



Wyoming's Medical Neighborhoods Transform Care Delivery

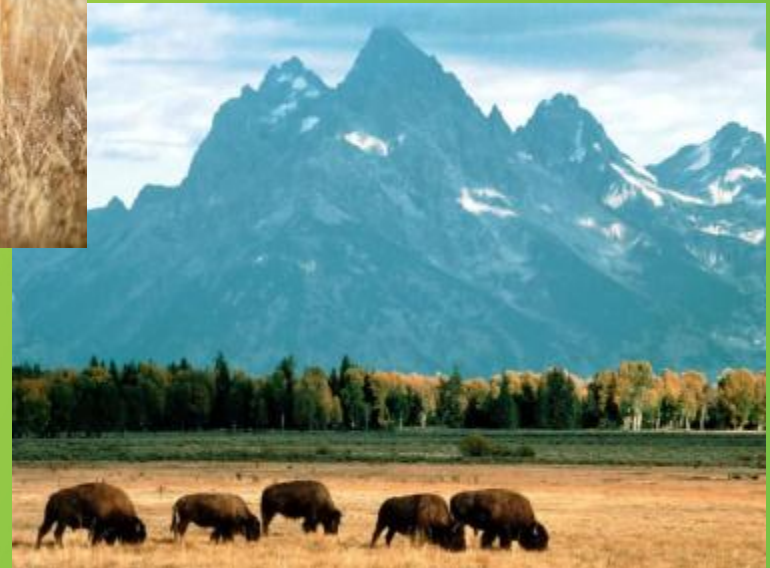
Stronger Together!

National Health Policy Forum
January 30, 2015

HEALTH CARE INNOVATION AWARD

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Population Health in Wyoming



Health Care Reform Anxiety

Health Insurance

Marketplace

PATIENT PORTALS

SGR

Care Management

EHRs

Care Transitions

Meaningful Use

Enhanced Access

Integration

Bundled Pmts

MSSP

Medicaid Expansion

Tax Credits

Never Events

ICD 10

Value Based
Purchasing

ACOs

Community Benefit

Rx Donut Hole

Community Ratings

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Wyoming Hospitals/Providers Unite in Learning

2008 Community Forums

Wyoming's Priorities (in this sequence):

1. Reform the delivery system
2. Reform the payment system
3. Cover the uninsured

2010 Preparing for the Leap

Paying for volume vs. paying for value

Paying for volume

- Fee-for-Service
- Fragmented care
- Duplication/Waste
- Treating sickness
- Acute Hospital Focused
- Little hospital/physician alignment
- Little HIT
- Adversarial payer relationships



Paying for value

- Accountable care; focus on wellness & prevention
- Right care, right setting, right time
- Fully-wired systems; health management data
- Aligned providers; incentives for population health management
- Payers as partners; new payment models



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Why Partner?

Shared Resources

- Access to care coordination/management best practices to manage rising-risk in medical homes and post-discharge
- Access to technology
- Data visibility
- Enhanced community impact
- Potential for better reimbursement

Shared Learning

- Statewide learning laboratory for funding to support comprehensive improvement initiatives
- Positioned us for value-based growth
- More attractive to capital partners; commercial payers and other risk bearing entities and cost-conscious consumers



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2010 – Wyoming's Pathway Emerges

Population Health: Transformation's Critical Path

Acute Care Hospital of the Past

- Episodic Health Care
- Limited Integrated Care Networks; Fragmented & Poorly Communicated care
- Lacked Quality & Cost Transparency
- Poorly Coordinated Chronic Care Management
- No Emphasis on Readmissions (Volume is your Friend)

Phase I: Coordinated, Seamless Delivery System → Patient and Family Centered Care

- Electronic Medical Records
- Primary Care Access Emphasis: Patient Centered Medical Homes
- Focused on Care Management, Care Transitions, and Preventive Care
- Transparent Cost and Quality Performance (On our websites; WHA)
- ID Provider Networks: Designed around the patient and the family/caregivers
- E-health / Telehealth Capability (Clinical adoption on the rise.)

Phase II: Community Integrated Delivery; Population Health Focused

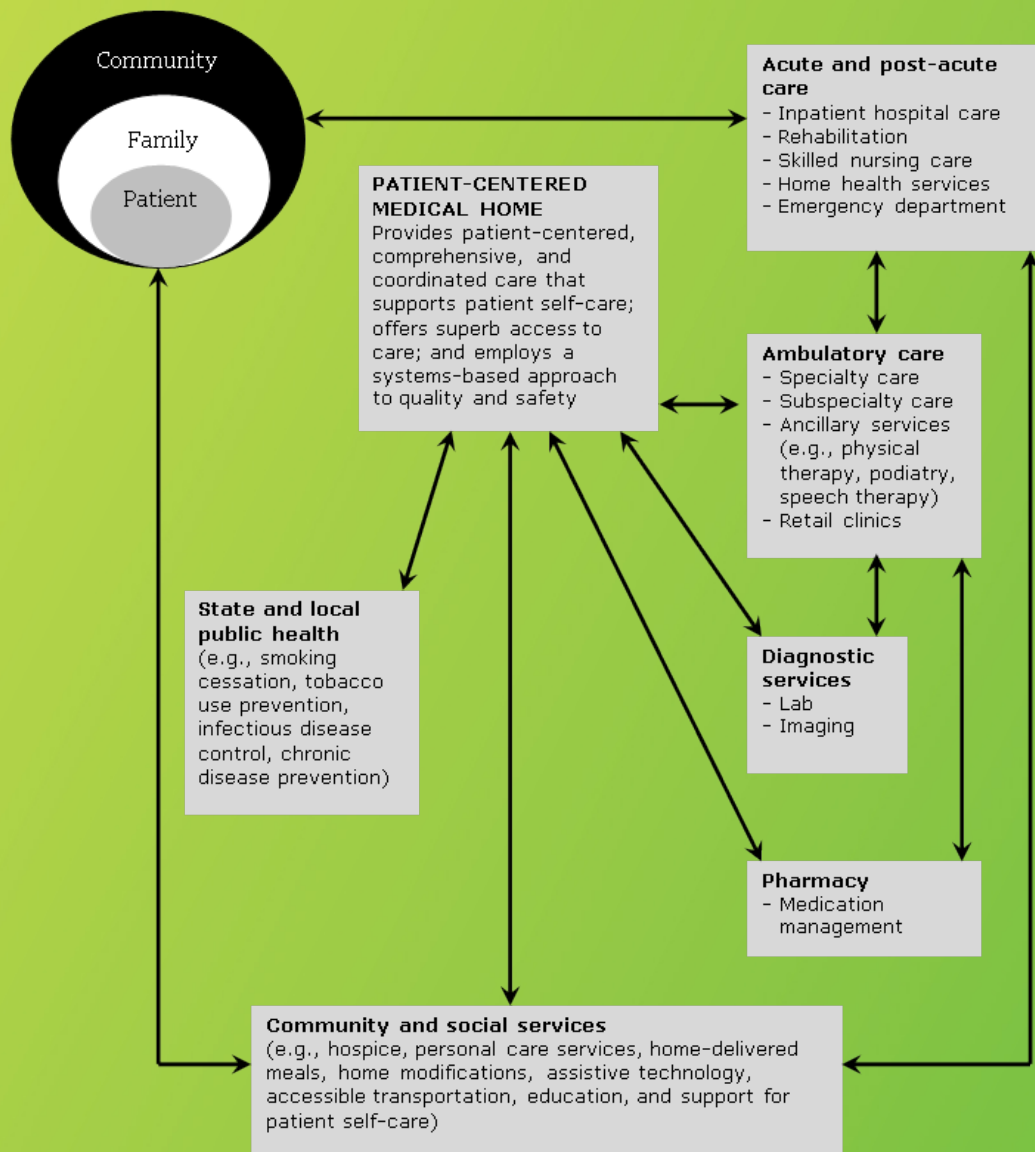
- Planned Approach to Community Health (Wyoming Health Matters, CCNA and CHIPs in 14 communities)
- Integrated Networks: Linked to community resources capable of addressing psychosocial/economic needs (Wyoming 2-1-1 statewide)
- Payers Incentives; Population-based Reimbursement
- Learning and Dissemination: - Capable of rapid deployment of best practices
- Better Prepared for Shared Financial Risk



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WY Medical Neighborhoods Transform Rural Care Delivery



Taylor EF, Lake T, Mysenbaum J, Peterson G, Meyers D. Coordinating care in the medical neighborhood: critical components and available mechanisms. White Paper (Prepared by Mathematica Policy Research under Contract No. HHS2902009000191 TO2). AHRQ Publication No. 11-0064. Rockville, MD: Agency for Healthcare Research and Quality. June 2011



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2012 HCIA Award: Strategies and Partners

Patient-Centered Medical Homes (PCMHs), led by primary care physicians, increase access, improve care coordination, build inter-disciplinary care teams, develop individualized care plans for patients with complex conditions, and maintain connections with community-based services for referral and follow-up. The PCMH care model is the core of high functioning medical neighborhoods.

Patient-Centered Medical Homes (PCMHs)
TransforMED®

Virtual Pharmacists, coordinated by the University of Wyoming's School of Pharmacy, provide Medication Therapy Management to patients and virtually connect PCMHs via telehealth. These community pharmacists play a vital role as the medication-utilization connection between patients, medical homes, and other health care providers in Wyoming's medical neighborhoods.

Virtual Pharmacists
UNIVERSITY of WYOMING

Wyoming Medication Donation Program, part of the Wyoming Department of Health, helps assist low-income and uninsured patients access available medications. Eligible patients referred to the program may receive medications from approved dispensing sites or by mail from the Wyoming Medication Donation Program.

Medication Donation
Wyoming Department of Health


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Telehealth/Telemedicine Desktop Solutions

 Cheyenne Regional Medical Center

Telehealth/Telemedicine Desktop Solutions deploys and upgrades video-conferencing technology in health care practices across Wyoming. Expanding Wyoming's telehealth/telemedicine system increases access to specialists, improves coordination between sites of care, and facilitates effective medical decision-making.

Wyoming Rural Care Transition Program
 Cheyenne Regional Medical Center

The **Wyoming Rural Care Transition Program** provides education and facilitates continuity of medical care as patients with complex conditions transition between hospitals and post-acute sites of care (including the home). Working with PCMHs and other providers, this service establishes personal care plans, improves patients' confidence to self-manage, increases patient and family engagement, and decreases health care costs by reducing avoidable hospital re-admissions.

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Medical Neighborhood Goals

Better Health

Improvement over
baselines in PCMH clinical
outcome measures ¹⁾

Example: % w/HgbA1C < 7

Better Care

Improvement over
baselines in PCMH clinical
outcome measures ¹⁾

Example: Colorectal
Cancer screenings

Lower Cost

\$33,227,238

Health Care Savings (2
admissions, per hospital,
per month over 3 years)

10% reduction in
ED Utilization

Participating Hospitals – All Strategies

- Campbell Co Memorial Hospital
- Cheyenne Regional Medical Center
- Community Hospital – Torrington
- Crook Co Memorial Hospital
- Elkhorn Valley Rehabilitation Hospital
- Evanston Regional Hospital
- Hot Springs Co Memorial Hospital
- Iverson Memorial Hospital
- Kimball Health Services
- Lander Regional Hospital
- Memorial Hospital of Carbon Co
- Memorial Hospital of Converse Co
- Memorial Hospital of Sheridan Co
- Memorial Hospital of Sweetwater Co
- Niobrara Health & Life Center
- North Big Horn Hospital
- Platte Co Memorial Hospital
- Powell Valley Hospital
- Riverton Memorial Hospital
- South Big Horn Co Hospital District
- South Lincoln Medical Center
- St. John's Medical Center
- Star Valley Medical Center
- Washakie Medical Center
- West Park Hospital
- Weston Co Health Systems
- Wyoming Behavioral Institute
- Wyoming Medical Center



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Participating Primary Care Medical Homes (PCMHs) and Pharmacies

- Adult & Geriatric Medical Specialties – Iverson
- Basin Clinic
- Big Horn Family Medicine
- Big Horn Mountain Medicine (Sheridan)
- Cheyenne Plaza Primary Care
- Community Health Center of Central WY
- Carol Fischer, MD
- Jackson Whole Family Health
- Kimball Health Services
- Lander Medical Clinic
- Memorial Clinics of Converse Co.
- Midway Clinic
- North Big Horn Hospital
- Platte Valley Medical Center
- Red Rock Family Practice
- Rendezvous Clinic
- St. Johns Family Health & Urgent Care
- South Lincoln Medical Clinic
- UW Family Medicine Residency – Casper
- Western Medical Associates

Pre-HCIA Clinics (7):

- Babson & Associates
- Cheyenne Health & Wellness Center
- Family First, PC
- Sage Primary Care – Casper
- UW Family Practice - Cheyenne
- Cheyenne Regional Medical Group Clinics:
 - Cheyenne Children's Clinic
 - Cheyenne Family Medicine

Virtual Pharmacy Participants

- Cheyenne
 - Hoys Drugs
 - Town and Country
 - North Star Infusion
- Casper:
 - Family Pharmacy
 - Walgreens (1071 CY Ave)
 - Walgreens (190 E Wyoming Blvd)
- Riverton:
 - Smith's Drug



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Emerging Medical Neighborhoods



- = Telehealth - Hospital Cameras
- = Telehealth - Webcams
- = Care Transition*
- = Virtual Pharmacy*
- = Medication Donation
- 🏠 = Patient Centered Medical Homes*
- H = Hospitals in Wyoming
- * # placed indicated

Rural Population By County

Albany: 36,299	Hot Springs: 4,812	Sheridan: 29,116
Big Horn: 11,668	Johnson: 8,569	Sublette: 10,247
Campbell: 46,133	Laramie: 91,738	Sweetwater: 43,806
Carbon: 15,885	Lincoln: 18,106	Teton: 21,294
Converse: 13,833	Natrona: 75,450	Uinta: 21,118
Crook: 7,083	Niobrara: 2,484	Washakie: 8,533
Fremont: 40,123	Park: 28,205	Weston: 7,208
Goshen: 13,249	Platte: 8,667	Total State: 576,412

Payer Partners – Incentivizing Value

Cooperative relationships with all payers and PCMHs

- ✓ Medicaid: April 2015: \$3 pm/pm for reporting on a common set of 9 quality measures; increasing in future years for improvement over Baselines
- ✓ Medicare: FY2015 \$42 pm/pm for Care Management for patients with 2+ chronic conditions

Commercial Payers negotiating directly with PCMHs

- ✓ Currently: Blue Cross/Blue Shield of Wyoming and WinHealth
- ✓ Next Year: United and Cigna

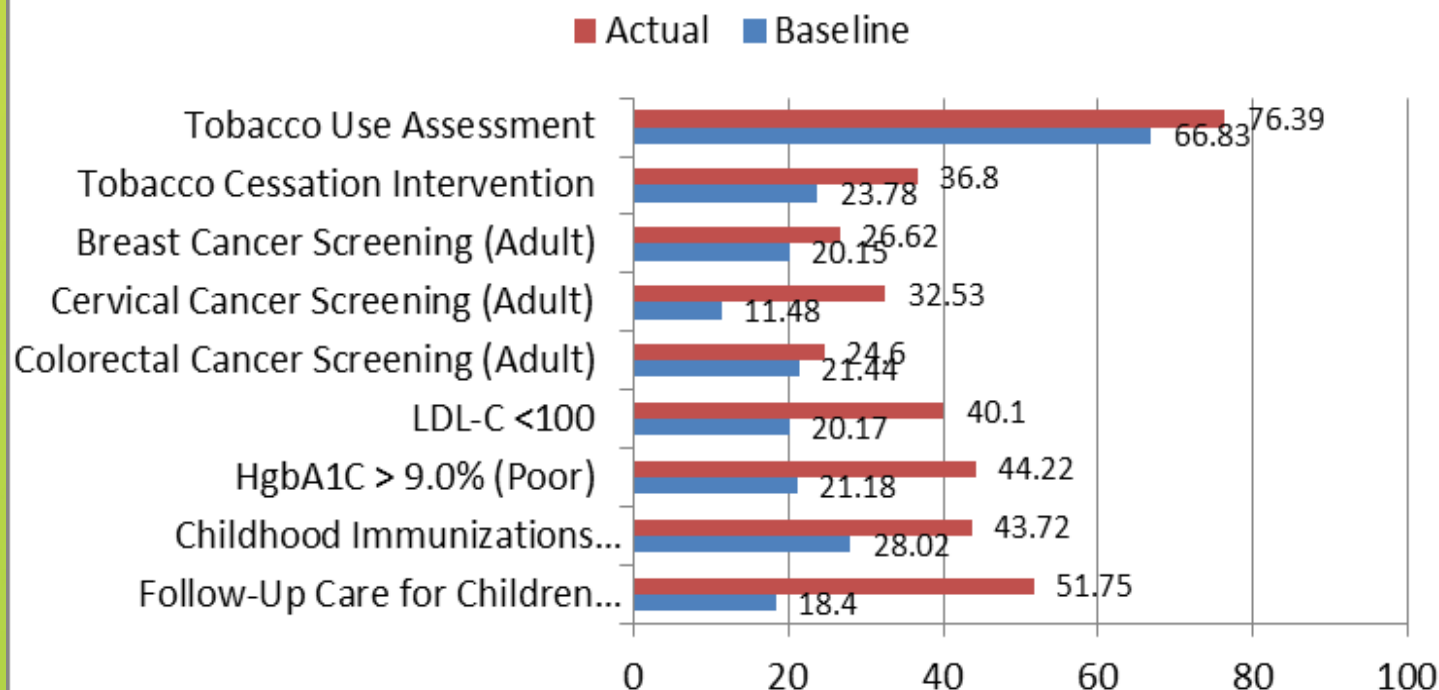


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Better Health / Better Care

Clinical Outcomes

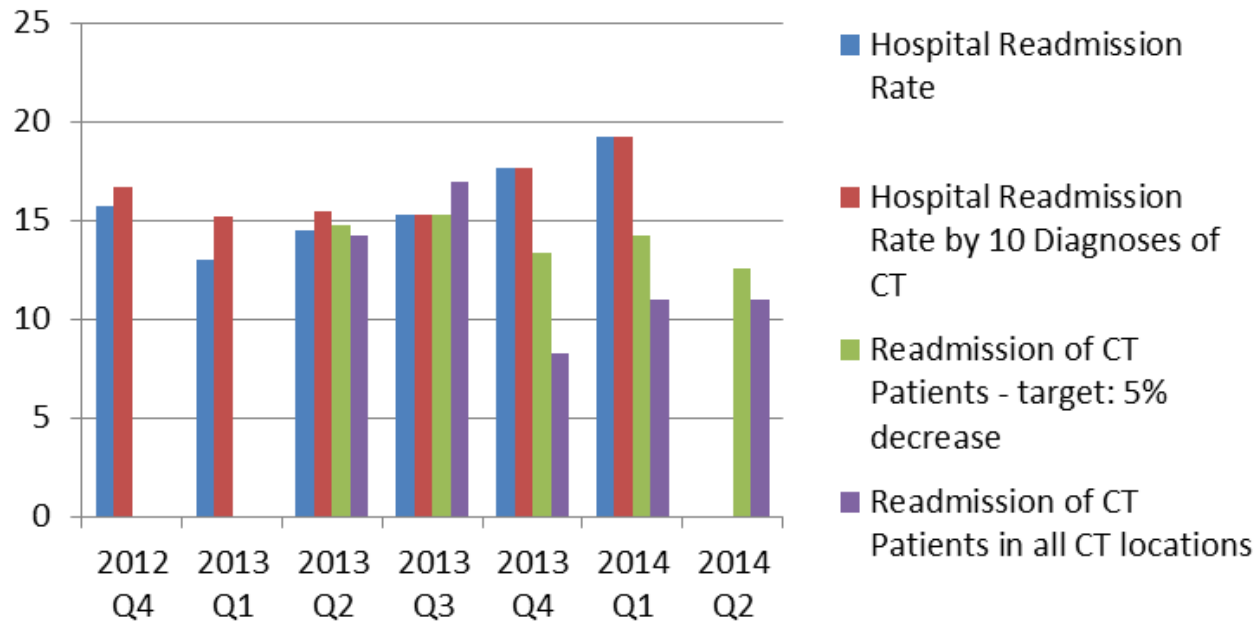


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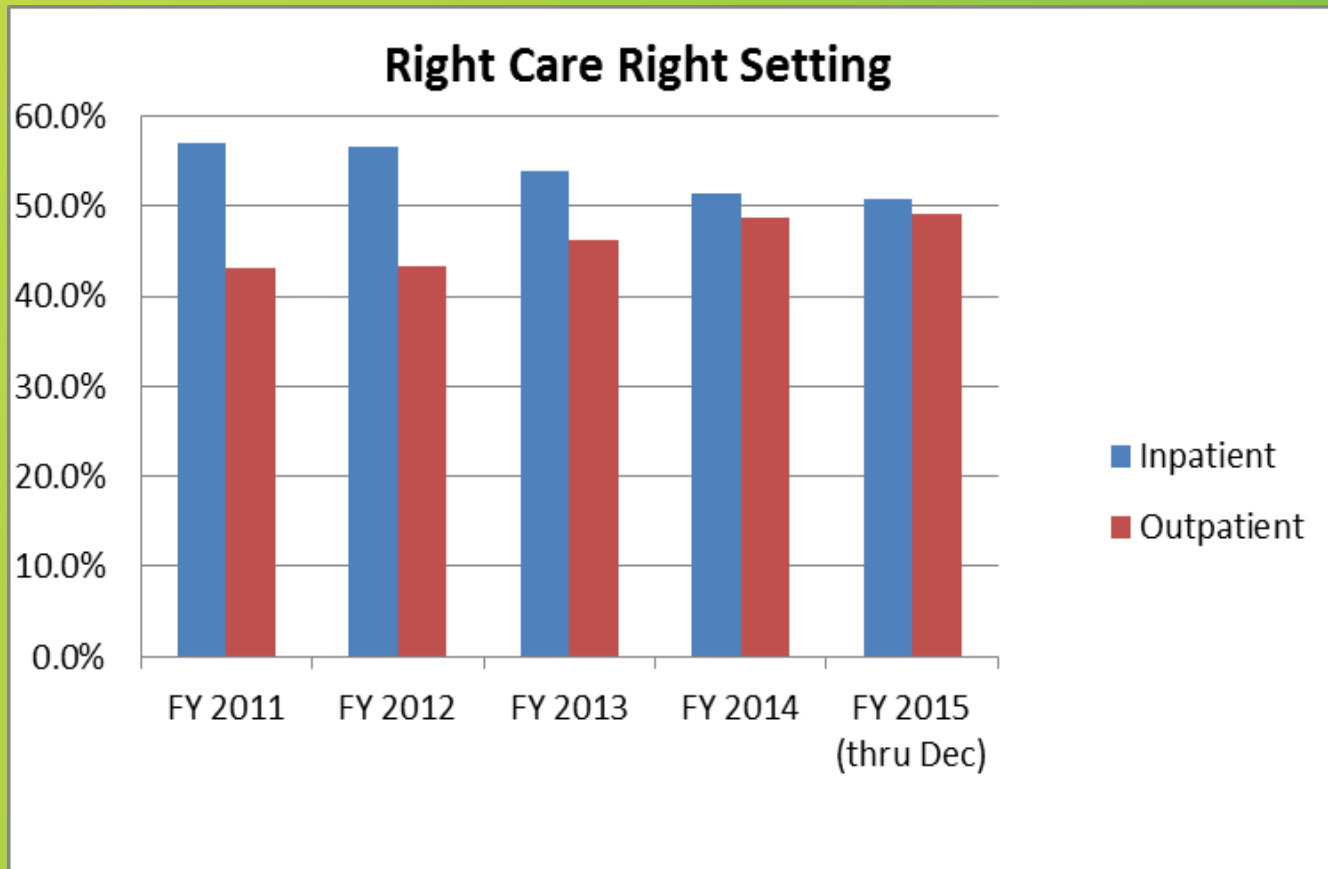
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Care Transitions: Decreased Readmissions

Care Transitions Readmission Rates



Lower Cost: Hospitals Shift to Outpatient Care



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Sustainability: Evaluating Return on Investment

HCIA Investments

- Investments in shared analytic expertise
- Convert practices to medical homes
- Develop integrated provider network
- Create high-risk care management teams
- Telehealth/Outreach
- Community safety-net partnerships low acuity access points
- Payers as Partners (Not adversaries)

New Era ROI

↓ Reduction in unnecessary hospitalization/readmissions

↓ Inappropriate ED utilization

↓ Uncompensated Care

While...

↑ Specialty Care Visits

↑ Primary Care Visits



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What's Next?

- 50% of primary care providers still need to transform
- High Risk Care Management needs to move into primary care
- Specialists need to be integrated into the *Medical Neighborhoods*
- Telehealth needs to move medication therapy management into primary care
- Enhance Payer Partnership

People & Community Centered Care

