State Employees Benefits Committee
June 10, 2016
Secretary Rita Landgraf, Department of Health and Social Services
## Today’s discussion

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Case for Change

Employers are facing increasing costs, an unhealthy workforce, and complex decisions.

Providers lack time and resources to proactively coordinate care.

Health care is confusing for Patients, and premiums are rising.
The Facts: Delaware’s Unhealthy Behaviors

<table>
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<th>Unhealthy Behaviors</th>
<th>Delaware</th>
<th>U.S.</th>
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<tr>
<td>Zero Unhealthy Behaviors</td>
<td>24.7%</td>
<td>28.1%</td>
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<tr>
<td>3 or More Unhealthy Behaviors</td>
<td>13.6%</td>
<td>12%</td>
</tr>
<tr>
<td>&lt;High School</td>
<td>26.4%</td>
<td>21.5%</td>
</tr>
<tr>
<td>&lt;$25K</td>
<td>19.1%</td>
<td>19.6%</td>
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5 Unhealthy Behaviors
- Smoking
- Physical Inactivity
- Excessive drinking
- Obesity
- Insufficient sleep

Source: United Health Foundation’s America’s Health Rankings/Spotlight: Impact of Unhealthy Behaviors (2014 Data)
Our Aspirations and Goals

<table>
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<th>Aspirations for Triple Aim</th>
<th>Goals to Achieve Through Plan</th>
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<td>▪ Become 1 of the 5 healthiest states in the U.S.</td>
<td>▪ Payer participation: across commercial &amp; government</td>
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<td>▪ Achieve top 10% performance for quality/patient experience</td>
<td>▪ Better value: through better care at lower cost, up to $1 billion in value over next several years</td>
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<td>▪ Bring health care spending growth more closely in line with growth of economy</td>
<td>▪ Sustainability: reinvest half of gains in providers</td>
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<tr>
<td>▪ PLUS ONE: Achieve higher provider experience</td>
<td>▪ Affordability: half of savings captured by consumers, employers, plan sponsors</td>
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Our Vision

- All Delawareans will have a primary care provider, and it will be simple for them to access care when they need it.
- Providers will be rewarded for innovative and efficient approaches to delivering quality care.
- When people need to go to the ER, they will not need to repeat their medical history and prescription information.
- Providers will have the time and resources to reach out to an elderly father after a hospital discharge to make sure he receives a follow-up appointment with his PCP.
- When a mother needs help caring for her child with asthma, she will know where to turn.
- Providers will work more closely together so that patients will feel as though the individuals caring for them, including behavioral health providers, are part of a team.
- Employers will be able to continue providing health insurance to their employees.
Delaware Center for Health Innovation: Public-private Governance Model

DCHI is an independent not-for-profit organization, with a voluntary Board and working committees comprising more than 70 stakeholders across 51 different organizations.

1 Division of Substance Abuse and Mental Health; 2 Division of Services for Aging and Adults with Physical Disabilities; 3 Division of Developmental Disabilities Services
We continue to bring stakeholders together through multiple forums in an open and transparent process. A broad stakeholder group remains involved, including:

- Governor Markell and every health care agency in Delaware
- Every large payer, including commercial payers, State Employee Health Plan, and Division of Medicaid
- Consumer advocacy groups
- Business community
- Extensive provider participation, including every health system, physician organizations, Every FQHC, behavioral health and LTC organizations, population health coalitions
- Numerous public officials and agencies
- Largest educational institutions
Delaware’s Strategy

Transformation of primary care through PCMHs and ACOs

Support for primary care practice transformation and care coordination

First in the country multi-payer Common Scorecard for primary care

Multi-payer adoption of value-based payment on statewide basis

Innovative two-year learning and development program with common curriculum on team-based, integrated care

Scorecard, tools, data, and resources to support neighborhoods

Integration of community-based health initiatives with delivery system focused on priority health needs

Patient at center of everything Delaware does

Care coordination funding in addition to outcomes-based payments

Medicaid MCO, state employees, and QHP standards to drive adoption
Progress to date

2011-2014

Initial pilots and planning

- Adopted new models through individual physicians, societies, hospitals (e.g., PCMH, ACOs)
- Shaped Delaware State Health Innovation Plan through 50+ workgroups and public meetings
- Formed Delaware Center for Health Innovation as public-private partnership

2015

Design for scale

Designed core program elements and launched:

- 21 provider sites live with Common Scorecard
- 75% quality measures in payers’ outcome based models reflected in Common Scorecard
- 4 practice transformation vendors selected to support providers
- Leveraged Medicaid MCO RFP
Where we are today

2016 and beyond

Adoption at scale

- Launch 3 Healthy Neighborhoods
- Release Common Scorecard statewide
- Enroll 50% of practices in practice transformation
- Evaluate and monitor launch of outcomes-based payment programs
- Scale care coordination
- Engage consumers through outreach campaign
- Begin implementation of workforce strategy
Changing landscape

- **Transparency**
  - All Payers Claims Database

- **Provider Risk Sharing**
  - Increase in ACOs
  - Availability of alternative payment models

- **Healthy Neighborhoods**
  - Moving from plan-based to population-based health
  - Increased engagement by all sectors
Examples of APCD use cases in other states

1. **Population Health**
   Determine prevalence of illness and injury within the broader state population and in specific communities

![Diabetes: HbA1c Not in Control (Core-17, MSSP-27)](chart)

2. **Value-based purchasing**
   Provide visibility to cost drivers and patterns of utilization across different populations

![Median Event Price: Commercially Insured Knee Replacement](chart)

3. **Provider risk sharing**
   Provide a view of utilization across the care continuum to help practices identify key drivers for improvement

4. **Consumer shopping**
   Provide consumers with information about the cost or quality of services

![Consumer shopping](chart)
Access to claims data: potential data flow and operations

Data suppliers:
- Medicare
- Medicaid MCO A
- Medicaid MCO B
- State Employees Health Plan
- Commercial Payer XYZ

Data users:
- Provider risk sharing
- Value-based purchasing
- Population health improvement
- Consumer shopping

Governing body

APCD

HIE

Analytic engine

Claims data

Comparative analysis
What Is a Healthy Neighborhood?

▪ Local communities coming together to harness the collective resources of all the organizations in their community to enable healthy behavior, improve prevention and enable better access to primary care for their residents

▪ Design and implement locally tailored solutions to some of the state’s most pressing health needs in:
  – Healthy Lifestyles
  – Maternal & Child Health
  – Mental Health & Addiction
  – Chronic Disease & Prevention

▪ Supported by DCHI through framework for collaboration and access to resources and expertise
Healthy Neighborhoods Will Launch 3 Local Councils In 2016

- We have identified our priority neighborhoods for 2016 and are beginning to recruit local Councils in:
  - West/Central Sussex
  - Wilmington/Claymont
  - Smyrna/Dover

![Map of Healthy Neighborhoods]

**Proposed 2016 rollout**

**Planned 2017-2018 rollout**
Role of SEBC

- Leverage RFP process
- Encourage health consumerism
- Continue engagement in DCHI
We Are In the Process of Engaging the Public

Objectives

- Introduce DCHI mission and objectives to all Delawareans
- Educate and inform general public about health care transformation initiatives
- Raise awareness of program’s positive impact on population and individual health
- Engage stakeholders to adopt changes that drive positive transformations

Methods

Mass media channels

Employers

Partners

General community forums

- Mass media channels
- Employers
- Partners
- General community forums
We welcome your feedback and input