




## Practice Transformation: Preparing for a Value-Based Purchasing Environment

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### Session Objectives:

- Understand the timeline and impact of MACRA/MIPS on health care payment methodology
- Learn the goals and implementation plans for CMS' Transforming Clinical Practice Initiative and Practice Transformation Networks
- Identify steps that your practice can take now to better prepare for this new environment

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### Francis Bacon (1561 - 1626)



*"He that will not apply new remedies must expect new evils; for time is the greatest innovator."*


Essays Of Innovations  
(1625)

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## Background and Context:

The Shift from Volume to Value


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### HHS Sets the Stage for Change

U.S. Department of HHS Secretary Sylvia M. Burwell  
Three Strategies to Drive Progress:


- Incentives to reward high-quality health care
- Improving the way care is delivered
- Accelerate availability of information to guide decision making



**Setting Value-Based Payment Goals — HHS Efforts to Improve U.S. Health Care**  
Sylvia M. Burwell

New targets have been set for value-based payment: 85% of Medicare fee-for-service payments should be tied to quality or value by 2016, and 30% of Medicare payments should be tied to quality or value through alternative payment models by 2016 (50% by 2018).

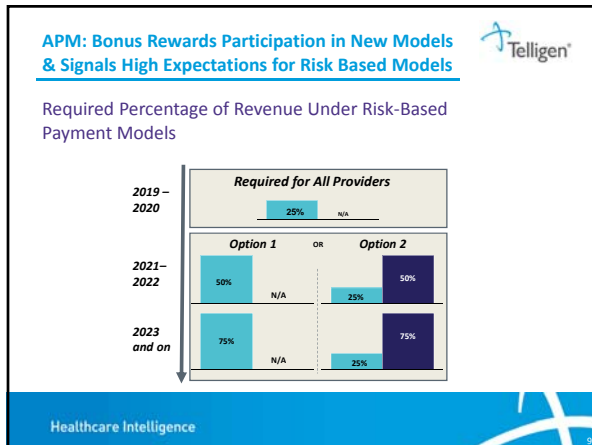
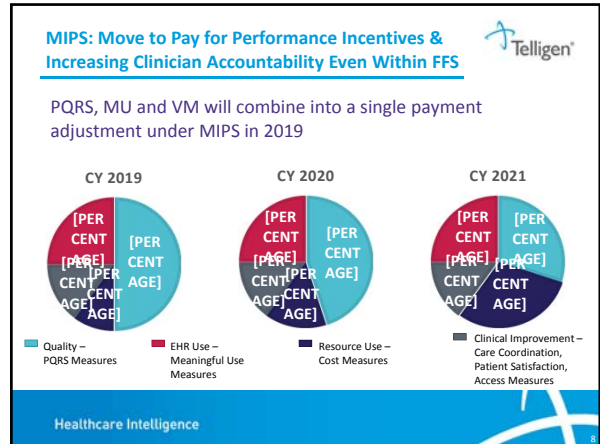
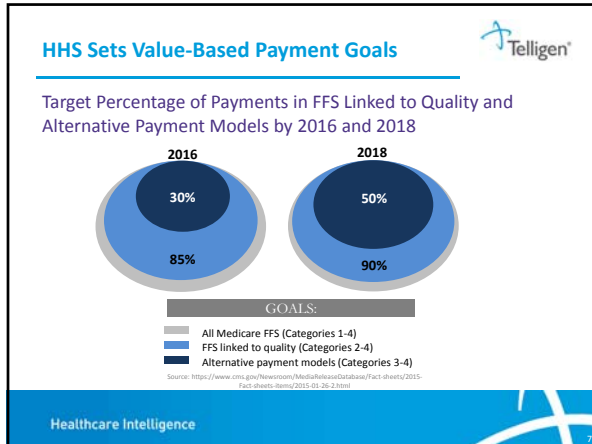
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### MACRA, SGR and MIPS

- Medicare Access & CHIP Reauthorization Act of 2015
  - Signed in to law April 2015
  - Permanently repeals the 1997 Sustainable Growth Rate Physician Fee Schedule Update
  - Changes Medicare PFS Payments
- MACRA: Must Choose Between Two Value-Based Payment Tracks
  - Merit-Based Incentive Payment System
  - Alternative Payment Models

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### William Edwards Deming (1900 – 1993)

*“It is not necessary to change. Survival is not mandatory.”*

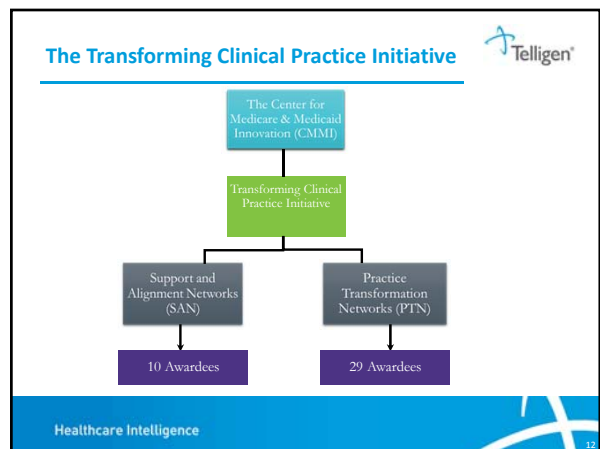
**William Edwards Deming**  
(1900 – 1993)

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## Transforming Clinical Practice Initiative:

For Practices In Iowa: The Compass Practice Transformation Network

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### So, where does TCPI fit in to this?

*TCPI is the major national initiative designed to "provide hands-on support to 140,000 physicians and other clinicians for developing the skills and tools needed to improve care delivery and transition to alternative payment models."*

—HHS Secretary Sylvia M. Burwell

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### Context for Transforming Clinical Practices

- With the passage of the Affordable Care Act in 2010 came renewed efforts to improve our health care system
- Efforts guided by focus on **better health, better health care and lower costs** through quality improvement
- Clinicians want to improve care for their patients, and to position their practices to thrive in a pay-for-value system
- Increasing accountabilities from care delivery reform programs (e.g. Medicare Shared Savings Program)
- 16 percent (185,000) of clinicians are currently participating in CMS advanced care delivery models or model tests
- With Innovation Center support, successful clinical practice leaders can support their peers with direct technical assistance to help them transform their practices

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### Clinical Practice Leaders Have Already Charted the Pathway to Clinical

Traditional Approach	Transformed Practice
Patient's chief complaints or reasons for visit determines care.	We systematically assess all our patients' health needs to plan care.
Care is determined by today's problem and time available today.	Care is determined by a proactive plan to meet patient needs.
Care varies by scheduled time and memory/skill of the doctor.	Care is standardized according to evidence-based guidelines.
Patients are responsible for coordinating their own care.	A prepared team of professionals coordinates a patient's care.
Clinicians know they deliver high quality care because they are well trained.	Clinicians know they deliver high quality care because they measure it and make rapid changes to improve.
It is up to the patient to tell us what happened to them.	You can track tests, consults, and follow-up after the ED and hospital.

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### TCPI: 5 Phases of Transformation

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### TCPI is a Sustainable Practice Redesign

- A collaborative, peer based learning initiative with focused, onsite improvement
- An opportunity to engage clinicians, patients, families and communities in stronger local partnerships to improve care
- Bi-directional learning and strengthening of healthcare policy

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### TCPI Goals

- Support more than 150,000 clinicians in their practice transformation work
- Improve health outcomes for millions of Medicare, Medicaid and CHIP beneficiaries and other patients
- Reduce unnecessary hospitalizations for 5 million patients
- Generate \$1 to \$4 billion in savings to the federal government and commercial payers
- Sustain efficient care delivery by reducing unnecessary testing and procedures
- Build the evidence base on practice transformation so that effective solutions can be scaled

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### Example: Compass Practice Transformation Network (Compass PTN) and State Leads

Dedicated Clinical and Operational Leads, Quality Improvement Advisors in each state to support participating clinicians and practices

**Primary Convener and Awardee:**  
Iowa Healthcare Collaborative

<b>Georgia</b> Georgia Hospital Association Research and Education Foundation	<b>Iowa</b> Iowa Healthcare Collaborative
<b>Kansas</b> Kansas Healthcare Collaborative	<b>Nebraska</b> RPN, LLC – A Regional Provider Network
<b>Oklahoma</b> Oklahoma University Physicians and Telligen	<b>South Dakota</b> HealthPOINT at Dakota State University

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### 7 Key Benefits to Participating Clinicians

1. Optimizes health outcomes for your patients
2. Promotes coordination of care for your patients
3. Learn from high performers how to effectively engage patients and families in care planning
4. More time spent caring for your patients
5. Alignment with new and emerging federal policies
6. Opportunities to be part of the national leadership in practice transformation efforts
7. No cost or risk to participate in TCPI or PTN

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### Example: Compass PTN Participant Expectations

- Join the PTN by signing a charter indicating that you will focus on the Initiative's aims
- Progress through the five identified phases of practice transformation over four years using technical assistance and peer-led support
- Identify a PTN point of contact in your clinic to receive and disseminate information to clinicians from the PTN, CMS and other contractors
- Collect and submit data monthly via secure web portal beginning in 2016
- Participate in 4-month PDSA improvement cycles coupled with in-person (regional or statewide) learning sessions
- Participate in educational venues and share experiences

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## How to Prepare for this New Environment

Three Focus Areas for Change

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### Three Areas of Focus

- Person and Family-Centered Care Design
- Continuous, Data-Driven Quality Improvement
- Sustainable Business Operations

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### Development of the TCPI Change Package

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    graph TD
      A[TCPI Driver Program] --> B[41 Site Visits]
      B --> C[Draft Change Package]
      C --> D[TCPI National Expert Panel]
      D --> E[TCPI Change Package v2.0]
    
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## 1. Person and Family-Centered Care Design

To achieve a person and family-centered care delivery system, seven key drivers should be considered:

- 1.1 Patient and family engagement
- 1.2 Team-based relationships
- 1.3 Population management
- 1.4 Practice as a community partner
- 1.5 Coordinated care delivery
- 1.6 Organized, evidence-based care
- 1.7 Enhanced access

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## 1.1 Patient & Family Engagement

- 1.1.1 Respect values and preferences
- 1.1.2 Listen to patient and family voice
- 1.1.3 Collaborate with parents and families
- 1.1.4 Be aware of language and culture

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## 1.2 Team-Based Relationships

- 1.2.1 Enhance teams
- 1.2.2 Clarify team roles
- 1.2.3 Optimize continuity
- 1.2.4 Define specialty-primary care roles

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## 1.3 Population Management

- 1.3.1 Assign to panels
- 1.3.2 Assign accountability
- 1.3.3 Stratify risk
- 1.3.4 Develop registries
- 1.3.5 Identify care gaps

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## 1.4 Practice as a Community Partner

- 1.4.1 Community health needs
- 1.4.2 Community collaboration
- 1.4.3 Identify social determinants
- 1.4.4 Use community resources
- 1.4.5 Be transparent

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## 1.5 Coordinated Care Delivery

- 1.5.1 Manage care transitions
- 1.5.2 Establish medical neighborhood roles
- 1.5.3 Coordinate care
- 1.5.4 Ensure quality referrals
- 1.5.5 Manage medication reconciliation

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## 1.6 Organized, Evidence-Based Care



- 1.6.1 Consider the whole person
- 1.6.2 Plan care
- 1.6.3 Implement evidence-based protocols
- 1.6.4 Decrease care gaps
- 1.6.5 Reduce unnecessary tests

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## 1.7 Enhanced Access



- 1.7.1 Provide 24/7 access
- 1.7.2 Meet patient scheduling needs
- 1.7.3 Create patient-centered spaces
- 1.7.4 Mitigate access barriers

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## Continuous, Data-Driven Quality Improvement



To achieve a practice culture of continuous quality improvement, the following key drivers should be considered:

- 2.1 Engaged and committed leadership
- 2.2 Quality improvement strategy supporting a culture of quality & safety
- 2.3 Transparent measurement and monitoring
- 2.4 Optimal use of HIT

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## 2.1 Engaged & Committed Leadership



- 2.1.1 Commit leadership
- 2.1.2 Develop a roadmap
- 2.1.3 Create a shared vision

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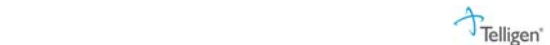
## 2.2 Quality Improvement Strategy Supporting a Culture of Quality & Safety



- 2.2.1 Use an organized QI approach
- 2.2.2 Build QI capability
- 2.2.3 Empower staff
- 2.2.4 Share learning

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*"If you can't describe what you are doing as a process, you don't know what you're doing."*

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### 2.3 Transparent Measurement & Monitoring



- 2.3.1 Use data transparently
- 2.3.2 Set goals and benchmarks

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### 2.4 Optimal Use of HIT



- 2.4.1 Innovate for access
- 2.4.2 Share information through technology
- 2.4.3 Use technology supporting evidence
- 2.4.4 Use technology for partnerships
- 2.4.5 Drive efficiency through technology

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### Sustainable Business Operations



To achieve a practice with long-term sustainable business operations, four key drivers should be considered:

- 3.1 Strategic use of practice revenue
- 3.2 Workforce vitality and joy in work
- 3.3 Capability to analyze and document value
- 3.4 Efficiency of operation

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### 3.1 Strategic Use of Practice Revenue



- 3.1.1 Use sound business practices
- 3.1.2 Use patient as customer feedback
- 3.1.3 Consider non-traditional revenue
- 3.1.4 Benefit from performance payments
- 3.1.5 Drive performance excellence
- 3.1.6 Ensure business accuracy

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### 3.2 Workforce Vitality & Joy in Work



- 3.2.1 Encourage professional development
- 3.2.2 Hire for fit
- 3.2.3 Cultivate joy
- 3.2.4 Improve quality time
- 3.2.5 Reward and recognize

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### 3.3 Capability to Analyze & Document Value



- 3.3.1 Manage total cost of care
- 3.3.2 Develop data skills
- 3.3.3 Develop financial acumen
- 3.3.4 Document value

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### 3.4 Efficiency of Operation



- 3.4.1 Streamline work
- 3.4.2 Eliminate waste
- 3.4.3 Maximize provider value

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### Need Assistance?



- Consider joining a free Practice Transformation Network
  - Four PTNs Serving Iowa:
    - Compass PTN
    - Community Health Center Association of Connecticut, Inc. IA
    - Mayo Clinic IA
    - National Rural Accountable Care Consortium IA

Be a "First Follower"!




<http://www.youtube.com/watch?v=fW8amMCVAJQ>

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### Resources & Contact Information



- 1) Innovation.cms.gov:  
Innovation Center Home/Innovation Models/Transforming Clinical Practices
- 2) CMS.gov:  
Home/Medicare/Value-Based Programs/MACRA MIPS & APMs
- 3) Compass Practice Transformation Network:  
 (515) 283-9330  
 [CompassPTNSupport@ihconline.org](mailto:CompassPTNSupport@ihconline.org)     [www.ihconline.org/CompassPTN](http://www.ihconline.org/CompassPTN)
- 4) Contact: Susan Brown, Health IT Director, Telligen  
515.440.8215  
sbrown@telligen.com

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