



Capital **BLUE** 

VALUE BASED CANCER  
CARE:  
A PAYER PERSPECTIVE

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# CAPITAL BLUECROSS

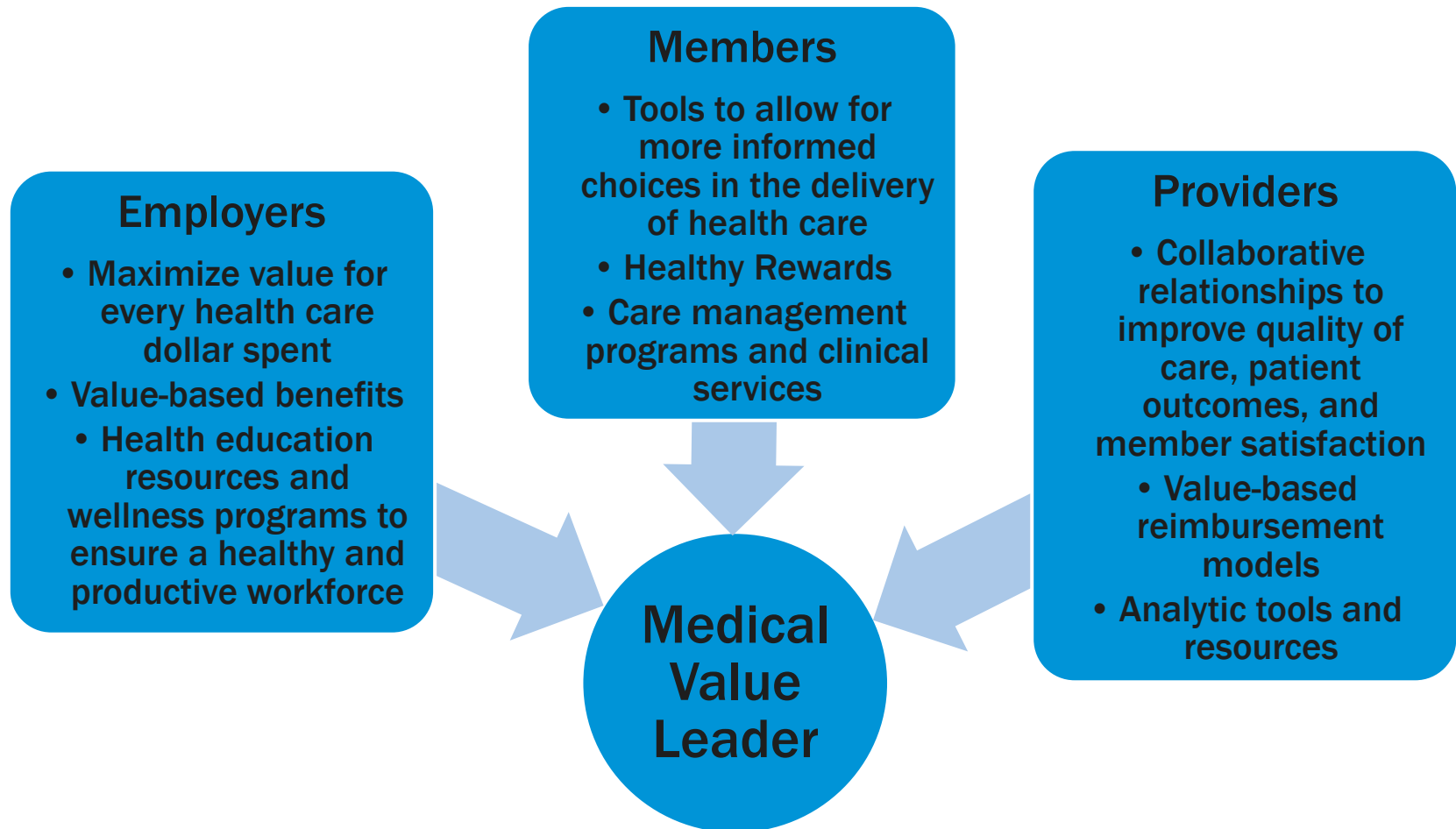
## **Mission:**

**To improve the health and well-being of our members and the communities in which they live**

## **Vision:**

**To be a member-focused health and medical value leader and effect superior care delivery by driving innovation throughout the system**

# ALIGNING STAKEHOLDERS



# PILOT PROGRAM GOALS

- Implement an Oncology Patient-Centered Medical Home (OPCMH) model within our network
- Improve quality through the implementation of standardized, evidence-based processes
- Improve patient experience and engagement through shared decision-making and patient-centered processes
- Recognize and enhance value in cancer care
- Control cost of care by reducing avoidable complications resulting in ED visits or hospitalizations
- Align with other value-based programs and CMS' Oncology Care Model (OCM)

# PILOT PROGRAM COMPONENTS

- **Three year engagement –**
  - Four network practices
  - Oncology Management Services (OMS) support
- **2 part program:**
  - Initial performance incentives based on achieving transformation milestones
  - Subsequent performance evaluation incorporating tiered reimbursement based on:
    - Ongoing validation of practice transformation adherence
    - Triple Aim quality performance metrics
    - Total cost of care

# PRACTICE TRANSFORMATION ACTIVITIES

- Pre-visit planning
- Optimal use of electronic medical records
- Appropriate telephone triage
- Patient self-assessment questionnaires / symptom grading
- Patient instruction and education materials
- Symptom management algorithms
- Adherence to evidence-based guidelines
- Institute of Medicine compliant care management plans that include goals of therapy and treatment intent
- Coordinated transitions of care planning
- Optimal patient navigation
- Tracking test results and consultation reports to completion

# OCM-ALIGNED QUALITY PROGRAM COMPONENTS

## Care and Preventive Quality Measures

OCM-1-Patients with all-cause hospital admissions within the 6-month episode

OCM-2-Patients with all-cause ED visits or observation stays that did not result in a hospital admission within the 6-month episode

OCM-3-Patients who died who were admitted to hospice for 3 days or more \*\*

NQF-0210-Patients who died from cancer receiving chemotherapy in the last 14 days of life

NQF-0211-Patients who died from cancer with more than one ED visit in the last 30 days of life

NQF-0213-Patients who died from cancer admitted to the ICU in the last 30 days of life

## Transition of Care

Ambulatory Care - Emergency Department Visits/1000 (Commercial)

Ambulatory Care - Emergency Department Visits/1000 (Medicare)

Plan All-Cause Readmissions (Commercial)

Plan All-Cause Readmissions (Medicare)

## Patient Satisfaction and Experience of Care

Overall Rating of Doctor

Composite: Getting timely appointments, care and information

Composite: How well doctors communicate with patients

Composite: Helpful, courteous and respectful office staff

Doctor's office followed up to give test results

\*\*Measure applies to commercial population only.

# Thank you