

# The Evolution of Patient-Centered Primary Care

National Institute for Health Care Management (NIHCM) Webinar on the Health Care Workforce

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### State of the Nation – We are at a Fork in the Road

Key healthcare challenges, such as insufficient resources directed to primary care, drive unsustainable healthcare costs and poor performance

Americans without access to primary care

60 Million

Average wait for non-emergency appointment

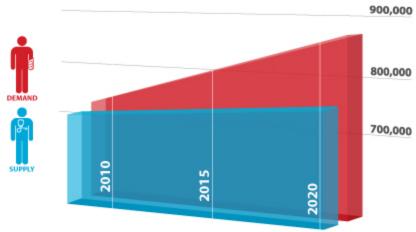
20.3

Days

PCPs accepting new patients

49.8%





 Anticipated 90K physician shortage by 2020, including a 45K PCP shortage

Source: Association of American Medical Colleges

Holistic solution required to drive the change to a proactive, coordinated and efficient health system focused on the health and well-being of each patient



### Our Solution: Patient Centered Care

<u>Patient Centered Care Goals:</u> Drive the transformation to a patient centered care model that promotes access, coordination across the continuum, wellness and prevention by collaborating with physicians, starting with primary care, in ways that allows them to successfully manage the health of their patients and thrive in a value based reimbursement environment

#### Hallmarks of Patient Centered Care Solution

**Coordination of care** Support for high risk **Facilitated and ensured** across the delivery patients access system **Outcomes and Shared decision making** compliance with and accountability with Promotion of wellness evidence based patients and their and prevention guidelines is measured caregivers and monitored

Aligns with industry definition of 'Accountable Care Organizations'



## Key Solution Components that Drive a Shift to Patient Centered Care

#### Payment Reform

- Moving from volume to value based payment models
- Implementing a shared savings framework aligning provider payment with improved patient outcomes

# Integrated Care Management & Enhanced Access

- Promoting proactive care, care planning & coordination built around patient needs
- Promoting ensured access through a range of health care access options

#### Provider Transformation

 Giving PCPs the information, tools and resources they need to move towards a proactive, coordinated, population health model

#### Member Engagement

- Encouraging a relationship with a trusted PCP even in an open access environment
- Engaging members as active participants in their health

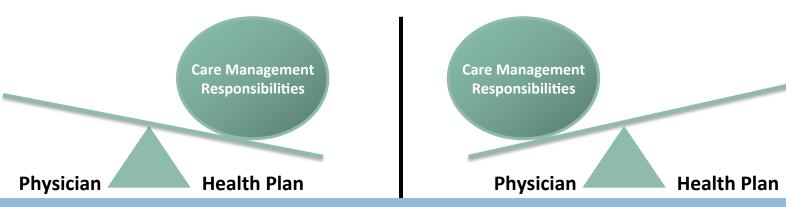
**Focus of Discussion** 

Results in a shift from a transaction based relationship to an inter-dependent collaborative relationship



## Aligned Care Management Model

A patient centered model leverages the best capabilities of physicians and health plans to optimize patient care management and engagement



#### Increasing ability of physicians to take on more accountability for care management

- Physician is beginning the practice transformation journey
- Focus is on educating physicians about available resources for their patients, ensuring they integrate into their care plans and encourage patients to enroll
- Provide training, education and tools to support care coordination and transformation activities and enable physicians to take on increasing responsibility
- Advanced provider organizations take on increased responsibility for a broad set of care management and disease management activities, shifting the responsibility for those activities from the health plan to the practice.
- Prevalent in in key markets (e.g., CA) with opportunities to expand model as provider organizations mature and more advanced organizations engage



# LiveHealth Online Enables Members to Connect to a Doctor Securely Online



#### **Benefits**

#### Consumers

- Immediate access to providers, anytime, anywhere
- Greater convenience and choice

#### **Providers**

- Freedom and flexibility, without overhead
- Increased practice revenue, efficiency

#### **Employers**

- · Reduced medical cost
- Improved productivity
- Increased employee satisfaction



## **Provider Transformation**

**Information** 

**Tools** 

Resources

#### Anthem will provide a variety of resources to help practices transform:

- Meaningful and actionable information
- Alternate care delivery technology (e.g., Live Health Online)
- Enhanced Patient Record (e.g., EMR, MMH+ and LPR)
- Comprehensive toolkits (e.g., care planning templates, population health registries)
- American College of Physicians Medical Home Builder®
- Learning Collaboratives



# Patient Centered Care Is An Inclusive, Flexible and Extensible Framework

**Inclusive**, because any provider organization with a primary care foundation willing to follow the program terms can participate

- Whether small, independent PCP organizations or larger, integrated organizations (IPAs, ACOs) with a primary care foundation
- The broader our reach, the greater the opportunity to influence positive change **Flexible**, because it is not a one-size-fits-all approach
- We're moving past acronyms like PCMHs or ACO and creating a set of solutions that allow us to support and work with primary care providers based on where they are today
- We will offer that support regardless of their current capabilities or how they are organized – and help them improve the quality and cost of care they deliver

**Extensible**, because it is designed to adapt and change with our physician partners

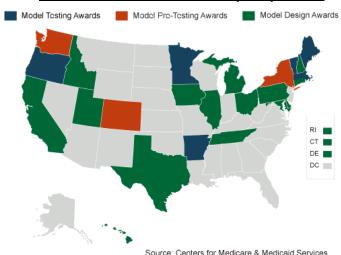
 Our model will continue to evolve with practices to support them as they take on increasing accountability for the cost and quality of care delivered to their patients



## Aligning with Government Initiatives

Anthem's Patient Centered Care approach aligns with government efforts to achieve a value based healthcare model, receiving accolades and garnering support for further expansion

#### **State Innovation Models (SIM) Grant**



- **ME**: 1 of 6 SIM Model Testing Award recipients and Anthem is on the 20-member Steering Committee overseeing execution
- 6 other Anthem markets received SIM grants:
  - NY CO: 2 of 3 Model Pre-Testing Awards
  - CA, OH, CT, NH: Received Model Design Awards (17 total)

#### **CMMI Comprehensive Primary Care Initiative**

 Beginning 11/1/12, participating in all 3 Anthem markets selected for the 7 CPC sites



#### New York: Capital District-Hudson Valley Region

74 Primary Care Practices | 287 Providers | 6 Payers Estimated 39.171 Beneficiaries Served



#### Ohio & Kentucky: Cincinnati-Dayton Region

75 Primary Care Practices | 276 Providers | 10 Payers Estimated 44.486 Beneficiaries Served



#### Colorado: Statewide

74 Primary Care Practices | 369 Providers | 9 Payers Estimated 42,064 Beneficiaries Served |

Other markets: AR, NJ, OK, OR



## Patient Centered Care is the New Normal with Efforts Underway to Further Build and Enhance

#### **Current**

- Started with a focus on provider organizations with a primary care foundation
- Patient Centered Care in nearly all our markets
  - 3,600+ arrangements including 52 ACOs
  - More than 22.5K physicians and 14.5K PCPs
  - Nearly **1.8 million** attributed members
- Will be in all of our markets covering at least 20% of our PCPs participating by early 2014
- Build out medical neighborhood including expanding hospital P4P and bundled payment programs and implementing the Patient Centered Specialty Care program 1/1/14

#### 2015-2016

- Continue to build the medical neighborhood, ensuring that all providers across the continuum share common patient centered goals around improved quality and reduced cost
- Launch National Patient Centered Primary Care Solution providing seamless access to a national Blue Plan patient centered care network
- The patient centered framework will cover up to 75% of our PCPs
- Optimize alignment of incentives across the provider continuum and with member incentives around common patient centered goals

Increasing benefits to all – better outcome, lower costs – as providers ramp-up and Patient Centered Care footprint expands



## Questions



