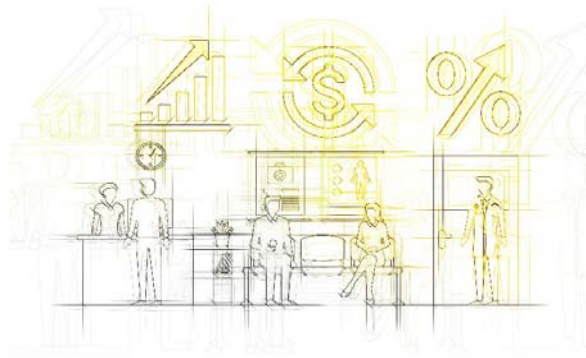


# The National ACO, Bundled Payment and MACRA Summit

## Success in Physician Led Bundles



# Disclaimer

This material and/or presentation is provided for guidance and/or illustrative purposes only and should not be construed as a guarantee of future results or a substitution for legal advice and/or medical advice from a healthcare provider. Stryker Performance Solutions does not practice medicine and assumes no responsibility for the administration of patient care.

This presentation is for information purposes only and is a high level review of the January 8, 2018, Center for Medicare & Medicaid Services, Center for Medicare and Medicaid Innovation Patient Care Models Group, Bundled Payments for Care Improvement Advanced and Request for Applications (RFA). It is by no means inclusive of all program specifications and focuses on the design of the model for the 32 clinical episodes inclusive to BPCI Advanced. Any views or guidance provided in this presentation should not be construed as legal advice or a definitive interpretation of law. BPCI Advanced participants are encouraged to seek the advice of qualified legal advisors as well as consultants.

***The statements contained in this document are solely those of the authors and do not necessarily reflect the views or policies of CMS. The authors assume responsibility for the accuracy and completeness of the information contained in this document.***

# Presenter

## **Robyn McGann, BSN, MBA | Sr. Consultant and BPCI Compliance Officer**

**Focus:** Works with clients to help identify operational and organizational opportunities to advance within today's reform environment. Geriatric-population-based risk mitigation is part of her specialty.



- 20 years as a Nurse Executive
- Chief Operating Officer of a large orthopedic surgical group
- Experience from a variety of healthcare settings including hospital inpatient/outpatient specialty areas, ambulatory surgical centers, large physician multi-specialty practices, home health care and private practice billing and contracting
- Since 2012, Robyn has spent the majority of her time immersed in CMS bundled payment models with conveners, physician groups, and hospitals around the country.

# Success in BPCI

# Performance Solutions Among the best in BPCI

## Results

In partnership with Performance Solutions, our current BPCI clients are projecting significant program savings opportunities.

**Current Performance  
Solutions BPCI participants  
on average achieved:**

**\$2,300**  
in savings  
per episode

**21%**  
reduction in  
readmission rates

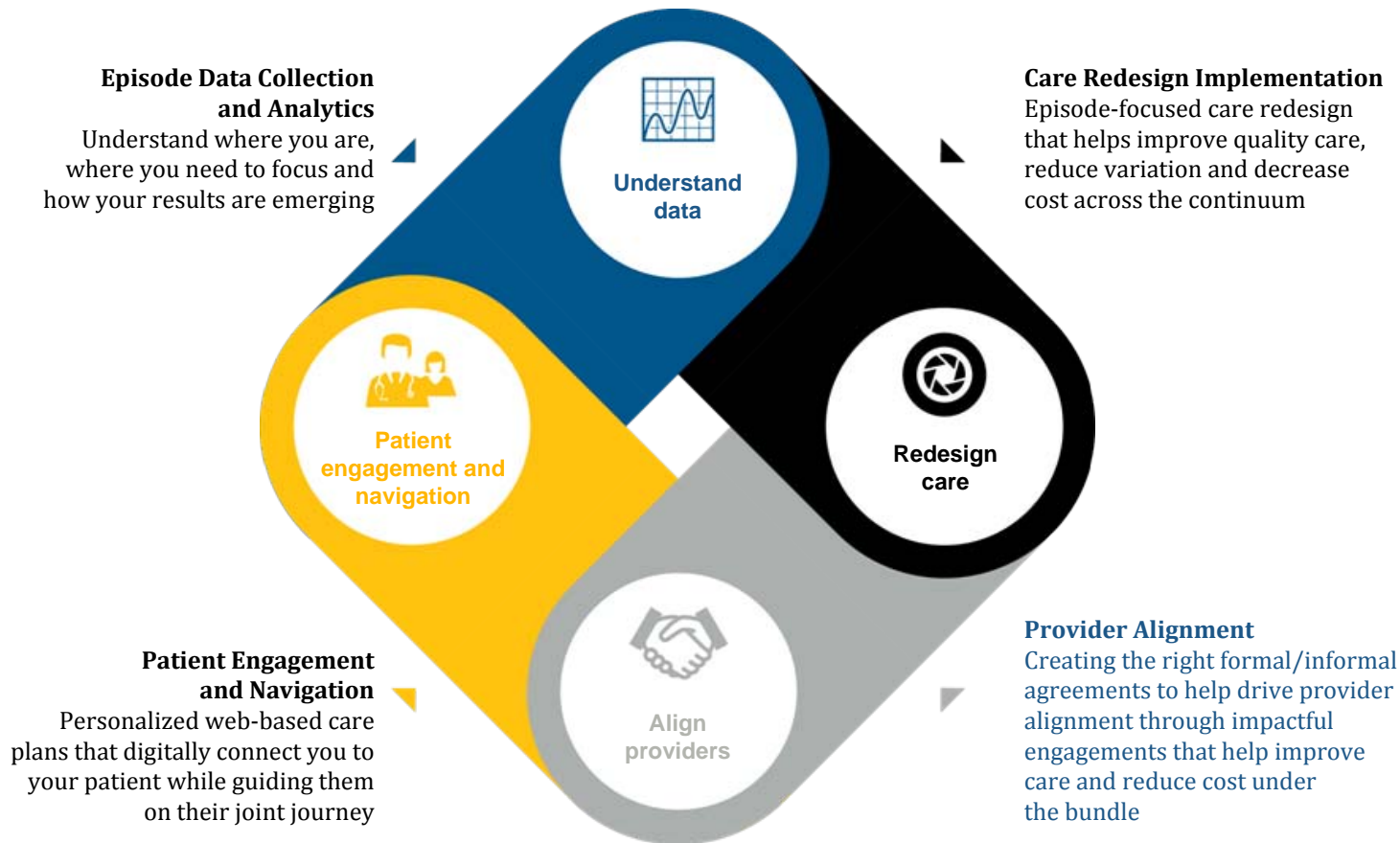
**30%**  
reduction in  
post-acute costs

**Physician leadership is  
critical to success**

# Traditional Hospital-Physician Relationship



# Critical success factors: Driven by Aligned Physicians

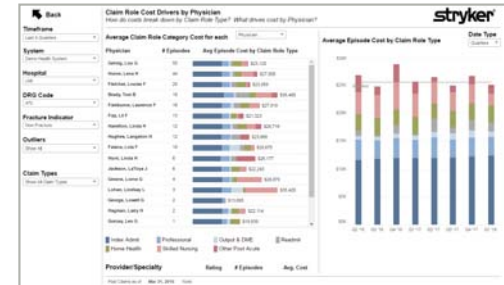
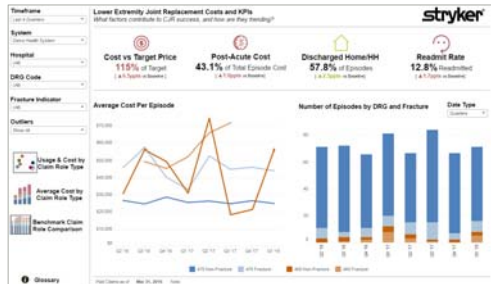




# Physician-Led Data Analytics: The Tools



- Detailed data analysis of 3 years of baseline CMS claims data compared to current experience.
- Evaluation of Target Price set by CMS.
- Projection of economic opportunity as compared to SPS benchmarks.
- Ongoing analysis of monthly and quarterly CMS claims data per the **Episode Performance Manager Dashboard**.
- Analysis of CMS reconciliation results and verification compared to monthly claims. Work directly with CMS to resolve any issues and identify inaccuracies.

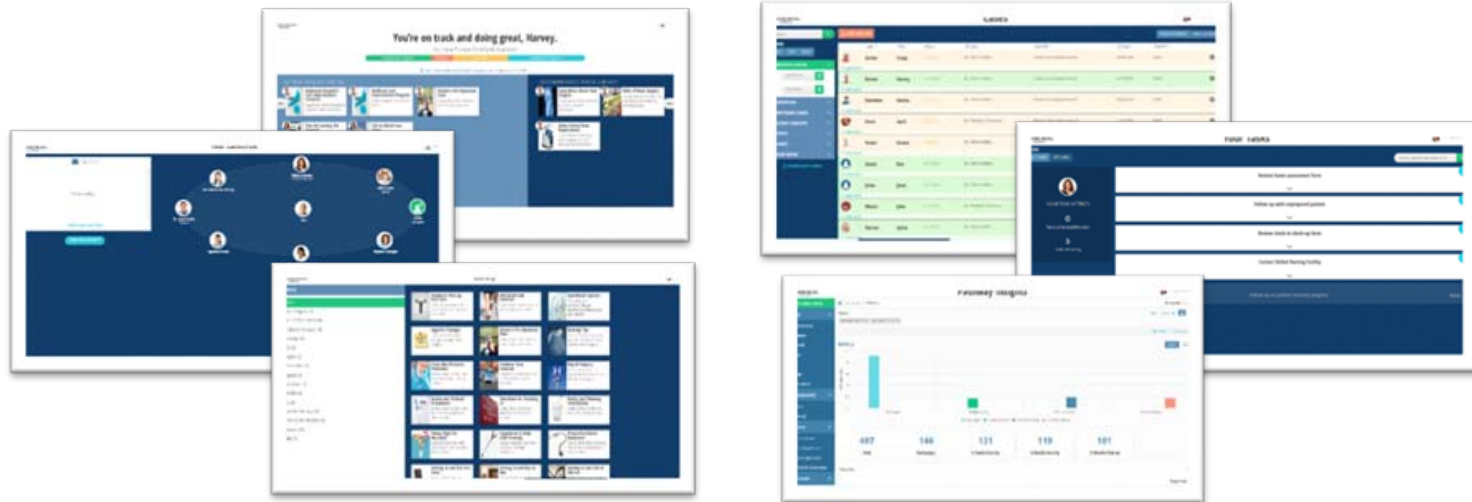


# Physician-Led Care Coordination and Patient Engagement



Implementation of a **web-based platform** that allows:

- Comprehensive episode management of the patient
- Personalized and interactive communication and care plans
- Ability to improve patient satisfaction, ensure compliance and collect patient report outcomes



# Physician Participation Options

# Physician Participation

## Options

- Gainshare in episode savings in bundled payment programs run by hospital or convener
  - Typically upside only – no downside risk
  - Easiest way to become familiar with payment reform programs with no risk
  - Qualifying as Advanced APM MACRA does **not** require physicians to take downside risk
- PGP can share or take full risk
  - Impractical for small groups unless they have unusually high volume
  - In CMS programs no cap on direct risk payments from payers or gainsharing payments to PGPs
    - Individual physicians are capped at 50% of their Fee-For-Service payments
    - PGP can retain excess and apply to overhead or general expenses

All gainsharing structures must be independently evaluated by the customer or Provider and their legal counsel for compliance with legal and regulatory gainsharing requirements. Stryker Performance Solutions does not provide legal or compliance advice in the development of a gainsharing structure.

These fee structures are subject to a final data review and a formal negotiation process between the parties. These fee structures will be subject to the guidelines set by CMS and compliance with all legal and regulatory requirements, and Convener's standard approval and due diligence process.

# Presenter

## Nick Jewell

Program Manager, Stryker Performance Solutions

**Focus:** Works with clients on the shift to value based medicine through Stryker's BPCI Advanced bundled payment convener. Nick brings a wealth of knowledge and experience from many healthcare settings including private physician group practices and post-acute facilities.



- Expertise and time has been focused around CMS bundled payment models for physician group practices and acute hospitals.
- Assisted in implementing the largest private practice bundle for Medicare's BPCI program.

# Physician-led Care Redesign:

Priorities Culture  
Process  
Outcomes

# Physician Led Pre-op optimization

## A shift in priorities

Optimization is no longer just a buzz word in the industry

- It's a necessary survival mechanism

Before bundled payment:

- A hole in the OR schedule =  revenue

After bundled payment:

- Filling a hole with a sub-optimized BPCI-A patient may =  revenue

# Physicians Lead Creation of a “Recover at Home” Culture

- Includes changing long-standing habits and beliefs  
(physicians, hospitals and patients)
- #1 patient success factor - messaging from the surgeon in the office at time of decision for surgery, and reinforcing the message in the hospital
- It is often a cultural shift
  - Physicians and staff must believe in and provide continuous education to patients
  - While home is the best place for recovery for the majority of patients, it is not always the path of least resistance
  - Requires correct messaging, early pre-operative planning and continuous support
  - Generally requires more time from physicians and staff; patient outcomes have shown to be more successful at a lower cost



# Physician-Led Care Redesign: The Process

## **The Care Navigator in the physician office is key to success**

- Determine the post-op care plan pre-operatively this is critical to success in bundled payment
- Use predictive risk assessment tools
- Automate care plans based on risk
- Engage patients via a digital platform
- Trigger tasks for staff follow-up only when there is deviation from the plan
- When expensive post-acute resources are used, automate follow-up tasks to drive management of LOS and referral to the next level of care

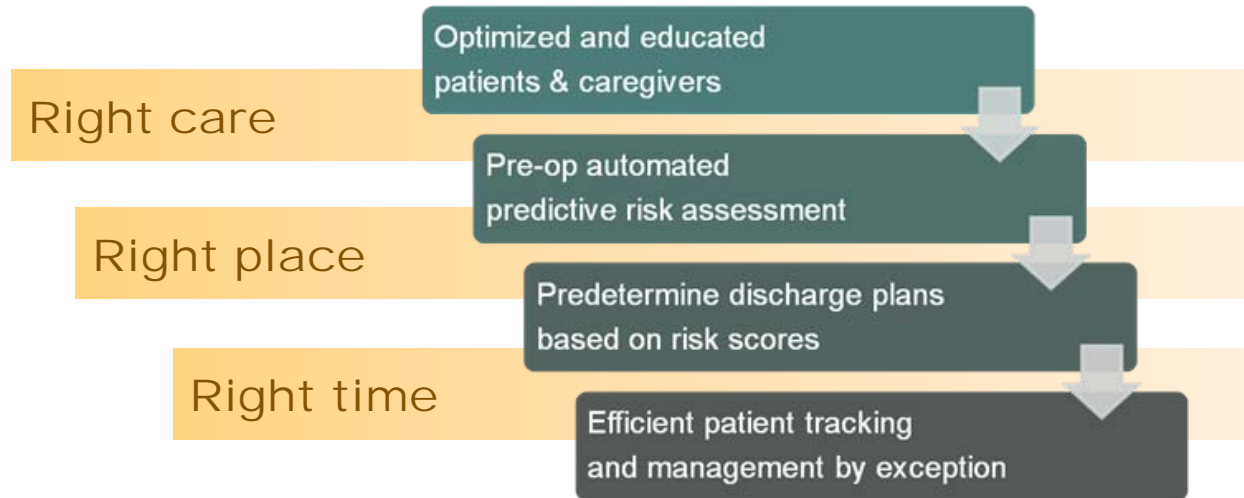


# Physician-Led Care Redesign: The Outcome



## Stryker Total Joint Surgical Home

Our Stryker Total Joint Surgical Home model enables providers to positively impact quality outcomes while lowering episode cost. Key features include:



**Questions?**  
Your bundled payment  
partner

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