Agenda

- Welcome, Roll Call, and Meeting Purpose
- Enhancements that Support Integrated Care Delivery
  - Review “themes/principles” from Nov. 9th meeting
  - Primary Care Case Management – review of proposal
  - Provider/Patient “attachment”
  - Multi-payer alignment/consistency
- Public Comment
- Next Steps and Wrap Up
Enhancements to Care Delivery: Themes/Principles

- Current alternative payment models (APM), such as IHP, are in place, modifications to payment methodology and measurements so that they are more equitable and effective.

- Flexible, prospective payments would be useful and better match costs as providers in APMs build necessary infrastructure, provide more flexible care delivery options, in a cost-effective way.

- Prospective, stable attribution may allow providers to more effectively target interventions, manage specific population.

- Provide increased accountability for patient care across the care continuum, potentially including non-medical expenses.
Enhancements to Care Delivery: Themes/Principles, continued

- Alternative payment models need to be **sustainable across multiple years**, ensuring that incentives remain in out years
- APMs should be **applicable across high and low efficiency providers**, rewarding for both performance and improvement
- **Metrics should continue to be used, but with caution**; they have great power to improve the care delivery system but can easily be over-emphasized in payment policy or become a new barrier for under-represented populations
- APMs need **consistency of goals and intended outcomes across payers**, while enabling flexibility and innovation
Enhancements to Care Delivery: Primary Topics for Today’s Meeting

- **Primary Care Case Management**
  - Review of memo and bill language; open questions, additional information needed?

- **Patient attachment to provider**
  - Allow for patient choice
  - Allow providers to know population they are responsible for, will receive prospective payments for, more effectively target interventions, manage specific populations
  - Support existing and enhanced alternate payment arrangements and care coordination
  - Include a variety of provider types, particularly for patients with complex conditions (i.e. not just traditional primary care providers)

- **Multi-payer alignment/consistency**
  - Ease burden on providers with APMs with multiple payers
  - Allow for flexibility and innovation, while keeping consistent goals of better, more cost effective, and accessible care
  - Could include consistency in metrics, methodologies, and definitions
  - Encourage up-take of APMs by payers across the health system
Next Meeting

Friday, November 20, 2015
2:00 PM to 4:00 PM
Location TBD