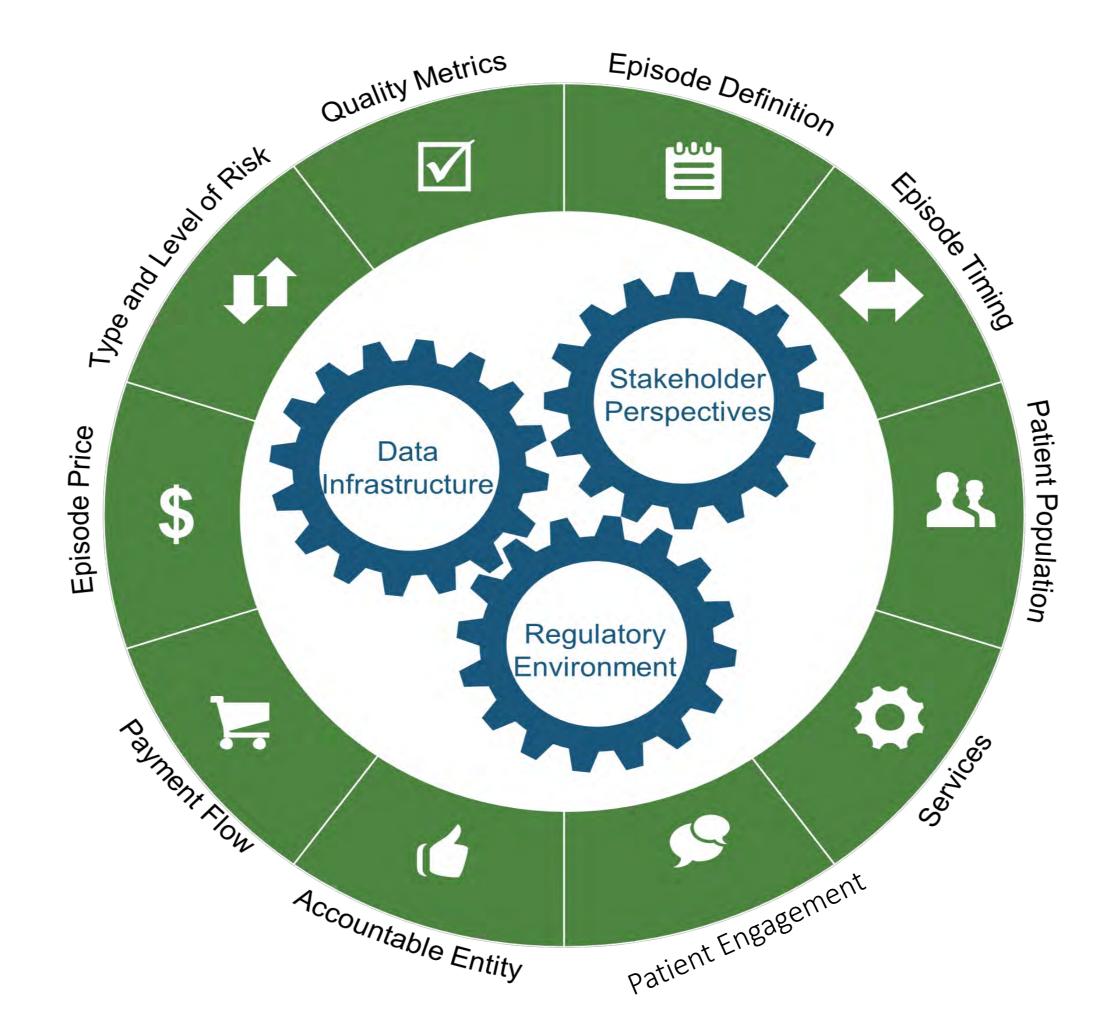
Revise



Final Release Summer 2016



Episode Design Elements





Episode Operational Considerations **Stakeholder Perspectives:** Perspectives of **Stakeholders** of episode payments Data Infrastructure **Data Infrastructure:** Issues

Regulatory Environment



Ensure that the voices of all stakeholders – consumers, patients, providers, payers, states and purchasers – are heard in the design and operation

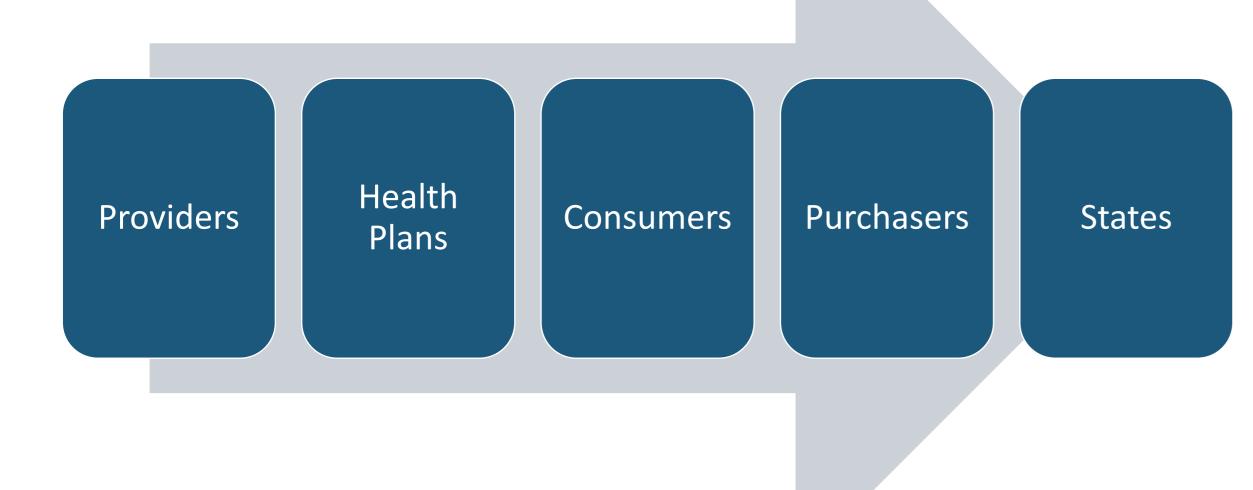
Understand and develop the systems that are needed to successfully operationalize episode payments

Regulatory Environment:

Recognize and understand relevant state and/or federal regulations, and understand how they support or potentially impede episode payment implementation

The Work Group Aims to...

Provide a Directional Roadmap to:





Promote Alignment:

- Design Approach
- Alignment Approach

Find a Balance Between:

- Alignment/consistency and flexibility/innovation
- Short-term realism and long-term aspiration

Panel Speakers





Dorothy Teeter

Director

Washington State Health Care Authority (HCA) National Patient Advocate Foundation



<u>Alan Balch</u>

CEO



William Jiranek, MD

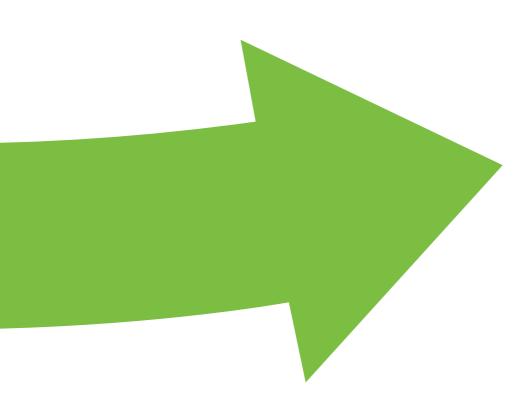
President

American Association of Hip and Knee Surgeons

Panel Discussion

APRIL 25-26, 2016

SHERATON TYSONS HOTEL





TYSONS CORNER, VA

Access the white papers: https://hcp-lan.org/groups/cep





CONTACT US

We want to hear from you!

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