Health Care Delivery Initiative Overview

Michigan State Innovation Model Kick-Off Summit
August 10-11, 2016
Kellogg Hotel Conference Center
Great Challenge with Great Opportunity

“Transforming health care delivery is arguably the single greatest current challenge in health care policy and practice today...

...there is no single change in policy or practice that will suffice; instead, the problem must be addressed through a range of concurrent, sequential, and mutually reinforcing changes.”

Image Credit: Institute for Alternative Futures
What could our future look like?

[Image Credit: Eileen Clegg, Visual Insight]
We’ve Got Assets

- Primary Care Transformation Experience
- Learnings from Accountable Care
- Significant Health Coverage Gains
- Health IT Infrastructure
- Capable Provider Networks
- Care Management and Coordination Competency
- Credibility with Federal Partners
- Working Models for Community Connections
- Expanded Care Teams
- Committed Payer Partnership
- Dedicated Leadership
- Respected Learning Institutions and Programs
Realizing the Characteristics of Michigan’s Future Health System

<table>
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<tr>
<th>Strengthen the primary care infrastructure</th>
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<td>Build capacity within communities to improve population health</td>
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<td>Provide care coordination to promote positive health and health care outcomes for individuals</td>
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<td>Improve systems of care to ensure delivery of the right care, by the right provider, at the right time, and in the right place</td>
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<td>Design system improvements to reduce administrative complexity</td>
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<td>Design system improvements that contain health care costs and keep insurance premiums affordable</td>
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- **Patient Centered Medical Home**
- **Community Health Innovation Region**
- **PCMHs and CHIRs Working Together**
- **Health Information Exchange**
- **Measurement, Evaluation, and Improvement**
- **Stakeholder Committees**
- **Advanced Payment Models**
### Support Scale for What’s Working
- Expand the PCMH foundation in Michigan including team-based care delivery, advanced access, care management, self-care support and core HIT functions

### Encourage the “Next Step” for Advancement
- Support more effective care transitions, informed referrals, integrative treatment, risk stratification, HIT enabled quality improvement and information exchange

### Test Promising Practices Where Opportunities Exist
- Encourage a community-centered health focus, fully linking clinical practice with community resources and population health interventions

How does SIM add value to these approaches?
Where Our Assets Meet Opportunities

• The world around us continues to present opportunities for growth and improvement that take many forms
• It’s noisy, occasionally it’s messy, and it can feel overwhelming
• Our goals don’t change as the landscape and new opportunities around us do, the ways we work together to achieve our objectives evolve
• The greatest potential for success in the State Innovation Model is to cut through the noise, connect the dots, and architect a path toward the goals we share
When combined, the PCMH Initiative (including the Custom Option available through SIM) and the Comprehensive Primary Care Plus program provide Michigan a great platform for continued success.

### Today’s Top of Mind Opportunities

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<th>Program</th>
<th>Potential Roles and Contributions</th>
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| PCMH Initiative (including Custom Option)         | • Provide a near term mechanism to ensure Medicaid engagement and payment participation for CPC+ selected practices  
  • This will require an effort on the part of all stakeholders match participating providers across programs  
  • Through the custom option:  
    • Provide an “on ramp” to PCMH transformation for practices that were not ready to participate when the CPC+ program began  
    • Engage providers excluded from CPC+ in PCMH transformation efforts and payment models  
    • Advanced alternative payment models for providers interested in and prepared for further payment reform                                                                                     |
| CPC+                                              | • Sustain the multi-payer payment model collaboration needed to build on MiPCT’s PCMH transformation without interruption  
  • Continue advancement in comprehensive primary care functions                                                                                                                       |
Near Term Strategy (2016-2017)
• Launch the PCMH Initiative January 2017, a Michigan Primary Care Transformation Partnership with the State Innovation Model
  • Seize opportunities to ensure similar programs (like CPC+ and the PCMH Initiative) align on common goals
  • Grow the number of primary care providers participating in PCMH transformation
  • Make investments in advanced primary care capability through supportive payment, practice learning and bolstering/expanding evidenced based efforts
  • Continue improvements in quality of care, health outcomes and patient satisfaction

Looking Toward the Future
• Identify new opportunities (like the Custom Option) which can compliment current efforts, advance care effectiveness, and bolster PCMH payment reform (thinking one step ahead on our path)
  • Spread PCMH transformation across Michigan
  • Sustain investments and encourage bold advancements
  • Reward shared ownership and accountability (community and clinical practice) for health outcomes
  • Deploy information sharing strategies which deepen the insights of patients and all health partners
Near Term Strategy (2016-2017)
• Ensure a thorough understanding of where Michigan’s payment landscape stands today including benchmarking current efforts
• Recognize the reach of and opportunities for payment reform beyond Michigan’s large scale PCMH efforts
• Support and encourage payers and provider networks in developing market-driven payment reform models that support multiple facets of the health system

Looking Toward the Future
• Establish progressively advancing goals for the scale of Michigan residents, providers and healthcare spending attributable to Alternative Payment Models
• Leverage payer partnerships and contract/regulatory opportunities (where available) to develop widespread commitment to APM goals
Near Term Investments

- $22 million 2017 investment in Care Management and Practice Transformation funded by the Medicaid budget and SIM grant dollars
- No-cost access for participants to the multi-payer, online data reporting and performance dashboard tools available through the Michigan Data Collaborative
- Partnership with the Institute for Healthcare Improvement for a SIM grant supported collaborative learning network to enhance PCMH practice transformation efforts
- Significant investment in care management and coordination training for practice staff, including work to ensure training opportunities for new types of Care Coordinators
- Partial funding of enhanced (greater focus on practice level actionable data) CAHPS process for participants
- Contracts with consulting partners to add expertise and formalize partnerships where it benefits the Initiative’s overall goals
- Supplemental training, free to participants, on key issues like coding for non-traditional service provision
- Initiative administration infrastructure which supports processes that practices and payers need to ensure meaningful participation
• What we know, and what we don’t know (today) about the PCMH Initiative and CPC+ in 2017
  – We will dive head first into the weeds on the things we do know and highlight the places we’re still working to figure out with partners

• How the PCMH Initiative application process will work and proposed expectations for participants

• Engaging discussion about future opportunities for transformation alternative payment models