

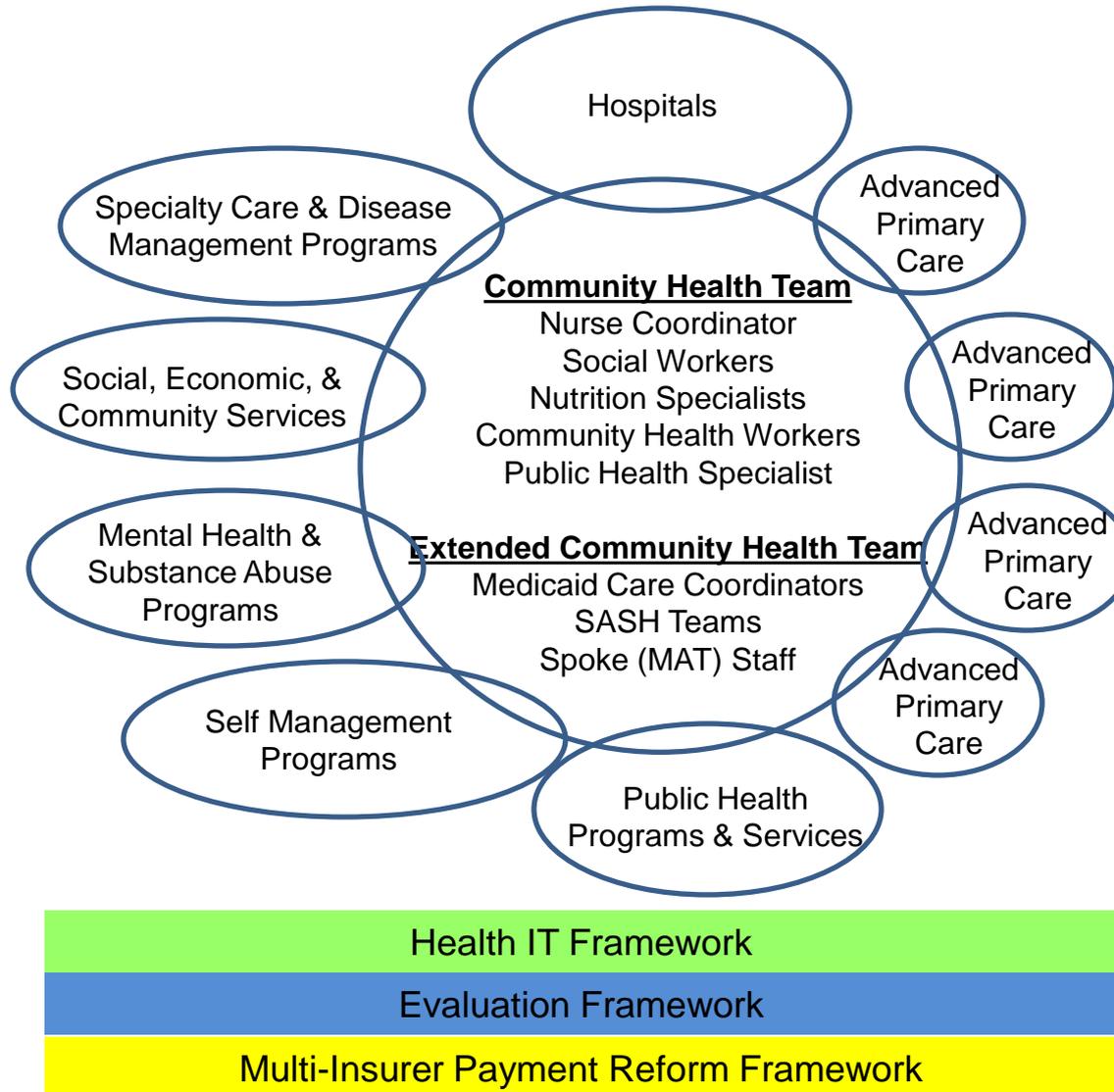
# **Building Community Networks of Preventive Health Services**

## **Executive Committee Planning, Design & Evaluation Committee**

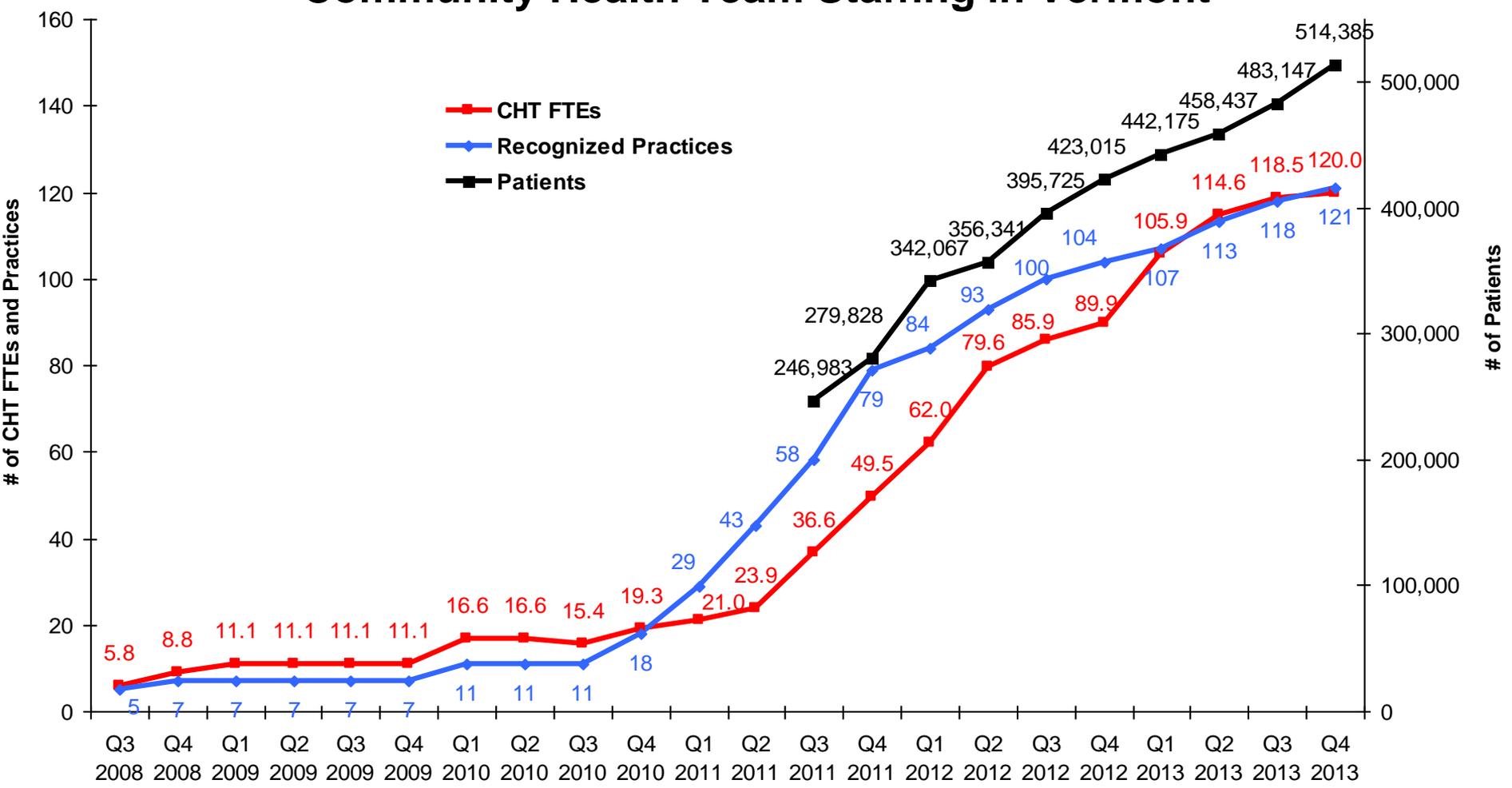
**February 11, 2014**

# Items for Discussion

1. Program status and operations
2. Results from the program evaluation
3. Integration with newer reforms (e.g. ACOs)
4. Proposed payment model – next steps



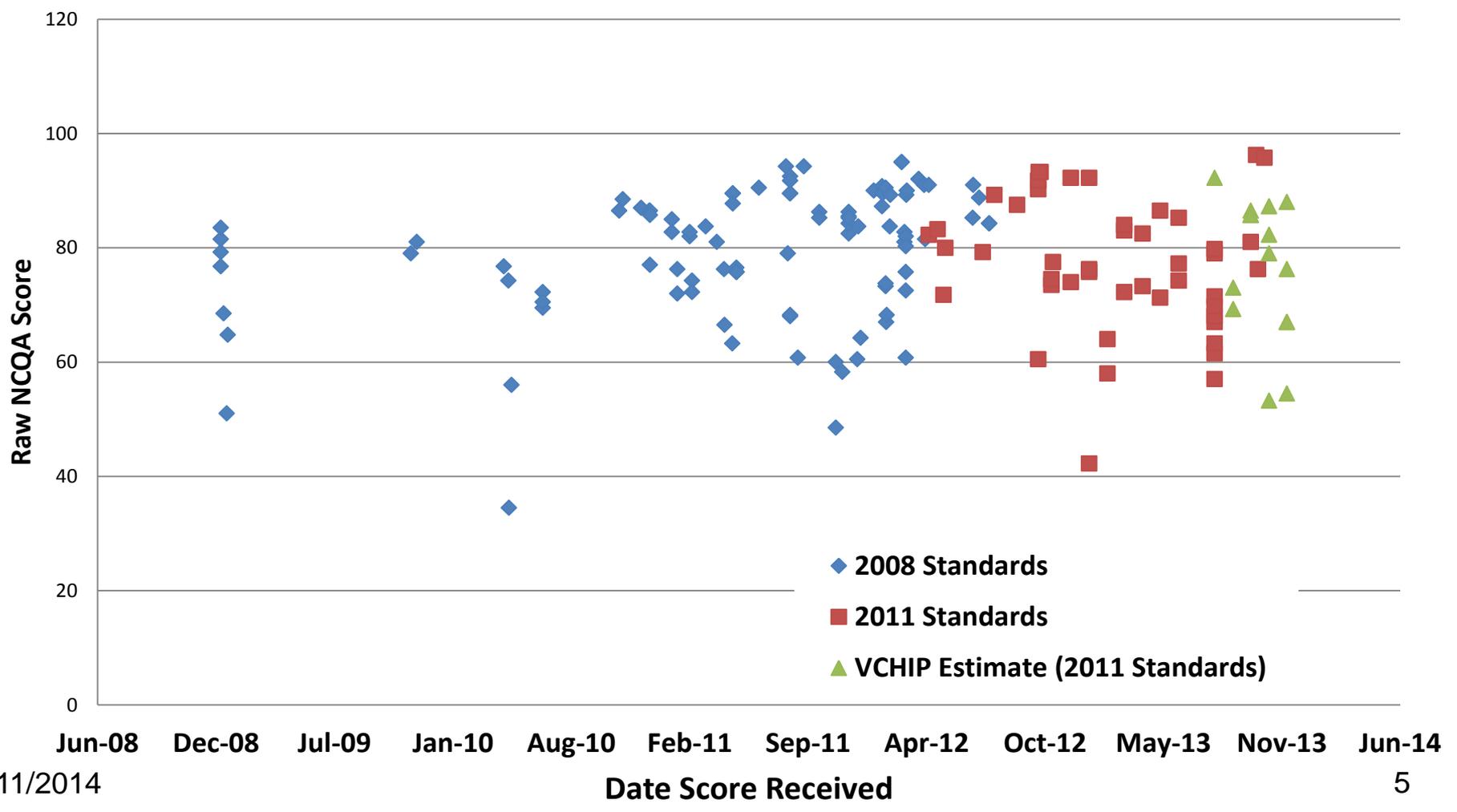
## Patient Centered Medical Homes and Community Health Team Staffing in Vermont



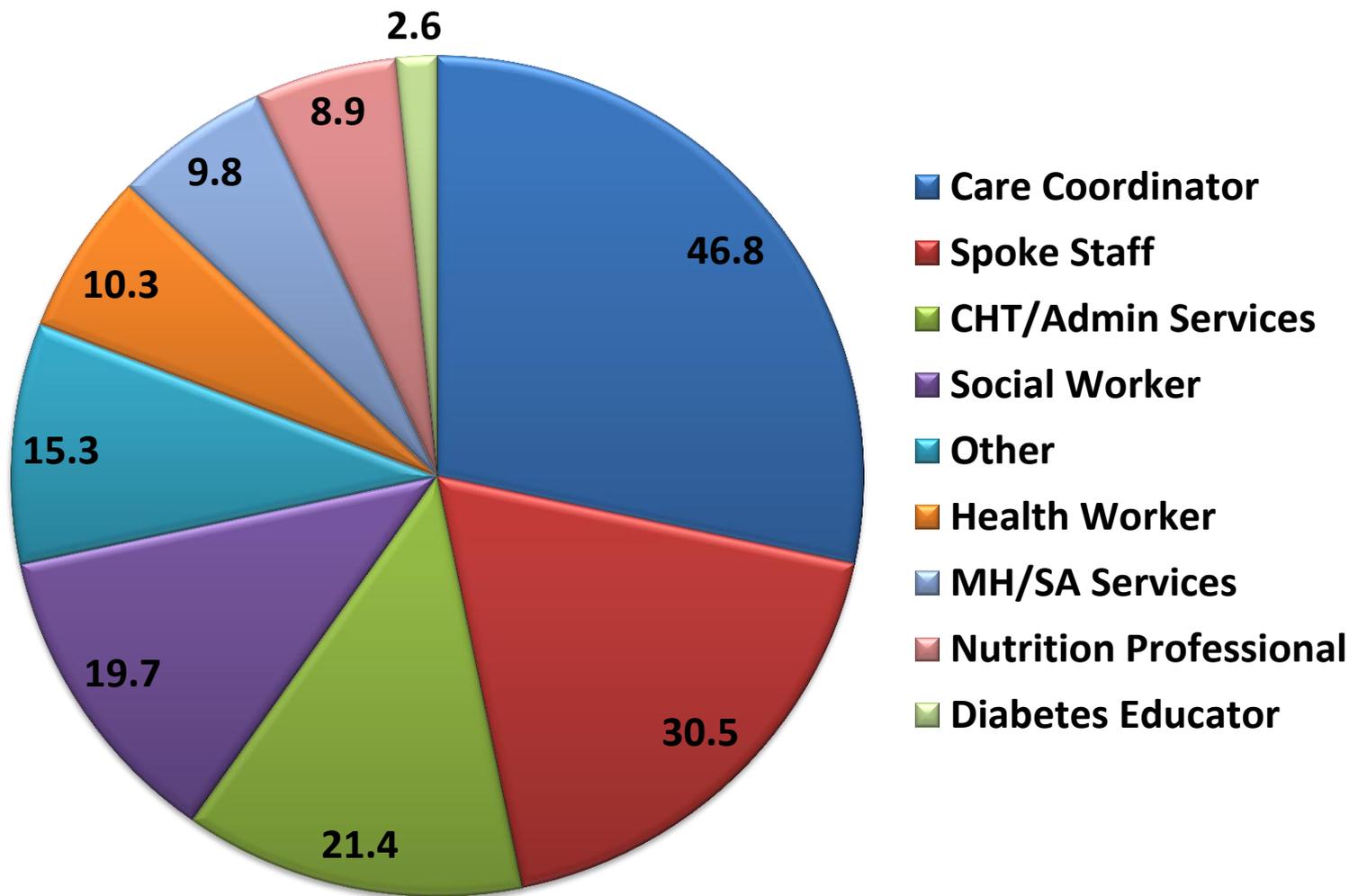
\*Since joining the Blueprint, three practices have combined to form a new practice, one practice has joined an existing practice, and one practice has closed.

# NCQA Scores Over Time

## December 2013



# Community Health Team Staffing (FTEs) December, 2013



## Health Services Network

| Key Components                 | December 2013 |
|--------------------------------|---------------|
| PCMHs (scored by UVM)          | 121           |
| PCPs (unique providers)        | 629           |
| Patients (per PCMHs)           | 514,385       |
| CHT FTEs (core staff)          | 120           |
| SASH provider FTEs (extenders) | 46.5          |
| Spoke Staff FTEs (extenders)   | 30.45         |

## Leadership Network

| Program Leaders & Extenders               | # People |
|-------------------------------------------|----------|
| Program Managers                          | 14       |
| Practice Facilitators                     | 13       |
| Community Health Team Leaders             | 14       |
| Regional Housing Authority Leaders (SASH) | 6        |
| Self Management Regional Coordinators     | 14       |

# Learning Forum Network

| Program Activities                                   | Frequency        |
|------------------------------------------------------|------------------|
| Program Managers Meetings                            | Every 6 weeks    |
| Practice Facilitators Meetings                       | Twice monthly    |
| Community Health Team Leader Meetings                | Monthly          |
| Self Management Regional Coordinator Meetings        | Quarterly        |
| Tobacco Treatment Specialists Meetings               | Quarterly        |
| Hub Care Coordinator Learning Community              | Monthly          |
| SASH DRHO Executive Directors                        | Weekly           |
| SASH Regional Team Meetings (3 regions)              | 3 Times per Year |
| SASH Local Meetings                                  | Quarterly        |
| Blueprint Conferences                                | Twice a year     |
| Office Based Opioid Therapy Collaborative (9 months) | Monthly          |
| 2/1 Asthma Collaborative (6 months)                  | Monthly          |

# Self Management Network

| Health Service Area | HLW General | HLW Diabetes | HLW Chronic Pain | Tobacco Cessation | WRAP    | DPP     |
|---------------------|-------------|--------------|------------------|-------------------|---------|---------|
| Bennington          | Offered     |              |                  | Offered           | Planned | Planned |
| Brattleboro         | Offered     |              | Offered          | Offered           | Offered | Offered |
| Barre               | Offered     | Offered      | Offered          | Offered           | Offered | Offered |
| Burlington          | Offered     | Offered      | Offered          | Offered           | Offered | Offered |
| Middlebury          | Offered     |              |                  | Offered           | Offered | Planned |
| Morrisville         | Offered     | Offered      | Offered          | Offered           | Planned | Offered |
| Newport             | Offered     | Offered      |                  | Offered           |         |         |
| Randolph            | Offered     | Planned      | Offered          | Offered           |         | Offered |
| Rutland             | Offered     | Offered      | Offered          | Offered           | Offered | Offered |
| St. Albans          | Offered     | Offered      | Offered          | Offered           | Offered | Offered |
| St. Johnsbury       | Offered     |              |                  | Offered           |         | Planned |
| Springfield         | Offered     | Offered      |                  | Offered           | Offered | Offered |
| Upper Valley        | Offered     |              | Planned          | Offered           | Planned | Planned |
| 2/ Windsor          | Offered     |              | Offered          | Offered           | Offered |         |

Barre HSA

Full Network

Node color indicates sub-network membership

Node size indicates Betweenness Centrality



### Financial Support

### Mechanism

### Product

|              |                                           |                     |
|--------------|-------------------------------------------|---------------------|
| All Insurers | Payment Reform # 1<br>\$PPPM - NCQA score | PCMH Transformation |
|--------------|-------------------------------------------|---------------------|

|              |                                    |                        |
|--------------|------------------------------------|------------------------|
| All Insurers | Payment Reform # 2<br>Shared Costs | Community Health Teams |
|--------------|------------------------------------|------------------------|

|           |        |                    |
|-----------|--------|--------------------|
| Blueprint | Grants | Project Management |
|-----------|--------|--------------------|

|           |        |                       |
|-----------|--------|-----------------------|
| Blueprint | Grants | Practice Facilitators |
|-----------|--------|-----------------------|

|           |        |                              |
|-----------|--------|------------------------------|
| Blueprint | Grants | Self Management<br>Workshops |
|-----------|--------|------------------------------|

|           |          |                                     |
|-----------|----------|-------------------------------------|
| Blueprint | Contract | Clinical Registry & Data<br>Quality |
|-----------|----------|-------------------------------------|

|           |          |                                                |
|-----------|----------|------------------------------------------------|
| Blueprint | Contract | Evaluation, Analytics,<br>Modeling & Reporting |
|-----------|----------|------------------------------------------------|

# Quality Data Leads to Quality Improvement

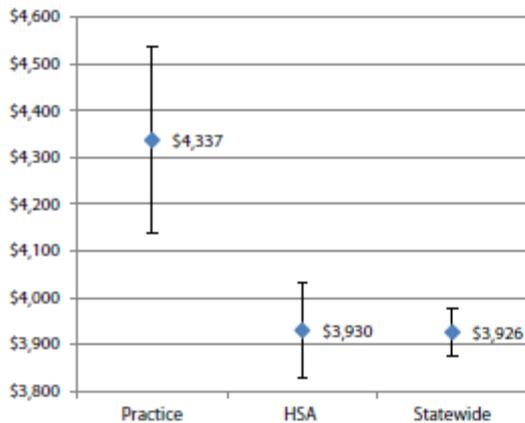
## All-payer Claims Database



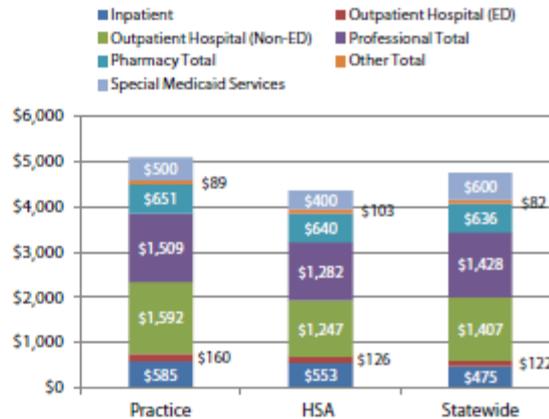
### Practice Profile: Main Street Primary Care

Period: 01/2011 – 12/2011 Practice HSA: Barre Profile Type: Adults (18–64 Years)

#### Total Expenditures per Capita



#### Total Expenditures by Major Category



#### Breast Cancer Screening

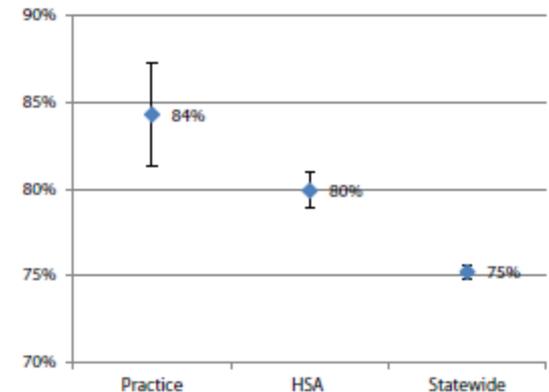


Figure 11: Presents the proportion, including 95% confidence intervals, of continuously enrolled female members, ages 52–64 years, who had a mammogram to screen for breast cancer during the measurement year or year prior to the measurement year.

## 2012 Study Groups

| <b>Study Groups</b>                  | <b># People</b> | <b># Practices</b> |
|--------------------------------------|-----------------|--------------------|
| <b>Commercial (Ages 1-17 Years)</b>  |                 |                    |
| Blueprint 2012                       | 30,632          | 102                |
| Comparison 2012                      | 22,488          | 49                 |
| <b>Commercial (Ages 18-64 Years)</b> |                 |                    |
| Blueprint 2012                       | 138,994         | 105                |
| Comparison 2012                      | 83,171          | 67                 |
| <b>Medicaid (Ages 1-17 Years)</b>    |                 |                    |
| Blueprint 2012                       | 32,812          | 94                 |
| Comparison 2012                      | 15,333          | 41                 |
| <b>Medicaid (Ages 18-64 Years)</b>   |                 |                    |
| Blueprint 2012                       | 38,281          | 105                |
| Comparison 2012                      | 16,159          | 54                 |

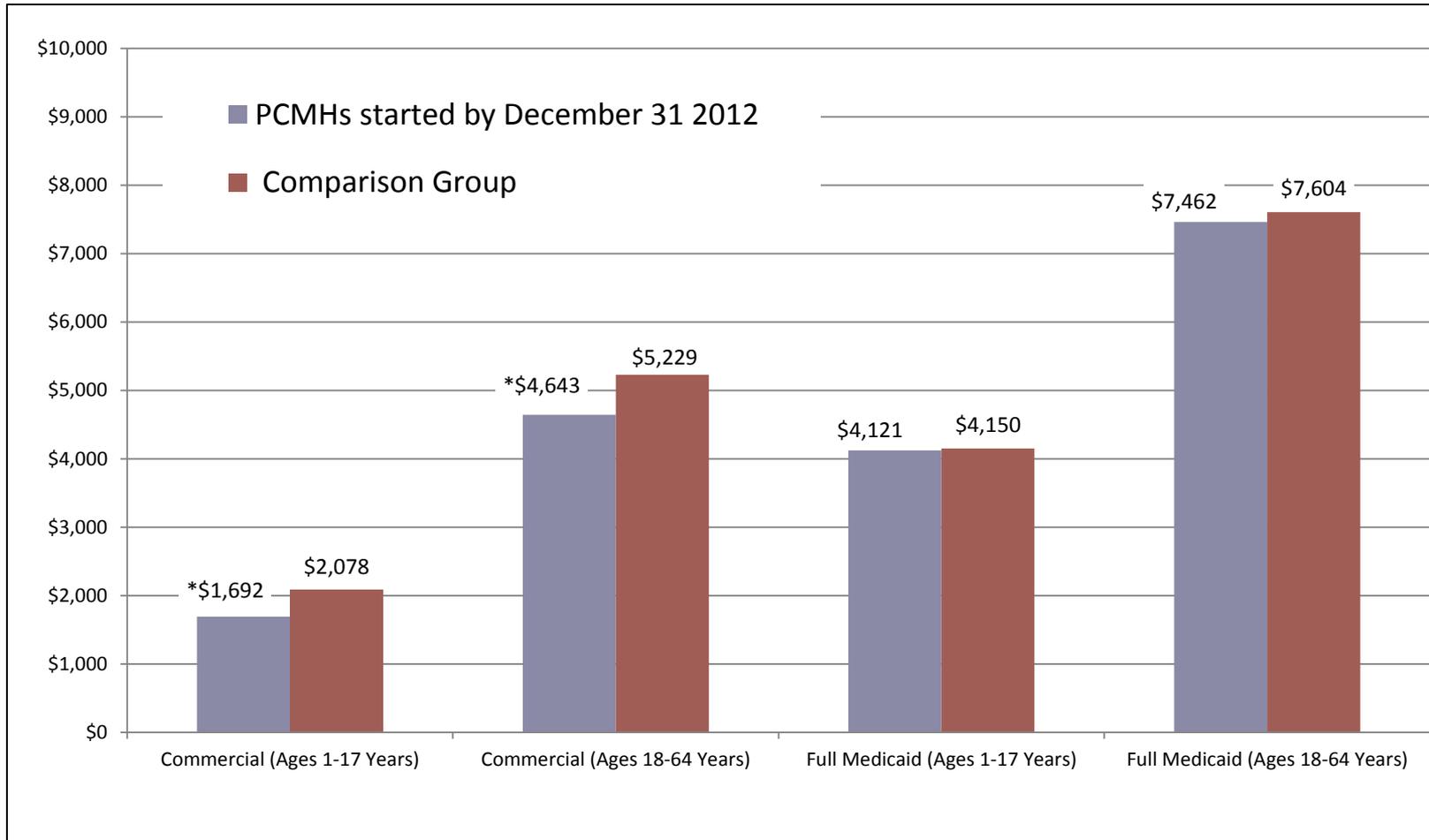
# 2012 Study Group Characteristics

| Age Stratification                   | Average Age | Male  | Healthy CRG* | Acute Illness or Minor Chronic CRG | Chronic CRG | Significant Chronic CRG | Catastrophic or Cancer CRG | Maternity | Blueprint Selected Chronic Conditions |
|--------------------------------------|-------------|-------|--------------|------------------------------------|-------------|-------------------------|----------------------------|-----------|---------------------------------------|
| <b>Commercial (Ages 1-17 Years)</b>  |             |       |              |                                    |             |                         |                            |           |                                       |
| Blueprint PCMHs                      | 9.7         | 50.4% | 80.1%        | 12.4%                              | 6.6%        | 0.7%                    | 0.2%                       | 0.4%      | 11.7%                                 |
| Comparison Group                     | 9.8         | 51.8% | 80.8%        | 12.0%                              | 6.2%        | 0.6%                    | 0.4%                       | 0.3%      | 10.1%                                 |
| <b>Commercial (Ages 18-64 Years)</b> |             |       |              |                                    |             |                         |                            |           |                                       |
| Blueprint PCMHs                      | 44.2        | 46.2% | 51.5%        | 22.0%                              | 20.0%       | 5.9%                    | 0.6%                       | 2.1%      | 30.4%                                 |
| Comparison Group                     | 43.3        | 45.4% | 54.4%        | 21.0%                              | 18.4%       | 5.3%                    | 1.0%                       | 2.2%      | 25.7%                                 |
| <b>Medicaid (Ages 1-17 Years)</b>    |             |       |              |                                    |             |                         |                            |           |                                       |
| Blueprint PCMHs                      | 8.5         | 51.1% | 72.1%        | 14.6%                              | 11.5%       | 1.6%                    | 0.2%                       | 0.7%      | 24.6%                                 |
| Comparison Group                     | 8.5         | 52.8% | 72.4%        | 14.6%                              | 11.1%       | 1.5%                    | 0.4%                       | 0.7%      | 21.6%                                 |
| <b>Medicaid (Ages 18-64 Years)</b>   |             |       |              |                                    |             |                         |                            |           |                                       |
| Blueprint PCMHs                      | 38.0        | 42.8% | 43.3%        | 20.2%                              | 26.2%       | 9.7%                    | 0.7%                       | 4.1%      | 44.5%                                 |
| Comparison Group                     | 37.8        | 42.8% | 46.2%        | 18.8%                              | 25.7%       | 8.2%                    | 1.2%                       | 4.4%      | 38.0%                                 |

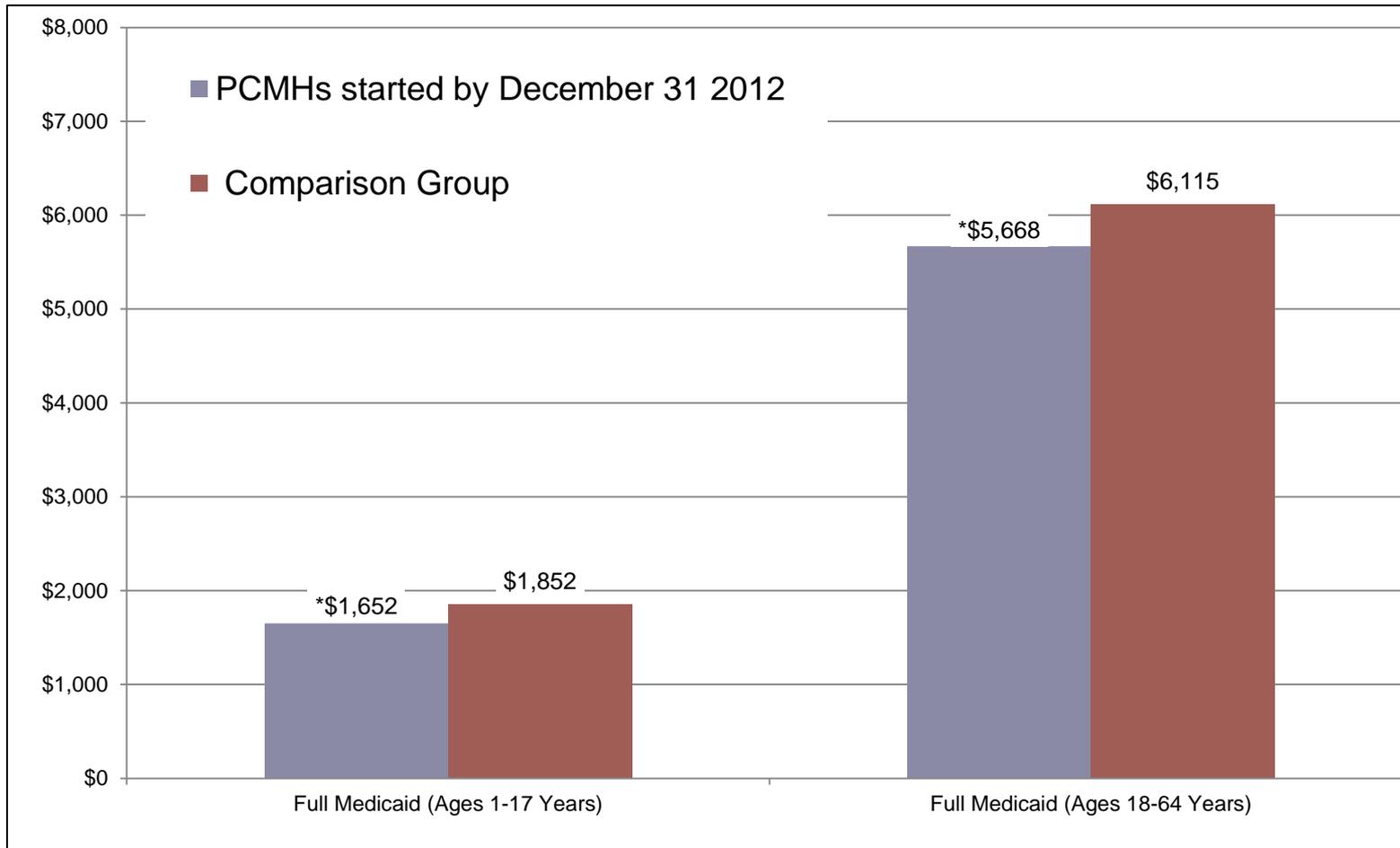
\*Clinical Risk Groups (CRGs) are a product of 3M™ Health Information Systems and were applied to the VHCURES claims data to classify each member's health status. For example, members with cancer, diabetes, minor chronic joint pain, or healthy are classified separately for analysis.

\*\*Blueprint Selected Chronic Conditions include: Asthma, Attention Deficit Disorder, Chronic Obstructive Pulmonary Disease, Congestive Heart Failure, Coronary Artery Disease, Diabetes, Depression, Hypertension

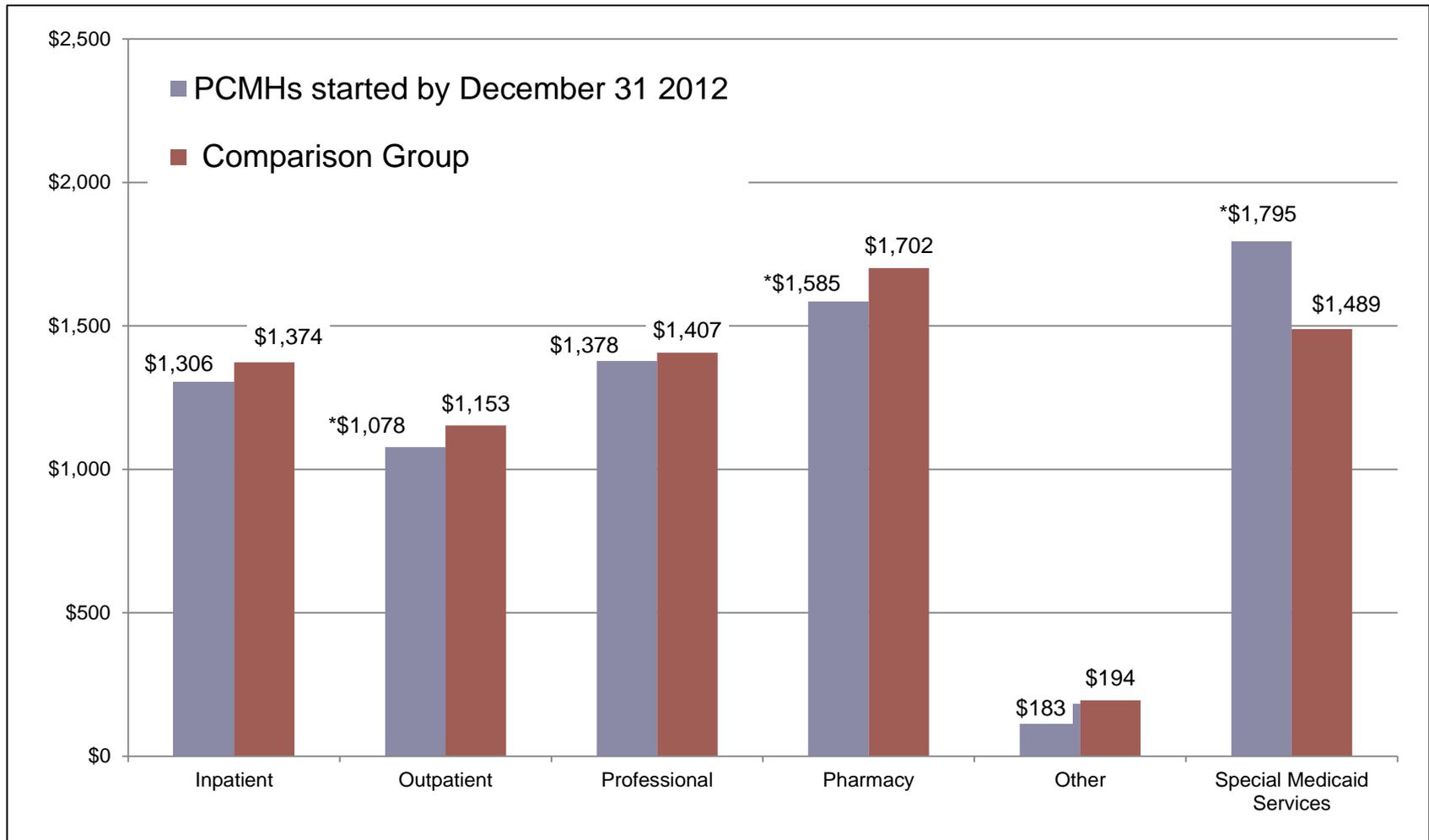
## 2012 Total Expenditures per Capita



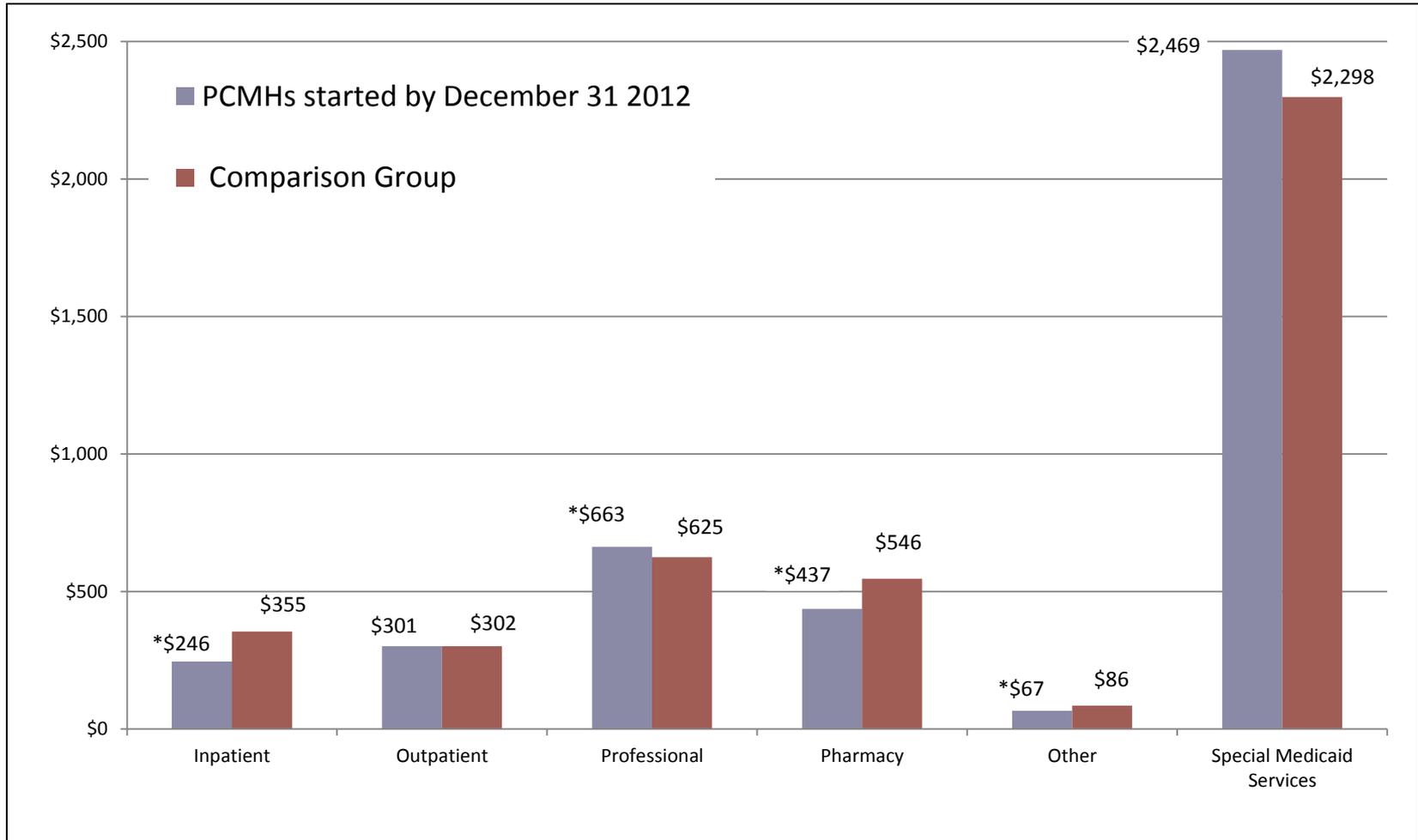
## 2012 Total Expenditures per Capita (Medicaid minus Special Services)



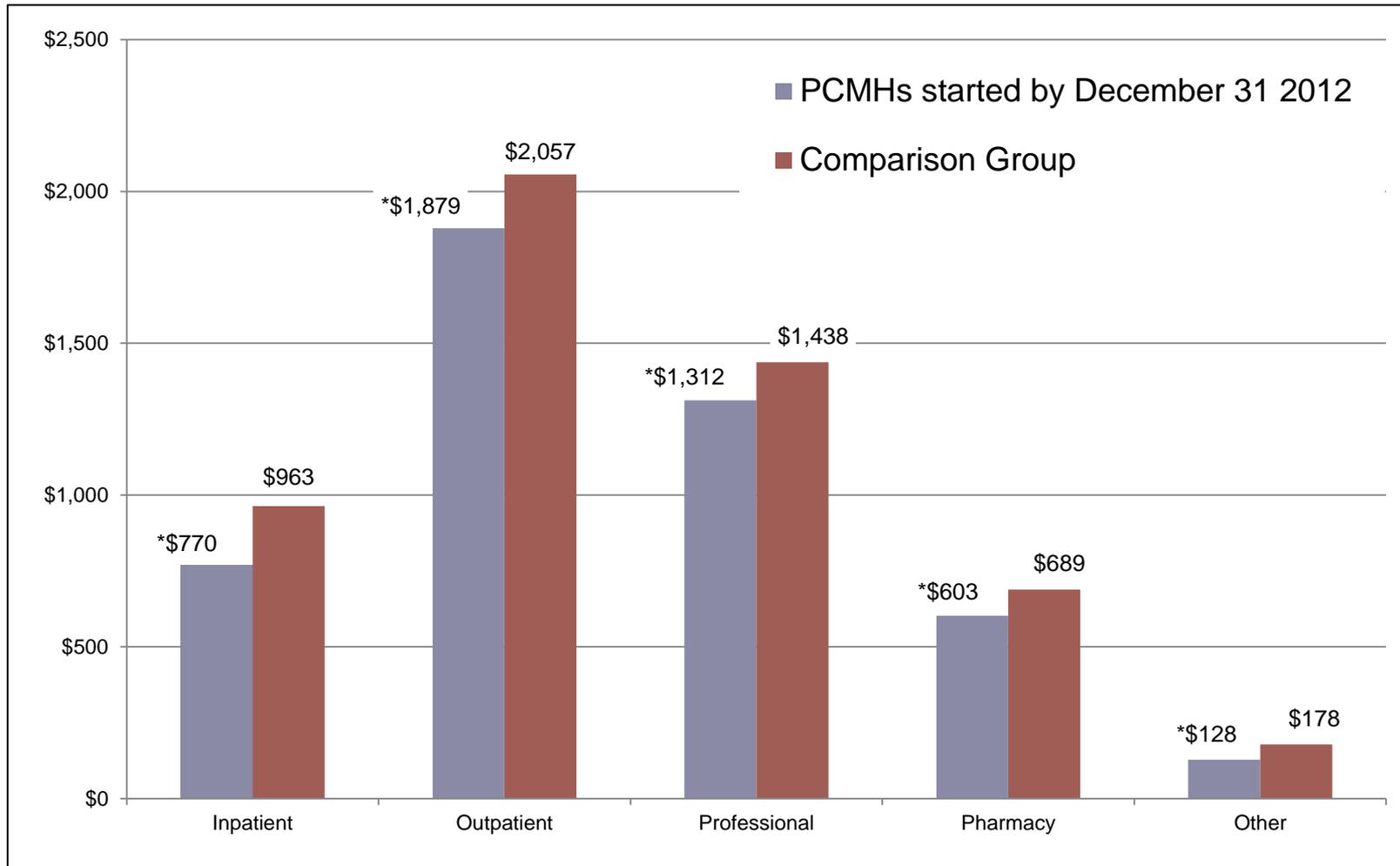
## 2012 Medicaid Expenditures by Major Category (Ages 18-64)



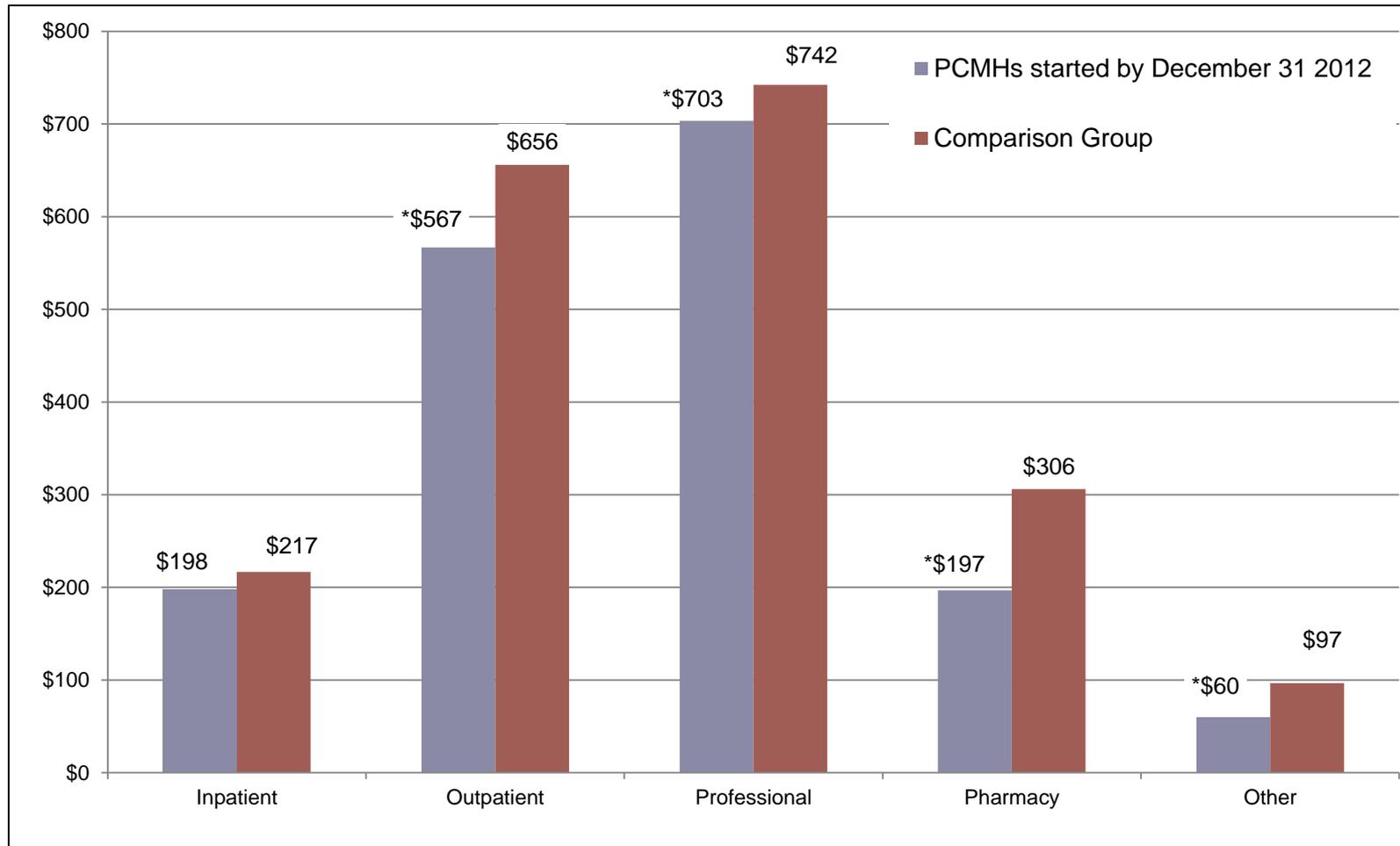
## 2012 Medicaid Expenditures by Major Category (Ages 1-17)



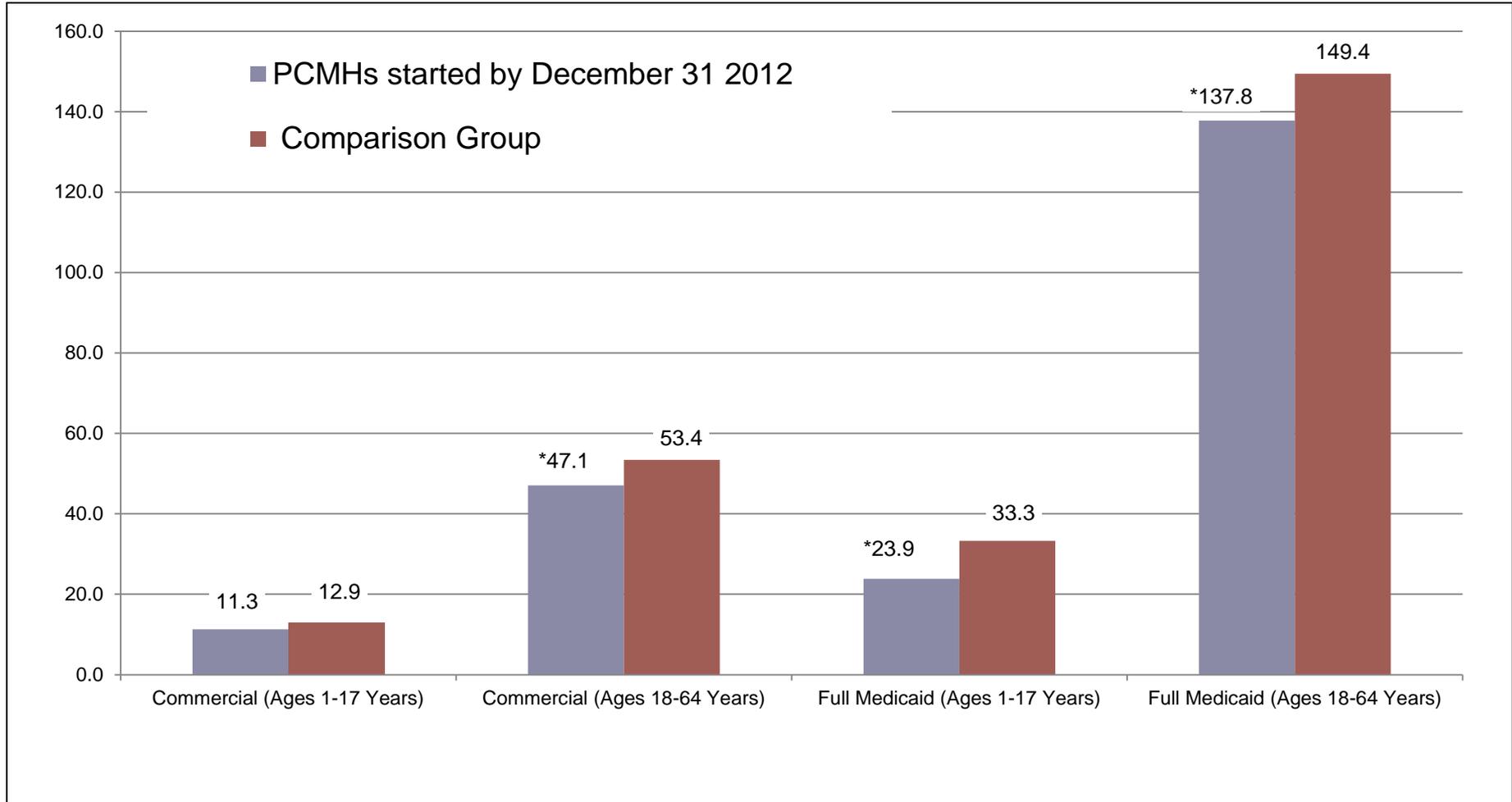
## 2012 Commercial Expenditures by Major Category (Ages 18-64)



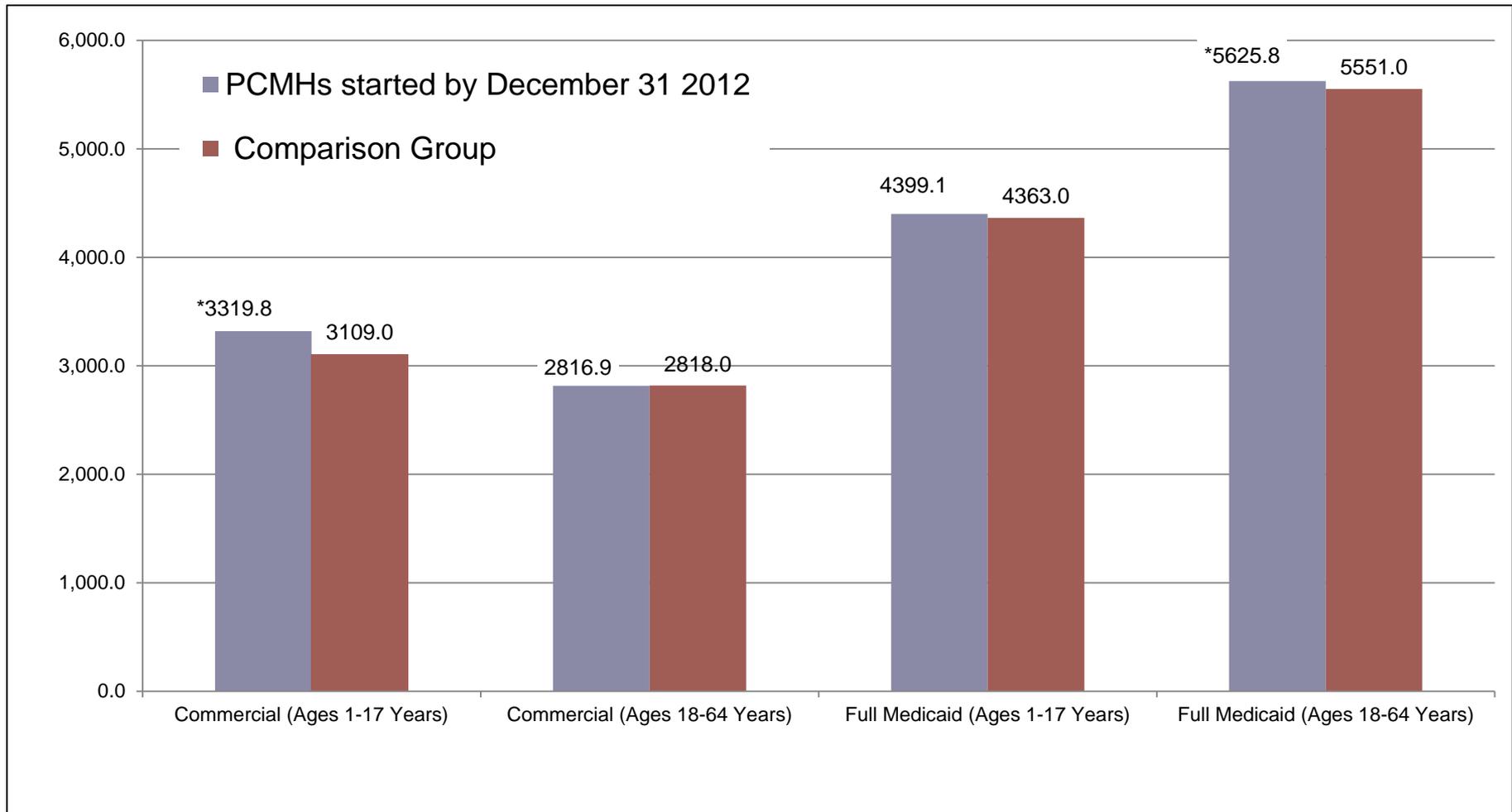
## 2012 Commercial Expenditures by Major Category (Ages 1-17 Years)



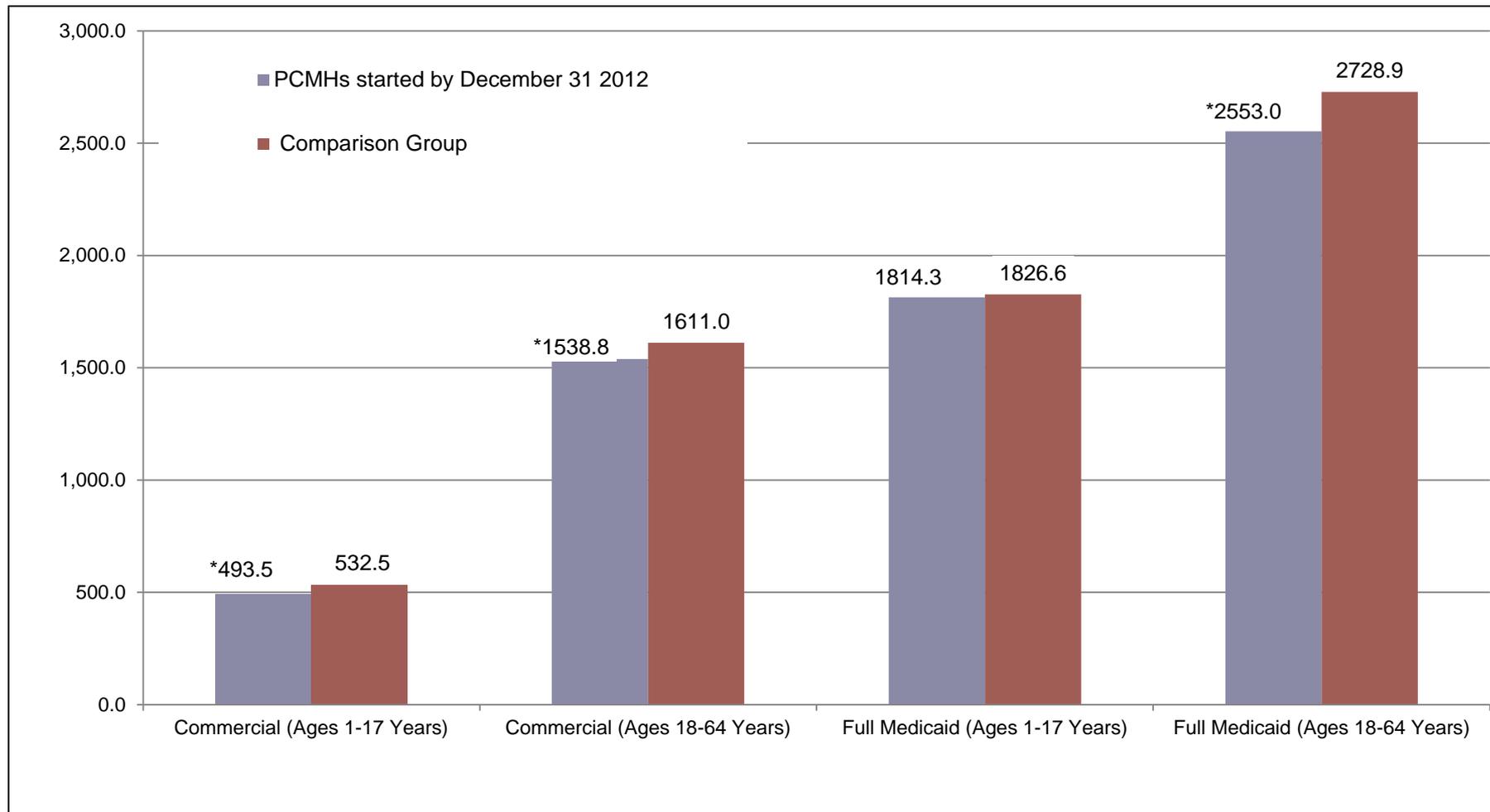
## 2012 Inpatient Discharges (rate / 1000 beneficiaries)



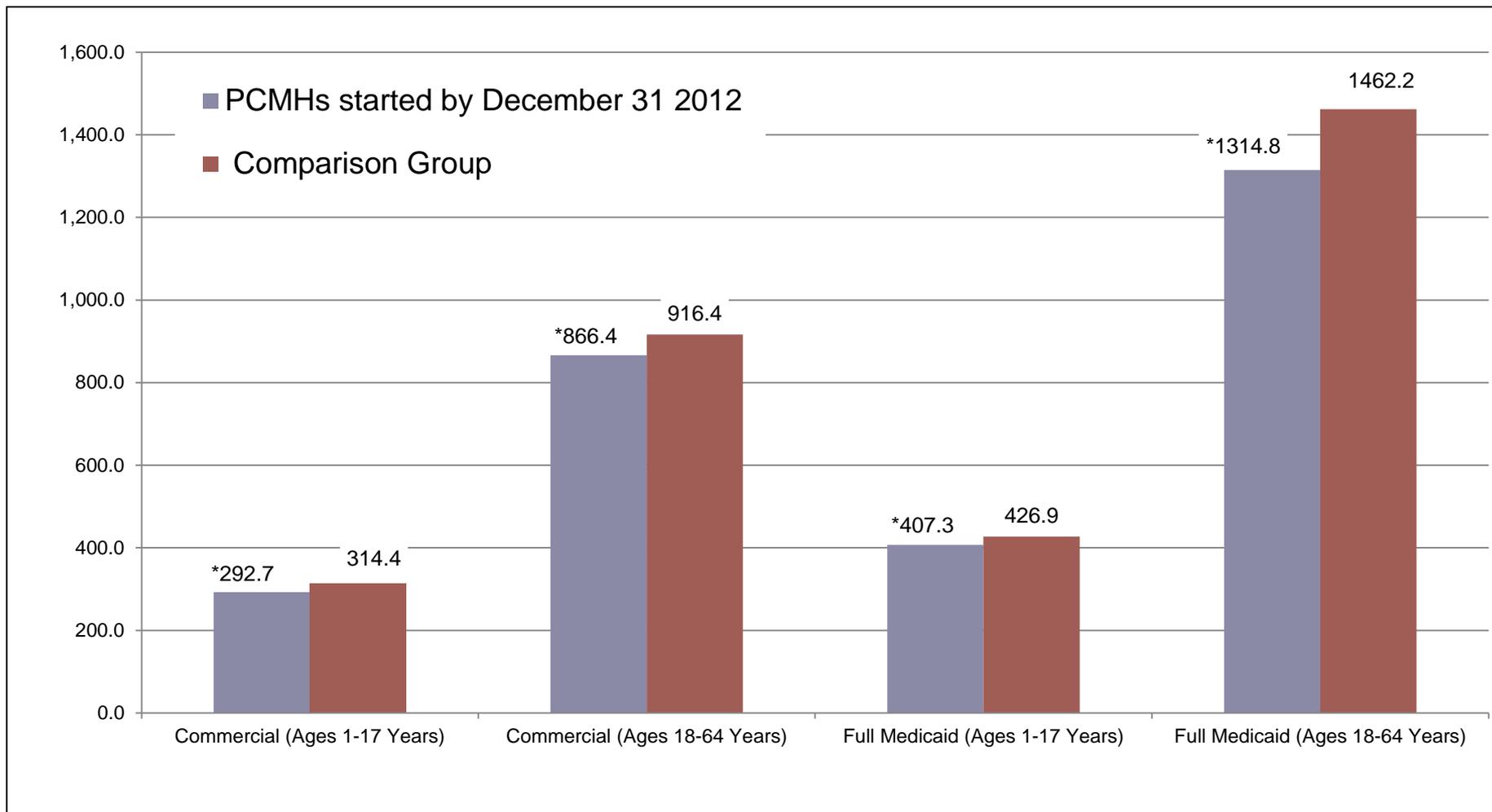
## 2012 Primary Care Visits (rate / 1000 beneficiaries)



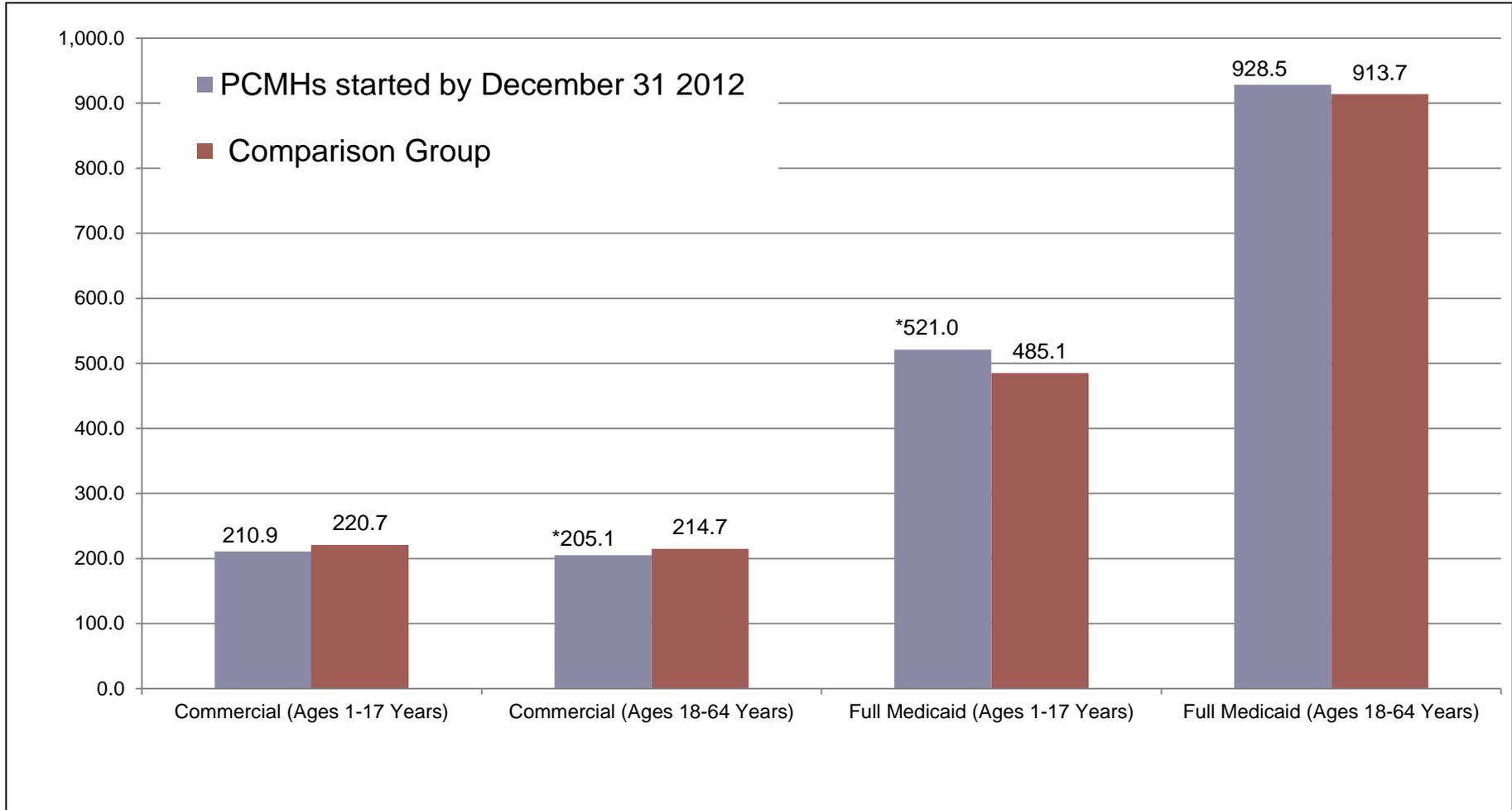
## 2012 Medical Specialty Visits (rate / 1000 beneficiaries)



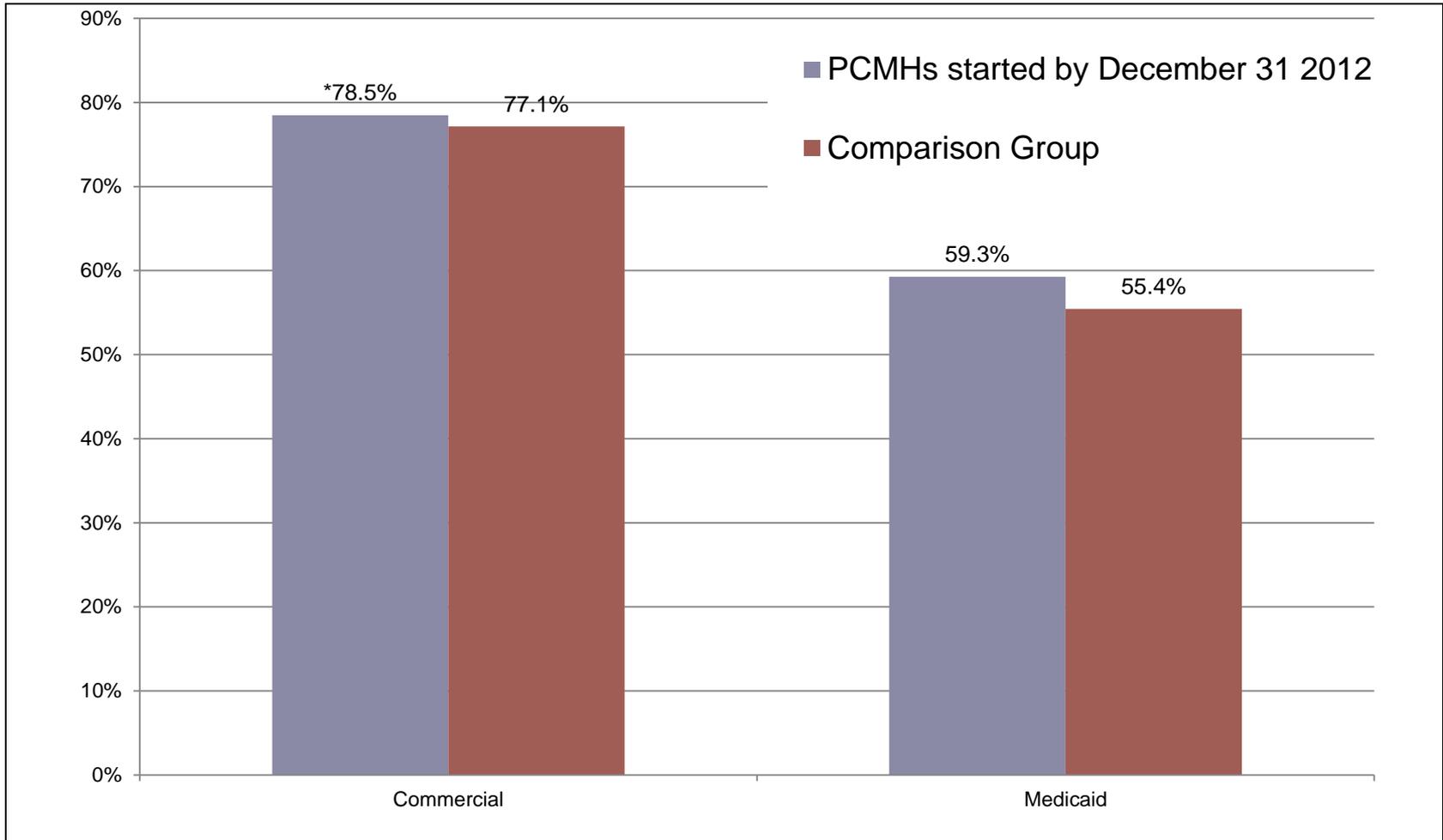
## 2012 Surgical Specialty Visits (rate / 1000 beneficiaries)



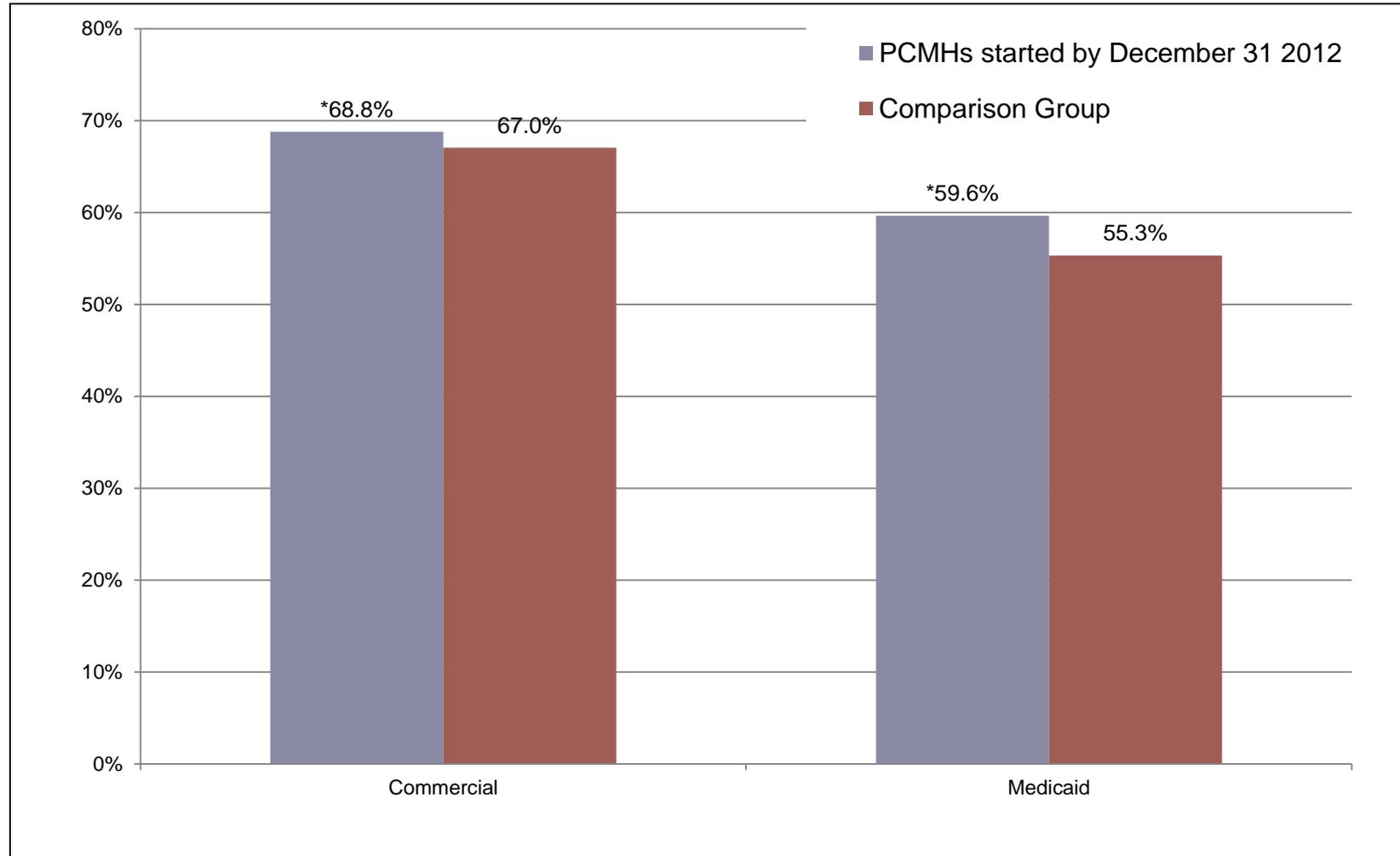
## 2012 Emergency Department Visits (rate / 1000 beneficiaries)



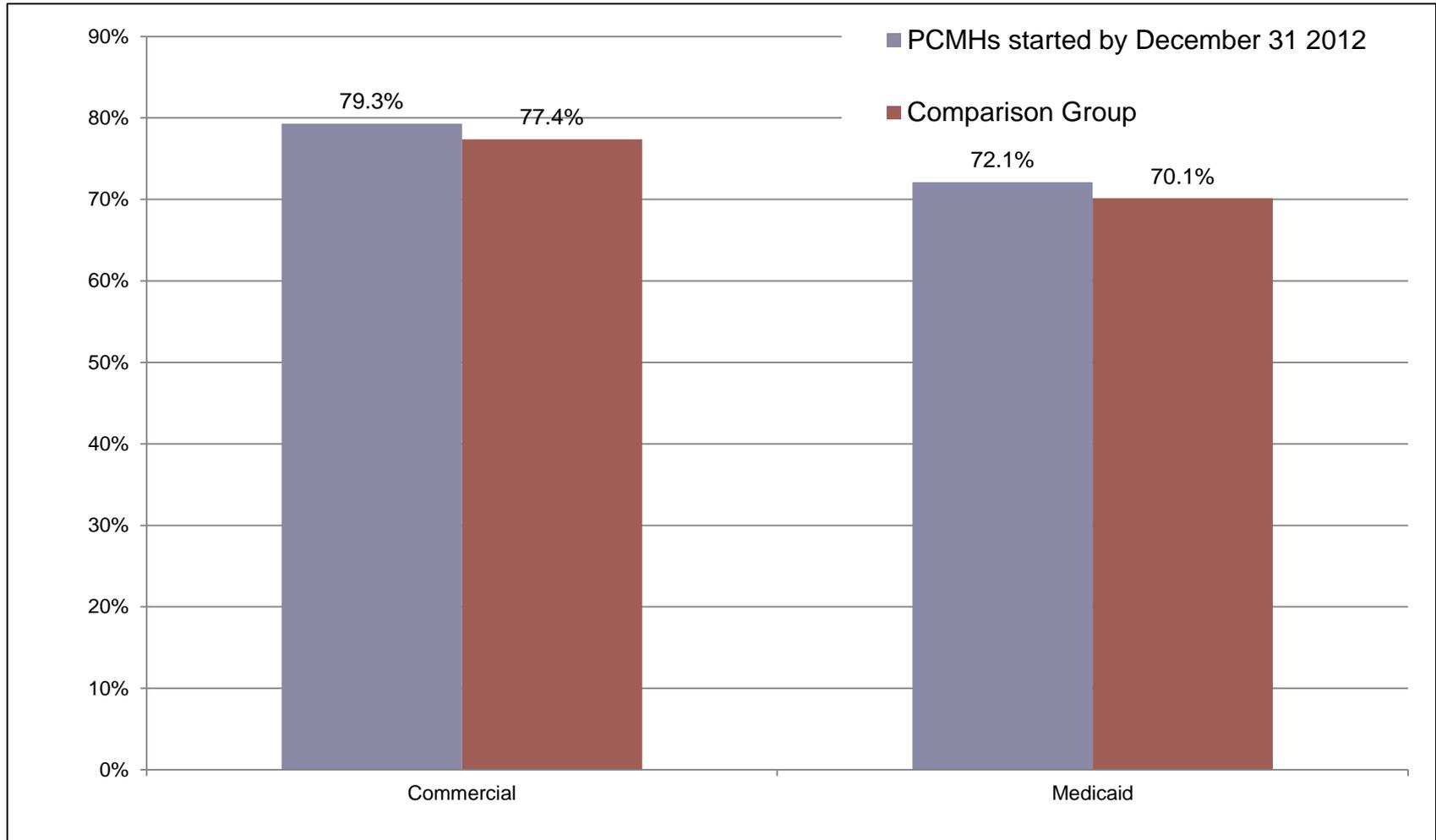
## 2012 Breast Cancer Screening (HEDIS)



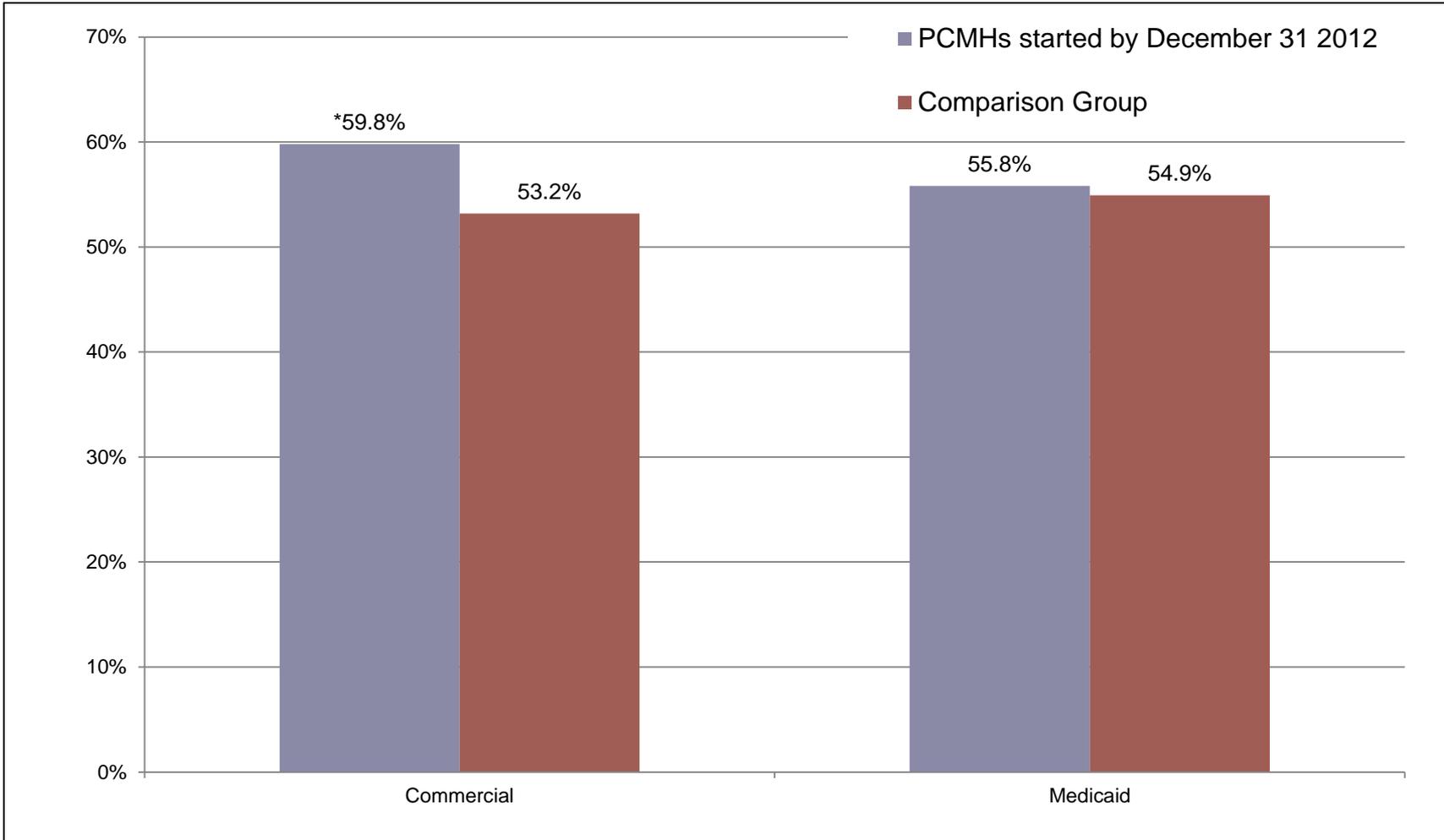
## 2012 Cervical Cancer Screening (HEDIS)



## 2012 Well-Child Visits (HEDIS)



### 2012 Adolescent Well-Care Visits (HEDIS)



## Savings Compared to Investment in 2012

| Study Groups                                     | # People | Amount Saved Per Person in 2012* | Total Saved in 2012 | Total Invested in 2012**  | 2012 Gain/Cost Ratio*** |
|--------------------------------------------------|----------|----------------------------------|---------------------|---------------------------|-------------------------|
| <b>Commercial (Ages 1-17 Years)</b>              |          |                                  |                     | Commercial<br>\$5,905,166 | 15.8                    |
| Blueprint 2012                                   | 30,632   | \$386                            | \$11,823,952        |                           |                         |
| <b>Commercial (Ages 18-64 Years)</b>             |          |                                  |                     | Medicaid<br>\$2,883,525   | 8.2 excludes<br>****SMS |
| Blueprint 2012                                   | 138,994  | \$586                            | \$81,450,484        |                           |                         |
| <b>Medicaid (Ages 1-17 Years) Excluding SMS</b>  |          |                                  |                     | Medicaid<br>\$2,883,525   | 2.2 includes<br>SMS     |
| Blueprint 2012                                   | 32,812   | \$200                            | \$6,562,400         |                           |                         |
| <b>Medicaid (Ages 18-64 Years) Excluding SMS</b> |          |                                  |                     | Medicaid<br>\$2,883,525   | 2.2 includes<br>SMS     |
| Blueprint 2012                                   | 38,281   | \$447                            | \$17,111,607        |                           |                         |
| <b>Medicaid (Ages 1-17 Years) Including SMS</b>  |          |                                  |                     | Medicaid<br>\$2,883,525   | 2.2 includes<br>SMS     |
| Blueprint 2012                                   | 32,812   | \$29                             | \$951,548           |                           |                         |
| <b>Medicaid (Ages 18-64 Years) Including SMS</b> |          |                                  |                     | Medicaid<br>\$2,883,525   | 2.2 includes<br>SMS     |
| Blueprint 2012                                   | 38,281   | \$142                            | \$5,435,902         |                           |                         |

\*Difference in 2012 total expenditures per person for Participants vs. Comparison Group.

\*\*Includes 2012 totals for Patient Centered Medical Home and Community Health Team payments.

\*\*\*Calculated as Total Saved divided by Total Invested.

\*\*\*\*Special Medicaid Services (SMS) include Transportation, Home and community-based services, Case management, Dental, Residential treatment, Day treatment, Mental health facilities, School-based and Department of Education Services

## Summary – Results from 2012 Claims Data

PCMH+CHT patients vs. their respective comparison groups

- Improved healthcare patterns
- Reduced medical expenditures per capita
- Linking Medicaid population to non-medical support services
- Similar or higher rates of recommended assessments

## Summary – Program Status in 2013

- PCMHs + CHTs providing health services to the general population
- Additional care support for targeted subpopulations
  - SASH
  - Hub & Spoke
  - VCCI
  - Tobacco Cessation
- Integral part of health and human service networks in each community
- Statewide network of self management support programs
- Network of local, regional, and statewide learning forums
- Multi-dimensional statewide administrative network (extension, QI)
- Comparative evaluation including practice profiles (PCMH>HSA>Statewide)

## Summary – Foundation for newer reforms - ACOs

- Local Blueprint leads (administrative, CHTs) work for organizations that are part of ACOs (hospitals, FQHCs)
- PCMHs + CHTs > more complete services for the general population
- ACOs > oriented towards care management for high cost patients
- ACOs can work with local administrative & CHT leaders
  - Plan care support strategies for targeted subpopulations
  - Determine need for additional care support in each HSA
  - Add care support that is needed for targeted subpopulations
  - Provide data & information for targeted subpopulations
- Evaluate additive impact of ACO to PCMH+CHT baseline

## Payment Structure

- Use targeted payment reforms to achieve targeted outcomes
- Further investment in advanced primary care
- Increase \$PPPM to PCMHs (Transformation)
- Increase \$PPPM for CHTs (Capacity)
- Introduce P4P \$PPPM (Outcomes)
  - Eligibility – based on quality (HEDIS)
  - Payment – based on Total Utilization Index (TUI)
- Composite payment model (Transformation + Capacity + Outcomes)
- Extension to specialists establishes shared interests & common goals