

**FALL 2016** 



A METROCARE PHYSICIANS PUBLICATION

## What a Singular Approach to Value-Based Contracting Means for **YOUR** Practice

The most significant factor in MetroCare's decision to become clinically integrated was the desire to support physician members with the value-based transition.

The reimbursement models have changed and are increasingly affecting payment levels for delivering measurable quality, and through that quality, the ability to lower cost.

A clinically integrated network such as HealthChoice Trilogy uses the strengths of the individual practices and MLH to create a team that can offer a full complement of solutions to a patient, employer or payer - through purposeful integration and coordination of services.

Regardless of the contract – UnitedHealthCare, CIGNA, even CMS contracts – there is a singular approach to achieve success. Though there may be subtle differences between contracts, a comprehensive strategy for practices has been developed and is being deployed. For years, MetroCare has been preparing for this shift and has invested significant resources to help practices sustain success within these new reimbursement models.

"It's actually a very simple, straightforward proposition for MetroCare members. All they need to do is engage MetroCare and plug into our resources. We will provide the support, guidance and tools to more effectively make the transition to value-based care," said George Wortham, III MD, Executive Director "There is no reason for practices to go it alone with all of the support available."

#### **METROCARE**

30 clinical metrics

Cost savings initiatives

Preparing since 2013

Clinical and cost decisions decided by MetroCare

#### **CONTRACT A\***

10 of the 30 clinical metrics w/variances
Specific cost savings initiatives

#### **CONTRACT B**\*

12 of the 30 clinical metrics w/variances Specific cost savings initiatives

#### **MACRA/MIPS**

Practice selected own metrics

Specific cost savings initiatives

\*Contracts negotiated by HealthChoice with approval from MetroCare

#### **METROCARE**

Clinical support, point of care tool (physician support tool), defined data targets, practice support and training to address all clinical and cost objectives

eg. – same diabetes care approach for all patients, regardless of payers, to assure metrics are met

Specific cost savings initiatives communicated to network and monitored

MetroCare's significant investment to support practices

### PHYSICIAN PRACTICE

Create needed practice
- specific changes
to provide singular
approach to clinical
and cost initiatives

Utilize MetroCare tools and resources for assistance

Practice success in simultaneous value – based contracts via singular approach

## **Network Quality Initiatives**

MetroCare is setting in motion our strategy for your success in your new value-based contracts. We will be contacting you very soon to involve you directly.

Our initial steps:

- Breast Cancer Awareness month: In October we
  will be making available to you sources for patient
  education, direction for setting up mammograms,
  and materials to motivate your patients. Other
  awareness initiatives will be planned in the future
  (colorectal and cervical cancers).
- Diabetes education will assist your MAs in understanding the reasoning behind what they do for diabetic patients and the importance of preventive care.
- Vision tool training for your practice will allow you to view your patients in relation to quality measures and recommended care guidelines applicable to multiple contracts.



# MetroCare/HealthChoice finalizes Value-Based Contract with Cigna

MetroCare Physicians' first value-based contract with United HealthCare went live in June 2016. In the past month, the Contract Review Committee and Board of MetroCare have agreed to pursue a similar agreement with Cigna.

Cigna became effective October 1, 2016.

Quick Facts About the Cigna Contract:

- The Cigna contract is similar to the one held between HealthChoice and UnitedHealthCare as they are upside only, meaning that practices do not bear any financial risk, but could share in potential savings.
- A practice's base agreement and Cigna fee schedule will remain unchanged (just like the United deal).
- Savings are offered for both contracts by achieving quality goals (reviewed by MetroCare). When the CIN network as a whole meets the quality goals and savings has occurred, this pool of money is redistributed amongst MetroCare / Trilogy Physicians.



- A significant difference between the United and Cigna contracts is that Cigna will pay a small care coordination fee (CCF) during the 1st year that will help fund the ramp up of training, central services and support for the practices.
- MetroCare's singular approach to value-based contracts will help practices seamlessly participate in all contracts simultaneously including Cigna.

HealthChoice offers care management programs to help you understand and manage your medical conditions, navigate a complex healthcare system, follow prescribed treatment plans, and lead a healthy lifestyle.

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