



Health Care Transformation and Innovation

State Employees Benefits Committee

June 10, 2016

Secretary Rita Landgraf, Department of Health and Social Services

Today's discussion

The case for change

Our strategy and goals

Current progress

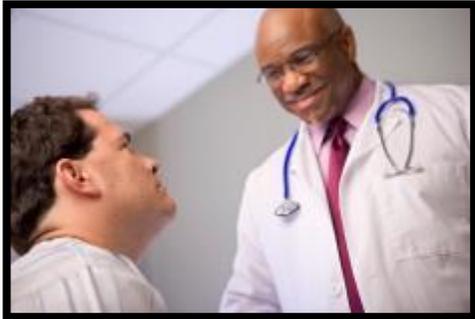
Role of SEBC

Q & A

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

Zero Unhealthy Behaviors

Delaware	U.S.
24.7%	28.1%

3 or More Unhealthy Behaviors

Delaware	U.S.
13.6%	12%

<High School	<High School
26.4%	21.5%

<\$25K	<\$25K
19.1%	19.6%



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

Aspirations for Triple Aim

- Become 1 of the 5 healthiest states in the U.S.
- Achieve top 10% performance for quality/patient experience
- Bring health care spending growth more closely in line with growth of economy
- PLUS ONE: Achieve higher provider experience

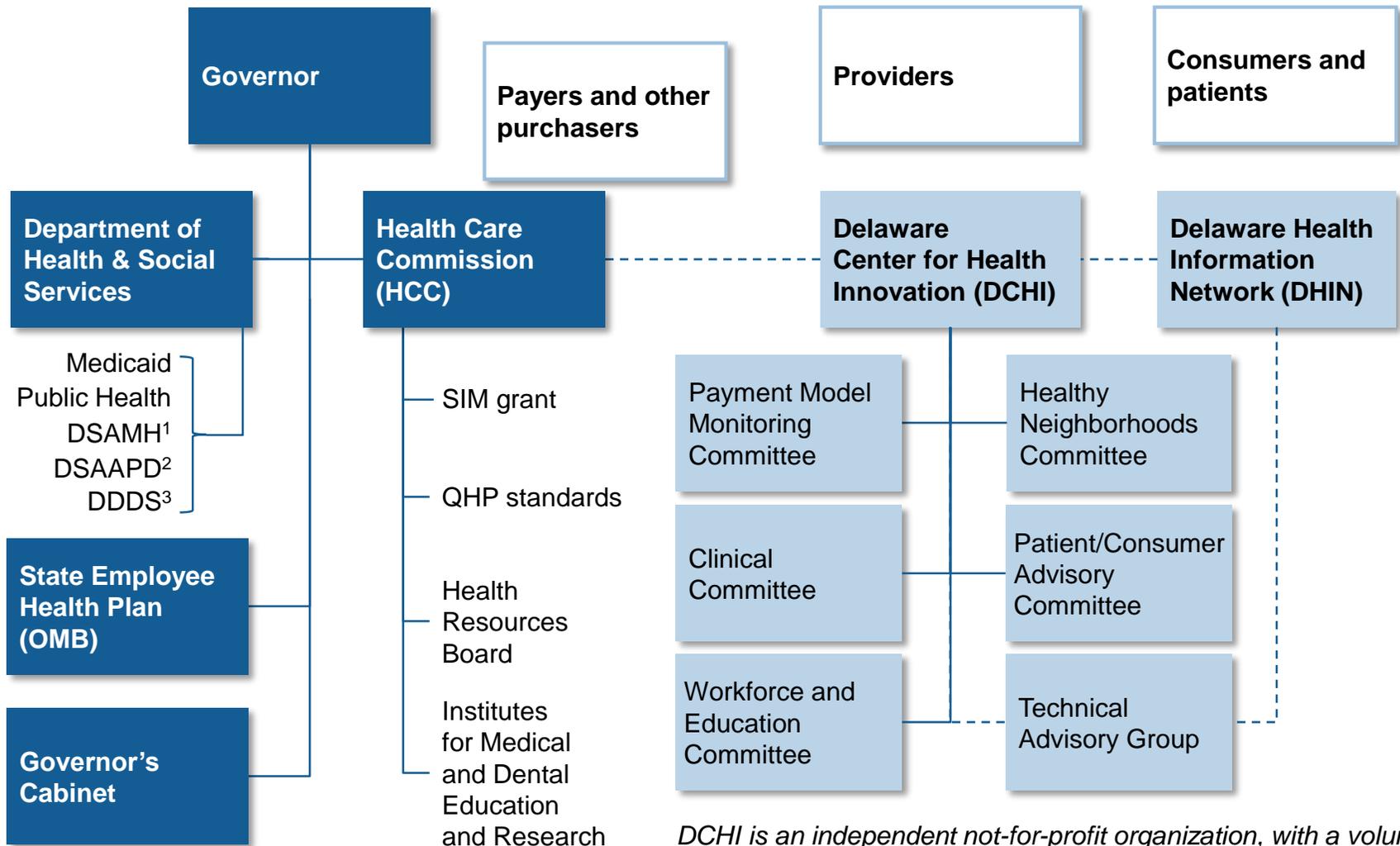
Goals to Achieve Through Plan

- **Payer participation:** across commercial & government
- **Better value:** through better care at lower cost, up to \$1 billion in value over next several years
- **Sustainability:** reinvest half of gains in providers
- **Affordability:** half of savings captured by consumers, employers, plan sponsors

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

A Broad Stakeholder Group Remains Involved

We continue to bring stake-holders together through multiple forums in an open and transparent process

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

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

Support for primary care **practice transformation and care coordination**

Scorecard, tools, data, and resources to support neighborhoods

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

Patient at center of everything Delaware does

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

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

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

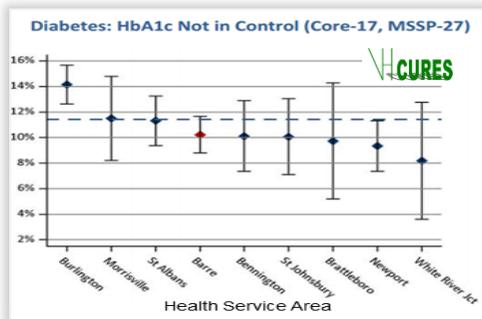
Healthy Neighborhoods

- Moving from plan-based to population-based health
- Increased engagement by all sectors

Examples of APCD use cases in other states

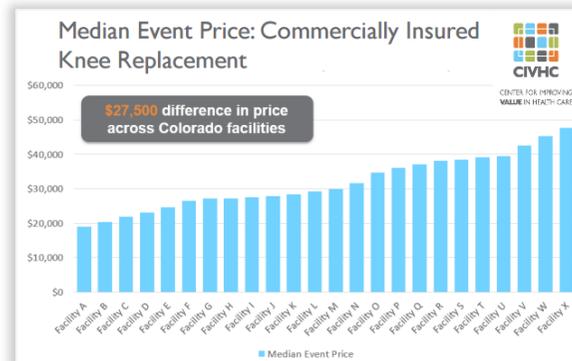
1 Population Health

Determine prevalence of illness and injury within the broader state population and in specific communities



2 Value-based purchasing

Provide visibility to cost drivers and patterns of utilization across different populations



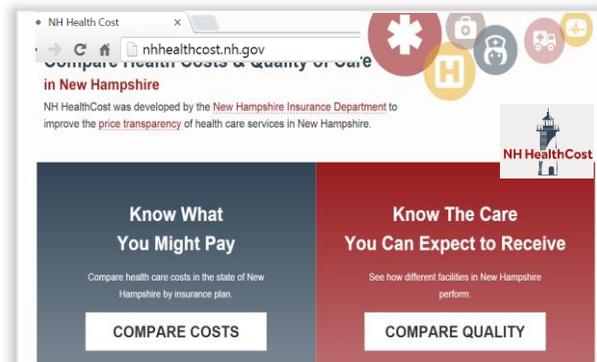
3 Provider risk sharing

Provide a view of utilization across the care continuum to help practices identify key drivers for improvement



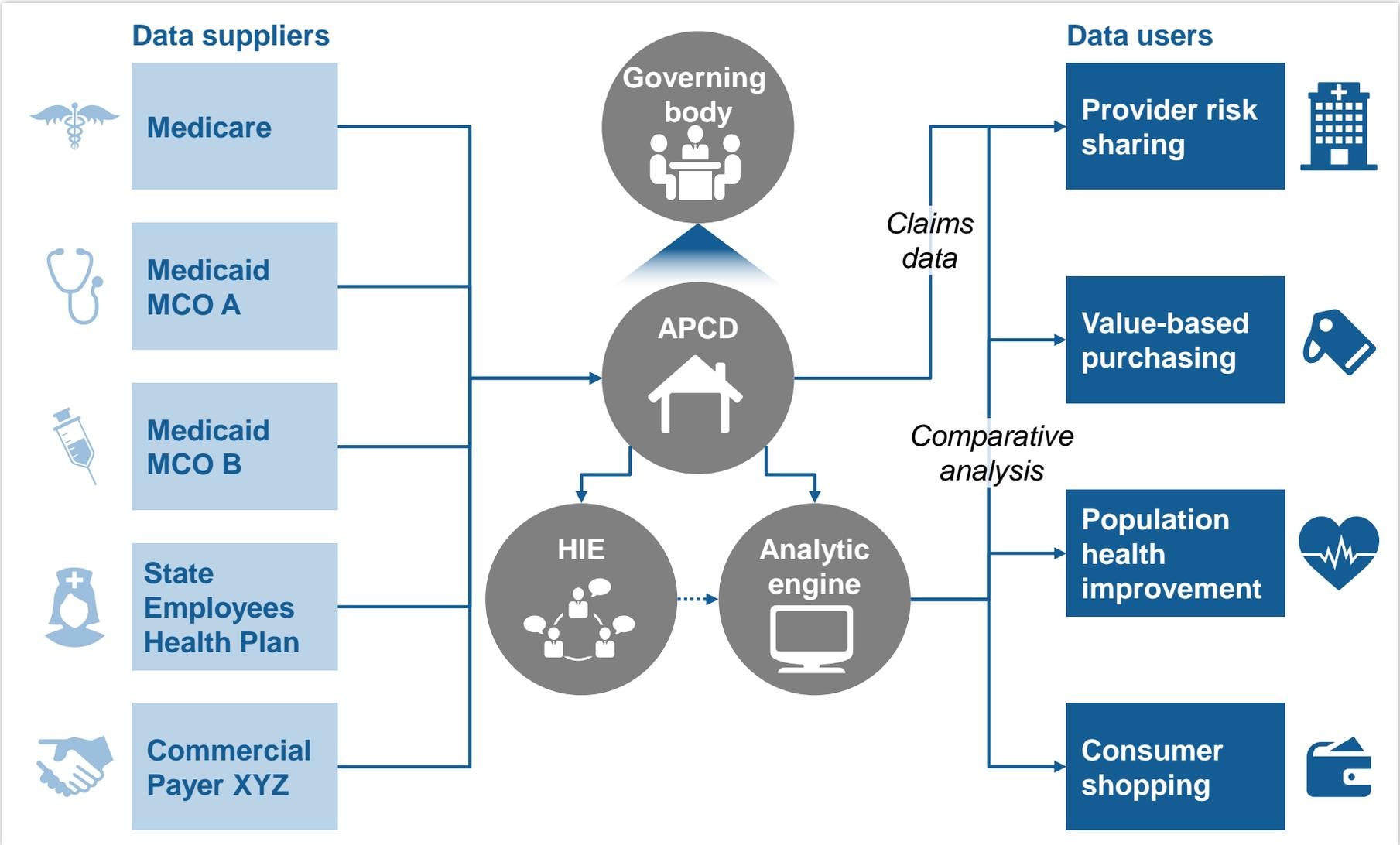
4 Consumer shopping

Provide consumers with information about the cost or quality of services



Access to claims data: potential data flow and operations

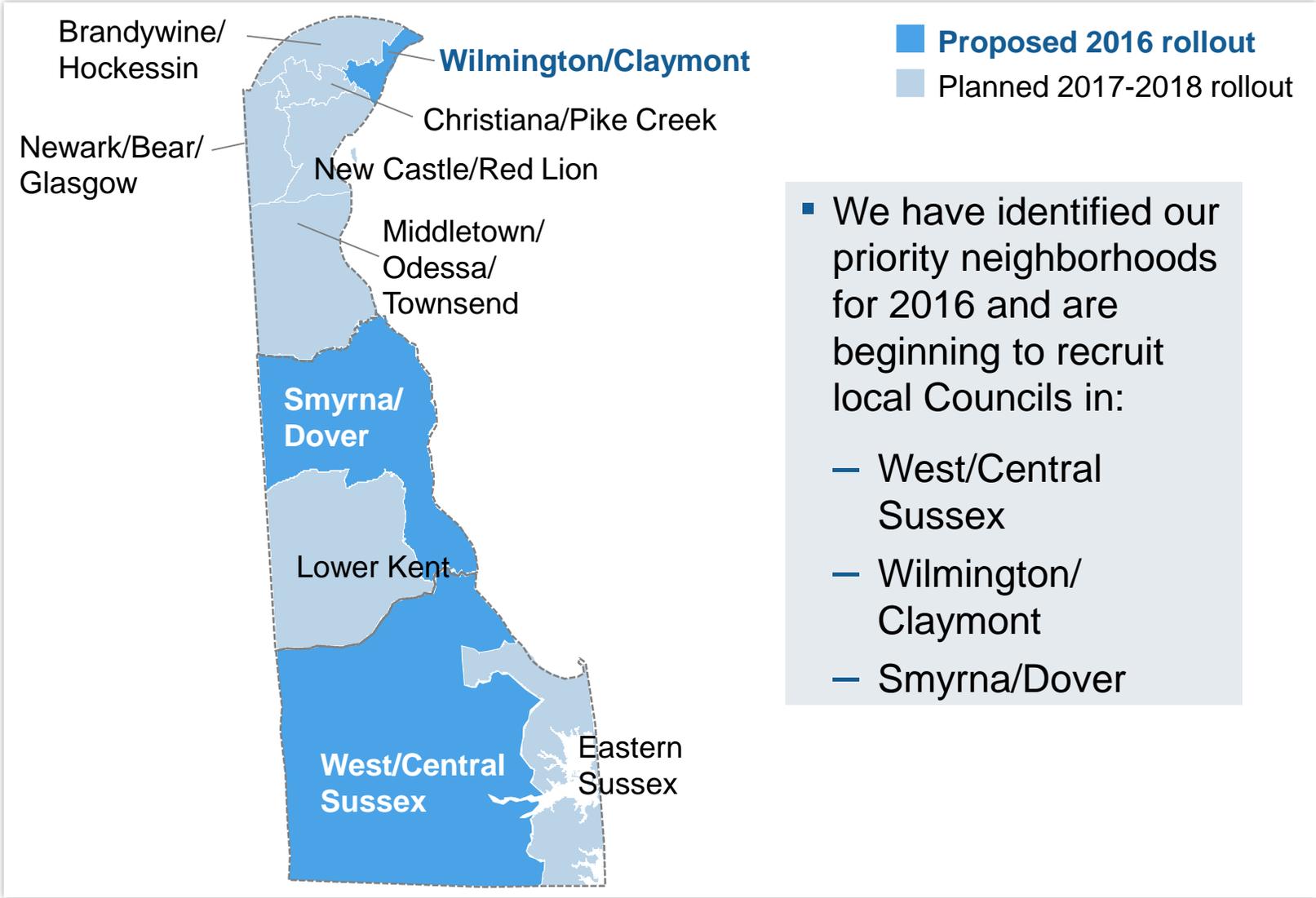
ILLUSTRATIVE



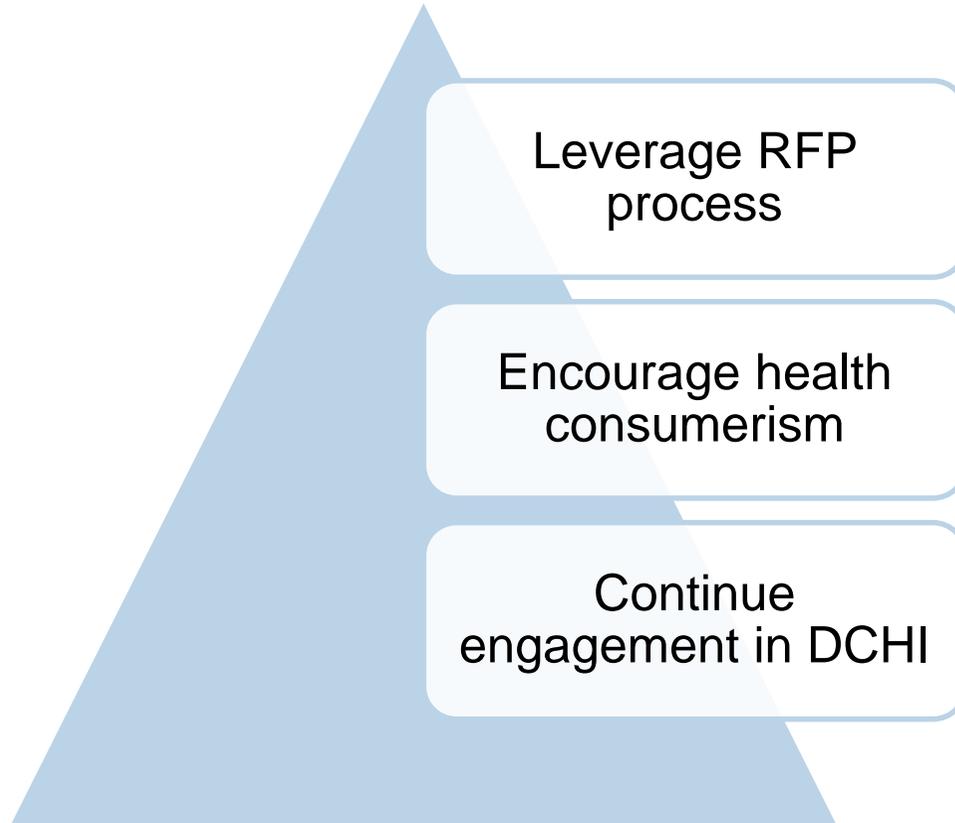
What Is a Healthy Neighborhood?

- **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



Role of SEBC



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



Questions

**We welcome your
feedback and input**

