



**KentuckyOne Health Partners**

KentuckyOne Health®



# Understanding and Preparing for MACRA

June 16, 2016

# Moving from Volume to Value

Reforming our health care delivery system to improve the quality and value of care is essential to address escalating costs, enhancing quality, and increasing numbers of Americans coming into the system with no previous healthcare.

Reform will:

- Improve access to right care, right time, right setting
- Improve health and prevent complications of illnesses
- Further migrate payments via incentives

The MACRA legislation is driving CMS to further focus on value in addition to quantity. All other payers are following this migration.



# What is MACRA?

- New legislation passed in 2015, repealing annual Sustainable Growth Rate (SGR)
- Locks reimbursement at near 0 growth in lieu of annual performance bonuses
- Two new payment tracts: MIPS or Advanced APM
- Program will be implemented on January 1, 2019, based on provider's 2017 performance



# Who will be impacted?

- Nearly all providers are impacted:
  - Medicare Part B payments
  - Physicians, PAs, NPs, Clinical Nurse Specialists, CRNAs
- Excluded are:
  - Clinicians, groups with less than 100 Medicare patients or \$10,000 in Medicare charges
  - Providers in their first year of Medicare billing
  - Medicare Part A



# MIPS: Merit-Based Incentive Payment System

- Bonus payments determined by:
  - Score of 0-100 on performance across 4 categories:
    - *Quality*
    - *Cost/Resource Use*
    - *Clinical Practice Improvement*
    - *Advancing Care Information*
- Stronger performers in a yet-to-be-defined region will benefit over those with low scores or no data
- Participants in a group APM (existing ACO) will benefit over independent provider organizations



# What can you do now?

- Educate your providers about this change to performance based payment
- Focus on documenting your high quality care
- Review PQRS and GPRO scores, put together an improvement plan
- Talk with your local ACO or call KentuckyOne Health Partners for support
- Routinely visit the KHP MACRA Resource Center for new information



# Implications for Providers

- Nearly all providers are impacted
- By default, most providers will be in MIPS model year one
- In addition to common PQRS measures, each specialty will have a few metrics
- The time to begin improving is now – 2019 bonus and penalties are based on 2017 performance



# How can KHP help?

Check out MACRA on KentuckyOneHealthPartners.org:





# How can KHP help?

Our Care Management System and Quality Portal are great resources for provider offices.

**Provider Portal**

Include Network(s):  KY  Out of Network  
 Employer: ALL Plan: ALL

**Patient Lookup**

Show me Results for:  PCP |  My Patients |  My Practice |  All Enrollees Lookback: 1 Year

Last Name: First Name: DOB:

Displaying records : 1 through 50 of 317

Name	Address	Date of Birth	Employer/Plan	View
1 XXXXXXXXXXXX, XXXXXXXX	XXX XXXXXXXXXX XXXXXXXX, XX	08/27/1940	CMS Kentucky Medicare	Chart   Referrals   Enrollment
2 XXXXXXXXXXXX, XXXXXXXX	XXX XXXXXXXXXX XXXXXXXX, XX	04/29/1934	CMS Kentucky Medicare	Chart   Referrals   Enrollment
3 XXXXXXXXXXXX, XXXXXXXX	XXX XXXXXXXXXX XXXXXXXX, XX	04/20/1942	CMS Kentucky Medicare	Chart   Referrals   Enrollment
4 XXXXXXXXXXXX, XXXXXXXX	XXX XXXXXXXXXX XXXXXXXX, XX	07/04/1940	CMS Kentucky Medicare	Chart   Referrals   Enrollment   Messages
5 XXXXXXXXXXXX, XXXXXXXX	XXX XXXXXXXXXX XXXXXXXX, XX	11/12/1945	CMS Kentucky Medicare	Chart   Referrals   Enrollment

**My Population's Management Needs**

Risk Level	Total	Nurse Assigned	No Nurse Assigned
Priority	2 1%	0 0%	2 100%
High	60 19%	19 32%	41 68%
Moderate	117 37%	16 14%	101 86%
Low	85 27%	5 6%	80 94%
No Known Risk	53 17%	1 2%	52 98%
Total	317 100%	41 13%	276 87%

**My Population's Conditions**

Condition	Total	%	Assigned	%
Medication/Part D Medication Adherence (National Standard)	18	6%	8	44%
Diabetes Care (National Standard)	48	15%	46	96%
Diabetes Care - Extended Condition Confirmation	56	18%	52	93%
Diabetes Mellitus	104	33%	99	95%
Diabetes: Hospitalization	1	0%	0	0%
Diabetes: Appropriate Treatment of Hypertension-Part D (National Standard)	47	15%	37	79%
Total Unique Patients	317			100%
Total Unique Rules	343			74%

Select Domain

ACO: 83% PATIENT/CAREGIVER EXPERIENCE: 80% CARE COORDINATION/PATIENT SAFETY: 82% PREVENTIVE HEALTH: 92% AT RISK POPULATION: 79%

From: Jan 1 To: Sep 1

At Risk Population	Score
CAD: Drug Therapy for Lowering LDL-Cholesterol	95
Diabetes Composite (All or Nothing Scoring): Low Density Lipoprotein (<100)	92
HTN: Blood Pressure Control	88
I/D: Complete Lipid Panel and LDL Control	88
Diabetes Composite (All or Nothing Scoring): Tobacco Non-Use	86
Diabetes Composite (All or Nothing Scoring): Blood Pressure <140/90	85
Diabetes: HbA1c: Poor Control	81
CAD: ACE Therapy	78
I/D: Use of Aspirin or Another Antithrombotic	76
HP: Beta-Blocker: Therapy for LVSD	74
Diabetes: Antiplatelet medication or Aspirin Use with I/D	65
Diabetes Composite (All or Nothing Scoring): Hemoglobin A1c Control (<8%)	45

Care Coordination/Patient Safety	Score
Screening for Future Fall Risk	100
Medication Reconciliation	81
Qualify for BMR/EHR Program Incentive Payment	74
Heart Failure Admission per 1,000 members	33
DOPO or Asthma Admission per 1,000 members***	12
All Condition Readmission***	10

\*\*\* Lower rate indicates better performance. rate is adjusted in the original reported scores.

Preventive Health	Score
Pneumococcal Vaccination	100
Influenza Immunization	98
Tobacco Use Screening and Cessation Intervention	98
Breast cancer screening	96
Adult BMI Assessment	96
Screening for High Blood Pressure	88
Depression Screening	87
Colorectal cancer screening	78

Patient/Caregiver Experience	Score
Getting Timely Care, Appointments and Information	92
Shared Decision Making	84
Health Promotion and Education	82
Health Status-Functional Status	81
How Well Your Doctors Communicate	79
Access to Specialists	37
Patients' Rating of Doctor	12

# How can KHP help?

- Education and hands on support to improve provider quality metrics:
  - July/August/September meetings and office visits;
  - September Annual Business Meeting
  - Regional forums in September and October
- Call us at [1.844.804.8725](tel:1.844.804.8725).



# Rely on KentuckyOne Health Partners

- Largest Medicare Certified ACO in Kentucky, among the 20th largest ACO's in the US
- More than 100 provider groups and nearly 2,300 clinical providers in Kentucky, Ohio and Indiana
- Managing over 100,000 lives and approaching \$1 billion in medical spend under contract
- Surpassing CMS medical spend savings goals 3 years in a row
- Improved GPRO quality scores 20% for all our ACO providers
- Becker's "100 ACO's to Know" for 4<sup>th</sup> year
- CAPG 4-Star "Exemplary" rating

