

IDAHO STATEWIDE HEALTHCARE INNOVATION PLAN KICK-OFF MULTI-PAYER STRATEGIES WORK GROUP

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Statewide **Healthcare Innovation** Plan

Improved health, improved healthcare, and lower cost for all Idahoans

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Grant Administrator:
Idaho Department of Health and Welfare

Agenda

- Introductions
- Overview of Multi-Payer Strategies Work Group Goals
- Review of Project Timeline
- Work Group Member Responsibilities
- Overview of Focus Group Input Process
- Discuss Key Policy Decisions for Multi-Payer Strategies Innovation
 - Current State
 - Future State
- Determine Primary Topics Important to Focus Group Participants
- Confirmation of Meeting Dates and Next Steps



Introductions

Work Group Team Members

Work Group Facilitators / Specialists

- Russ Ackerman, Facilitator (Mercer)
- Scott Banken, Facilitator (Mercer)
- Bill Laskowski, Specialist (Mercer)
- Sudha Shenoy, Specialist (Mercer)
- Dr. Jeff Thompson, Specialist (Mercer)
- Shelli Stayner, Specialist (Mercer)

Work Group Members

- Dr. Dave Peterman, Chair (Primary Health Medical Group)
- Yvonne Ketchum (Blue Cross of Idaho)
- Melissa Christian (Regence Blue Shield of Idaho)
- Dave Self (PacificSource)
- Randy Billings (St. Luke's Health System)
- Blaine Peterson (St. Alphonsus Health System)
- Paul Leary (Division of Information Technology Services, IDHW)
- Kathy McGill (Idaho Department of Insurance)
- Larry Tisdale (Idaho Hospital Association)
- TBD (NORCO)

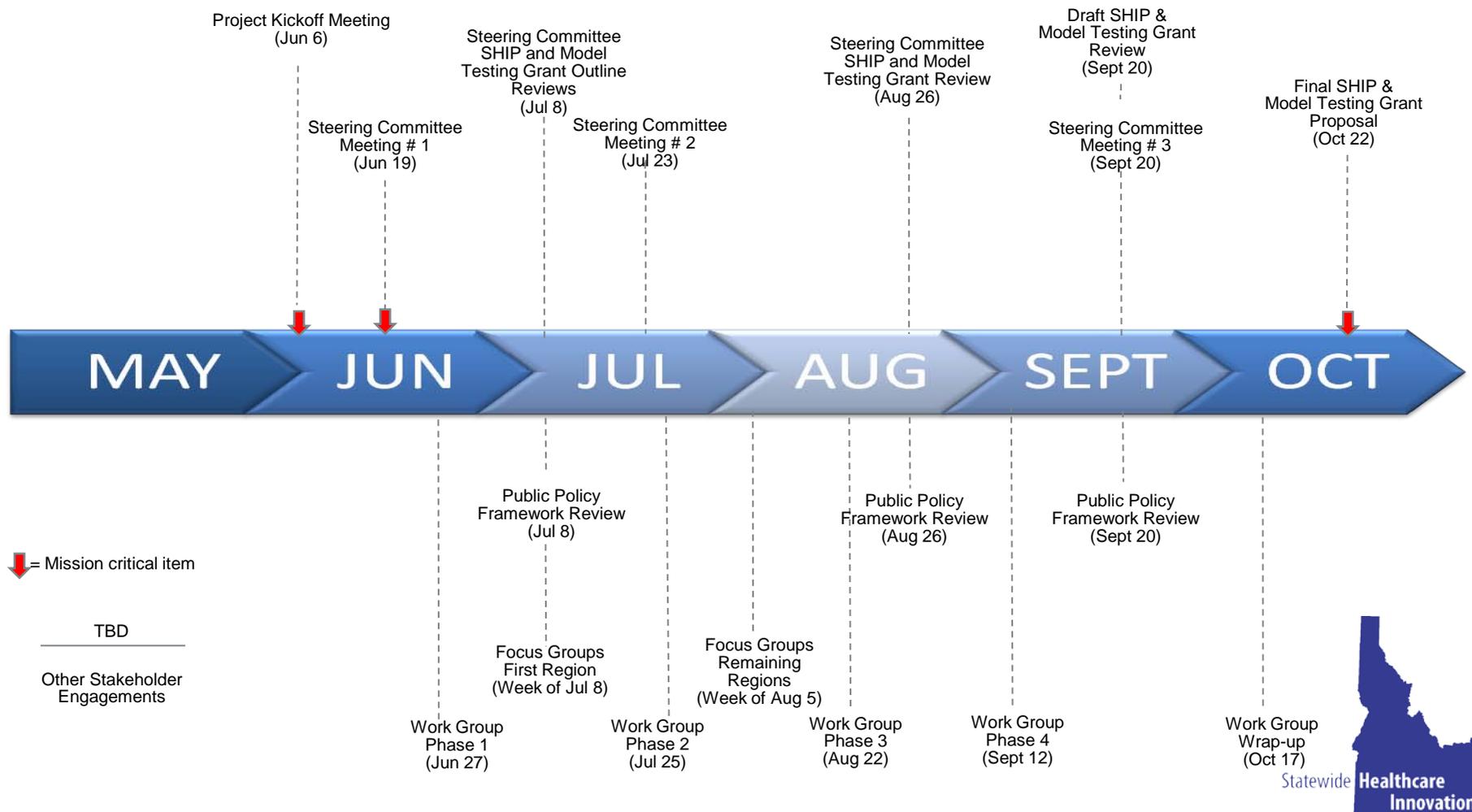


Multi-Payer Strategies Work Group Goals

- Payment model for the new health care delivery and payment system that would sustain innovation throughout the state
- Gap Analysis of current and future state
- Build upon successful existing payment structures
- Processes to monitor health care cost performance trends affecting cost trends
- Quality performance indicators by payer type
- Delivery system targets that relate to multi-payer strategies



Timeline and Project Flow – Tentative Work Group Meeting Dates



Work Group Member Responsibilities

- Preparation for and attendance at all Work Group meetings.
- Collaboration in recommending critical elements of the Multi-Payer Strategies blueprint.
- Engagement in developing an innovation plan that strives to meet the expected outcomes of the new system.
- Provision of expertise and information as needed.
- Guidance for soliciting focus group input.
- Advocating to key stakeholders for their support including letters of support and participation.

Key Decisions for Multi-Payer Strategies Innovation

- **Stakeholder Engagement and Pilot Convening:** Determine best practices in developing consensus on common goals and strategies. Determine the most appropriate vehicles by which to test those goals and strategies.
- **Developing Infrastructure and Community Linkages:** Determine best practices in building community infrastructure to support multi-payer pilots, including information technology, shared practice supports, and behavioral health integration.
- **Payment:** Determine appropriate payment methodologies to support practices participating in multi-payer payment and delivery system reform programs. Determine the feasibility of uniform multi-payer incentives for performance tied to statewide metrics.
- **Attribution and Enrollment:** Quantify any shared saving or fiscal responsibility tied to poor outcomes. How to attribute patients to practices for participation in multi-payer models.
- **Evaluation:** Determine appropriate means of measuring multi-payer impact, and any shared saving for participation in multi-payer models.



Overview of Focus Group Input Process

- Three key groups of focus group stakeholders:
 - **Primary Care Providers** (physicians, nurse practitioners, and physician assistants, all of whom are qualified to become a Medicaid Health home)
 - **Consumers** (patients)
 - **Other Service Providers** (mental health, Idaho Health Data Exchange, the Duals programs; entities critical to the design of transformation in Idaho)
- Focus groups will:
 - Assess acceptability of delivery system changes
 - Identify obstacles to implementation
 - Evaluate needs and opportunities for innovation
- Work group will:
 - Engage in developing content to solicit focus group input
 - Incorporate focus group input into recommendations

Overview of Focus Group Input Process, cont'd

- Focus groups have limited time
 - Can only cover a portion of material with each focus group
 - Need to carefully consider:
 - What questions the focus groups will address
 - Which focus group audience is best positioned to address them
- ▶ **Action Required:** Identify discussion content for focus groups

Determine Primary Topics Important to Focus Group Participants

- Quality
 - Current quality performance by key indicators
 - Delivery system cost performance targets
 - Health outcomes for all participating patients
 - Improve health care for all participating patients
- Costs
 - Health care cost performance trends and factors affecting cost trends (including commercial insurance premiums
 - Medicaid and CHIP information, Medicare information, etc)
 - Cost management strategies to ensure financial sustainability throughout the system

Determine Primary Topics Important to Focus Group Participants, cont'd

- Where it is best to build new and where it is best to build upon existing structures and systems in order to avoid duplication of existing structures/systems
- Accountability of all participants, regardless of payer or region
- Roles and responsibilities within the system design
- Challenges to implementing the model in order to yield the desired outcomes and potential solutions
- Accountability for outcomes

Confirmation of Meeting Dates and Next Steps

- Tentative work group meeting dates:
 - June 27
 - July 25
 - August 22
 - September 12
 - October 17 (if needed)
- Need to move any dates?
- Start time?
- Next steps

