

### **WellPoint Patient Centered Primary Care**

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### **Overarching Network Strategy**

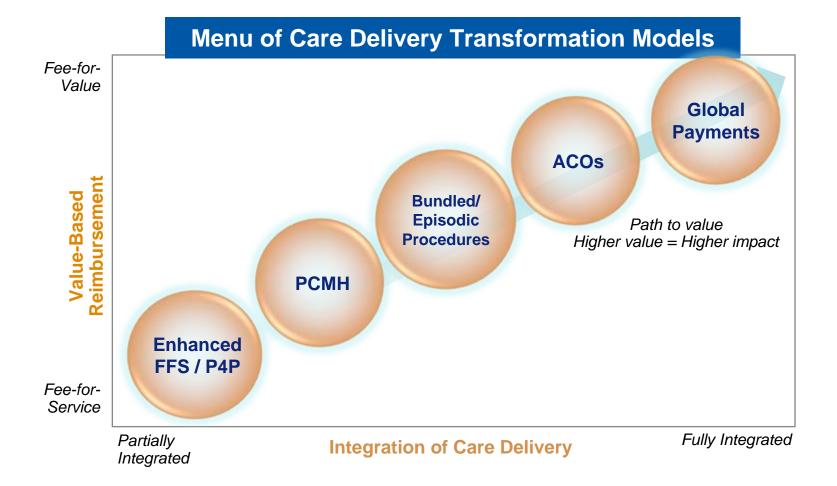
As stewards of our customer's healthcare dollar, our goal is to mitigate cost trends and promote quality and affordability by:

- Rationalizing reimbursement and to re-align the connection between price, cost and value with a focus on the total cost of care
- -Imbedding payment for value in ALL reimbursement methodologies, not just pay-for-performance or risk-based arrangements
- -Moving away from the current, unsustainable, model that encourage and reward growth and spending over health planning and investments based on proven efficacy and improved health outcomes.
- -Creating the right incentives to foster and enable hospitals, health system, physicians and other providers make the right health planning decisions based on community need and reasonable returns as measured by:
  - √ Validated, meaningful, improvements in quality or
  - ✓ Reductions in costs with no adverse impact on outcomes.



#### A Balanced Approach:

A Menu of Solutions





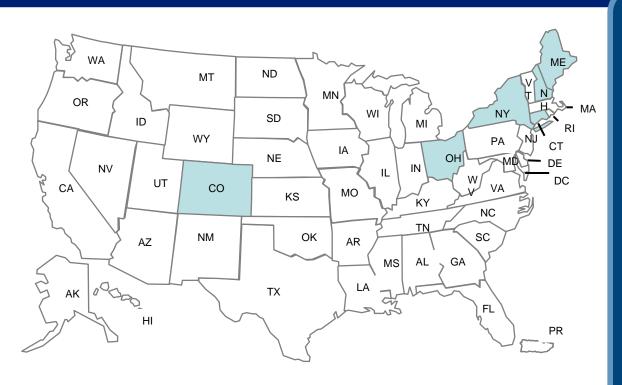
# Patient Centered Medical Home – Why Focus on Primary Care?

- Rising healthcare costs and gaps/variations in quality and safety
- Current system emphasizes
   episodic treatment for acute care
   and more care, not better care;
   Capitation led to less care
- Aging population & increased prevalence of chronic diseases
- Current crisis in primary care recruitment and retention leading to looming shortage of providers

- Need for better coordination of care among providers; care coordinated by a personal physician is associated with better outcomes, especially in individuals with chronic diseases
- Disease management as currently exists yielding mixed results; DM activities most successful when integrated into a physician practice
- Broad dissatisfaction with the system from all stakeholders



#### **WellPoint Medical Home Pilots**



Multi-payer active pilot

Colorado:

Convener: <u>Health Team Works</u> United, Cigna, Humana, Aetna, Rocky

Mountain, Medicaid

Maine:

Convener: Quality Counts

Aetna, Cigna, and Harvard Pilgrim

New Hampshire:

Convener: NH Citizen's Initiative Cigna, Harvard Pilgrim, Medicaid

New York:

THINC Convener: THINC RHIO

Aetna, CDPHP, Hudson Health Plan,

MVP, and United/Oxford

Adirondack Convener: Hudson

**Headwaters** 

Blue Shield of NE NY; CDPHP; Excellus;

**MVP** 

NYC Convener: Empire

Ohio:

Convener: Greater Cincinnati Health

Improvement Collaborative

United and Humana; Columbus: Access

Health - other payers are TBD



## **Highlights of Anthem's Primary Care Success**



- Quality improvement in nearly all diabetes measures
- 3.6% decrease in acute IP admissions per 1000 per year
- 6.1% decrease in total ER visits per 1000 per year
- 2% decrease in specialist visits per 1000 per year



- **NEW HAMPSHIRE**
- 1.3% increase in persistent medication usage



- 18% decrease in acute IP admissions/1000, compared to 18% increase in control group
- 15% decrease in total ER visits/1000, compared to 4% increase in control group
- Specialty visits/1000 remained around flat compared to 10% increase in control group
- **COLORADO-Year 2**
- Overall Return on Investment estimates ranged between 2.5:1 and 4.5:1



## Our Strategy is Built Around A Patient Centered Delivery Model



Expanded Access



Care management and care coordination



Exchange of meaningful information



Meaningful enhanced compensation tied to desired and measurable behavior changes

**Four Foundational Pillars** 





## Critical metrics that will demonstrate success

#### Increased Quality and Efficiency Performance

- Avoidable ER
- Admissions
- Appropriate use of advanced imaging
- Use of preferred laboratory, radiology & ambulatory surgery facilities
- Referral to high value specialists
- Improved Clinical Quality
- Increased Care Management engagement and follow up
- Pharmacy utilization: Brand vs. generic
- PMPM Target Management
  - Costs compared to established medical cost targets.
- Increased Patient Satisfaction
- Informed, preference sensitive care



### **Questions or Comments**