



Status of Work Groups for All-Payer Hospital
System Modernization
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HSCRC

Health Services Cost
Review Commission

HSCRC Work Group Descriptions

Physician Alignment & Engagement

- ▶ Alignment with Emerging Physician Models
- ▶ Shared Savings
- ▶ Care Improvement
 - ▶ Care Coordination Opportunities
 - ▶ Post-Acute and Long-Term Care
 - ▶ Evidence-Based Care

Performance Improvement & Measurement

- ▶ Reducing Potentially Avoidable Utilization to achieve Three-Part Aim
 - ▶ Statewide Targets & Hospital Performance Measurement
 - ▶ Measuring Potentially Avoidable Utilization
- ▶ Value-Based Payments (integration of cost, quality, population health and outcomes)
- ▶ Patient Experience and Patient-Centered Outcomes

HSCRC Work Group Descriptions

Data and Infrastructure

- ▶ Data Requirements
- ▶ Care Coordination Data and Infrastructure
- ▶ Technical and Staff Infrastructure
- ▶ Data Sharing Strategy

Payment Models

- ▶ Balanced Update
- ▶ Guardrails for Model Performance
- ▶ Market Share
- ▶ Initial and Future Models

Overview

- ▶ Progress on focused set of tasks needed for initial Commission decision making
 - ▶ Several Commission agenda items reflect workgroup input
- ▶ Still remaining short-term issues and longer-term issues to address
- ▶ Coalition of consumer group engaged across all groups and offering input
- ▶ Beginning to develop plans for 2nd phase of workgroup process for subsequent Commission discussion

Workgroup Products (as of 5/12/14)

▶ **Payment Model**

- ▶ Draft UCC Policy Recommendations
- ▶ Draft Update Factors Recommendation for FY 2015
- ▶ Draft Readmission Shared Savings Recommendation for FY 2015
- ▶ Final Report – Balanced Update and Short-Term Adjustments

▶ **Performance Measurement**

- ▶ Final Recommendations– Maryland Hospital Acquired Conditions
- ▶ Final Recommendations – Readmissions
- ▶ First Draft – Efficiency Report

▶ **Data and Infrastructure**

- ▶ Final Report - Data Requirements for Monitoring All-Payer Model

▶ **Physician Alignment and Engagement**

- ▶ First Draft - Current Physician Payment Models and Recommendations for Physician Alignment Strategies under the All-Payer Model

Payment Models Workgroup

- ▶ **Subgroups still active:**
 - ▶ Demographic Adjustment
 - ▶ Global Budgeting
- ▶ **Next areas of focus**
 - ▶ Guardrails for model performance
 - ▶ Capital policy
 - ▶ Market share
 - ▶ Global budgeting experience
 - ▶ Relationship of hospital utilization to benefit design changes
 - ▶ Relationship to alignment strategies

Physician Alignment & Engagement

- ▶ **Alignment Strategies Goals and Desirable Features (still finalizing)**
 - ▶ Engage health care providers and align their incentives based on quality improvement goals, consistent with the goals, requirements and policies of the All-Payer Model
 - ▶ Promote aligned incentives to improve the overall health of the entire population, including hospital and non-hospital-based health care services
 - ▶ Encourage the development of programs and services the keep stride with the national trend of movement from a volume based provider centric system to a value based consumer centric system
 - ▶ Strive to engage all payers in the incentive and alignment programs
 - ▶ Desirable Features: Engagement, Alignment, Transparency, Scalability, Sustainability
- ▶ **Draft Report on Alignment Strategies – June due date to Commission**
 - ▶ Background on landscape of existing payment models – addressing workgroup comments
 - ▶ Potential Strategies – revising and seeking additional comments
- ▶ **Next Area of Focus**
 - ▶ Care Improvement Opportunities/Care Coordination
 - ▶ Post Acute and Long-Term Care

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- ▶ ▶7 Evidence Based Care

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Performance Measurement Update

- ▶ **Work in progress**
 - ▶ Population-based Cost Measures (Efficiency and Potentially Avoidable Utilization Report)
 - ▶ Updated Balanced Scorecard
- ▶ **Next Area of Focus**
 - ▶ Patient-Centered, Population-Based Performance Measurement and Value-Based Payment Vision and Strategy
 - ▶ Outpatient measures
 - ▶ Revisit measures of potentially avoidable utilization

Data Infrastructure

- ▶ **Work in Progress**
 - ▶ Total Cost Report Development (subgroup)
- ▶ **Next area of focus - Data Infrastructure for Care Coordination and Improvement**
 - ▶ Potential for Medicare data
 - ▶ Conceptual model for use of data and infrastructure needed
 - ▶ Need to coordinate with other groups and understanding of data needs