Aligning Health Plans to Accelerate Synergy & Impact

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Fixing the broken supply chain















Willis Towers Watson III'IIII











GROUP ON HEALTH









PBGH Health Plan Playbook



Playbook for Successful and Collaborative Health Plan Management

Leveraging the Collective Power of PBGH Members to Impact Health Care Delivery

For Employers 2020

e is being

hodological e spending

reduced specialty spend, in addition to a better patient experience.\(^1\) Conversely, concerns around an increasingly specialist -oriented health care system has led to increased national discussion and action to strengthen America's primary care foundation. are compensated significantly less than physicians in other medical specialities, leading to a specialist-oriented system overall, and contributing to a shortage of primary care physicians.

expenditures that goes to primary care—as a percentage of overall spending.

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L Standardizing the Measurement of Commercial Health Plan Primary Care Spending, Milbank Memorial Fund. See pp 5-7, https://www.milbank.org/wp-content/uploads/2017/07/MMF-Primary-Care-Spending-Report.pdf

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The Metrics

- 1 Benchmarking Primary Care Spend
- 2 Integration of Primary Care and Behavioral Health
- 3 Depression Screening Utilization
- 4 Use of Two-Sided Risk Payment Models
- 5 Efforts to Avoid Low-Value Care
- 6 Adoption of Biosimilars
- 7 Site-of-Service Redirection for Administered Drugs
- 8 IHA-PBGH Commercial ACO Measure Set
- 9 Reporting on Depression Screenings and Remission Rates

2. Integration of Primary Care and Behavioral Health

Common Challenges

ration of behavioral In some situations, health plans will assert tify and provide access to that few providers are meeting the viduals in need of mental requirements for the CoCM. In these cases, BGH uses the Collaborative purchasers and health plans can discuss M), an approach to the actions that plans are currently taking integration that has been to help providers meet the requirements for studies to improve CoCM payments. CoCM enhances primary services to the primary anagement behavioral nd psychiatric consultation

What We Measure

The number of unique provice CoCM CPT codes (99492-994 total payments for these coding data on the number of pthese codes, we have a proxprimary care providers are off behavioral health services ar promoting adoption of collal

4. Use of Two-Sided Risk Payment Models

When providers assume financial risk, it creates aligned incentives that support innovation and effective use of resources. Two-sided risk payment models allow providers to perform services at costs below the benchmark share in savings while also financially disincentivizing those whose actual costs exceed the benchmark. By adopting this approach, employers can encourage innovation and competition while ultimately reducing total expenditures.

Common Challenges

There are several different methods for measuring spending, quality and participation in two-sided risk arrangements. It is key for health plans to decisively choose a valid method of measurement and maintain open communication with purchasers on its definition and parameters.

What We Measure

nods for The proportion of overall spending attributdaparticiments. It is percentage of plan participants enrolled in by choose a not maintain or attributed to these arrangements.

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