

Incorporating and Scaling Prospective Bundled Payments Contracts

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Cognizant Healthcare Practice

PROVIDERS



70+ Health Systems and 300,000+ Care Providers Supported through over 400 PM/EHR Partners



URAC Certified – Health Utilization Management, Workers Compensation



NCQA DM Systems Certification for 7 programs supported by CareAdvance Enterprise™

PAYERS

400+ Payer Organizations, incl. Over 20 of top 25 Plans and 8 out of top 10 Blue Plans



Healthcare Informatics: Rank 3



Support systems that host and process over **190M+** members/patients across North America



Serving ${\bf a}$ of provider population in North America



Strong team of **35,000+** professionals - 1500+ Doctors, PhD's, Nurses, Pharmacists



Understanding Prospective vs Retrospective

"Multi-Provider Global Case Rate"

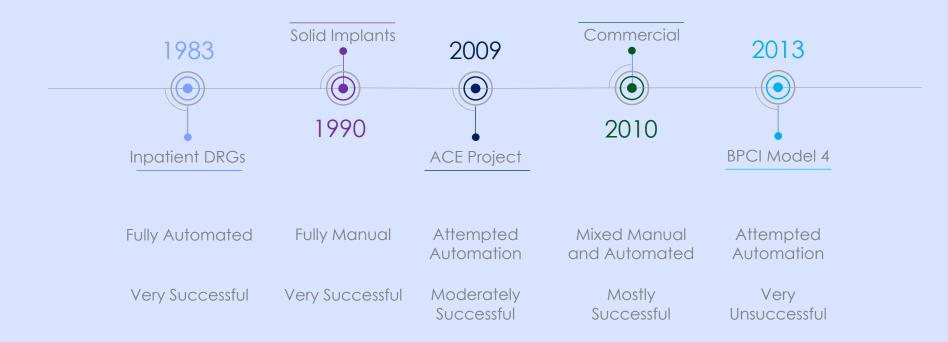
- A single payment is made to a "conductor" (typically the provider organizing the care) to cover all services from all relevant providers over all dates.
- The conductor pays the other providers directly

"Shared Savings over a Budget"

- All providers continue to bill traditional fee-for-service.
- After the episode ends, a "reconciliation" occurs, comparing the cost of all the services against the budget.
- Savings (sometimes losses) are received by the "conductor"



Timeline of Prospective Episode Payment





Topics for Prospective Payment Bundles

	Pros	Cons	
NGE	More Effective in Changing Provider Behavior	Requires Technology Enhancements to Scale	
	Payers Get "Savings" at Time of Contract	Conductor Must Pay Other Providers	3-1
	Providers Keep 100% of Additional Savings	Revenue Cycle Management Impact	S.
•	Improves Reference Pricing	Immediate, Limited Downside Risk	RISK
Î	Improves Gainsharing	Regulatory Issues in Some States	



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Wait, Did You Say Downside Risk?

HEALTH PAYER INTELLIGENCE xtelligent HEALTHCARE MEDIA

75% of Providers Drop Out of CMS Bundled Payments Model

Only 25 percent of those that showed interest and volunteered in the bundled payments program have actually moved forward once downside risk was introduced.

healthcare innovation

Are Federal Health Officials Fed Up With Providers' Unwillingness to Take on Downside Risk?

A series of tough public statements by senior federal healthcare officials point to an underlying problem: the federal experiment with accountable care isn't moving the needle fast enough to really bend the overall healthcare cost curve

BY MARK HAGLAND - MAY 15, 2018







Something ouite curious has been happening in federal healthcare policy recently, involving

Prospective Episodes Give Providers Technical Risk, not Incident Risk

Incident Risk:

- "how many people get sick"
- Hard for providers to manage

Technical Risk:

- "how much to treat one sick patient"
- Easier for providers to manage



Reference Pricing – Cousin of Prospective Payment Bundles

The New Hork Times

- Reference pricing offers patients a flat benefit for a procedure (or episode)
- Patients can seek a provider who accepts benefit amount and get care for free
- Patients can seek any provider and pay the difference
- Nominally, a benefit design topic
- In reality, a provider contracting strategy

TheUpshot THE NEW HEALTH CAR How Common Procedures Became 20 Percent Cheaper for Many Californians California Healthline C REPUBLISH OUR CONTENT EDITION INSIGHT POSTCARDS SPOTLIGHT INNOVATIONS ASK EMILY TOPICS Search **California Healthline Daily Edition** Summaries of health policy coverage from major news organizations Anton Hjertstod **CalPERS' 'Reference Pricing'** By Austin Frakt Initiative Saves \$5.5M Over Two Years CalPERS saved more than five million dollars through an initiative that set standard prices for knee and hip replacements and prompted beneficiaries to select higher-value hospitals for the procedures. Health Data Management reports (Goth, Health Data Management, 5/23).



EXPANDED PAYMENT METHODOLOGIES: INCORPORATING AND SCALING PROSPECTIVE BUNDLED PAYMENTS CONTRACTS

Jake Yount | Director; Network Pricing & Expense Analysis 2/26/2019





Background

- Blue Cross NC
- Program Background 2013-Present
- Current Market
- Building Program To Scale
 - Program Foundation
 - Successful Workflow
 - Blue Cross NC Phased Approach
- Market Program
- Measure Savings & Outcomes
- ➤ Questions?



BACKGROUND



BlueCross BlueShield of North Carolina

Blue Cross NC

Transformative Care Strategy

- + Drive better health outcomes and better patient experience at a lower cost of care
- + Refocus health care delivery and reimbursement on quality vs volume

Bundle Program Business Strategy

- + Improve quality through effective care coordination
- + Reduce avoidable complications
- + Reduce readmissions results better than national standards
- + Improve cost of care
- + Improve patient satisfaction rates

Program Background 2013-Present:

Started in 2013:

- + One provider group; TJR(knees); retrospective
- + No automated pricing system
- + Manual reporting

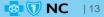
2019:

- + Eight prospective contracts; TJR(knees, hips, shoulders)
- + Payment bundling application software
- + Hosted SaaS bundled payment analytics platform
- + Contracted bundled services with analytics vendor
- + Currently analyzing episodes like maternity, oncology, other ortho (spines), for opportunities
- + Discussing prospects with interested provider groups



Blue Cross NC Current Market:





BUILD PROGRAM TO SCALE



BlueCross BlueShield of North Carolina

ProgDefine Progtiani Goals/Vision

Clinical patient/member goals (include benefit design goals) Medical expense/savings goals

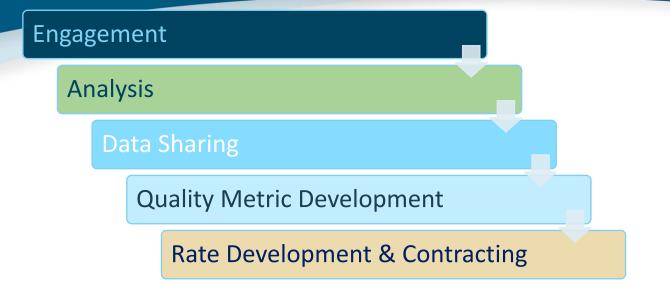
Type of bundled payment arrangements (retrospective vs. prospective)

Build Technology Solution

- Payment bundling pricing system
- Bundled analytics/reporting solution
- Papesign Resource and enEngagement Model
 - Dedicated team: contracting, system config, data analytics/reconciliations, claim processing, clinical
 - Partner with vendor specializing in bundled payment services
 - Build repeatable process to include







- Partner with providers that want to transform care
- Obtain buy-in from a senior level of each organization
- Blue Cross NC works with vendor to perform the initial analysis
- Collaborative approach to share the data so providers can validate findings
- Blue Cross NC and the provider develop the quality metrics
- Contract is developed and executed among the parties



Blue Cross NC Phased Approach

Improve infrastructure to enhance bundle program

	Phase I 2013-2015	Phase II 2016-2018	Phase III 2019-
PROVIDERS	Two Provider groups	Four Provider groups	Statewide expansion
EPISODE TYPES	TJR Knee & Hip	TJR Knee, Hip, Shoulder	TJR expansion, chronic conditions, specialty care
ANALYTICS TOOL	SAS	Aver Analytics	Aver Analytics
BUNDLE DEFINITIONS	Prometheus	Prometheus	Prometheus / Other Methodologies
REIMBURSEMENT SYSTEM	Legacy/ Manual	Cognizant PBA Manual / Automated	Cognizant PBA Automated
PAYMENT MODEL	Prospective / Retrospective	Prospective Bundle	Prospective / Retrospective
RECONCILIATIONS	Manual	Aver Analytics	Aver Analytics
MEMBER EXPERIENCE	Soft steerage: Lower cost sharing	Stronger Steerage: Targeted outreach Streamlined cost sharing	Hard Steerage: Reference pricing Hard benefit steerage



MARKET PROGRAM



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Sample Messaging and Promotional Tactics



Bundled payments: A coordinated program for better care and value

At Blue Cross and Blue Shield of North Carolina (Blue Cross NC), we've worked with a group of high-quality providers to offer a complete hip and knee replacement program.

Your entire hip or knee replacement process is streamlined and simplified. From pre-surgery tests and office visits, to the surgery itsait, to follow-ubcheck-ins and physical therapy. So, there's improved quality through care coordination, fower complications and readmissions, better range-of-motion results and lower episode costs. And, there's less worty and less paperwork.

Where to turn

Blue Cross NC has agreements with this select group of providers to bundle the payments related to a total knee or hip replacement:

- + OrthoCarolina 1-704-323-2452
- EmergeOrtho (formerly Triangle Ortho) 1-919-281-1720
- + Surgical Center of Greensboro
- 1-336-272-0012
- Novant Health Orthopedics & Medicine (knee replacement only) Cornelius office – 1-704-316-1830 Huntersville office – 1-704-384-1680

The "bundled payment" brings together the costs of your hip or knee surgery: orthopedic surgeon, hospital or surgical facility, anesthesia, physical therapy and more.

A bundle of better care

- All services during the inpatient stay, including physical therapy and any care related to complications
- + All related services performed on an outpatient basis, including physical therapy and any care related to complications
- + Simplified billing to save time and prevent hassles

If you need a knee or hip replacement, visit one of Blue Cross NC's select bundled payment providers for streamlined, high-quality care and simplified billing.

😗 🕑 🔠 🕴 BlueCrossNC.com/Bundle

Benefits for you

+ Increased overall quality of care

- + Higher level of service
 + Greater emphasis on the
- management of costs
- by 17%*
- Complication rates reduced by 4%¹
- Physical therapy is covered at 100%
- + All post-surgical services included



payment providers listed, or visit BlueCrossNC.com/Bundle.

 2017 bendied program dalm data analysis provided by Awar Analysis.
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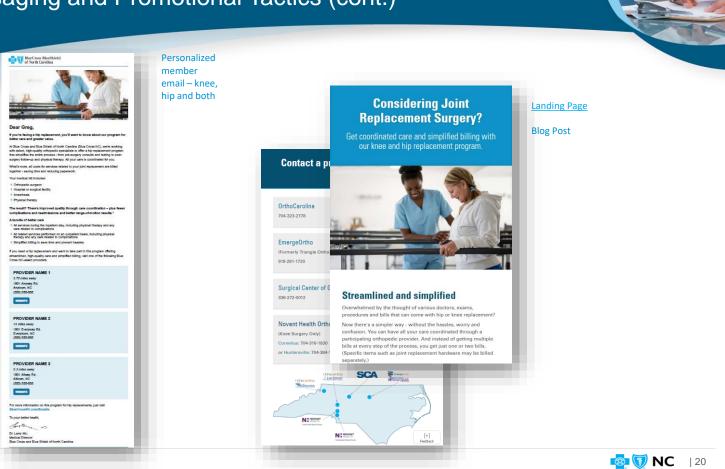
BlueCross BlueShield of North Carolina



Blue Connect Tile



Messaging and Promotional Tactics (cont.)





MEASURE SAVINGS & OUTCOMES



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Example: Knee replacement

Fee for service cost: **\$\$\$\$**

Bundled payment cost: **\$\$\$**

Average savings with bundled payment*

21%



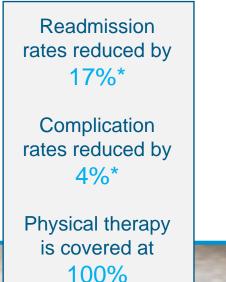
Bundled payment approach improves:

- + Care coordination
- + Health outcomes
- + Cost containment

* Average savings will vary by location. Based on 2017 bundled program claim data analysis provided by Aver Analytics



Coordinated Program for Better Care & Value Bundled payments for knee or hip replacement



- Increased overall quality through care coordination and bundled services
- + Greater emphasis on cost management; simplified billing
- + All post-surgical services included





QUESTIONS?



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