



FOR YOUTH DEVELOPMENT®
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY

COMMUNITY INTEGRATION SUPPORTING PATIENTS AND FAMILIES

THE Y AND POPULATION HEALTH:
EMERGING TRENDS AND SUPPORT
OF PHYSICIAN PAYMENT REFORM
EFFORTS



OBJECTIVES

- 1. PROVIDE A PERSPECTIVE ON THE TRENDS IN POPULATION HEALTH, AND THE ROLE OF THE Y IN HEALTH CARE TRANSFORMATION**
- 2. DISCUSS Y-USA'S INFRASTRUCTURE FOR SUPPORTING CHRONIC DISEASE PREVENTION PROGRAMS.**
- 3. DISCUSS THE EMERGING ROLE OF CBOS IN SUPPORTING CLINICAL PRACTICE CLINICAL IMPROVEMENT ACTIVITIES**
- 4. ANSWER QUESTIONS**

TRENDS IN POPULATION HEALTH: THE Y'S CHANGING ROLE

IMPACT OF HEALTH REFORM

- Health reform efforts are shifting the financial incentives from fee-for-service to payment for health outcomes
 - Value-Based Payment Contracting
 - Alternative Payment Models
- Success in a value-based payment contract requires a progressive population health strategy
- Best practice models of population health align health systems with community-based organizations to synergize efforts to address the health of targeted health risks in the community

COMMUNITY INTEGRATED HEALTH

- Comprehensive population health strategy that integrates health systems, providers, and community-based health promotion programs to address the breadth of health issues facing a population
- Elements of success:
 - Treatment strategies that fully implement primary, secondary, and tertiary prevention strategies
 - Clinical pathways to support placing members in appropriate treatment tracts - based on risk stratification
 - Deployment of evidence-based programs in community settings

THE Y'S PORTFOLIO OF EVIDENCE-BASED (RCT PROVEN) PROGRAMS

DISCOVERY

Efficacy

Validation

DEVELOPMENT

Translation

Scaling

DISSEMINATION

Dissemination

YMCA's Diabetes Prevention Program

Enhance Fitness (Arthritis Self-Management)

LIVESTRONG at the YMCA (Cancer Survivorship)

Moving For Better Balance (Falls Prevention)

Blood Pressure Self-Monitoring

Childhood Obesity Intervention

Brain Health

Parkinson's

Tobacco Cessation

Building the pool of the 21st century

THE ROLE OF THE Y IN ALTERNATIVE PAYMENT MODELS (APMS)

CLINICAL PATHWAYS SUPPORTING EVIDENCE-BASED PROGRAMS VIA ALTERNATIVE PAYMENT MODELS

- Clinical Pathways that fully implement primary, secondary, and tertiary prevention are essential to success in APMs
- Prevention efforts in community-based settings have increased adherence with sustained disease self-management impacts and are essential to a comprehensive population health strategy
 - Medicare Shared Savings ACO
 - Bundled Payment
 - Oncology Care Model

Y EVIDENCE-BASED PROGRAMS SUPPORTING APMS

- Alternative Payment Models provide financial incentives to achieve cost savings and improve clinical outcomes
- The APM model provides the ability to risk stratify the target population using clinical indicators and Medicare claims data
- Targeted high-risk beneficiaries are referred to the appropriate primary or secondary prevention program
- YMCA evidence-based programs provide the capacity to implement preventive health strategies that are proven to drive improvement of clinical outcomes and reduction in overall healthcare expenditures

Y EVIDENCE-BASED PROGRAMS INTEGRATED WITH APMS

- Medicare Shared Savings Program
 - ACO risk stratification to determine populations at-risk for diabetes
 - Enrollment in a Y DPP Program
 - Achievement of cost savings and clinical outcome improvement in the targeted ACO population
- Cardiac Care / Cardiac Rehab Bundled Payment
 - Cardiac Rehab Shared Space
 - Blood Pressure Self-Monitoring Program

INTEGRATION WITH APMS (CONT.)

- Oncology Care Model
 - **LIVESTRONG®** at the YMCA
 - Improved incentives for improved outcomes for beneficiaries diagnosed with cancer
 - Support and Navigation activities
- Comprehensive Joint Replacement Bundled Payment
 - Moving For Better Balance Program – supporting knee replacement beneficiaries during days 61 – 90 of a bundled payment episode

**SUPPORTING
MACRA CLINICAL
IMPROVEMENT
ACTIVITY REQ.**

MACRA – MEDICARE ACCESS AND CHIP REAUTHORIZATION ACT

- Establishes a Merit Incentive Program
 - First Performance period begins January 1, 2017
- Provider Reimbursement will be adjusted based on a defined scoring methodology
- Links Provider Payment to Outcomes
- Requires clinical practices to engage in clinical improvement activities
- Practice Transformation efforts support successful participation in MIPS payment model

CLINICAL IMPROVEMENT ACTIVITIES (CIA)

- Practices will be graded based on their performance in each CIA:
 - Expanded Practice Access
 - Population Management
 - Care Coordination
 - Beneficiary Engagement
 - Patient Safety and Practice Assessment
 - Achieving Health Equity
 - Emergency Response and Preparedness
 - Integrated Behavioral and Mental Health

EXAMPLE CLINICAL INTEGRATION PATHWAY SUPPORTING MIPS

- Practice Identification of population that has risk factors for diabetes
- Clinical pathways and E.H.R decision support tools that support provider referral to YMCA evidence-based DPP
- YMCA receipt of referral from provider E.H.R using electronic referral to Y E.H.R (Athena Health)
- Clinical documentation of delivery of DPP services to referred consumer
- YMCA E.H.R used to document services with summary report submitted to the referring provider

PROVIDER INCENTIVES FOR CLINICAL INTEGRATION

- YMCA as preferred community provider of evidence-based programs throughout the broad spectrum of the population supports the achievement of the following clinical improvement activities
 - Population Health
 - Care Coordination
 - Health Equity

Y-USA'S MANAGEMENT SERVICES ORGANIZATION

THE LATEST INNOVATION...

Authorized plan for Y-USA to **assume functions of a Management Services Organization (MSO)** -- providing **administrative, business, and technology services** to local Ys to enable them to receive third party payment for the delivery of the YMCA's DPP and other chronic disease prevention programs.

Local Ys	Chronic Disease Prevention Program Team
<ul style="list-style-type: none">• Program delivery• Track participant outcomes in technology system• Raise funds to assist with sustainability in absence of 3rd party payors.	<ul style="list-style-type: none">• Train Ys to deliver DPP and other evidence-based programs• Management and administration support• Coordinate with existing TPA for technology support• Provide reporting technical assistance to Ys for reporting to partners, CDC, etc.



“Build”

“Buy”

FUNCTIONS OF THE MSO

Local Y Business
Function

Program Delivery

Payor
Engagement

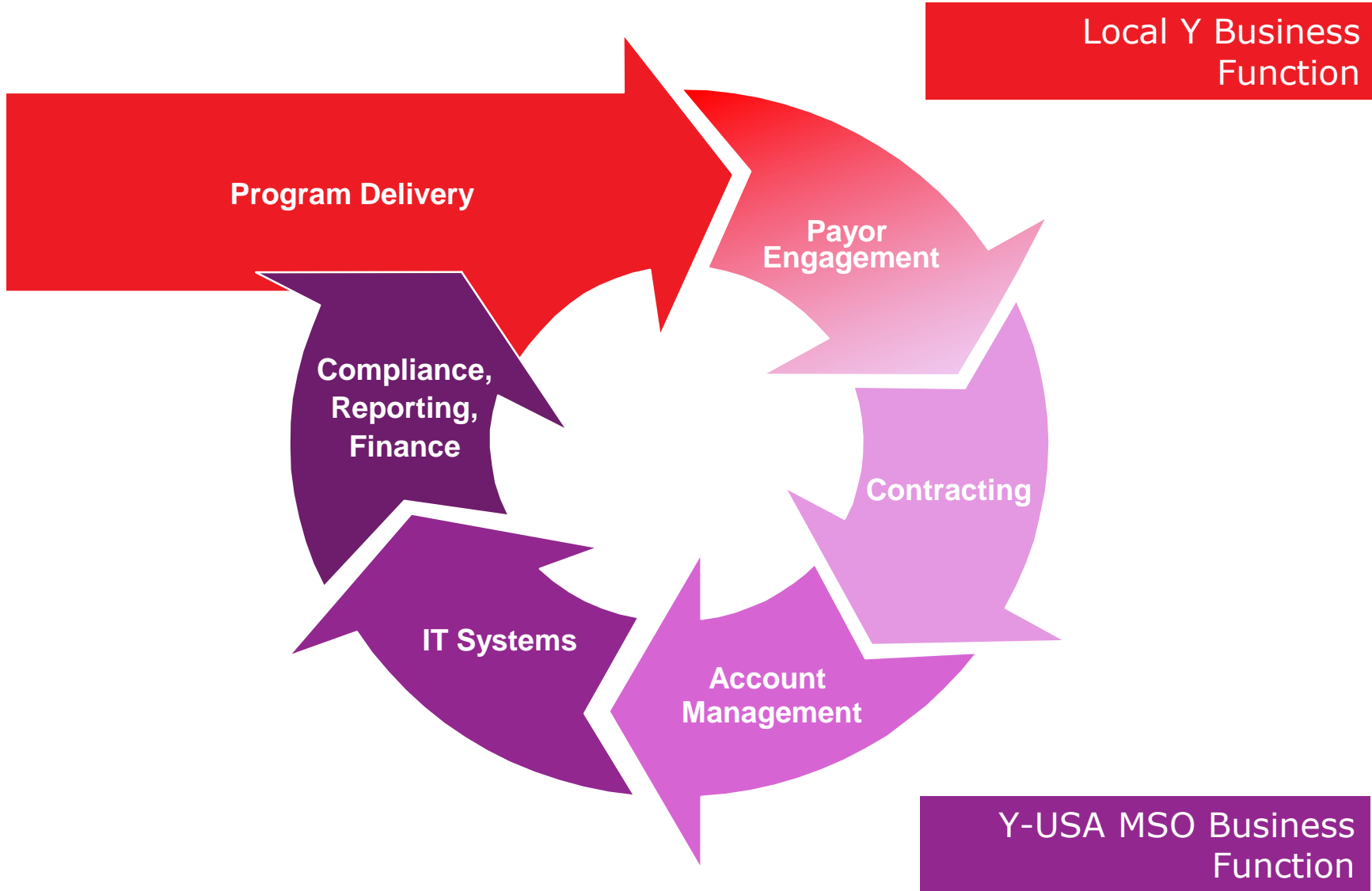
Compliance,
Reporting,
Finance

Contracting

IT Systems

Account
Management

Y-USA MSO Business
Function



EXAMPLE OF CLINICAL INTEGRATION

SHARED SPACE EXAMPLE

YMCA of Greater Charlotte:

- Existing shared space arrangement with a large health system serving their market
 - Health System provides direct medical services and preventive health services to community residents, inside the YMCA
- Relationship will expand to include a targeted focus of physician referrals to evidence-based prevention programs that are sustained through reimbursement contracts and inclusion in Alternative Payment Models
- Population Health Strategy includes providing targeted physician referrals to evidence—based interventions at the YMCA
- The YMCA will be a participant in the health system clinically integrated health network

QUESTIONS



**THANK
YOU**