Transforming Clinical Practice Initiative - A No-Cost Win/Win for Providers and Patients

Presented by:
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April 12, 2016
Objectives

- What is TCPI and what is its purpose?
- Why now?
- NE Region Practice Transformation Networks
  - Which one is right for me?
  - Provider/Practice Benefits
- How do I sign up?

This presentation has been prepared for the New England Region comprised of 6 states: Connecticut, New Hampshire, Maine, Massachusetts, Vermont, and Rhode Island.
What is TCPI?

- One of the largest federal investments to support doctors and other clinicians through collaborative and peer-based learning networks
- Rural, small practice, underserved pop. not receiving support in larger network
- ACO’s, CPCI, MAPCP excluded from TCPI
TCPI - Who is Eligible?

• Everyone! ....almost

• **All healthcare providers** with NPI who submit claims Medicare/Medicaid

• PCMH practices
Overview

• Transform care model from volume to value

• 5 phase transformation

• Three sources of support: PTNs, SANs, QIO’s

• No cost resources and technical assistance
Why Now?

- PQRS, MU, Value Modifier → MACRA/MIPS
- Practice QI infrastructure needed for MIPS
- New - reporting pt. experience, measuring utilization
- Performance in 2017 used as measurement year for MIPS 2019
- <8 months to create systems for success in 2017
Bottom Line…

• CMS rapidly moving from FFS to value-based payments
• Commercial payers will follow
• Prediction: 25% of all payments based on quality & value by 2019
• Better to prepare now for what we know is coming
OLD: PQRS, VM, MU*
• Phased out after 2018

NEW: MIPS
• Quality, MU, Clinical Practice Improvement Activities, Resource
• 2019 +/- 4% → +/- 9% 2022
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<thead>
<tr>
<th>TCPI AIMs/Goals</th>
<th>Primary Drivers</th>
<th>Secondary Drivers</th>
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<tbody>
<tr>
<td>1) Practice Transformation. Evidence of a culture of quality where the vision is clear and data is used to drive continuous improvement in quality, outcomes, cost of care and patient, family and staff experience.</td>
<td>1.1 Patient &amp; family engagement</td>
<td>2.1 Engaged and committed leadership</td>
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<td>2) Effective solutions moving to scale. Evidence of practice spreading effective improvement strategies to full scale for the entire population under its care</td>
<td>1.2 Team-based relationships</td>
<td>2.2 Quality improvement strategy supporting a culture of quality and safety</td>
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<td>3) High Clinical Effectiveness: Practice is effective in bringing all patient segments to their health status goals.</td>
<td>1.3 Population management</td>
<td>2.3 Transparent measurement and monitoring</td>
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<td>4) Reduced Avoidable Hospital Use: Rates of readmission and unnecessary admissions for practice’s patients have been reduced.</td>
<td>1.4 Practice as a community partner</td>
<td>2.4 Optimal use of HIT</td>
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<td>5) Reduced Unnecessary Testing &amp; Procedures: Practice demonstrates a reduction in unnecessary testing and in the use of the ED by its patient population.</td>
<td>1.5 Coordinated care delivery</td>
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<td>6) Reduced costs: Practice controls its internal costs as well as other elements of total cost of care.</td>
<td>1.6 Organized, evidence based care</td>
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<td>7) Documented Value: Practice can articulate its value proposition and increases participation in available value-based payment agreements.</td>
<td>1.7 Enhanced Access</td>
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<td>2.1 Engaged and committed leadership</td>
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<td>3.1 Strategic use of practice revenue</td>
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<td></td>
<td>3.2 Staff vitality and joy in work</td>
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<td>3.3 Capability to analyze and document value</td>
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<td>3.4 Efficiency of operation</td>
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## TCPi Transformation - Two Dimensions

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<tr>
<th>Transformation of Performance</th>
<th>Transformation of Operations</th>
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<tbody>
<tr>
<td><strong>Phase 1 - Set Aims and Develop Basic Capabilities</strong></td>
<td><strong>Phase 1 - Leadership Sets Aims and Identifies Basic Capabilities</strong></td>
</tr>
<tr>
<td><strong>Phase 2 - Report and Use Data to Generate Improvements Text</strong></td>
<td><strong>Phase 2 - Develop and startup operations; begin generating and using data Text</strong></td>
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<td><strong>Phase 3 - Achieve Progress on Aims of Lower Cost, Better Care, and Better Health</strong></td>
<td><strong>Phase 3 - Have the operations in place and operating</strong></td>
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<td><strong>Phase 4 - Achieve Benchmark Status</strong></td>
<td><strong>Phase 4 - Achieve levels of operational performance needed to achieve aims</strong></td>
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<td><strong>Phase 5 - Thrive as a Business via Pay for Value Approaches</strong></td>
<td><strong>Phase 5 - Have sustainable operations built into budgets and financial plans</strong></td>
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3 Prong Approach

- SAN’s – 10 - workforce development National/Regional professional associations

- PTN’s – 29 - enrollment, resources, move providers through transformation phases

- QIN-QIO – 14 - assessments, technical resource, e.g., DSME to meet patient empowerment goals, preventing readmissions
Which PTN is right for you?

PTN Benefits?
Clinician Enrollment by State = Goal 140K
Finding Your PTN
www.healthcarefornewengland.org

The U.S. health care system is rapidly moving from a fee-for-service model to multiple integrated care networks. The Transforming Clinical Practices Initiative (TCPI) is designed to collaborate with the five Practice Transformation Networks (PTNs) located in New England to help clinicians achieve large-scale health improvements.

Our goal is to assist approximately 35,000 clinicians in the New England region in the improvement of health outcomes for millions of Medicare, Medicaid and CHIP beneficiaries and other patients and reduce unnecessary hospitalizations for 5 million patients through practice assessments, tests and educational opportunities.

Meet the Five PTNs in New England

- **Connecticut**
  - Federally Qualified Health Centers
- **Connecticut & Massachusetts**
  - Primary Care, Specialty & Behavioral Health Clinicians
- **Maine, New Hampshire & Vermont**
  - Primary Care, Specialty & Behavioral Health Clinicians
- **Rhode Island**
  - Primary Care, Specialty & Behavioral Health Clinicians
- **Vizient**
  - (formerly UHC-VHA) Members of Academic Medical Centers

Not sure where to start?
- Contact Lisa A. Greenlund, CHSP, ARM:
  - Senior Program Administrator, TCPI
  - T: 401.528.3258
  - E: lgreenlund@healthcentricadvisors.org

Who is eligible?
- Doctors – all specialties
- Podiatrists
- Optometrists
- Oral Surgeons
- Dentists
- Chiropractors
- Pharmacists
- Physician Assistants
- Nurse Practitioners
- Clinical Nurse Specialists
- Certified Registered Nurse Anesthetists
- Anesthesiologist Assistants
- Certified Nurse Midwives
- Clinical Social Workers
- Clinical Psychologists
- Registered Dieticians
• University of Massachusetts Medical School
• UConn Health (sub awardee)

**Customized and Practice-centered Approach:**

• Help practices articulate *their* transformation agenda
• Prioritize efforts
• Identify measures
• Facilitate transformation through data-driven QI
Achieve the Quadruple Aim and Bring Joy Back to Your Clinical Practice!

**Succeed in Value-Based Payment**
- Optimize current revenue
- Prepare for alternative payment models

**Optimize Use of Health Information Technology**
- Calculate and report clinical quality measures
- Give clinicians actionable care gap information

**Strengthen Connections to Community Partners**
- Improve coordination across primary and specialty care, hospitals, behavioral health and community-based providers

**Free Technical Assistance**
- Quality Improvement Advisors
- Faculty Experts
- Professional Resources – CMEs, etc.

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The Value Proposition

Southern New England Practice Transformation Network
• For further information contact:

Valerie Konar, MBA, Project Manager
valerie.konar@umassmed.edu

Dr. Ron Adler, Lead Physician
Ronald.adler@umassmemorial.org
• Transforming providers in ME, NH, and VT
• Assessment of practice readiness for change and customized plan/tech. assistance
• PTN Learning Collaborative (w/CE credits)
• Direct, practice-based QI support from Practice Coach
• No-cost access to PQRS Solutions, assistance reporting to CMS
Maine Quality Counts
– Eleesa Marnagh, Joan Orr, Lisa Tuttle: ptn@mainequalitycounts.org

New Hampshire Citizens Health Initiative
– Jeanne Ryer: Jeanne.Ryer@unh.edu

Vermont Program for Quality in Health Care
– Lee Bryan: leeb@vpqhc.org
• RI and neighboring states
• Prepare for value based payment models
• No cost resources:
  – Technical assistance; one-on-one coaching
  – Data-driven, QI skill building
  – Care coordination/transition services
  – Leadership Academy for select clinicians to train as healthcare leaders
• Only 1,500 slots available, 947 already filled
• Contact Darlene Morris, Director, Center for Improvement Science at dmorris@riqi.org
• Year 1 enrollment ends 4/30/2016!

• TCPI provides no-cost, Peer-to-Peer preparation for value based payment models

• Visit healthcarefornewengland.org for information on TCPI & PTN contact info
QUESTIONS?

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Resources
Support and Alignment Networks

American College of Emergency Physician
American College of Physicians, Inc.
HCD International, Inc
Patient Centered Primary Care Foundation
AAFP/ABFM Family Medicine SAN
Network for Regional Healthcare Improvement
American College of Radiology
American Psychiatric Association
American Medical Association
National Nursing Centers Consortium
Websites

- www.healthcarefornewengland.org
- www.healthcarecommunities.org
- ptn@mainequalitycounts.org
- www.aafp.org/practice-management/payment/medicare-payment.html