

Alignment and Parity Amongst the MSSP and MA Payment Models



July 17, 2019

Poll Q1: which payer contracts are you involved with?

- **A) Medicare Advantage**
- **B) Medicare ACO (MSSP/NG)**
- **C) Medicaid**
- **D) Commercial ACO**

Agenda

- About Salient
- Why is this **topic** important?
- Who is the **population**?
- What are the **similarities** and **differences**?
- What **resources** and **infrastructure** are required?
- Conclusion
- Q/A

Who is Salient Healthcare?

Salient Healthcare is focused on helping provider organizations confidently accept greater risk in their value-based contracts.

Our solutions support provider organizations of all sizes across the country managing more than 5,000,000 lives in value-based contracts with Medicare, Medicaid, and Commercial Payers.

A Division of Salient Corporation, a Performance Management Company, located in Albany, New York.



A Division of Salient Management Company



Who are the Speakers?

Craigian Gray, MD, JD, MBA; Chief Medical Officer, Salient

- Physician with over 30 years of clinical experience
- Former Medicaid Director of NC and Hospital Medical Director
- Fun Fact: Enjoys jamming with the band

Amy Kotch, MHA; Lead Business Consultant, Salient

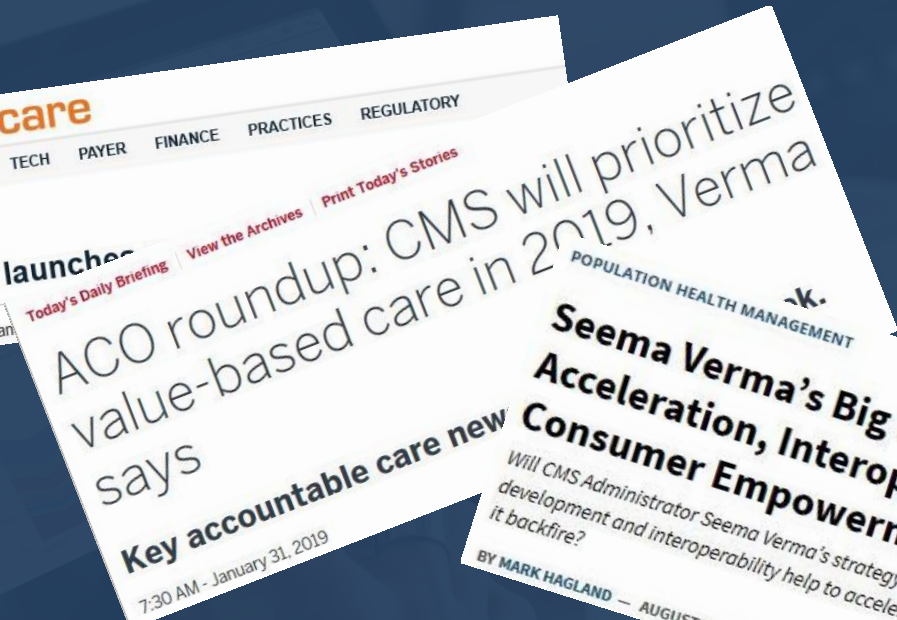
- Consultant for over 25 ACOs/ MSOs
- Received a Masters Certification in Population Health from Johns Hopkins University and Normandale Community College
- Fun fact: Advanced open-water scuba-diver

Maria Nikol, MJ; Senior Business Consultant, Salient

- 10 years of experience in healthcare operations and healthcare strategy
- Holds a Master of Jurisprudence in Health Law from Widener University and a Bachelor of Science in Pharmaceutical Marketing and Management from the University of the Sciences in Philadelphia
- Fun Fact: Figure skater

It's 2019, Where is the healthcare landscape?

Major Evolution



It's 2019, Where is the healthcare landscape?

There is a strong need to manage the Medicare population

**4.6% growth
over 10 years**

Payments to MA plans have **2x**
between 2007-2017

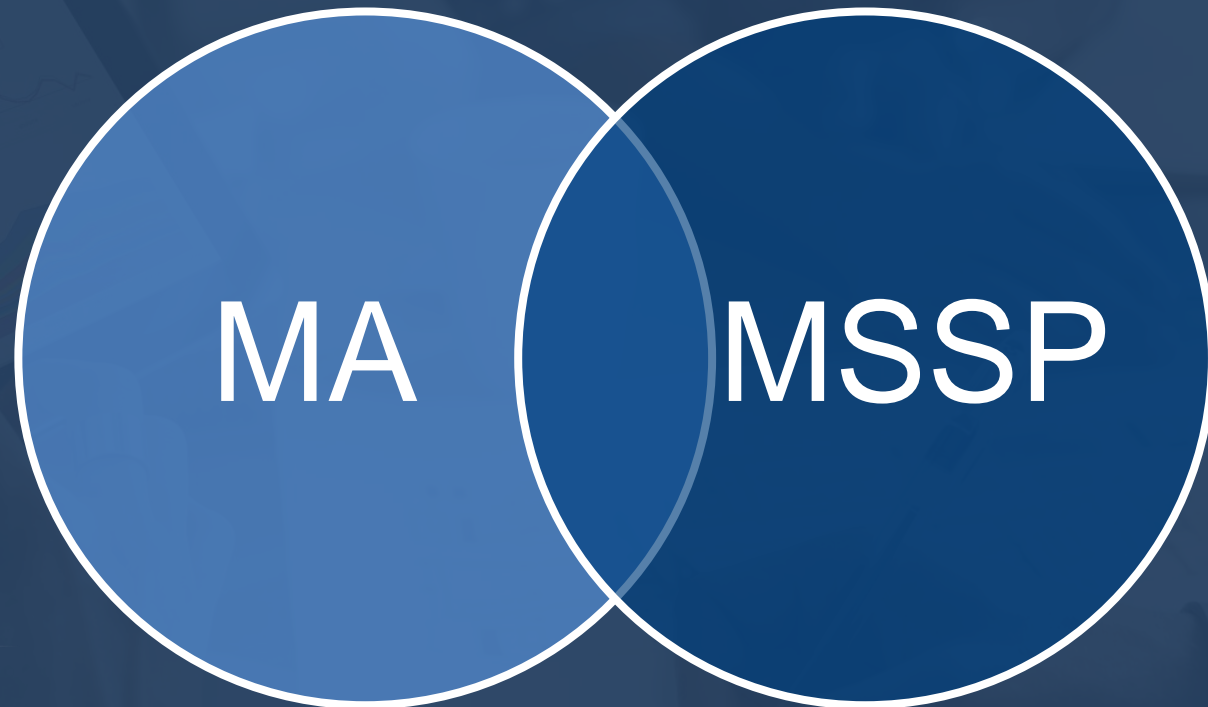


It's 2019, Where is the healthcare landscape?

Similarities and differences between the programs

Different resources and infrastructure to take on these contracts

Contract alignment when negotiating with payers



Poll Q2:

Which payer model is preferred by your organization?

Select one

- **A) Medicare ACO MSSP/Next Gen**
- **B) Medicare Advantage**
- **C) commercial ACO**

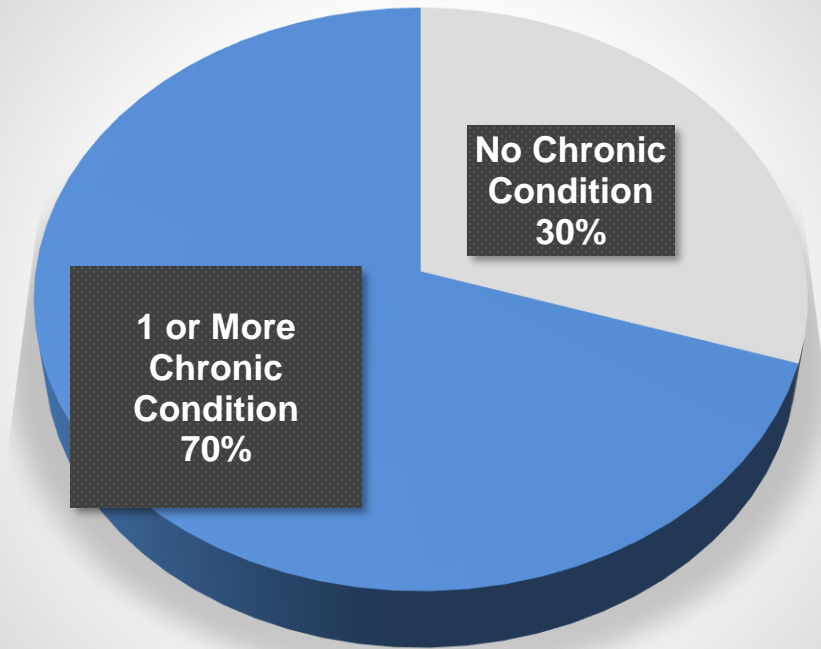


Who is the population?

 **SALIENT** HEALTHCARE

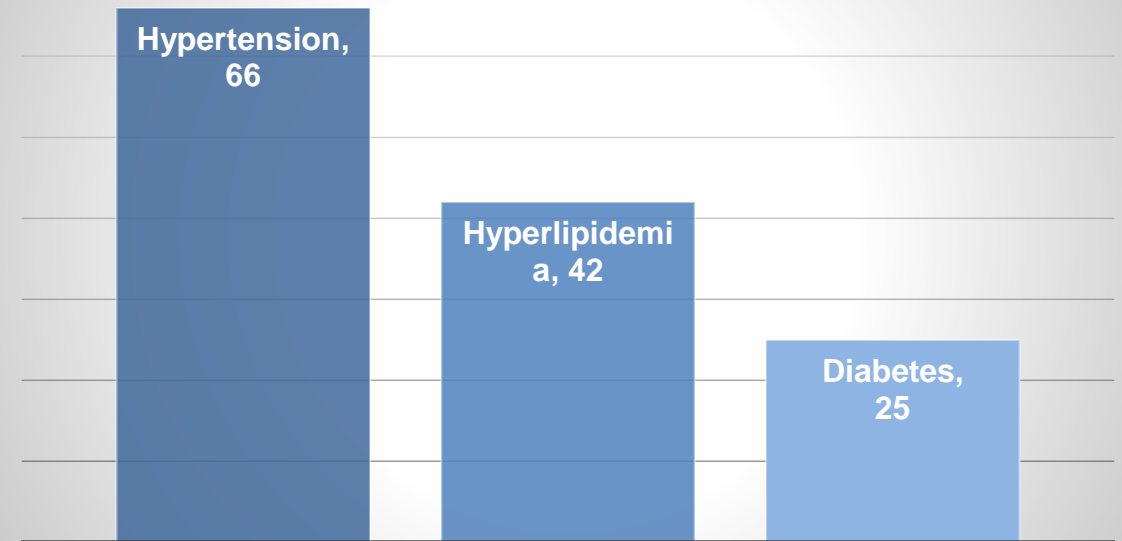
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Medicare Beneficiaries



■ No Chronic Condition ■ 1 or More Chronic Condition

Top Chronic Conditions of Medicare Beneficiaries

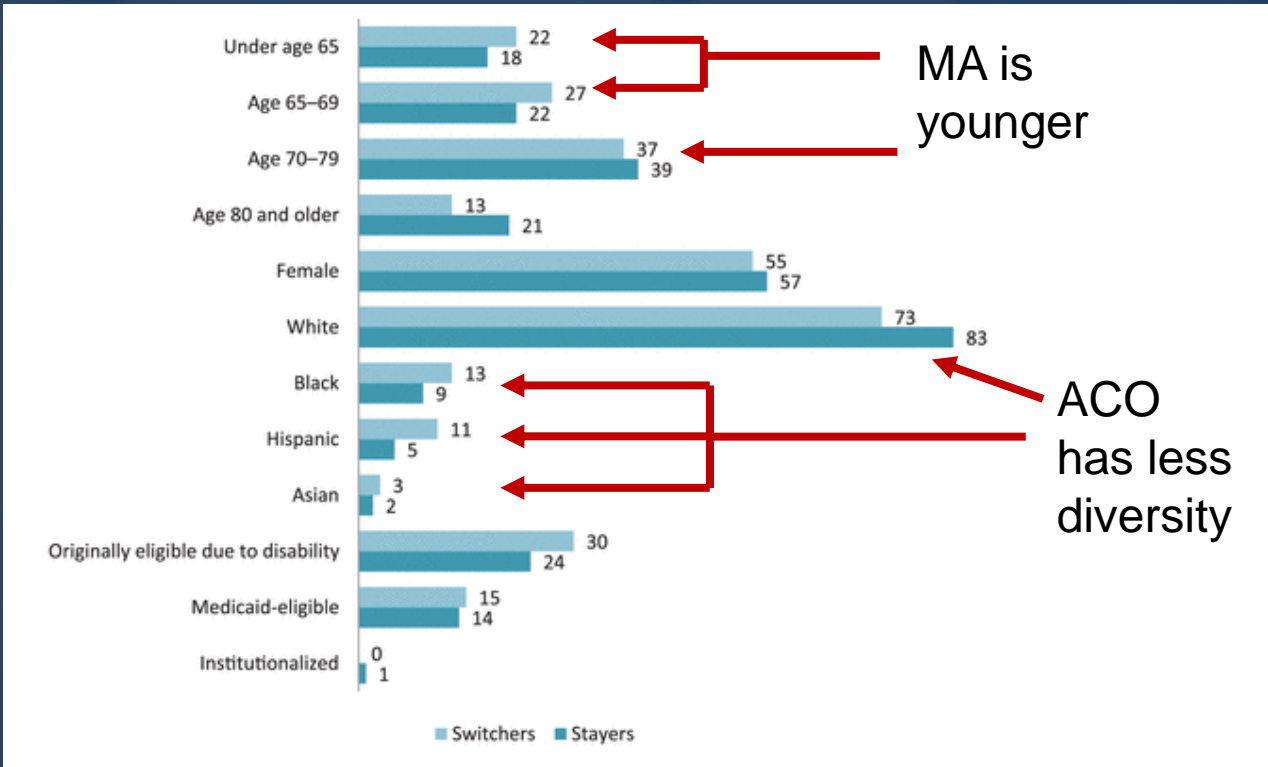


TOP CHRONIC CONDITIONS

■ Hypertension ■ Hyperlipidemia ■ Diabetes

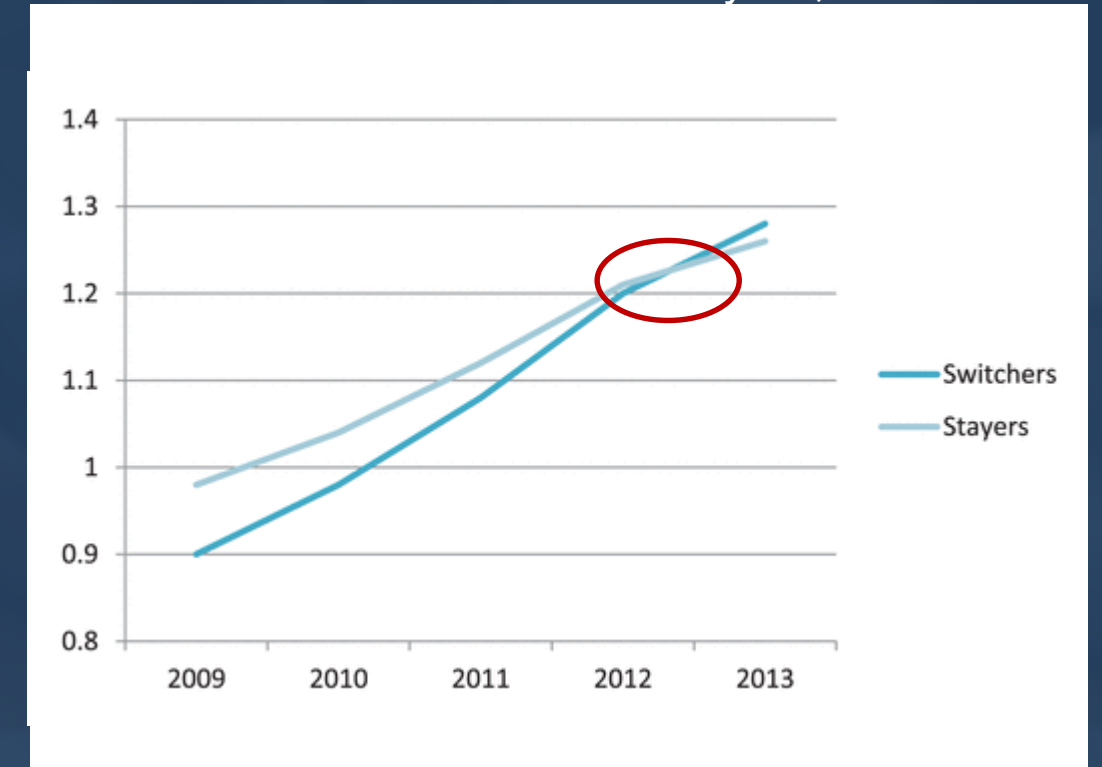
MA Patients Tend to Be Younger and Healthier

Percent of beneficiaries with certain characteristics



• Source. Authors' analysis of Medicare beneficiary summary file and risk adjustment data, 2008-2013.

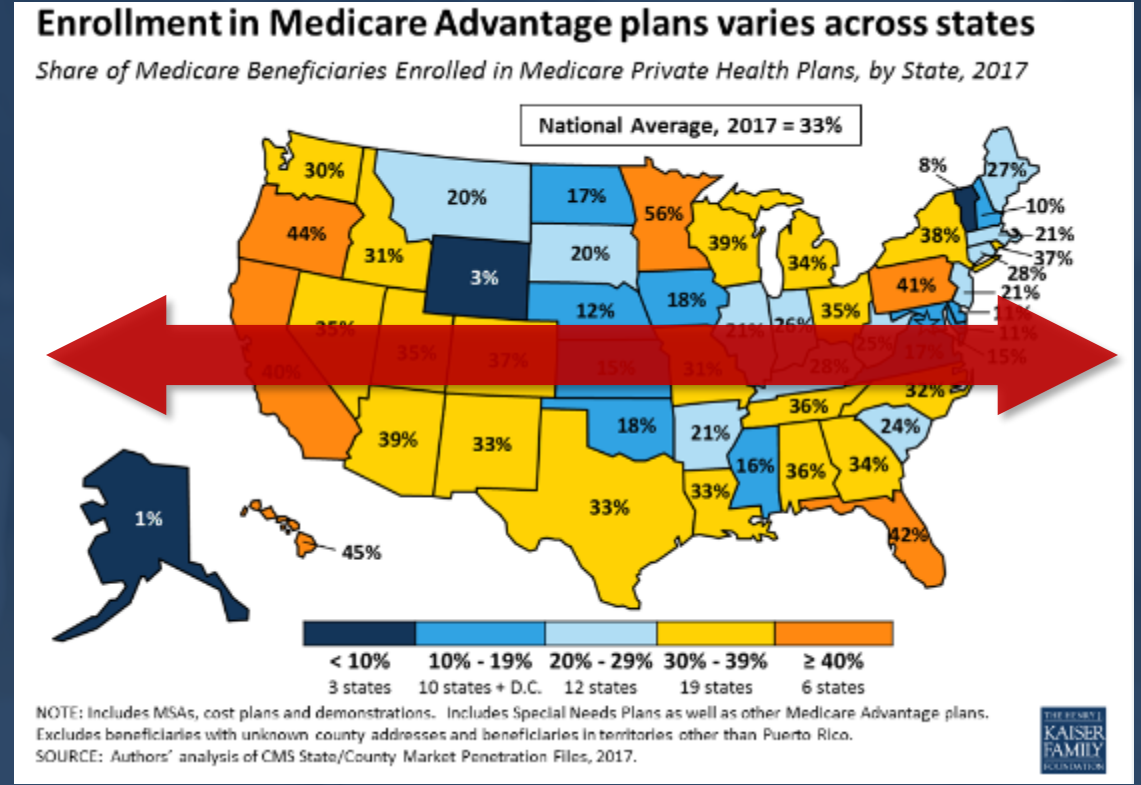
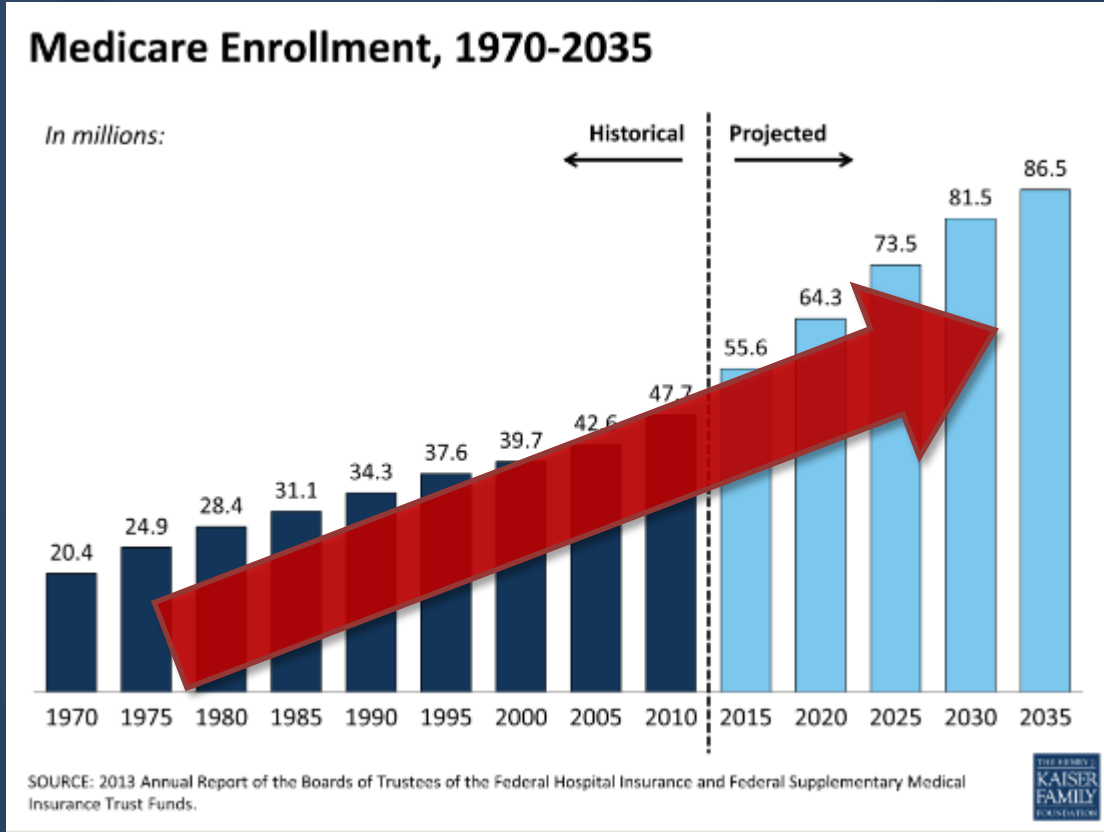
Risk scores for switchers and stayers, 2009-2013



• Source. Authors' analysis of Medicare beneficiary summary file and risk adjustment data, 2008-2013

<https://journals.sagepub.com/doi/figure/10.1177/0046958018788640?>

Medicare and MA Enrollment Increasing

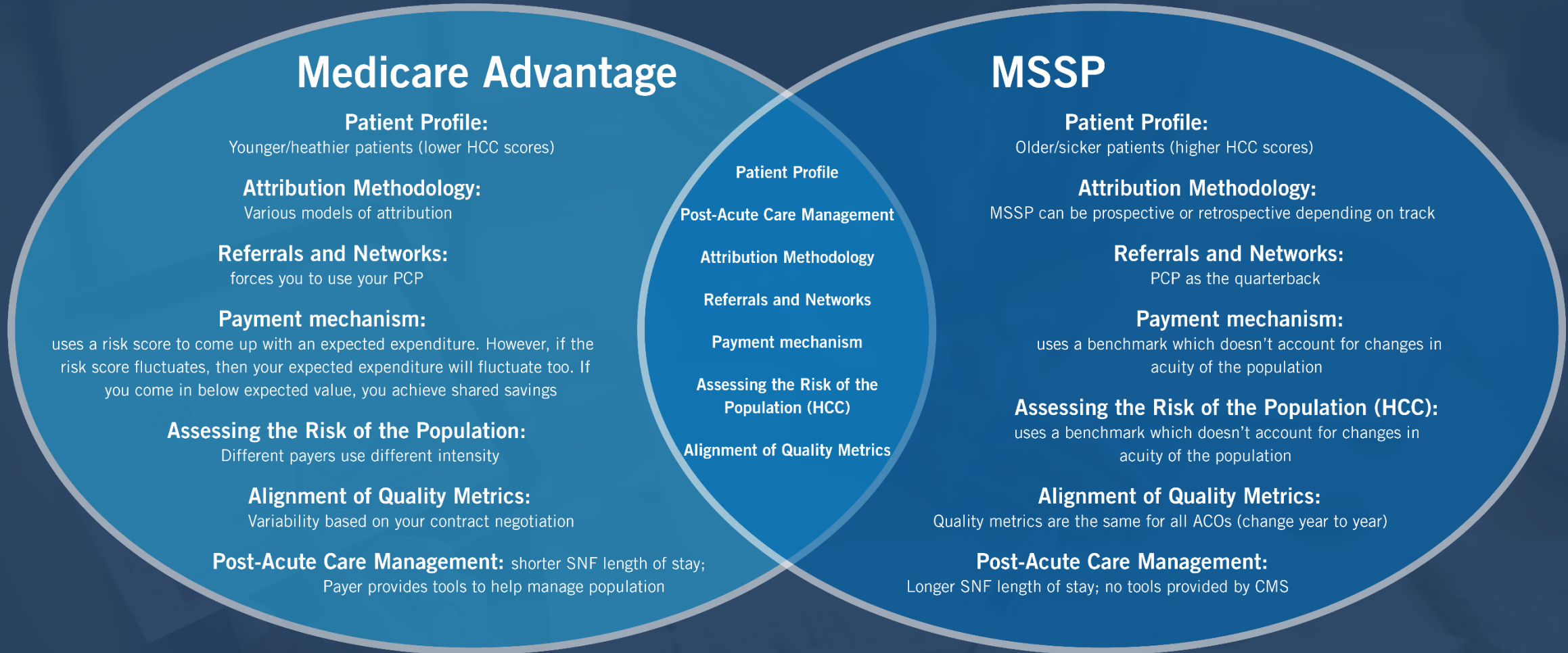


**What are the similarities
and differences?**

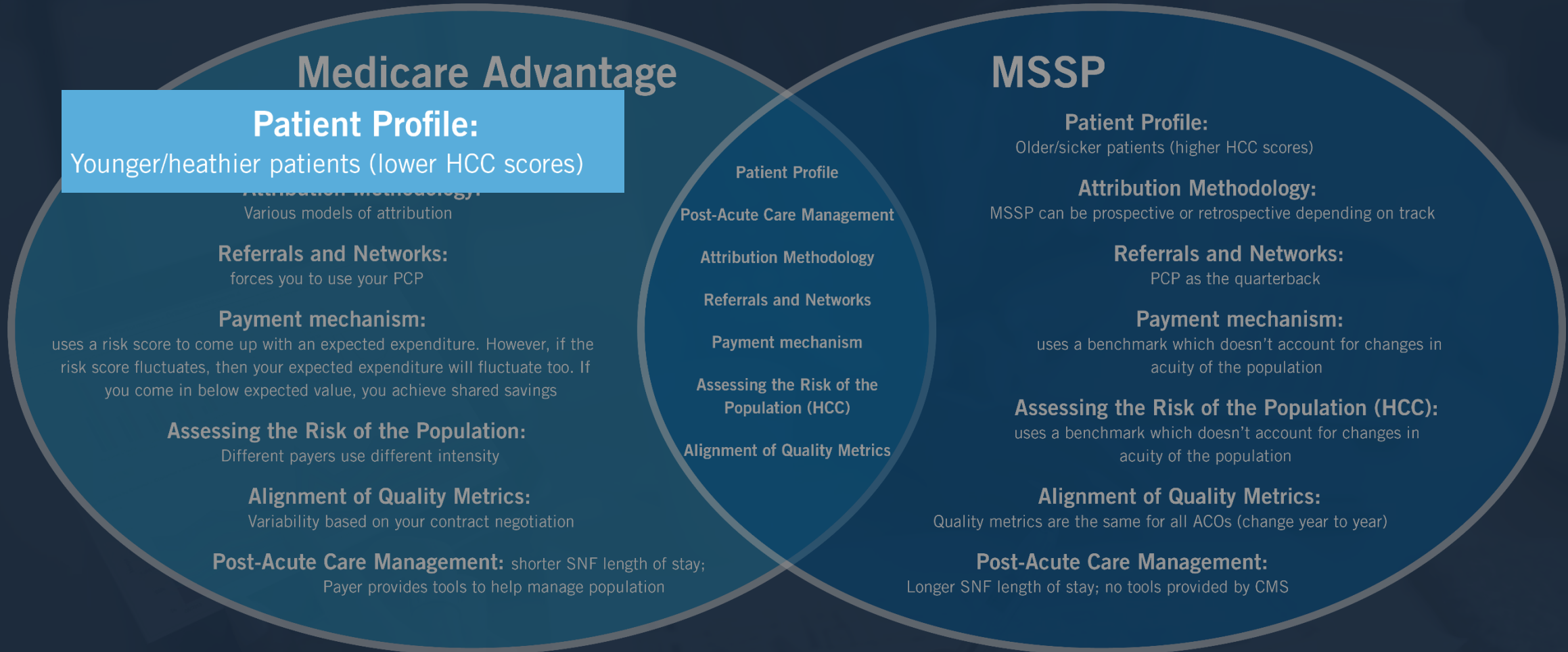
**How do you create more
alignment and parity via
contract negotiation?**



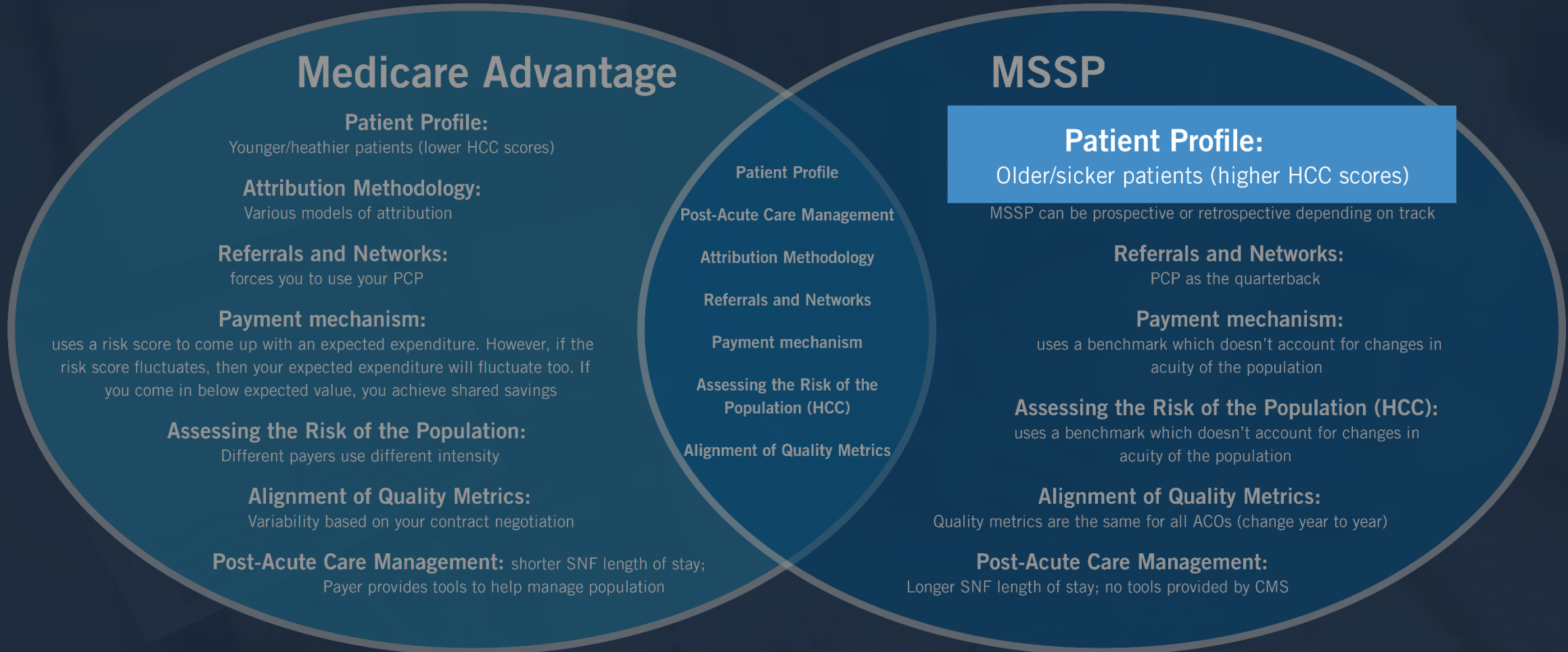
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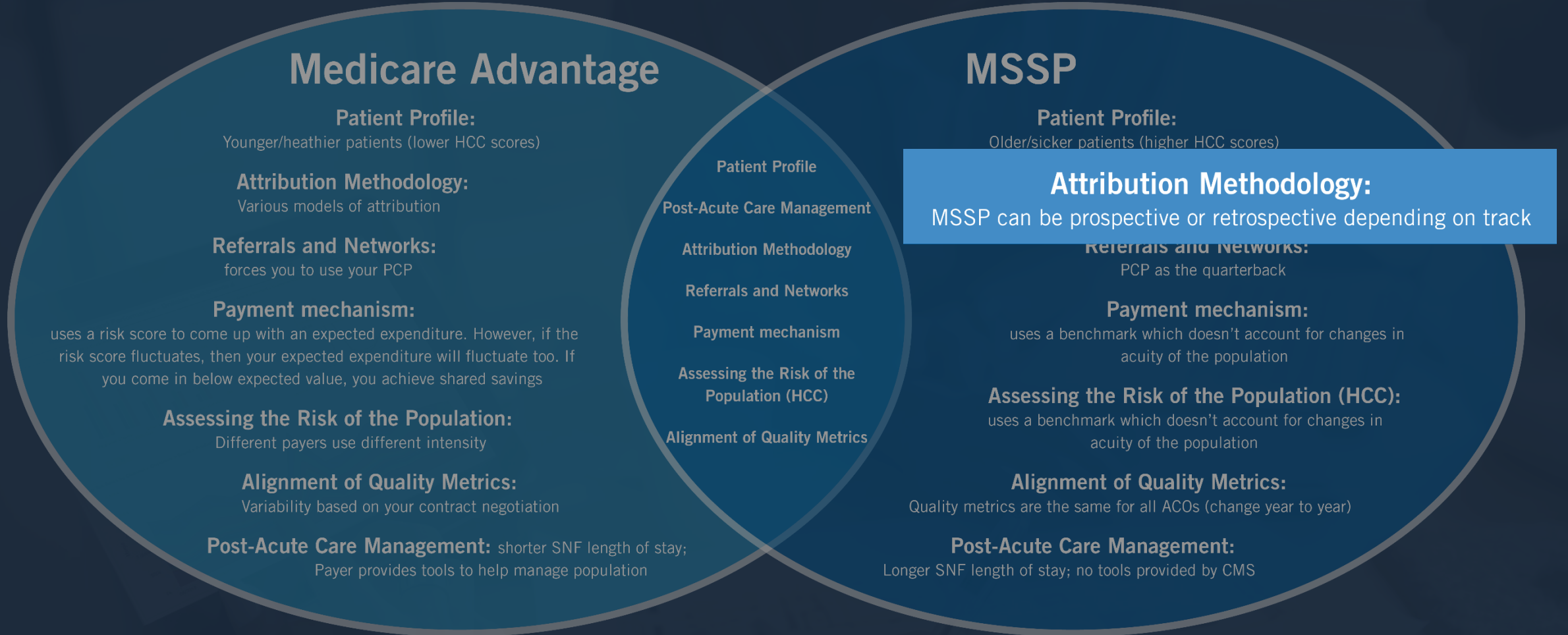
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What are the similarities and differences?

Medicare Advantage

Patient Profile:

Younger/healthier patients (lower HCC scores)

Attribution Methodology:

Various models of attribution

Referrals and Networks:

forces you to use your PCP

Payment mechanism:

uses a risk score to come up with an expected expenditure. However, if the risk score fluctuates, then your expected expenditure will fluctuate too. If you come in below expected value, you achieve shared savings

Assessing the Risk of the Population:

Different payers use different intensity

Alignment of Quality Metrics:

Variability based on your contract negotiation

Post-Acute Care Management: shorter SNF length of stay;
Payer provides tools to help manage population

MSSP

Patient Profile:

Older/sicker patients (higher HCC scores)

Attribution Methodology:

MSSP can be prospective or retrospective depending on track

Referrals and Networks:

PCP as the quarterback

Payment mechanism:

uses a benchmark which doesn't account for changes in acuity of the population

Assessing the Risk of the Population (HCC):

uses a benchmark which doesn't account for changes in acuity of the population

Alignment of Quality Metrics:

Quality metrics are the same for all ACOs (change year to year)

Post-Acute Care Management:
Longer SNF length of stay; no tools provided by CMS

Patient Profile

Post-Acute Care Management

Attribution Methodology

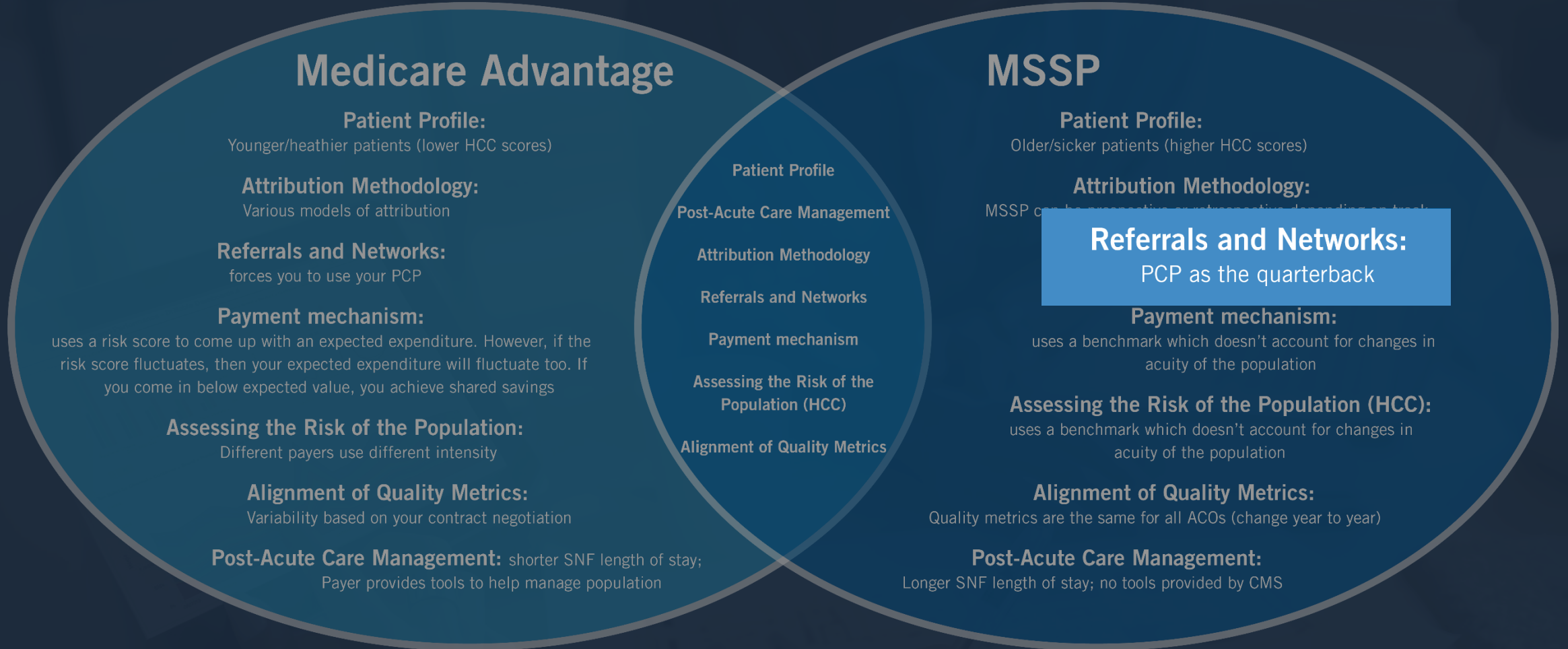
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Patient Profile
Post-Acute Care Management
Attribution Methodology
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Payment mechanism
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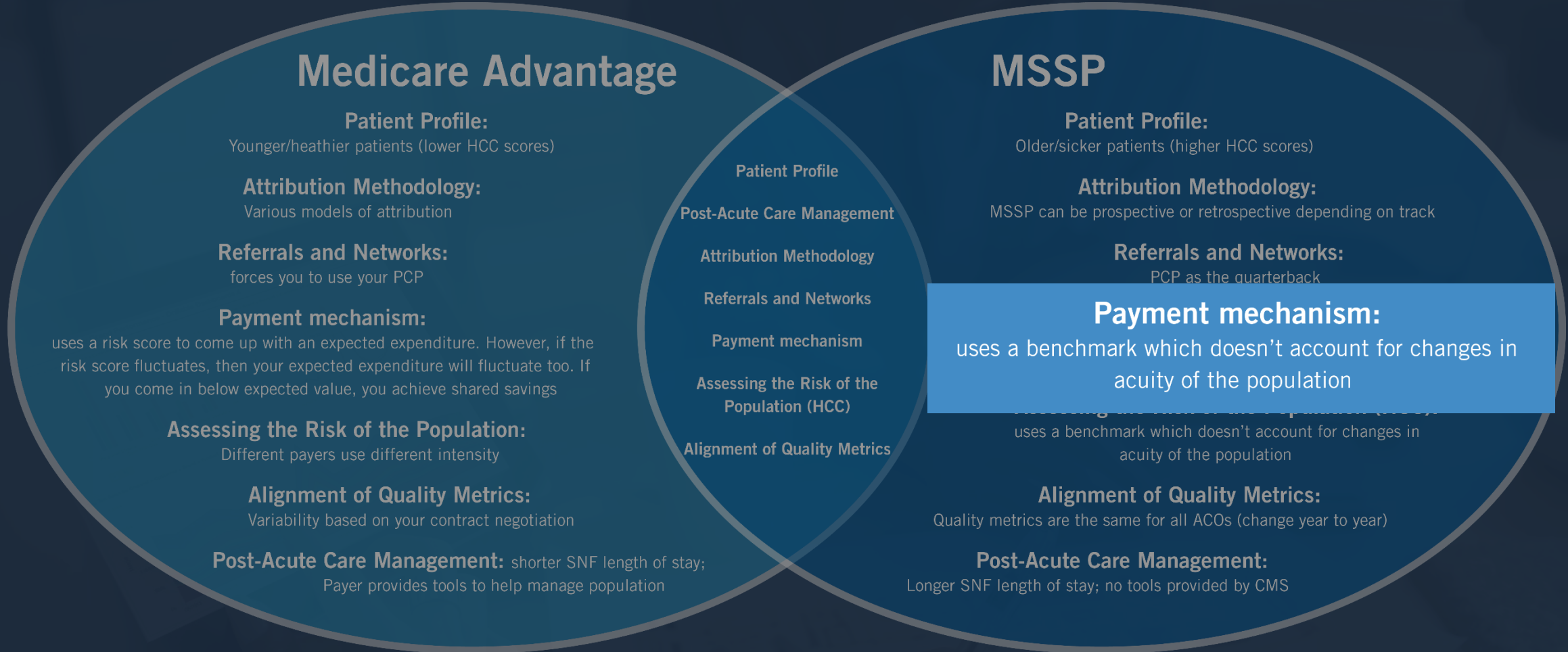
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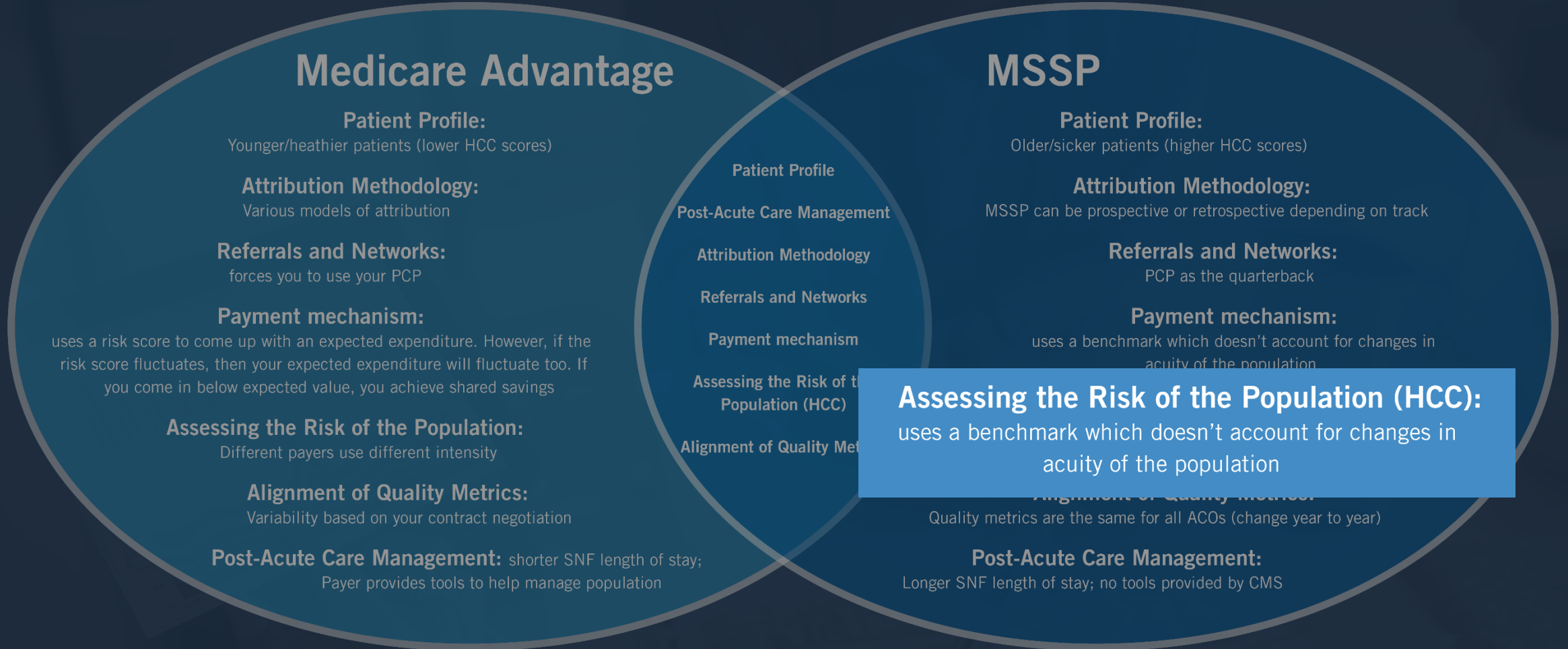
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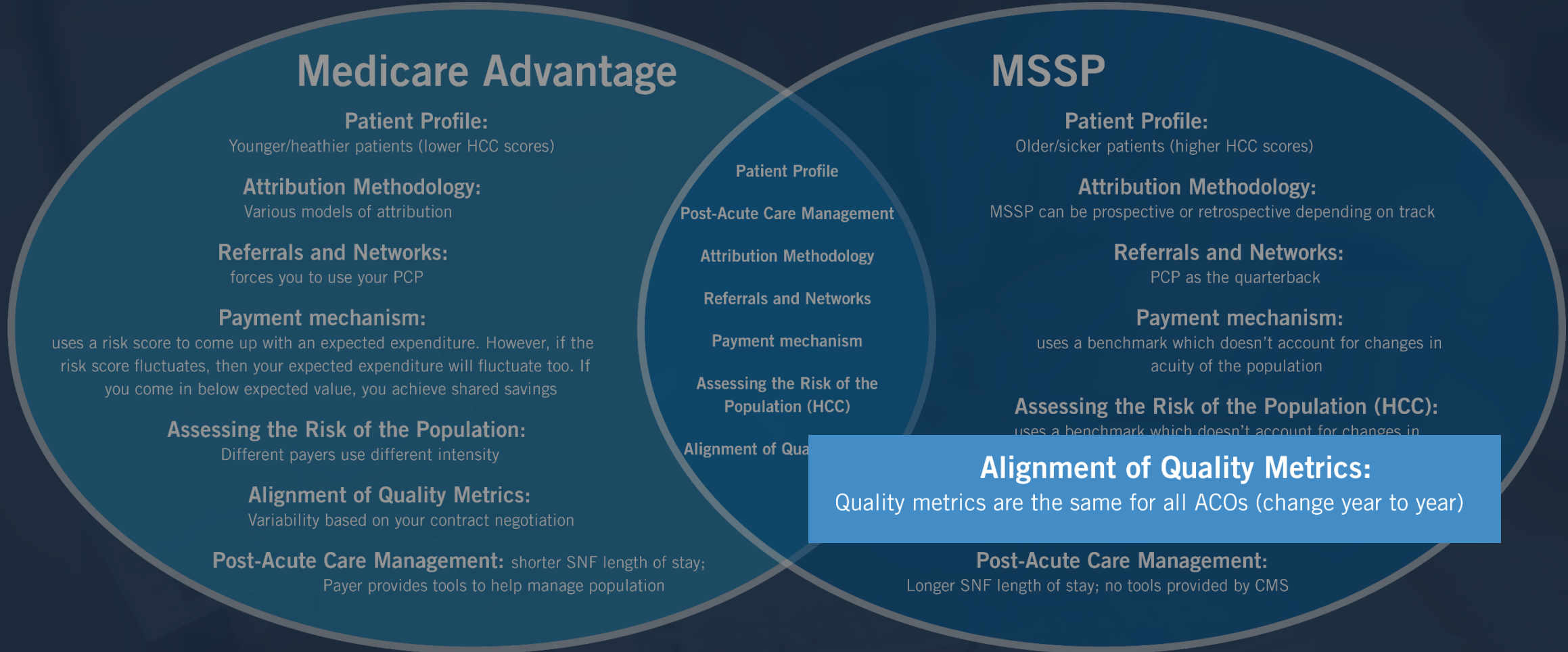
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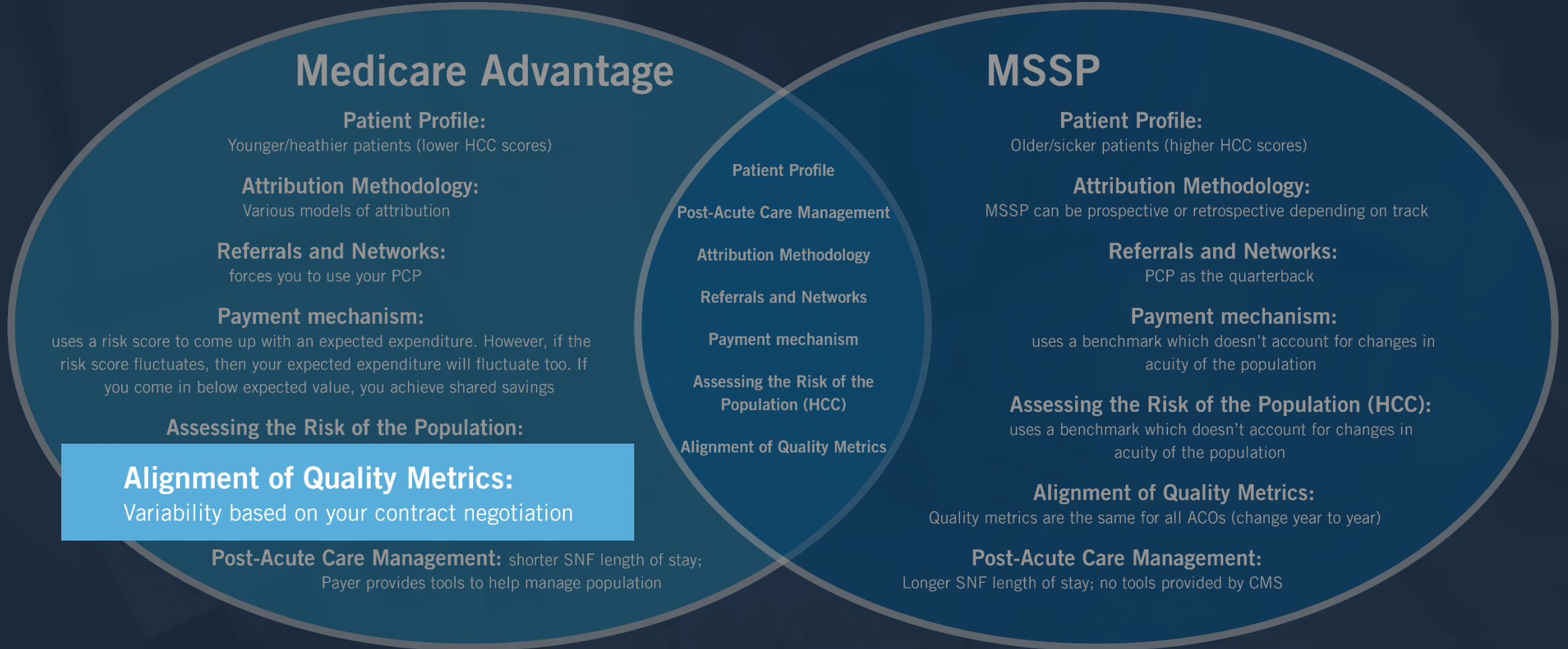
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Poll Q3:

Have you been able to align your quality metrics across payers?

Select one

- **A) yes**
- **B) no**

What resources and infrastructure are required?



Resources and Infrastructure

Care
Management

Social
Determinants
of Health

Compliance

Patient
Engagement

Provider
Network
Engagement

Office
Workflow

Data
analytics

Salient Healthcare Dashboard



What does Salient Offer?

- **Performance management solution for value-based payment models**
- **Can incorporate multi-payer data into one solution**
- **Data warehousing**
- **2 Data interfaces:**
 - Salient Interactive Miner
 - Dashboards
- **Free 45-day trial for our ACO clients**
 - Training available online and in person
 - Complimentary assessment
- **Extensive analysis and technical in-house support**
- **Continuous system upgrades and enhancements**

The Why

- More and more organizations have multi-payer contracts that need to align in a way that physicians can practice in their day-to-day function without having to perform to contract specifics.
- Effort to decrease physician burden whether it's having to log into multiple system or having to comply with multiple or different quality metrics
- Initiatives should be support and generated with physician buy-in from the start of all programs

“The key to high performance is timely and specific knowledge in the hands of the value creator at the point of value creation.”

- Guy Amisano, CEO, Salient Management Company

Thank You

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<https://www.acoexhibithall.com>



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