

Colorado Scorecards on Payment Reform

Dollars and Sense: Lowering Health Care Costs and Increasing Transparency

Catalyst for Payment Reform November 13, 2018





Agenda



AGENDA

About CPR

CPR's Scorecards on Payment Reform

Economic signals

System Transformation & Outcomes Measurement

Questions & Contact



About CPR

About CPR



An independent nonprofit corporation working to catalyze employers, public purchasers and others to implement strategies that produce highervalue health care and improve the functioning of the health care marketplace.

- 32BJ Health Fund
- 3M
- Aircraft Gear Corp.
- Aon Hewitt
- Arizona Health Care Cost Containment **System** (Medicaid)
- AT&T
- The Boeing Company
- CalPERS
- City and County of San Francisco •
- Comcast
- Compassion International
- Covered California

- **Dow Chemical** Company
- **Equity** Healthcare
- FedEx Corporation
- **General Motors** Company
- Google, Inc.
- Group Insurance TennCare Commission. MA
- The Home Depot•
- Mercer
- Miami University (Ohio)
- Ohio Medicaid
- Ohio PERS
- Pennsylvania **Employees** Benefit Trust **Fund**

- **Pitney Bowes**
- Qualcomm Incorporated
- Self-Insured Schools of California
- South Carolina Health & Human Services (Medicaid)
 - (Medicaid)
 - **US Foods** Walmart Stores.
 - Inc.
- Wells Fargo & Company
- Willis Towers Watson

About CPR continued





EDUCATION

Learn about high-value health care purchasing



TOOLS & SUPPORT

Helping purchasers take action



COORDINATION

A louder voice in the marketplace



RESEARCH & ANALYSIS

Push the market and measure progress

CPR's Goal:

20% of payment flows through methods proven to improve value by 2020

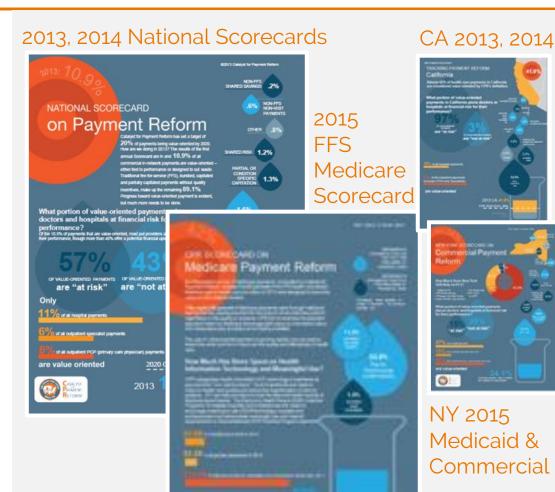


CPR's Scorecards on Payment Reform

Previous Scorecards



- ✓ National and Regional Scorecards the first to track the nation's (and certain states') progress in implementing value-oriented payment.
- Scorecard 2.0 includes the same metrics and more, developed with the help of a multistakeholder advisory committee.



Tracking progress



CPR wanted to go beyond tracking how much & what types of payment reform programs occur between payers and providers in the commercial and Medicaid market.

Scorecard 2.0 seeks to answer the question: Are payment reforms having their intended impact on the quality, efficiency, and cost of health care?

Introducing 2.0



The development and piloting of Scorecard 2.0 in Colorado, New Jersey, and Virginia is funded by:





CPR selected the states through a RFP process in the summer of 2017.

CIVHC stated in their response:

"The information contained in the Scorecard will help health plans and our state identify additional ways we can make significant strides towards reducing costs and improving outcomes, enabling the setting of goals for payment reform moving forward."





Economic Signals

CPR's payment reform definition



Payment reform: a range of health care payment models that use payment to promote or leverage greater value for patients, purchasers, payers, and providers.

CPR measures the total dollars paid to providers through payment reform programs (with quality) in CY 2016 or most recent 12 months.

Methodology



Commercial

- ✓ 4 health plans participated
- ✓ These plans and their contracted providers cover 2,214,000 lives in the commercial market or 78% of the commercially-insured lives in Colorado
- ✓ Sets a baseline for Colorado using 2016 data

Medicaid

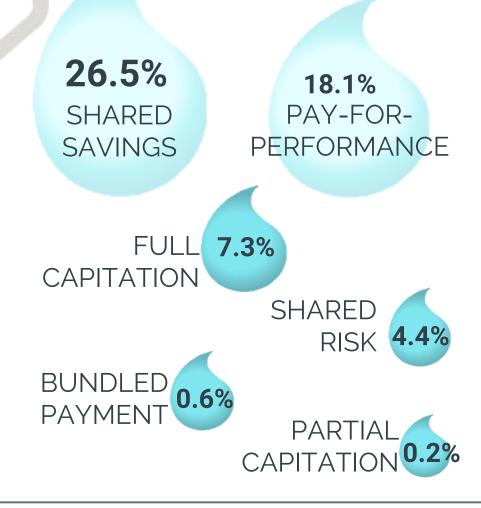
- ✓ Collected data directly from HCPF
- ✓ Data represents that of 1,329,000 lives in the Medicaid market or 100% of Medicaid enrollees in Colorado in 2016
- ✓ Sets a baseline for Colorado using 2016 data

Commercial payment reform





of the total payments made to providers are value-oriented



Medicaid payment reform



54.4% of the total payments made to providers are value-oriented

16.4%
PAY-FORPERFORMANCE

16.4% NON-VISIT FUNCTIONS





Moving to risk



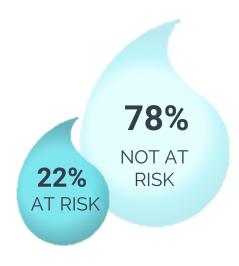
COMMERCIAL

MEDICAID

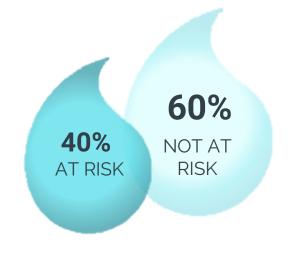




Zero shared risk contracts reported

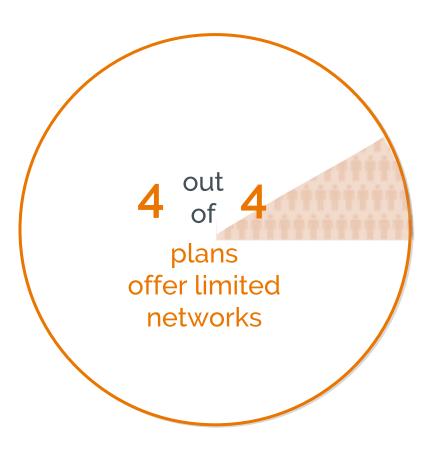


Share of Value-Oriented
Payments that Put
Providers at Financial Risk



Limited networks (commercial only)





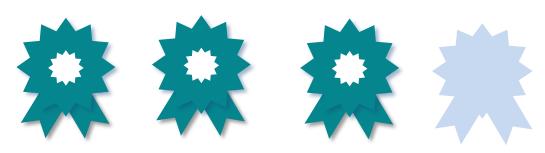
9%
of members
in these plans
are enrolled
in these products



System Transformation & Outcomes Measurement

Member support tools (commercial only)





3 of 4 offer quality information



4 of 4 offer price information







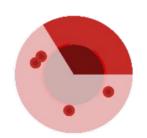


3 of 4 offer treatment decision information

HEDIS[©] measures (commercial)



HbA1c poor control



34% of people with diabetes had poorly controlled blood sugar (HbA1c >9%) U.S. PPO average: 43%

Controlling high blood pressure



of people with hypertension had adequately controlled blood pressure

U.S. PPO average: 55%

All-cause readmissions



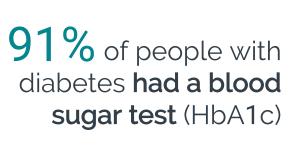
7% of hospitalizations are followed by another hospitalization within 30 days*



*Based on VA's case mix

U.S. average not available

HbA1c testing



U.S. PPO average: 89%



HEDIS[©] measures (Medicaid)



HbA1c poor control



XX%
of people with diabetes
had poorly controlled
blood sugar (HbA1c >9%)

Medicaid average: 43%

Controlling high blood pressure

Not available for Colorado Medicaid - HEDIS 2017

All-cause readmissions

Not applicable to Medicaid for HEDIS 2017

HbA1c testing

XX% of people with diabetes had a blood sugar test (HbA1c)

Medicaid average: 87%



Statewide measures from Commonwealth Scorecard

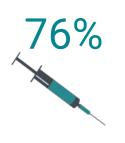


Unmet care due to cost



U.S. average: 13%

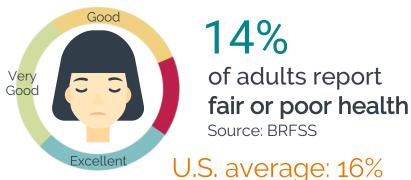
Childhood immunizations



of children ages
1.5 - 3 years old received
all recommended doses
of seven key vaccines
Source: NIS

U.S. average: 71%

Health-related quality of life



Home recovery instructions

89%



of adults reported being given information about how to recover at home

Source: HCAHPS

U.S. average: 87%

NTSV Cesarean Sections



COMMERCIAL

*NTSV measure. Analysis by CIVHC of Vital Statistics Program data.

23%

of women with low-risk pregnancies* had Csections

MEDICAID



*NTSV measure. Analysis by CIVHC of Vital Statistics Program data. 18%
of women
with
low-risk
pregnancies*
had Csections



Hospital-Acquired Pressure Ulcers

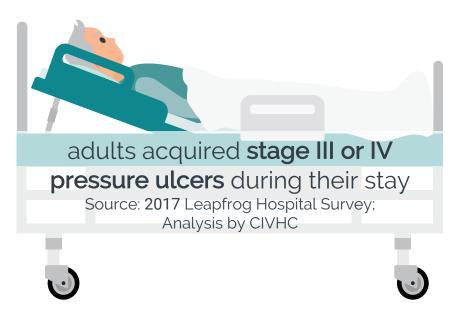


COMMERCIAL

MEDICAID

1.8 out of 1,000

0.7 out of 1,000







Questions & Contact

Leader Perspectives Report



- ✓ Key themes include: administrative waste; patient-centered quality metrics; and the role of benefit design
- ✓ 17 leaders interviewed including 3 provider leaders,3 purchasers, and others!
- ✓ Thank you to those who participated!





CONTACT

Andréa Caballero, MPA
Program Director
acaballero@catalyze.org
714.815.8425

Alejandra Vargas-Johnson Project & Research Manager avargasjohnson@catalyze.org 510.213.3777

www.catalyze.org

Thank you!





Thank you for supporting this project & catalyzing a better functioning health system in Colorado!