# Welcome to the Conference on Health Payment Reform



# Agenda

#### **Welcome & Opening Remarks**

#### **Citizens Health Initiative Pillars Update**

#### **Payment Reform**

Overview of Reform Options

#### **Perspectives on Payment Reform**

- Payment Aligning Goals
- Employer Perspective: Why payment reform is critical to health reform
- Payment Reform Initiatives in Maine
- Q&A

#### Lunch

#### **Medical Home**

Overview of Medical Home and Description of the NH Pilot

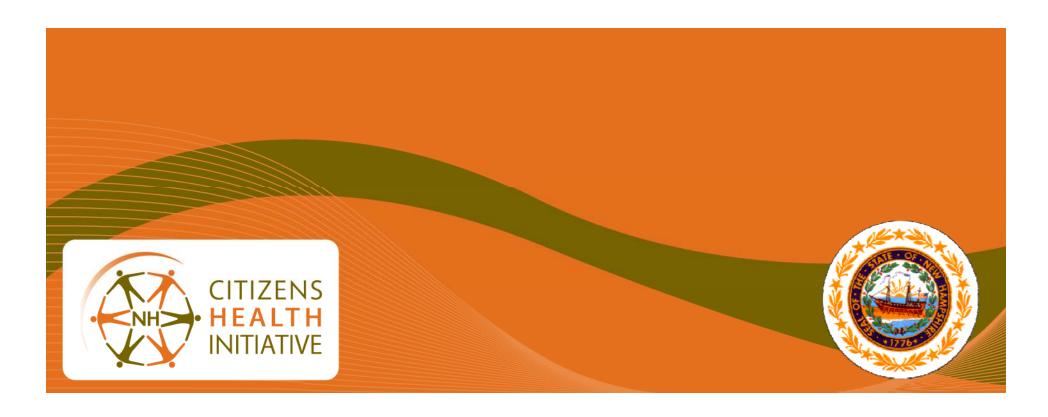
#### **Panel on Medical Home**

- NH Medical Home Pilot Physician Perspective from an Independent Multi-Specialty Physician Organization
- NH Medical Home Pilot Administrator from an Independent Practice
- Carrier Why Carriers see Medical Home as important
- Medicaid: The Intention of HHS on Medical Home
- Q&A

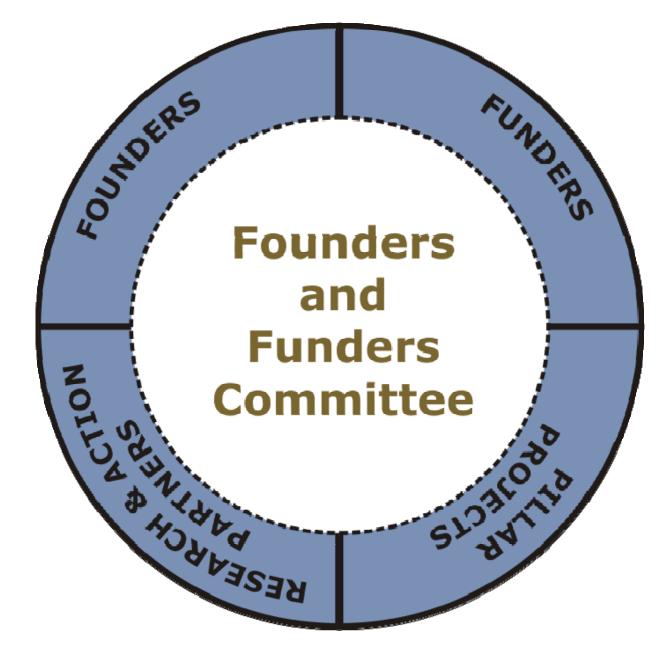


Wrap Up

# Initiative Update



# Organizational Structure





### Founders

## State of New Hampshire

- Department of Insurance
- Department of Health & Human Services

## University of New Hampshire

- College of Health & Human Services
- Institute for Health Policy & Practice

**Endowment for Health** 



### **Funders**

State of New Hampshire

University of New Hampshire

**Endowment for Health** 

New Hampshire Charitable Foundation

**Local Government Center** 

**HNH**foundation

Norwin S. and Elizabeth N. Bean Foundation

Harvard Pilgrim



# 2009 Pillar Projects

- Health Promotion & Disease Prevention
- Health Information Technology & Exchange
- Health Finance & Structure Transparency
- Health Payment Reform
- Medical Home



### Health Promotion & Disease Prevention

- Objective is to create initiatives to help individuals sustain and improve health, focusing realistically on the leading causes of illness and death in New Hampshire.
- Partner with communities who are organized (Keene, UNH, North Country, Purchasers Group on Health) matching them with resources and measuring progress.
- Develop communities who are not yet organized and develop community mentor program.
- Share evaluation and policy lessons.



## Health Information Technology & Exchange

- Support the HIT/E Strategic Plan delivered to Governor Lynch on 1/1/09
- Support the Department of Health and Human Services in their efforts as stewards of the Plan
- Work in partnership with multiple associations to deploy, analyze, and summarize a provider technology survey
- Continue work supporting implementation of ePrescribing and EMR technologies
- Provide educational opportunities for policy makers



# Health Finance & Structure Transparency

### **Cost and Utilization**

- 2005–2007 Cost and utilization summary of NH commercially insured lives
- Payer transparency briefs

### Quality

- Support report card efforts of NHPGH (May)
- Release a ME/NH Adverse Drug Events incidence and cost study (June)
- Develop a Quality Transparency Working Group (Q3)

### **Communication, Education & Outreach**

Make available all studies via website and partner organizations



# Payment Reform

- Pillar established with the goal of creating pilot projects by Fall 2009 that:
  - Align payment, goals and incentives across the systems of care: primary, specialty, behavioral, ancillary and hospital;
  - Address the unsustainable rate of growth in healthcare expenditures;
  - Reward explicitly defined quality care;
  - Reward excellence in the delivery of evidencebased clinical practices;
  - Incent the use health information technology;
  - Recognize administrative best practices and lean processes; and
  - Serve as a model of transparency.



### Medical Home

- Pillar objective is to affect a fundamental shift in reimbursement to promote high quality, efficient care
- Initial focus is to establish, promote and measure pilot
  Medical Homes in the State
- One of a small handful of projects in the country pursuing a Multi-Stakeholder approach
- Participating at the national level with the Patient Centered Primary Care Collaborative
- 9 practices participating in two year pilot represent more than 30,000 commercial members and 130,000 unique patient visits per year
- Pilot commenced on 01/01/2009, and payment to providers to begin on 06/01/2009

