COMMUNITY INTEGRATION
SUPPORTING PATIENTS AND FAMILIES

THE Y AND POPULATION HEALTH: EMERGING TRENDS AND SUPPORT OF PHYSICIAN PAYMENT REFORM EFFORTS
OBJECTIVES

1. PROVIDE A PERSPECTIVE ON THE TRENDS IN POPULATION HEALTH, AND THE ROLE OF THE Y IN HEALTH CARE TRANSFORMATION

2. DISCUSS Y-USA’S INFRASTRUCTURE FOR SUPPORTING CHRONIC DISEASE PREVENTION PROGRAMS.

3. DISCUSS THE EMERGING ROLE OF CBOS IN SUPPORTING CLINICAL PRACTICE CLINICAL IMPROVEMENT ACTIVITIES

4. ANSWER QUESTIONS
TRENDS IN POPULATION HEALTH: THE Y’S CHANGING ROLE
IMPACT OF HEALTH REFORM

• Health reform efforts are shifting the financial incentives from fee-for-service to payment for health outcomes
  • Value-Based Payment Contracting
  • Alternative Payment Models
• Success in a value-based payment contract requires a progressive population health strategy
• Best practice models of population health align health systems with community-based organizations to synergize efforts to address the health of targeted health risks in the community
COMMUNITY INTEGRATED HEALTH

• Comprehensive population health strategy that integrates health systems, providers, and community-based health promotion programs to address the breadth of health issues facing a population

• Elements of success:
  • Treatment strategies that fully implement primary, secondary, and tertiary prevention strategies
  • Clinical pathways to support placing members in appropriate treatment tracts - based on risk stratification
  • Deployment of evidence-based programs in community settings
THE Y’S PORTFOLIO OF EVIDENCE-BASED (RCT PROVEN) PROGRAMS

- YMCA’s Diabetes Prevention Program
- Enhance Fitness (Arthritis Self-Management)
- LIVESTRONG at the YMCA (Cancer Survivorship)
- Moving For Better Balance (Falls Prevention)
- Blood Pressure Self-Monitoring
- Childhood Obesity Intervention
- Brain Health
- Parkinson’s
- Tobacco Cessation

Building the pool of the 21st century
THE ROLE OF THE Y IN ALTERNATIVE PAYMENT MODELS (APMS)
CLINICAL PATHWAYS SUPPORTING EVIDENCE-BASED PROGRAMS VIA ALTERNATIVE PAYMENT MODELS

• Clinical Pathways that fully implement primary, secondary, and tertiary prevention are essential to success in APMs

• Prevention efforts in community-based settings have increased adherence with sustained disease self-management impacts and are essential to a comprehensive population health strategy
  • Medicare Shared Savings ACO
  • Bundled Payment
  • Oncology Care Model
Y EVIDENCE-BASED PROGRAMS SUPPORTING APMS

• Alternative Payment Models provide financial incentives to achieve cost savings and improve clinical outcomes

• The APM model provides the ability to risk stratify the target population using clinical indicators and Medicare claims data

• Targeted high-risk beneficiaries are referred to the appropriate primary or secondary prevention program

• YMCA evidence-based programs provide the capacity to implement preventive health strategies that are proven to drive improvement of clinical outcomes and reduction in overall healthcare expenditures
Y EVIDENCE-BASED PROGRAMS INTEGRATED WITH APMS

- Medicare Shared Savings Program
  - ACO risk stratification to determine populations at-risk for diabetes
  - Enrollment in a Y DPP Program
  - Achievement of cost savings and clinical outcome improvement in the targeted ACO population
- Cardiac Care / Cardiac Rehab Bundled Payment
  - Cardiac Rehab Shared Space
  - Blood Pressure Self-Monitoring Program
INTEGRATION WITH APMS (CONT.)

• Oncology Care Model
  • LIVESTRONG® at the YMCA
  • Improved incentives for improved outcomes for beneficiaries diagnosed with cancer
  • Support and Navigation activities

• Comprehensive Joint Replacement Bundled Payment
  • Moving For Better Balance Program – supporting knee replacement beneficiaries during days 61 – 90 of a bundled payment episode
SUPPORTING MACRA CLINICAL IMPROVEMENT ACTIVITY REQ.
MACRA – MEDICARE ACCESS AND CHIP REAUTHORIZATION ACT

- Establishes a Merit Incentive Program
  - First Performance period begins January 1, 2017
- Provider Reimbursement will be adjusted based on a defined scoring methodology
- Links Provider Payment to Outcomes
- Requires clinical practices to engage in clinical improvement activities
- Practice Transformation efforts support successful participation in MIPS payment model
CLINICAL IMPROVEMENT ACTIVITIES (CIA)

- Practices will be graded based on their performance in each CIA:
  - Expanded Practice Access
  - Population Management
  - Care Coordination
  - Beneficiary Engagement
  - Patient Safety and Practice Assessment
  - Achieving Health Equity
  - Emergency Response and Preparedness
  - Integrated Behavioral and Mental Health
EXAMPLE CLINICAL INTEGRATION PATHWAY SUPPORTING MIPS

• Practice Identification of population that has risk factors for diabetes

• Clinical pathways and E.H.R decision support tools that support provider referral to YMCA evidence-based DPP

• YMCA receipt of referral from provider E.H.R using electronic referral to Y E.H.R (Athena Health)

• Clinical documentation of delivery of DPP services to referred consumer

• YMCA E.H.R used to document services with summary report submitted to the referring provider
PROVIDER INCENTIVES FOR CLINICAL INTEGRATION

• YMCA as preferred community provider of evidence-based programs throughout the broad spectrum of the population supports the achievement of the following clinical improvement activities
  • Population Health
  • Care Coordination
  • Health Equity
Y-USA’S MANAGEMENT SERVICES ORGANIZATION
THE LATEST INNOVATION...

Authorized plan for Y-USA to **assume functions of a Management Services Organization (MSO)** -- providing administrative, business, and technology services to local Ys to enable them to receive third party payment for the delivery of the YMCA’s DPP and other chronic disease prevention programs.

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<tr>
<th>Local Ys</th>
<th>Chronic Disease Prevention Program Team</th>
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| • Program delivery  
  • Track participant outcomes in technology system  
  • Raise funds to assist with sustainability in absence of 3rd party payors. | • Train Ys to deliver DPP and other evidence-based programs  
  • Management and administration support  
  • Coordinate with existing TPA for technology support  
  • Provide reporting technical assistance to Ys for reporting to partners, CDC, etc. |

**Healthy Living Department MSO**

- Employs staffs for:
  - Payor Engagement  
  - Contracting  
  - Account Management  
  - Marketing  
  - Provider engagement  
  - Technology support  
  - Compliance  
  - Reporting  
  - Finance

- Contracts with vendors for:
  - Technology platform  
  - Billing / revenue cycle management

«Build” «Buy”

[Logo: athenahealth]
FUNCTIONS OF THE MSO

Program Delivery

Compliance, Reporting, Finance

IT Systems

Account Management

Contracting

Payor Engagement

Local Y Business Function

Y-USA MSO Business Function
EXAMPLE OF CLINICAL INTEGRATION
YMCA of Greater Charlotte:

• Existing shared space arrangement with a large health system serving their market
  • Health System provides direct medical services and preventive health services to community residents, inside the YMCA

• Relationship will expand to include a targeted focus of physician referrals to evidence-based prevention programs that are sustained through reimbursement contracts and inclusion in Alternative Payment Models

• Population Health Strategy includes providing targeted physician referrals to evidence—based interventions at the YMCA

• The YMCA will be a participant in the health system clinically integrated health network
QUESTIONS
THANK YOU