

BUILDING A POSITIVE PAYER- PROVIDER PARTNERSHIP

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INTRODUCTION

- » Value-Based Purchasing (VBP) is an approach that ties payment to the quality and efficiency of healthcare services delivered.
- » This resource provides strategies for cultivating a strong relationship with a Managed Care Organization (MCO) when entering into a value-based purchasing agreement. It provides insights into what the payer values and pinpoints measurable outcomes that hold significance to the payer, thereby guiding the formulation of a value proposition. Understanding the payer's requirements is imperative in the design of your program.

WHAT DOES THE PAYER VALUE?

A PAYER'S PERSPECTIVE ON VALUE BASED PAYMENT/VALUE BASED CARE (VBP/VBC)

VBP/VBC's proactive, data-driven approach means providers, patients and insurance companies are better aligned in the goals of keeping patients healthy and keeping costs down over time.

Addressing risk factors and early-stage disease is better for patients and less expensive than late-stage interventions and hospitalizations.

Well-controlled chronic conditions incur fewer costs compared to uncontrolled conditions that often progress.

Enhanced care coordination and data sharing can also help streamline administrative processes and reduce wasted spending.

SAVINGS OPPORTUNITIES FROM A PAYER'S PERSPECTIVE

Early detection and proactively addressing risk factors

Enhanced patient engagement and better management of chronic conditions

Standardization of care and use of Centers of Excellence

Better use of evidence-based decision making, leading to personalized treatment plans

Informed referrals and best site of service, (e.g., walk-in clinics rather than emergency rooms, when appropriate)

Improved care coordination, fewer complications and hospitalizations

Fewer unnecessary or duplicative tests and procedures

More prescribing of generic medications when possible

“Savings don’t come from the denial of services; they come from ensuring that our members are receiving the right level of service at the right time and in the right setting,” Germano.

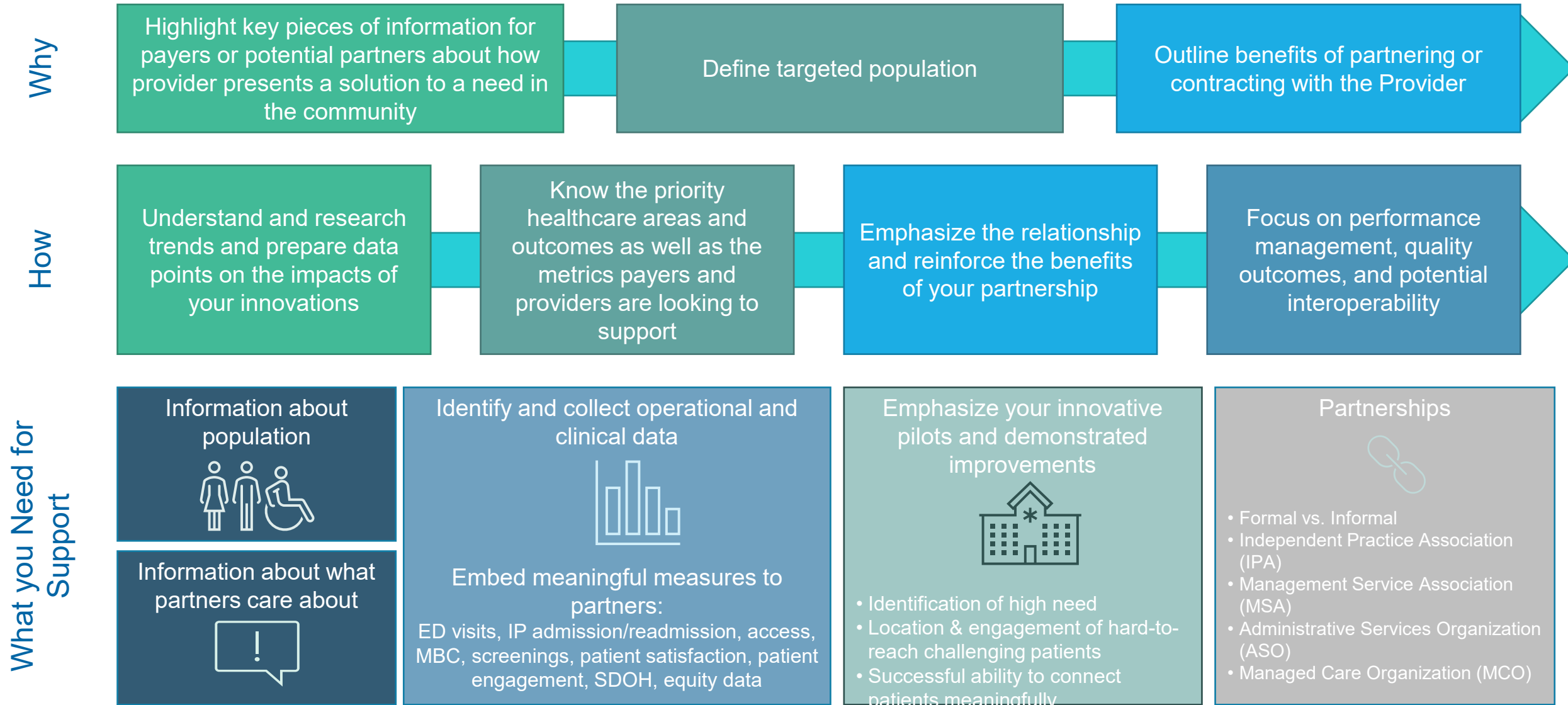


CONNECTING PROVIDER AND PAYER VALUES TO VBP



BUILDING A VALUE PROPOSITION FOR PAYERS

BUILDING A VALUE PROPOSITION FOR PAYERS



USE DATA TO UNDERSTAND YOUR TARGET POPULATION FOR VBP

- » Use data to define different populations and approaches to each:
 - » Diagnosis
 - » Demographics
 - » Acuity
 - » Chronicity
 - » Complexity
 - » Access to available supports
- » Consider risk stratifying your “attributed” populations
- » Develop tiers of care for patients of different needs/risks
- » Create clinical protocols appropriate for each tier

EVIDENCE READINESS FOR VBP AND PROACTIVE PLANNING FOR VBP

Data review process identified

Monthly data review with payer
Care management ready to address gaps in service
Quality review tools to measure outcomes
Dedicated teams to support VBP

Education

Educate Staff on VBP and progress
Training of staff to address gaps in service
SDOH training

Proactive Outreach

Propose monthly meetings with Payer
Regularly scheduled internal meetings with VBP team

Accountability

Define reports that will be used to demonstrate accountability

VBP MODELS IN THE PROVIDER SPACE

Provider's Key to Success in VBP

Contracting

Be Specific

Identify targeted milestones that will impact overall metrics used in the VBP with specific activities expected, fully developed timelines, and meaningful incentives

Clinical Care

Partner & Coordinate

Understand where you are in the integration spectrum and expand integration opportunities to reduce fragmentation and silos

Analytics

Meaningful Metrics

Ensure that the metrics used are relevant and meaningful to the you as the providers as well as the payer. Consider data collection and sharing processes to ensure continuous performance monitoring.

Health Equity

Monitor Disparity

Leverage screening tools to expand SDOH data collection. Use analytics to identify disparities in outcomes and use VBP to incentivize gap closure and movements toward health equity

CONTRACTING FOR VBP WITH PAYERS

When contracting with your payers

- Know your payer's requirement for VBP/VBC
 - Medicaid
 - Medicare
 - Commercial
- Value proposition
 - Work with Payer to solution for setting up VBP/VBC through your value proposition
 - Present the projected ROI and projected changes in required outcomes to the payers
- Contract
 - Make certain that your VBP/VBC requirements, outcomes, risk and payment are clearly defined through contract.
 - Suggest contract language changes that provide a true and realistic trajectory to success

**“THE BEST WAY TO PREDICT THE FUTURE IS TO
INVENT IT.”
ALAN KAY**

MINI SELF ASSESSMENT



Knowledge

1 2 3 4 5 6 7 8 9 10

Comfortability

1 2 3 4 5 6 7 8 9 10

Confidence

1 2 3 4 5 6 7 8 9 10

Reflect & Connect:

What do you think your organization may look like 5 -10 years from now if you incorporate and build upon these concepts?

[Photo by Glenn Carstens-Peters on Unsplash](#)



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