Clinical Integration and P4P: Using Pay for Performance to Build Clinical Integration within a Physician-Hospital IPA

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Presented by:
Michael Edbauer, DO,
Vice President, Medical Affairs CIPA Western New York IPA
Nancy Hourigan, MBA
Manager, Physician Compensation CIPA Western New York IPA
Objectives for Today

• What is CIPA and the Catholic Health System of Buffalo
• Review Role of Physicians and Hospitals in Health Care Transformation.
• Discuss how Clinical Integration can promote the PCMH and Disease Management.
• Understand how CI and P4P allows an organization to transition to an Accountable Care Organization (ACO)
Organizational Overview

- Not-for-profit membership organization founded in 1997
- >840 physicians, < than 30% of market
- Physician Participating Agreement is non-exclusive
- Four acute care hospitals - Erie/Niagara counties
- Six health plan contracts including: Commercial, Medicare and Medicaid
- 140,000 members
CIPA Western New York IPA, Inc.
Organizational Graph

- Catholic PPO
  - Sole Member
- CIPA WNY IPA, Inc.
- CIPA Western New York IPA, Inc. Governing Board
- Catholic IPA Physicians
- Ex-Officio
  - 2
- Institutional Members
  - Acute Care
  - Home Care
  - Long Term Care
- 17 Directors
  - 10 Primary
  - 7 Specialist
- 8 Directors
Who Will Bring Value?

• Health Plans
• Disease Management Companies
• Physicians and Hospitals
Who are the Leaders?

Health Care Opinion Leaders: Views on Responsibility for Improving Quality and Safety of Health Care

“Who should be primarily responsible for improving the quality and safety of care delivered in the United States?”

Percent responding...

- Provider community: 68%
- Government agencies: 47%
- Independent organizations such as NCQA, the Joint Commission, or IHI: 45%
- Managed care plans: 11%
- Employers: 3%
- Other: 1%

Note: Bars do not sum to 100% because survey respondents were asked to choose two options.

Case for Clinical Integration

• Costs are high
• Quality is overall mediocre
• **Significant Variation**
  • Fragmented Uncoordinated Systems
  • Overworked Physicians
  • Decreased Physician Involvement with Hospitals
• Need for further Investment in HIT
Criteria for Clinical Integration

• Clinical integration is the development of organized processes to improve clinical care.
• Clinical integration programs engage physicians in initiatives that address gaps in quality of care.
• Clinical integration programs are likely to result in improvement.
• Clinical integration programs would not be possible without joint contracting.
Physician Leadership

• Key to Success
• Need to direct Input and Feedback
• Need to provide effective communication and education as it relates to evolving economic model
• Need to be realistic in expectations
• Need to Listen
CIPA physicians evaluated CIPA on service attributes perceived most relevant to its physician panel: communication, advocacy with the health plans, quality initiatives and the electronic health record initiative. All service attribute ratings remained at about 90% overall positive ratings.
Tactics To Meet Goals of CI

- Invest in human resources and infrastructure to improve care
- Develop organized processes
- Measure results
- Provide interventions
- Take corrective actions
Specific Gaps to be Addressed:

- Technology
- Clinical Office Design
- Utilization Management
- Patient Centric Continuum of Care
Closing Quality Gaps: Technology

Eliminate paper medical records by 2012

• Electronic Health Record Initiative
  36 months of financial support for physicians who adopt (CCHIT) certified EHR vendor (started September 2006)

• Beginning to Sunset Program
  Will end December 31, 2012
CIPA’s EHR Health Record Adoption

October 2006 to January 2010

Jan 2010 Adoption rate = 53%
PCPs = 61%, SCPs = 50%

130 Jan 2007
251 Jan 2008
294 Jan 2009
422

Closing Quality Gaps: Technology

- Financial support for connectivity
  - Connecting to hospital, labs, imaging
- Hospital Investing EHR
- Working with local RHIO (HealtheLink):
  - Interface between multiple systems
  - Interoperability (MSSNY)
Interoperability Model

Integrated Outcome Dashboards:
A. Preventive health indicators
B. Chronic health indicators

Diagnostics | Hospital | Radiology | Health Plan | Rx | Laboratory

Demographics
Problem Lists
Allergies
Medications
Referrals
Via CCD, CCR
or HL7

HealtheLink (Axolto)

NextGen | Medent | AllScripts | E-Clinical | Other EMRs

- HealtheLink (Axolto) connects various health information systems.
- Integrated Outcome Dashboards provide insights into health outcomes.
Closing Quality Gaps: Clinical Office Design

To meet increasing demand for quality and value medical care needs to be provided by knowledgeable and efficient teams of health care professionals

• Provide Clinical/Technical support to clinical offices
  - Meaningful Use (E-prescribing, Registries, Patient Reminders)
  - How to change office flow/data entry
  - How to generate reports
Provide Office Based Disease Management (Program initiated 2008)

- Trained RNs, LPNs in principles of disease management, EBM, coaching and coordination of care
- Enhance or replace health plan disease management programs
- Bring added resources to patients and families
- Systematic monitoring of patient care using registries and data warehouse
Closing Quality Gaps: Clinical Office Re-Design

- **Pharmacy Support**
  - Utilizing Pharmacist in conjunction with care coordination and care transition
  - In office and virtual

- **Nutrition Support**
  - Utilizing Nutritionist to train staff
  - Provide group programs
Diabetes Measures of Perfect Care by Cycle (6 Months)

3 Measures: HbA1c < 7   LDL < 100   BP <= 130/80

% of Patients with # Measures in Control

- 3 Measures: 28.51%
- 2 Measures: 36.44%
- 1 Measure: 37.00%
- 0 Measures: 12.64%
Closing Quality of Gaps: Utilization Management

- Need Reliable Data Warehouse
  - Claims and Clinical data

- Generate Meaningful Reports

- Electronic Health Record Report
  - Extract Transfer and Load to DM System
CIPA Data Warehouse

Non Member

Physician

www.cipawny.org

Data (claims, EHR, Lab, etc)

MedVentive

Reporting System
(\& Network Manager)

Data Warehouse

Design

Access

CIPA
Closing Quality of Gaps: Utilization Management

- Develop Programs to Act on Reports - Reduce Waste
  - Physician focused (Rx and imaging)
- Spans the Delivery System
  - Need consistency between outpatient and inpatient
- Need to look at Overall Impact
  - Example formulary impact
Patients who are informed about their health care needs and are involved in their care have greater probability of meeting desired treatment objective.

• Patient Education
  - Multi-media, supported by physician but performed by team

• Patient Coaching
  - Key component of office based DM

• Patient Activation (PAM)
  - Consistently engage the patient
Closing Quality Gaps: Patient Centric

• Programs need to follow the patient
• Need to be coordinated with effective communication
• Need integration with office (primary and specialty), acute facilities, home care, sub-acute etc
• Service Lines and Technology
• Whole System Measures (IHI)
Closing Quality Gaps: Patient Centric

Background: Over 20% of Medicare discharges have readmission within 30 days

• Care Transitions Program
  - Nurse visit within 48 hours of discharge
  - Coordinate with office Care Coordinator to schedule appointment
  - Medication reconciliation
  - Family engagement
  - Activate community resources
  - Re-assess discharge plan to reduce potential risk for readmission
The role of CIPA is to provide all the necessary resources for successful Clinical Integration.
Alignment of Clinical Integration with Patient Centered Medical Home

- Electronic Health Record adoption and move to meaningful use
- Patient registries and office based Disease Management
- Referral and lab tracking
- Patient Education and self Management
- Performance Reporting and Action Plans
- Patient Facing EHR*
Transition to an Accountable Care Organization

• Moves to more formal relationship between physicians and hospital system

• Shift to taking greater amount of direct financial risk

• Greater opportunity to impact care and change
Transition to an Accountable Care Organization

• Need to understand the needs of community, government and employers

• Need to develop expertise in managing this broad delivery system
Questions