# Employer Initiatives in Value-Based Payment

Washington State's Accountable Care Program

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## Washington State Health Care Authority

- Largest health care purchaser in the state
  - 350,000 public employees and dependents
  - 1.8 million Medicaid enrollees
  - \$10 billion annual spend
- Washington State's lead agency for health care policy



### Paying for Value/Payment Redesign



In partnership with purchasers, providers, and payers, Washington will:

- Leverage its purchasing power to move 80% of its health market from "fee for service" to valuebased payments.
- Test, improve, and bring to scale shared savings and total cost of care models (that have ACO attributes).
- Implement Medicaid payment and delivery models that support full integration of physical and behavioral health.

Accountable Care Program Physical & Behavioral Health Integration

Multi-Payer

Encounterbased to Value-based



### Accountable Care Program (ACP)

#### Goal

- Improved patient experience
- Integrated "head and body" care
- Financial accountability

#### 2016 Partners

- Puget Sound High Value Network LLC
- UW Medicine Accountable Care Network

#### 2017

- Expand statewide
- Recruit more employers and purchasers

Available to state employees on January 1, 2016



## Washington State: "The Bree Collaborative"

- Legislatively chartered in 2011
- Multi-stakeholder group appointed by the Governor
- Identifies up to 3 clinical focus areas annually
- Develops "best practice" recommendations
- Recommendations, if accepted by the Director of the Health Care Authority, incorporated into State purchasing strategies
- Other stakeholders encouraged to adopt recommendations





### Accountable Care Program- Mechanics

### How will model design drive care transformation?

•Patient-centered medical home, Bree Collaborative recommendations, Shared Decision Making pilots, Health IT requirements

## How will access to timely care and member experience improve?

•Expanded service hours, dedicated contact center and website

### What are the financial and quality models?

- Shared risk model
- •Quality improvement model rewards improvement <u>and</u> achievement of Core Measure set measure targets





### Accountable Care Program - Mechanics

### How will the benefit design differ from UMP Classic?

- 30 percent lower monthly premiums, lower medical and prescription drug deductibles, and no cost-sharing for office visits to primary care network providers.
- Members who complete a wellness assessment and earn a wellness incentive will pay no or a reduced medical deductible.
- Same monthly out-of-pocket limits, inpatient and emergency coinsurance rates, and covered services as UMP Classic plan.

## Do ACPs have data tools to manage the defined population?

ACPs will receive timely data on PEBB members care





## Washington State Value Based Purchasing

- HCA will spread and scale its VBP approach by sharing contract language with private purchasers to incorporate in their contracts and business processes
- To view details of original RFP and contract language (with confidential information redacted) and learn more about Healthier WA:

http://www.hca.wa.gov/hw/Pages/acp\_multipurchaser.aspx



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