

WAIVER INTEGRATION TEAM #6

Participant Workbook

May 24, 2017

APM Gap Analysis: Where are we and where do we need to go?

Session A: With your WIT

As a WIT, discuss the following questions:

1) Meeting the APM Requirement

- a. Do we think we already meet the requirement? Why or why not?
 - i. If yes, how can we demonstrate the required quality accountability component?
 - ii. If yes, how is the APM performing so far? Are there operational issues that have limited success or caused strain on your system?
 - iii. If no, what can we be doing to prepare? Is planning already underway? What are the operational issues to consider for the APM to be effectively implemented?
- b. Do we need more information? From whom? Other next steps?

2) Health Plan Alignment

- a. In what ways are APMs an opportunity to strengthen the relationship with our Medi-Cal managed care plan(s)?
- b. What are the pros and cons from the plan perspective when entering into APM arrangements with providers?
- c. What shared priorities and challenges with the health plans do we have that might be impacted by an APM arrangement?
- d. What do we need from our plan to be successful under an APM?
 - i. What barriers might we face?
 - ii. Can we identify any strategies to overcome those barriers?
- e. Given your experience with APMs to date, do you anticipate expanding the size/risk of your APM structure with your plans over time? If so, what is your time frame and what needs to occur to get there?

3) The Movement to Value Based Payments (VBP)

- a. Considering that the national movement toward VBP assumes a continuum with increasing risk and performance accountability over time:
 - i. How are we preparing for this trajectory?
 - ii. How will it impact our system?
- b. What key strengths and weaknesses does our system have that could impact our success under VBP?
 - i. How can we improve in the areas where we are challenged?
 - ii. How can we leverage and build upon our strengths?

Session B: With your Affinity Group

Sit with peers who do similar work (e.g., ambulatory care leaders, performance/quality improvement leaders, data leaders, finance leaders, whole person care leaders, managed care strategy leaders). As an affinity group, discuss the following questions:

- 1) How does moving towards more risk and value-based payments as a system affect my role and responsibilities?
- 2) What are the challenges and opportunities?

APM Take-Aways

Write down any questions and/or next steps related to what you learned about APMs this morning. Did you learn anything new that others in your organization need to know? If so, who needs to know and how will you communicate with them?

When you finish writing your take-aways, share them with a partner at your table.

Coordinating Whole Person Care and PRIME

Session A: With your WIT

As a WIT, discuss the following questions:

- 1) How are you identifying shared patients in Whole Person Care, PRIME Project 2.2, and Project 2.3?
- 2) What is your approach to risk stratification?
 - a. As patients enter your system (any door), how do you triage them to Whole Person Care or 2.3? If your Whole Person Care pilot has tiers/bundles for different levels of acuity, how do you triage people to those tiers?
 - i. Who is responsible? How are the appropriate people notified?
 - b. As patients are discharged from the hospital, how do you triage them to the appropriate level of follow-up care vis-à-vis WPC and/or PRIME?
 - i. Who is responsible? How are the appropriate people notified?
- 3) Do patients move between Whole Person Care and 2.3 based on their level of acuity? In other words, if a WPC patient improves over time, do they “step down” to participate in 2.3? If so, what is the process?
- 4) How are you leveraging existing complex care programs for purposes of WPC and PRIME?
- 5) Is there overlap in staff roles and responsibilities for WPC and 2.3?
- 6) How will you know that you’ve successfully coordinated WPC, 2.2 and 2.3? What are the indicators of success and how will you track them?

Session B: With your Peers

WPC leads present an overview of their Whole Person Care programs and answer questions. Then, using the above questions as a guide, participants have a table discussion about how different systems are coordinating WPC and PRIME (WPC leads facilitate).

WPC Take-Away

Take a few minutes to write down 2-3 take-aways from this table discussion. Include at least one take-away related to your own work and one related to the goals of your system (e.g., coordination that’s needed, but you are not directly responsible for seeing it through). If there are follow-up steps, how will the work get done and who needs to be involved?

When you are finished writing your take-aways, share them with a partner at your table.

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