

Forward on Quality: How Do We Get to Breakthrough?

Margaret E. O'Kane, NCQA President Value-Based Payment and P4P Summit February 19, 2016

What breakthrough requires



Clinical practice redesign

Payment reform

Careful tracking of added value through payment reform

Outcome measures (the holy grail)



Leverage data collection from clinical practice (not separate "paperwork")



Strengthen the link between what PCMHs measure and what they accomplish



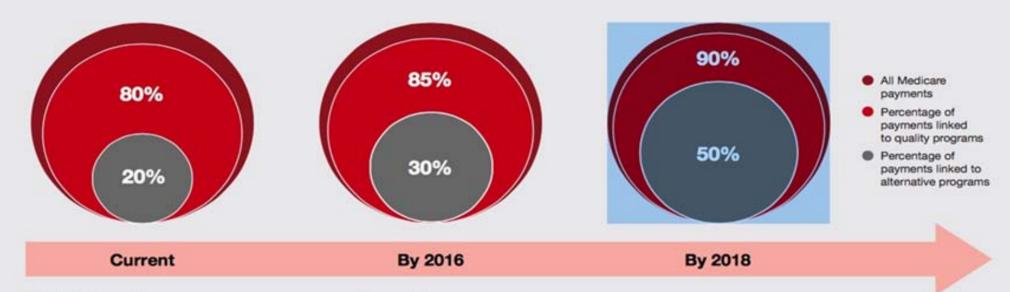


Payment reform can't be optional

NO EXCUSES!



CMS payment changes



Quality based payment programs

- Hospital Value-Based Purchasing
- Hospital Readmissions Reduction
- Hospital-Acquired Condition Reduction
- End-Stage Renal Disease (ESRD)
- Quality Incentive
- Value-Based Modifier

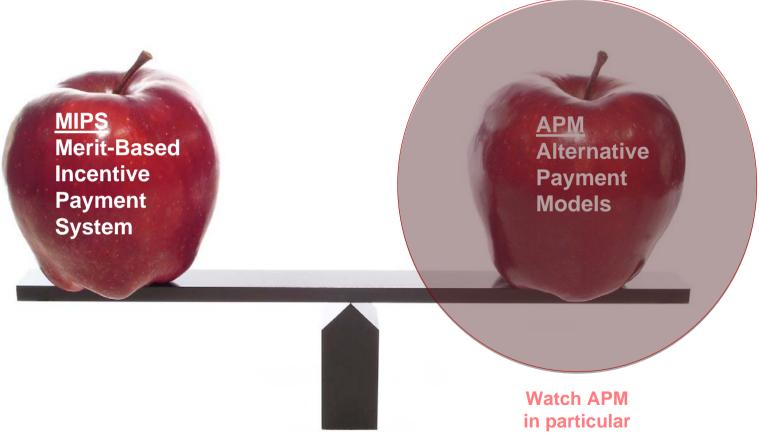
Alternative payment programs

- Pioneer Accountable Care Organization
- Medicare Shared Savings Program
- Bundled Payments for Care Improvement
- Comprehensive Primary Care Initiative
- Patient Centered Medical Homes

- Comprehensive End Stage Renal Disease
- · Oncology Care Model
- Medicare/Medicaid Financial Alignment

Source: Morning Consult

MACRA has two tracks. They must be easy to compare.





5 MACRA principles



- Well-organized primary care team for each patient
- 2. Measurement for each unit of accountability
- 3. Core set of measures to facilitate comparisons
- Measurement to aid fast improvement, accountability
- 5. Useful, accessible results



"How do I help Mom decide about Medicare?"





Clinical integration

Being patient-centered beats evaluating individual clinicians



The sicker the patient, the more important this is





Working to the top of one's license brings...





Outcomes measures

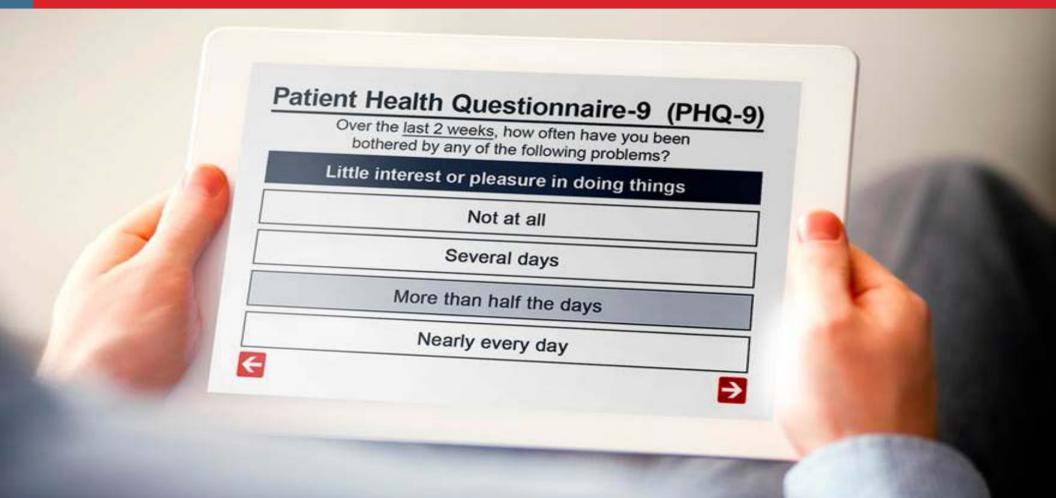
Structure, process & outcome measures all have their place



Use outcome measurement for procedures



A promising collaboration on new ways to collect depression data



Patient-reported outcomes in quality framework

STRUCTURE PROCESS





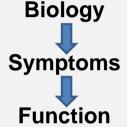
HEALTH SYSTEM CHARACTERISTICS

Provision of treatment Availability of care **Knowledge and** beliefs of providers **Provider** communication

ENVIRONMENTAL CHARACTERISTICS



OUTCOME



General health perception

Overall quality of life



PATIENT FACTORS

Behaviors

Use of care **Knowledge and beliefs Expectations** Adherence to treatment

Demographics Age, Gender, SES

Health characteristics Severity of condition Co-morbid factors



Use patient safety measures in hospitals





We need patience to see things through...

NO





...but time is of the essence



