

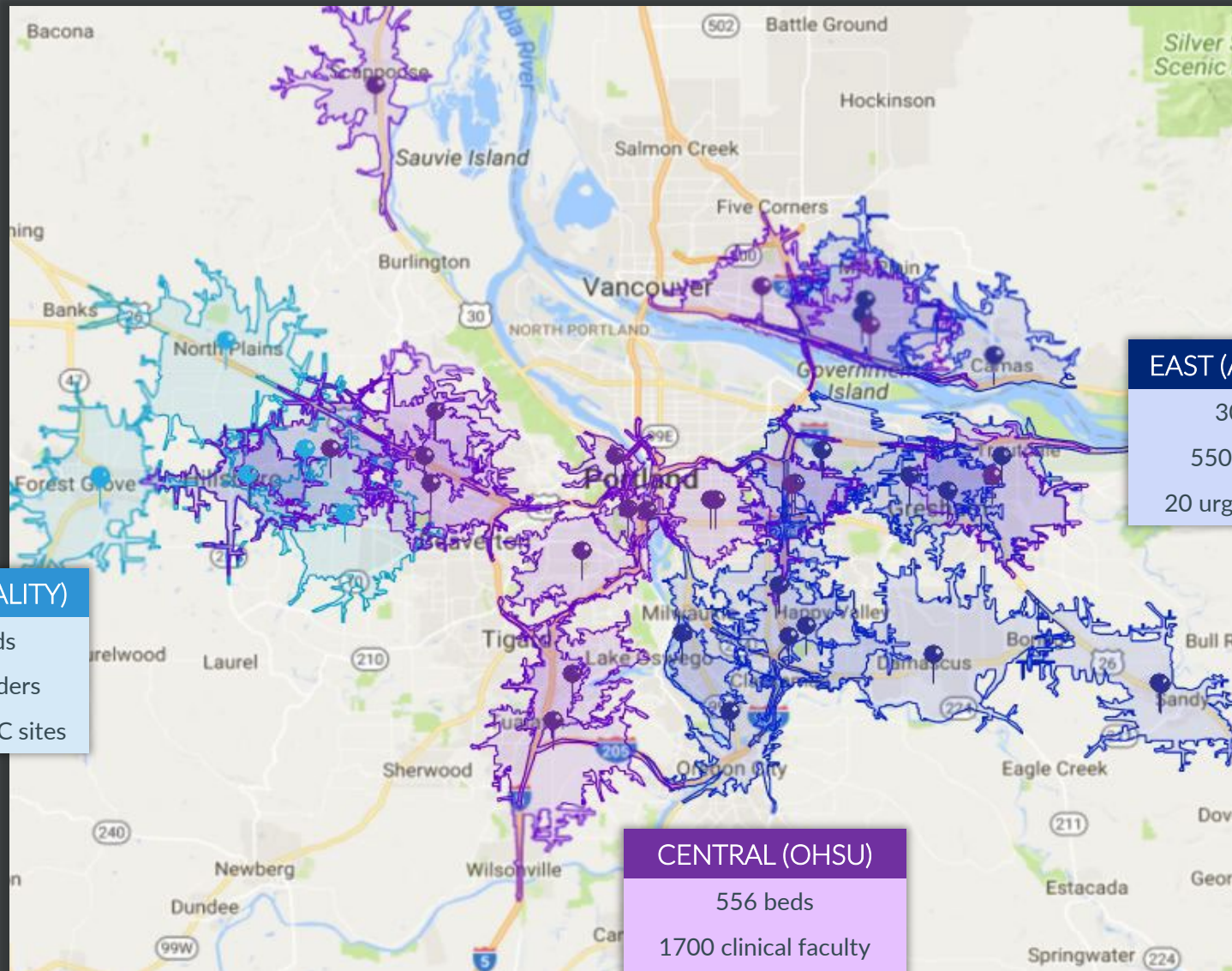


OHSU: Value Based Care

APPD Fall Meeting 2018

DATE: September 2018 PRESENTED BY: Anthony Masciotra, MBA CPA, CEO OHSU Practice Plan

OHSU system: Metro coverage



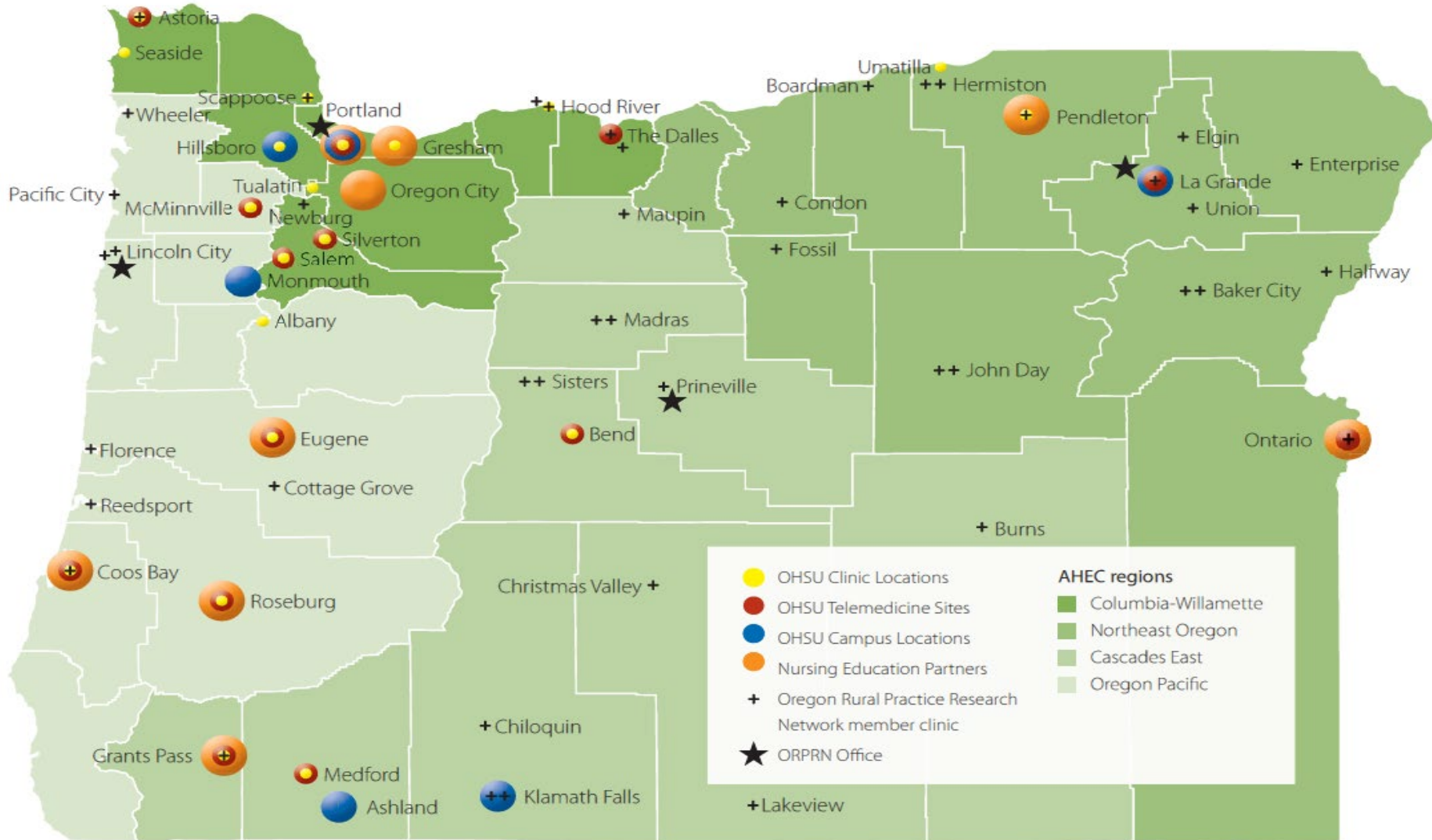
WEST (TUALITY)
215 beds
300 providers
15 urgent/PC sites

EAST (ADVENTIST)
302 beds
550 providers
20 urgent/PC sites

CENTRAL (OHSU)
556 beds
1700 clinical faculty
10 urgent/PC sites

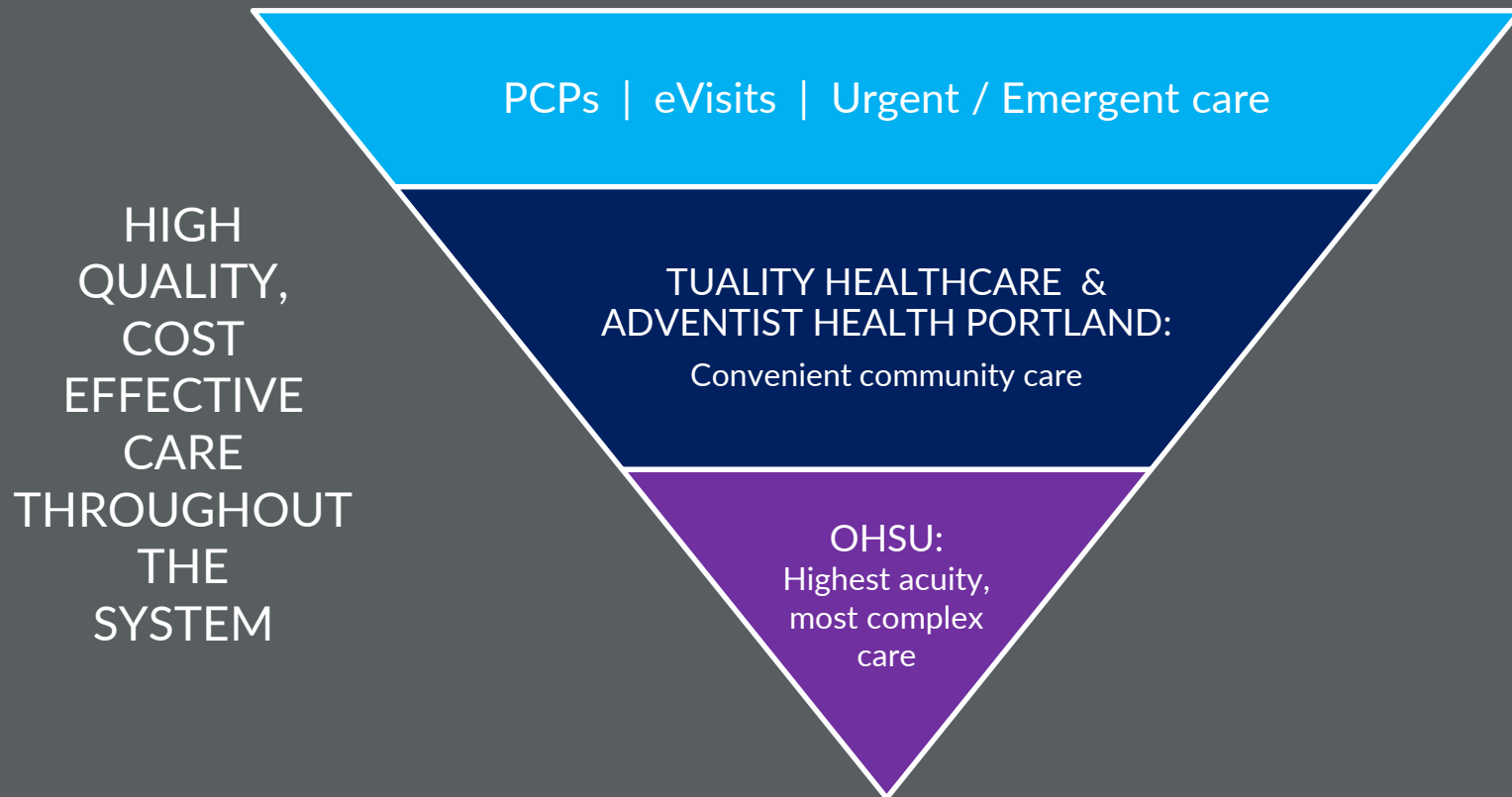


OHSU: Serving all of Oregon



High value network

CUSTOMER | MEMBER | PATIENT



Describe the state of value-based care and population health in your market?

- The Portland metro area is highly saturated with large health systems (Kaiser, Prov, Legacy) who are making advancements in VBC/pop health daily, allowing them to rapidly expand their footprint in this market
- Large number of CPC+ participants in our market (MSSP, MA, and others) transforming their care delivery models rapidly
- Expanding prevalence of virtual care options that get at the quadruple aim, as it relates to VBC and pop health: video visits, telemedicine, remote patient monitoring, eConsults, eVisits.
 - In addition to OHSU's offerings, we know that SMART MD is being used at Adventist (patient portal to enter info and then they are contacted).
 - CareOregon is paying Rubicon MD for a third-party eConsult platform.
 - Other health systems also offer asynchronous and video platforms and the urgent care market is also expanding, with each system aligning with different options.

How is your faculty practice preparing for value-based care and population health?

- OHSU partnered with two health systems (Tuality, Adventist) to expand access for our patients in the Portland metro area.
- We have developed strong MD leadership to head up a number of internal and external payer facing workgroups working to address, medical cost and quality, finance, growth, and the analytics necessary to support value based care and population health such as:
 - Office of Primary Care and Population Health
 - Evidence-Based Practice
 - Telehealth
 - Clinical Integration Medical Directors
 - Healthy Planet Steering Committee
- We have approximately 50,000 patients at risk between our self insured employees, two risk individual exchange arrangements that care for a diverse patient population of 16,000 patients and a small MA population
- We are also enhancing our infrastructure surrounding in preparation for participation in the BPCIA program this Fall - entering into 12 bundles
- We are integrating primary care within OHSU and across the metro area

Do you participate in or own a Clinically Integrated Network (CIN)?

How is it structured?

- Our Portland Metro based system – OHSU academic practice and two community based systems are legally structured such that we can achieve clinical integration – we share financial risk, are integrating care platforms across systems and the OHSU Practice Plan provides considerable services– hospitalists, emergency medicine support, critical care support and an integrated electronic bed management system “Mission Control”.
- We are working to become more unified across our Primary care practices and partner health systems in order to provide one experience of care to our patients.

How important are these initiatives to the overall strategic direction of the practice?

- The care delivery transformation necessary to support our ability to manage populations of patients and succeed in value based care are critically important and a part of our OPP priorities in FY 19
 - Office of Primary Care and Pop Health
 - Office of VBC
 - Office of Community Engagement
 - Partnerships with other PC practices in Portland Metro Area to expand our capacity/footprint geographically (Sellwood PC, CHA, etc)

Does your practice participate in an Accountable Care Organization(s)? Describe the model(s) and your practice's level of participation.

- OHSU along with 5 other Oregon systems formed the Oregon ACO and entered into a MSSP track 3 program in CY 2015. We exited the program effective December 31, 2017 for a number of reasons outside the control of OHSU.
- We have since refocused our efforts on expanding the number of lives under value based care arrangements via contracts with a number of payers. In addition to our two risk based contracting arrangements in 2018 OHSU continues to participate in the CPC+ initiative, The Oncology Care Model initiative, CJR, a number of Medicaid based pay for performance programs and will be participating in BPCI in 2019.



What is your practice's stance on MACRA and other Medicare initiatives in this area

- We fully support the balanced focus on cost and quality and believe that delivering a value proposition to our payers and employers is critical to our success.
- Our expansion of lives in risk based contracts and ever growing number of value based care programs we participate in demonstrates our commitment to and support of a shift from volume to value via legislation such as MACRA.
- We continue to struggle with high cost treatments, that as the only academic center in Oregon, drive the differential between us and other systems.

Can you identify specific successes or unique areas of focus within your practice that highlight engagement by your faculty/leadership in managing at risk populations

- CJR has been a success with \$120,000 in reconciliation savings payments over the first two years of the program (even the first year, most savings the second year).
- Data related to OCM is pending
- IMPACT program for substance abuse
- Social determinants of health task force
- Creation of the Office of Primary Care to better manage populations and chronic conditions
- Focus on cost/quality - use of Healthy Planet analytics to better manage care and incorporate claims data into our EHR

Has your institution established data sets, dashboards and/or metrics to achieve success in managing an at risk population(s)?

- Our institution invested in Epic's Healthy Planet framework which has the tools and analytic capabilities to help us ingest claims data, understand utilization in different patient populations, and create clinical quality dashboards within epic which are foundational to supporting our VBC/pop health efforts.
- We have selected metrics in each of the below categories to track our progress
 - financial
 - quality
 - experience (provider/patient)

What other strategic factors are guiding your decisions and investments in value-based care and population health?

- Our mission is to improve the health of all Oregonians. We are focused on how to deliver value based care while expanding our research and teaching missions. Being the only Academic center in our region, our mission not only differentiates us in this regard, it also presents additional cost challenges that we need to address.
- We believe that providing value to our patients, payers and employers is critical to the success of our system
- Large integrated systems such as Kaiser, Providence and Legacy compete with us clinically and do not have the additional burden of our mission. Integrating our care across populations with a focus on value and evidenced based practice will be critical to our success.

Please comment on any other items that are guiding your deliberations and actions in this area.

- Reliance on FFS revenues to fund expansion and growth and the related impact of at risk contracts on revenue stream
- Readiness of faculty for change – increased impact on resilience and wellness
- Funding for infrastructure to support initiatives and timing thereof



Thank You

Appendix

OHSU system: Right care, right place

VISION

To manage our resources to accept all appropriate transfer patients to OHSU and partner hospitals while ensuring the delivery of high quality care to our patients.



MISSION

Be a national leader in capacity management to provide the right care to the right patient at the right time and place with the right team and maintaining good stewardship of our resources.

