

Maternity Multi-Stakeholder Action Collaborative

Track 2: Contracting with Providers

July 28, 2017

1:00 – 2:00 pm ET



PLEASE NOTE:

- All telephone lines are **unmuted** and you are no longer in “Listen-Only” mode. **Please mute your own telephone.**
- ReadyTalk works best with Chrome, but does work with other browsers. If you have connectivity issues, try refreshing your browser or switching to Chrome.



For technical issues, please contact Kristian Motta (kmotta@rippleeffect.com) or Leah Allen (lallen@mitre.com)

Agenda

	Timeframe (ET)	Topic	Facilitators/Presenters
1	1:00 - 1:05 pm	Welcome and Meeting Overview	Tanya Alteras
2	1:05 – 1:20 pm	Content Overview	Michael Bailit
3	1:20 – 1:55 pm	Expert Discussant Interviews and Facilitated Discussion	Lili Brillstein Bill Golden
4	1:55 – 2:00 pm	Wrap-Up and Next Steps	Michael Bailit

Antitrust Statement

MAC Participants agree that all activities are in compliance with federal and state antitrust laws. In the course of discussion, **no financial information from participants will be shared with others or with the general public.**

During meetings and other activities, including all formal and informal discussions, each participant will refrain from discussing or exchanging information regarding any competitively sensitive topics. Such information includes, but is not limited to:

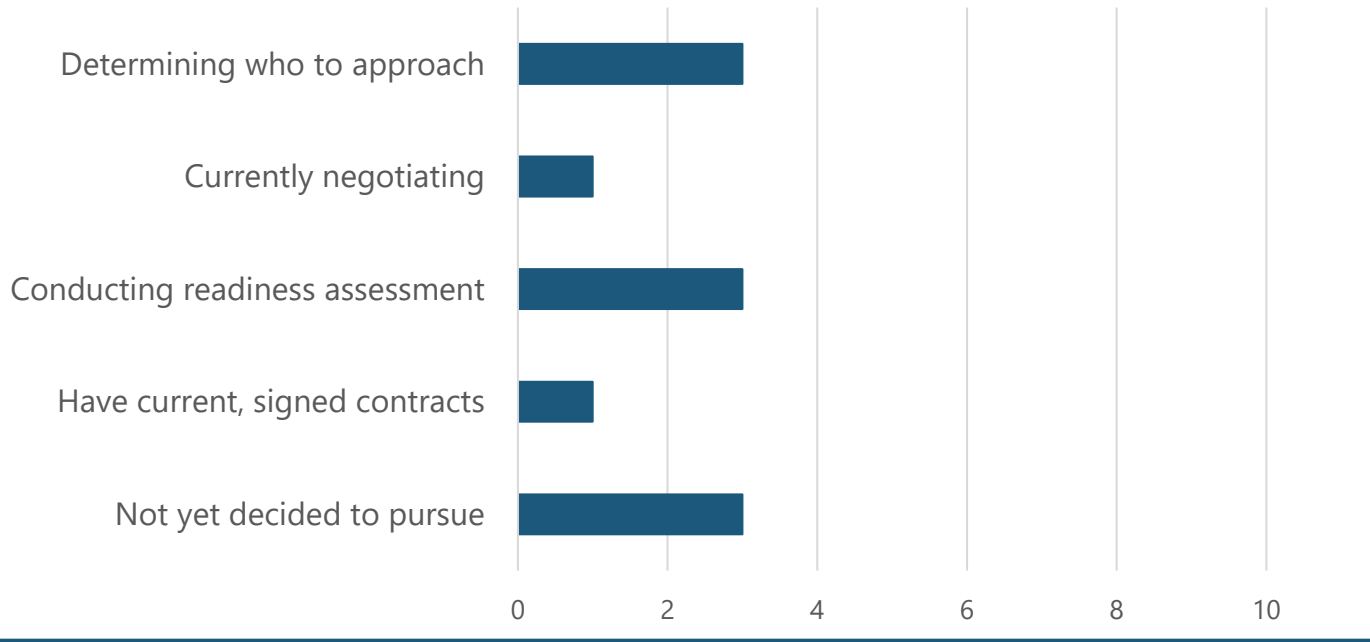
- ✓ PMPM
- ✓ Shared savings or incentive payments
- ✓ Information about market share, profits, margins, costs, reimbursement levels or methodologies for reimbursing providers, or terms of coverage

Meeting Objectives

- ✓ Explore contracting steps, including:
 - Identifying provider characteristics that make them more or less amenable to contracting for episodes
 - Infrastructure and education required for purposes of engagement
 - Assessing options for identifying the contracting entity (i.e. maternity care providers, birth locations, or ACOs, IPAs, or state-created entities)
 - Conducting a readiness assessment
- ✓ Ask questions and interact with:
 - Bill Golden to understand one state's approach to contracting with all Medicaid maternity providers
 - Lili Brillstein to understand one commercial plan's approach to contracting with selected providers and different provider types (hospital, OB/GYN)

Poll Results

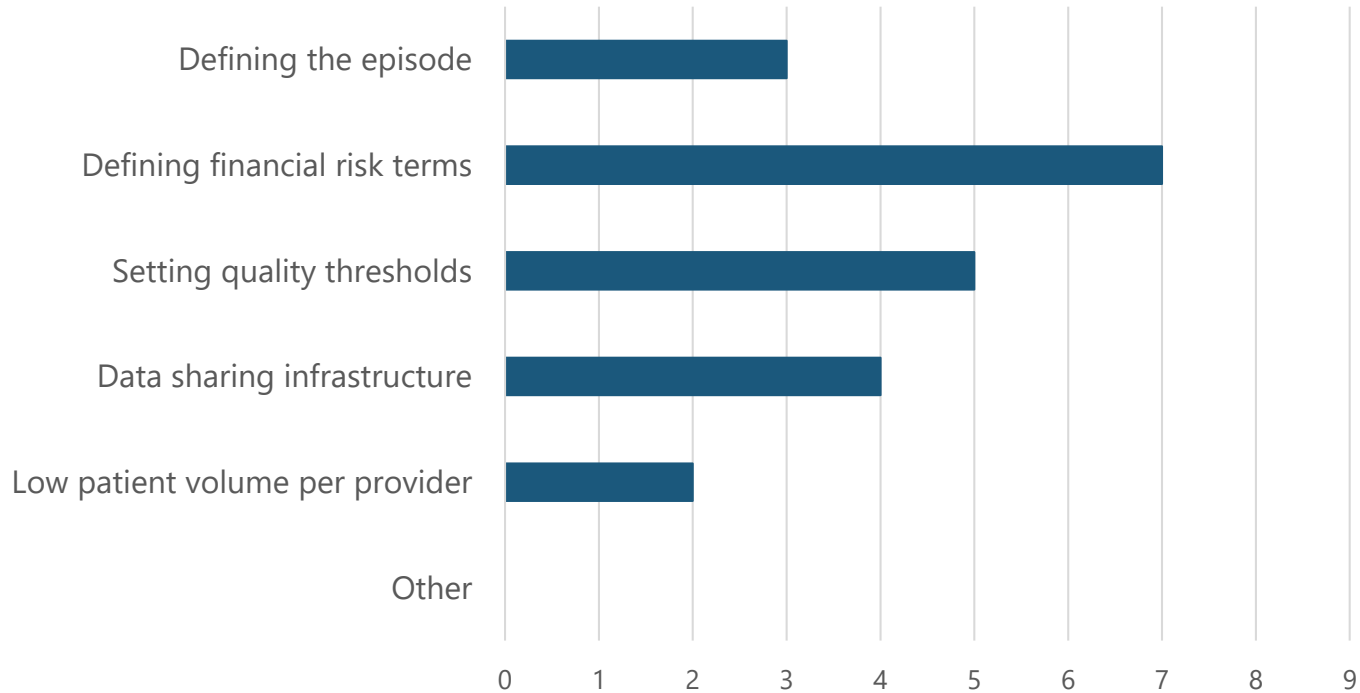
At what stage is your organization in the process of contracting with one or more providers to implement episode-based maternity payment models?



<i>Answer</i>	<i>Total #</i>	<i>Total %</i>
<i>Determining who to approach</i>	<i>3</i>	<i>27%</i>
<i>Currently negotiating</i>	<i>1</i>	<i>9%</i>
<i>Conducting readiness assessment</i>	<i>3</i>	<i>27%</i>
<i>Have current, signed contracts</i>	<i>1</i>	<i>9%</i>
<i>Not yet decided to pursue</i>	<i>3</i>	<i>27%</i>

Poll Results

What are your concerns/challenges for the contract negotiation process?



<i>Answer</i>	<i>Total #</i>	<i>Total %</i>
<i>Defining the episode</i>	3	33%
<i>Defining financial risk terms</i>	7	78%
<i>Setting quality thresholds</i>	5	56%
<i>Data sharing infrastructure</i>	4	44%
<i>Low patient volume per provider</i>	2	22%
<i>Other</i>	0	0%

Selecting Providers Amenable to Contracting for Maternity Episodes

States can...

- Mandate the payment method for any Medicaid provider that has met a certain volume threshold for episodes (AR approach). *We'll hear more about this approach when we speak with Bill Golden.*
- Require your managed care organizations (if you have them in your state) to implement a state-designed maternity episode with their provider networks (TN and OH approach).
- Greatly incentivize (\$, data, oversight...) – but not mandate – managed care organizations to contract using the state-designed approach, giving MCOs the flexibility on what entities to contract with (NY approach).

Selecting Providers Amenable to Contracting for Maternity Episodes

Commercial or Medicaid plans have broad discretion, and can consider starting episodes with one or more of your high-volume maternity providers:

- ...with whom you have a good relationship
- ...with high quality (or low quality) scores for maternity care
- ...with wide variation in episode costs, or varying from cost benchmarks
- ...with strong internal management systems and effective leadership well-poised to make necessary changes to clinical operations
- ...already engaged in some sort of a non-maternity episode-based payment program (e.g., the federal BPCI or CCJR programs)

Engaging Providers

In order to engage providers in the episode design and implementation process, consider the following:

- **Host education sessions** on how episode-based payment works, leaving time for Q&A from the providers. This might be done on an ad-hoc basis in-person, via webinar, or during regularly scheduled meetings.
- **Share maternity cost and quality performance information** with providers and compare it to other comparable providers (e.g., those in the region, network, state, etc.)
- **Explain the financial model**, including any potential for shared savings or risk, and what the provider might have to do to achieve savings, or avoid loss.

Options for Identifying the Contracting Entity 10

Maternity Care Providers



OB/GYNs

Certified Nurse Midwives

Family Physicians

Birth Locations



Hospitals

Birth Centers

ACOs, IPAs, or State-Created Entities



Example: NY's Performing Provider Systems

What is Included in the Contract? (1/2)

Definition of the Episode

- Scope of services included / excluded
- Episode time period
- Member eligibility

Payment Terms

- Prospective vs. FFS with retrospective reconciliation (and timing of the reconciliation)
- Financial risk arrangement details (including how savings / losses will be calculated)
- Payment schedule
- Any requirements for contracting entities to distribute any portion of realized savings to individual physicians or subcontracting entities
- Appeals

What is Included in the Contract? (2/2)

Provider Responsibility

- How and when to submit claims, submit data for quality measurement, and notify the plan of episode commencement (if required)

Payer Responsibility

- What reports will be provided to providers, and when
- Whether payers take on responsibility to allow providers to review and comment on any publicly reported quality data, and/or quality data that will be used to adjust payment.

Readiness Assessment

- When ready to contract with providers, some payers conduct readiness assessments – generally for value-based payment.
- Readiness assessments help to determine whether the provider is:
 - Ready to accept risk (if you're moving forward into a risk arrangement)
 - Ready to accept and work with the data they will receive (to help them understand their performance)
 - Committed at the senior management level
 - Clinically capable of transforming care processes to be successful under episode-based payment

Strategies for Contracting Success

1. Be open and flexible with providers

- ✓ Consider varying the contracting approach by provider, if possible
- ✓ If not possible, gather input from many stakeholders beforehand and take a consistent approach

2. Consider delivering technical support to help providers succeed

- ✓ Partner with providers and work with them to help them be successful.
- ✓ Consider routine face-to-face meetings on performance if feasible

3. Complete the contracting process in a timely fashion

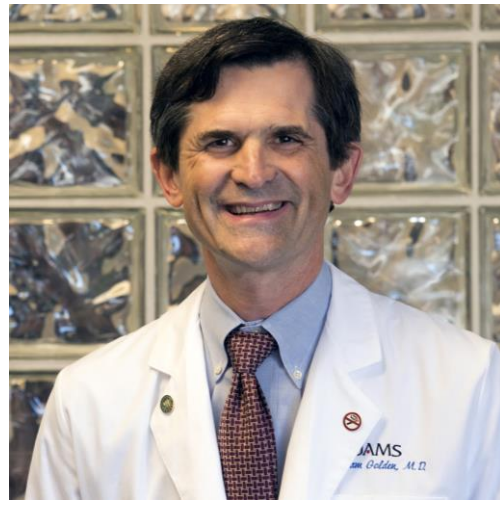
- ✓ Slow contracting phases can dry up enthusiasm

Approaches from the Field

Live interview with colleagues

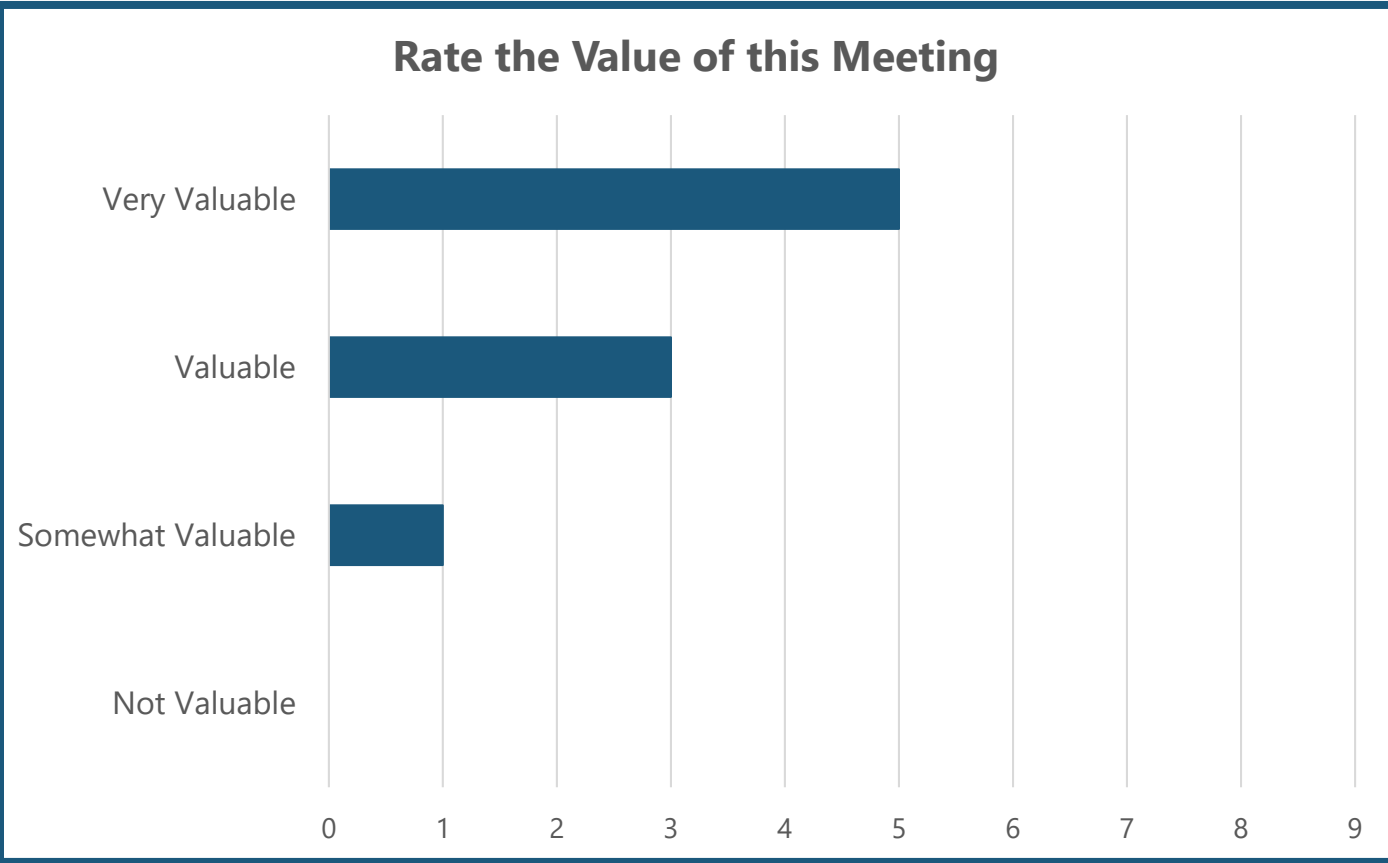


Lili Brillstein
*Director, Episodes of Care
and Market Innovations,*
Horizon Blue Cross Blue
Shield of NJ



Bill Golden, MD
Medical Director,
Arkansas DHS/Medicaid

Poll Results



<i>Answer</i>	<i>Total #</i>	<i>Total %</i>
<i>Very Valuable</i>	5	56%
<i>Valuable</i>	3	33%
<i>Somewhat Valuable</i>	1	11%
<i>Not Valuable</i>	0	0%

Looking Ahead

Session	Track	Session Name	Date	Time (ET)
1	1	Making the Business Case (Completed)	2/8	2-3 PM
2	2	Quality Measurement, Part 1 (Completed)	3/3	1-2:30 PM
3	2	Quality Measurement, Part 2 (Completed)	3/20	2:30-4 PM
		SESSION POSTPONED	4/14	1-2 PM
4	2	Setting the Patient Population (Completed)	5/4	1-2 PM
5	1 & 2	Alternative Models of Maternity Care Delivery & Determining Services (Completed)	5/22	2-3 PM
6	2	Setting the Episode Price & Budget (Completed)	6/15	1-2 PM
7	2	Data Sharing and Infrastructure (Completed)	7/7	1-2 PM
8	2	Contracting with Providers	7/28	1-2 PM
9	1	**Next: Episode Payment in Medicaid Managed Care States**	8/16	2-4 PM

MAC Team

Primary Points of Contact

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