MCO Perspective: DSRIP and Value-Based Contracting

Robert Wells
Manager, Provider Performance

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Provider Performance Team

- Formed two years ago, Superior’s Provider Performance department is a specialized team comprised of data analysts, provider outreach specialists and performance improvement specialists.

- Provider Performance creates and implements Superior’s provider incentive contracts.

- Transformation Projects is the team that focuses on State-directed programs such as the Network Access Improvement Program (NAIP), Quality Incentive Payment Program (QIPP), Foster Care Centers of Excellence (FCCE) and Delivery System Reform Incentive Payment program (DSRIP) collaboration opportunities.
Value-Based Initiatives

• Quality and Utilization Bonus Programs
  – Pay-for-Performance (P4P) programs reward physicians or groups for achieving quality and network utilization goals.
    • Example: Bonuses for exceeding improving on quality measures such as HEDIS, 3M VIS.

• Shared Savings Programs
  – Providers earn shared savings for reducing unnecessary utilization and improving or maintaining quality.
    • Using 3M technology, target utilization and quality thresholds are created. If the provider exceeds the utilization target and meets a quality threshold Superior will share savings with the provider.
Value-Based Initiatives

• Recognition Rewards Programs
  – Providers can earn bonuses if they have achieved external recognition through programs such as Bridges to Excellence (BTE) or Patient Centered Medical Home (PCMH).
    • BTE currently pays recognized diabetes providers a tiered per member/per month (PMPM) bonus for attributed members. Asthma BTE is being developed at this time.

• Gold Carding Programs
  – These programs reduce the administrative burden of prior authorization through the use of Preferred Provider Networks (PPNs).
Provider Proposals

• The Basics
  – Is your organization contracted with Superior? Do you deliver services in our regions? Can we agree to share data?

• Storytelling Through Data
  – Expect to be asked for patient-level information with Medicaid ID’s. When Superior pitches a business case internally for a new incentive project, data is key.

• Information Sharing
  – Known high utilizers or patients with a history of readmissions/frequent ER usage, etc. Superior can see a broader picture through claims data.

• Collaboration
  – Proposals are expected to be a collaboration. A lot of our incentive ideas actually originate from providers. Superior would like to hear from you!

• Start Small
  – Projects focusing on even a few members can eventually have a big impact.