Blue Cross Blue Shield of Michigan

Organized Systems of Care
PGIP: Catalyzing Health System Transformation in Partnership with Providers

**PGIP**

**Chronic Care Model**

- Transform care processes to effectively manage chronic conditions
- Build registry and reporting capabilities to manage populations of patients
- Achieve savings in specified areas
- Reward physicians for improved performance and efficiency
- Share savings

**PCMH**

**Primary care transformation**

- Build PCMH infrastructure
- Strengthen doctor-patient relationship
- Support PCPs and their team’s ability to effectively manage care
- Coordinate care across the continuum for a defined patient population
- Establish linkages with community services

**OSCs**

**Organized Systems of Care**

- Support establishment of systems of care that assume responsibility and accountability for managing a defined population of patients across all locations of care


Expand PGIP to include specialists involved in chronic care

Implement PCMH and quality/use initiatives

Continue to increase number of initiatives

Continue to add new specialties to PGIP

Extend provider-delivered care management with links to BCBSM for customer reporting statewide
What is an Organized System of Care?

BCBSM term used to describe a community of caregivers with a shared commitment to quality and cost-effective health care delivery for the primary care-attributed population of patients
What is an Organized System of Care?

**Requirements:**
- Ability to identify patient population and key providers of care:
- Measure performance:
- Provide feedback to providers
- Advanced primary care
- Integrated care processes

**PCP- attributed patient population**

**Care Partners**
- Community Services
- Other Facilities
- Hospitals

**PCMH Neighbors**
- Major Specialists (Cardiology, Orthopedics, etc.)

**Patient-Centered Medical Home**
- Care Manager
- Primary Care Physicians
Organized System of Care: Vision

- Increase clinical integration among primary, specialty and facility-based care
- Strengthen the primary care foundation
- Decrease variation and fragmentation in care processes
- Improve care quality and health outcomes for patients
OSC Guiding Principles

- Organization exists to serve community
- Patient Centered Medical Home-based (primary care foundation)
- All patient systems and solutions (not payer-specific)
- Population defined by Primary Care Physician-attributed patients
- Clinical integration across provider groups
- Responsible for creating shared processes of care and information systems and accountability for cost and quality at population level
- Optimizing quality and efficiency at population level
Organized System of Care: Desired Outcomes

- Coordinated health and social services support
- Improved management of complex patients
- Improved outcomes and efficiency
- Reduction in preventable ER visits & admissions
- Appropriate use of testing and referrals
- Prevention and early diagnosis
- Self-management support

High-performing health systems with responsibility and accountability for collectively managing a shared population of patients
How is an OSC different from an ACO?

Goals conceptually aligned – better care for individuals, better health for populations and slower cost growth

Differences – OSC focuses on before the fact responsibility/infrastructure support; ACO focuses on after the fact accountability (contracts linking payments to population level performance)

**OSC**
- BCBSM and Physicians Organizations collaboratively develop program, determine how communities of caregivers are identified, defined and organized

**ACO**
- Requirements defined by CMS (section 3022 of the Affordable Care Act)
Organized Systems of Care: Development Collaboration with Physician Organizations

- Collaborative development of OSC concepts, initiatives and guidelines
- Core workgroup - 10 physician organization leaders representing a cross section of our provider community
- Review team - composed of representatives from over 25 physician organizations across Michigan
# OSC Initiatives

## Supporting Infrastructure Development

<table>
<thead>
<tr>
<th>Initiative</th>
<th>Date</th>
<th>Description</th>
</tr>
</thead>
</table>
| Integrated Registry                             | July 2011  | - Promotes an integrated health information system  
|                                                |            | - Used to collect, track, use and store patient health information  
|                                                |            | - Allows all OSC providers to have the right information at the right time to effectively manage their patient population                                                                                     |
| Integrated Performance Measures                 | July 2011  | - OSC-level integrated performance metrics; used for measurement and reporting  
|                                                |            | - Enables providers to manage patient population at the OSC level                                                                                                                                         |
| Integrated Processes of Care                    | March 2012 | - Clinical integration  
|                                                |            | - OSC level care processes that will enable the OSC community of caregivers to communicate, coordinate and collaborate                                                                                   |
Organized Systems of Care

- BCBSM PGIP OSC 1st open enrollment - July 2012

- Result - 38 PGIP OSC-contracted organizations across Michigan for 2012/2013 program year

- PGIP-contracted OSCs are eligible to receive infrastructure development support from BCBSM PGIP through participation in the OSC Initiatives
## CMS ACOs in Michigan

<table>
<thead>
<tr>
<th></th>
<th>ACO</th>
<th>Pioneer or MSSP</th>
<th>Start Date</th>
<th>PGIP OSC</th>
</tr>
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<tbody>
<tr>
<td>1</td>
<td>Greater Washtenaw Area Care Partners (GWACP)</td>
<td>Pioneer ACO</td>
<td>Jan 2012</td>
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<td>Genesys Integrated Group</td>
<td>Pioneer ACO</td>
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<td>Michigan Pioneer ACO</td>
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<td>4</td>
<td>Accountable Healthcare Alliance</td>
<td>MSSP</td>
<td>July 2012</td>
<td>Yes</td>
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<td>Oakwood ACO</td>
<td>MSSP</td>
<td>July 2012</td>
<td>Yes</td>
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<td>Southeast MI Accountable Care</td>
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<td>ProMedica Physician Group</td>
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<td>POM ACO</td>
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<td>9</td>
<td>Partners in Care (St. John Providence)</td>
<td>MSSP</td>
<td>Jan 2013</td>
<td>yes</td>
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</table>
Organized Systems of Care – Hospitals

• BCBSM is aligning hospital and physician payment incentives by establishing common performance goals and fostering collaboration

• Hospital performance metrics will be the same as PGIP to facilitate information sharing and analysis across hospitals and their partner POs

• Build on PGIP initiatives to establish better clinical integration through OSCs
Other BCBSM Value Partnerships Initiatives that support population management/OSC concepts

- Patient Centered Medical Home – Neighbor program
- Provider Delivered Care Management (PDCM) and PDCM-oncology
- Specialist uplift process (includes fee uplifts for oncologists)
For More Information

• Robin Mitchell, BCBSM Value Partnerships, rmitchell@bcbsm.com, 313-448-7015

• BCBSM Value Partnerships website
  – http://www.bcbsm.com/provider/value_partnerships/

• Main PGIP section of BCBSM site:
  – http://www.bcbsm.com/provider/value_partnerships/pgip/

• PCMH /OSC Initiatives:

• To subscribe to BCBSM’s PGIP Matters eNewsletter: