



# PEIA Comprehensive Care Partnership

**PEIA-Cabin Creek Health Systems  
Pilot Project**

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## A visionary dreamer.....

“Somehow I can’t believe that there are any heights that can’t be scaled by a person who knows the secrets of making dreams come true.”

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# Who wished upon a star....

“This special secret, it seems to me,  
can be summarized in the 4 C’s: “

- Curiosity
- Confidence
- Courage
- Consistency

Walt Disney

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# Comprehensive Care Partnership

## □ Project Aim:

Patient-centered Medical Home Model in which we deliver accessible, evidenced-based primary care, cost efficiently.

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# SO TELL US SOMETHING WE HAVEN'T HEARD

Besides, CHC's are *already* doing that!

(Feel free to yawn, fidget or roll your eyes here).

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# Comprehensive Care Partnership's Distinctions:

- A *joint* effort between Payer-Provider to deliver patient-centered, accessible, evidenced-based primary care, cost-efficiently.
  - Transparency between payer-provider regarding all measures: performance, outcomes, utilization and costs.
  - At Risk, Pay for Performance
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# PROGRAM PRINCIPLES

- Capitated Rates for primary care services – risk adjusted.
  - Per Member/Per Month Payments.
  - 10% Withhold for Process Performance Measures.
  - Non-capitated services are in risk pools, with *savings* shared: 50-50.
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# THE RISK POOLS

- Hospital
  - Emergency Room
  - Specialist
  - Pharmacy
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# PEIA PM/PM NON-CAPITATED COSTS – ALL MEMBERS

IN-PT HOSPITAL	\$38.79
OUT-PT HOSPITAL	\$39.40
EMERGENCY ROOM	\$9.09
PHARMACY	\$61.85
SPECIALIST	\$45.92

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# PEIA PM/PM PRIMARY CARE COSTS – ALL MEMBERS

□ \$22.68

(Is this a “we’re getting what we pay for”  
lesson?)

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# Why the Withhold and Risk Pools?

They didn't buy our "give *us* some of that money you're spending on specialists, hospital care, and emergency rooms and *we'll* do a better job, more cost effectively"

..... not without some proof first.

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# Process and Outcome Measures: Patients with Diabetes

% Pts with A1c in last 12 months	Goal: 87.5%
% Pts with most recent A1c >9	Goal: <30%
% Pts with eye exam in last 12 months	Goal: 55%
% Pts with LDL in last 12 months; Value <100	Goal: 45%
% Pts with Blood Pressure <140/80	Goal: 70%



# Process and Outcome Measures: All Patients

% Pts $\geq$ 50 with Flu Vax in last 12 mos	Goal: 90%
% Pts $\geq$ 65 with Pneumo Vax once	Goal: 90%
% Pts 50-80 with Colorectal CA Screen	Goal: 50%
% Pts with documented BMI in last 12 months	Goal: 70%



# Process and Outcome Measures: Women

% Women 40-69 with Mammogram in last 24 months	Goal: 85%
% Women 21-64 with PAP Test in last 24 months	Goal: 50%

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# Other Performance Measure

- Patients 5-56 with Persistent Asthma who have a Prescription for long-term control of their Asthma – Goal: 80%
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# What's The Job Entail?

- ❑ Commitment to Medical Home Model
  - ❑ Systems to identify/track status of patients' preventive and chronic care health interventions
  - ❑ First assessment visit within 90 days of enrollment.
  - ❑ EMR/Registry to track performance/outcome measures for the population
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Patient Identifier	Demographics	Phone Numbers/County
SSN: 444-55-6666	Age: 51 Y Female <a href="#">More Info...</a> DOB: 01 Nov 1957 Status: MARRIED Race:	Home: 333-444-5555 Work: 402-877-8213 County:

**Prevention** Version 3.0

**Prevention**

Prevention	Measure	Value	Date	Standard Goal	Patient Goal
Screening Exams	<a href="#">Weight (lbs)</a>	152 lbs	21 Jan 2009	As needed	
Screening Exams	<a href="#">Height (in)</a>	66 in	21 Jan 2009	As needed	
✓ Screening Exams	<a href="#">BP</a>	120/78	21 Jan 2009	< 140/90; Every 2 years	
✓ Screening Exams	<a href="#">Cholesterol</a>	290 mg/dL	20 Jan 2009	Every 5 years	
Screening Exams	<a href="#">LDL</a>	150 mg/dL	20 Jan 2009	As needed	
Screening Exams	<a href="#">A1c</a>	8 %	20 Jan 2009	As needed	
✓ Screening Exams	<a href="#">Depression Screen</a>	12/27	10 Nov 2008	As needed	Every 2 years
Screening Exams	Hearing Exam			As needed	
Screening Exams	Skin Exam			As needed	
Screening Exams	Oral/Dental Exam			As needed	
Screening Exams	Eye/Vision Exam			As needed	
✓ Screening Exams	<a href="#">Breast Exam</a>	Breast Exam	23 Oct 2008	Every 1 years	
✗ Screening Exams	<a href="#">Mammogram</a>	normal	Feb 2007	Every 1 years	
✗ Screening Exams	<a href="#">Pap Smear</a>	normal	Feb 2007	Every 1 years	
✓ Screening Exams	Fecal Occult			Every 1 years	
✓ Screening Exams	Sigmoidoscopy			Every 5 years	
✓ Screening Exams	<a href="#">Colonoscopy</a>	Colonoscopy	15 Dec 2007	Every 10 years	
Screening Exams	Rubella Screen			As needed	
✓ Screening Exams	<a href="#">Tetanus/Diphtheria</a>	Tetanus/Diphtheria (Td)	Oct 1999	Every 10 years	
Screening Exams	<a href="#">Pneumovax</a>	Pneumovax	19 Sep 2007	As needed	
✗ Screening Exams	<a href="#">Influenza Vaccine</a>	Influenza Vaccine	Jan 2008	Every 1 years	
Screening Exams	<a href="#">Immunizations</a>	Smallpox shot	14 Jan 2008	As needed	
Screening Exams	<a href="#">Screening Exams Comment</a>	GAPS-2,4,5,6	21 Nov 2008		



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# Why the audacity of hope for this model?

- CHC's have been in training for the job for sometime now....
  - ✓ Chronic Care Model
  - ✓ Population-based Health
  - ✓ Data Collection: Registries/EMR's
  - ✓ Access and Patient-centered Care
  - ✓ Integration of Behavioral Health Services
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## Not to mention.....

- CHC's ought to be paid for the work we already are doing.
  - CHC's have to potential to impact large numbers of patients in WV.
  - CHC's have the ability to impact *total* costs on care if we are given the financial resources/rewards.
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# Bold, Audacious Goals!

“Whatever you can do or *dream you can*, begin it! Boldness has genius, power and magic in it. Begin it now.....”

Johann van Goethe

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