What Will the Future Look Like

California Public Health Leadership Institute

David Saïen, CMS Regional Administrator
The “Triple Aim”

Population Health

Experience of Care

Per Capita Cost
The Triple Aim Goals of CMS

• Better Care
  – Patient Safety
  – Quality
  – Patient Experience
• Reduce Per Capita Cost
  – Reduce unnecessary and unjustified medical cost
  – Reduce administrative cost thru process simplification
• Improve Population Health
  – Decrease health disparities
  – Improve chronic care management and outcome
  – Improve community health status
HITECH ACT

- Regional extension centers
- Workforce training
- Medicare and Medicaid incentives and penalties
- State grants for health information exchange
- Standards and certification framework
- Privacy and security framework

Adoption of EHRs

Meaningful use of EHRs

Exchange of health information

Research to enhance HIT

Beacon Community Program

- Improved individual and population health outcomes
- Increased transparency and efficiency
- Improved ability to study and improve care delivery
Driving Healthcare System Transformation

Un-managed

- Fee For Service
  - Inpatient focus
  - O/P clinic care
  - Low Reimbursement
  - Poor Access and Quality
  - Little oversight
- No organized networks
- Focus on paying claims
- Little Medical Management

Fee For Service

Coordinated Care

- Organized care delivery
  - Aligned incentives
  - Linked by HIT
- Integrated Provider Networks
- Focus on cost avoidance and quality performance
  - PC Medical Home
  - Care management
  - Transparent Performance Management

Accountable Care

Patient Centered

- Patient Care Centered
  - Personalized Health Care
  - Productive and informed interactions between Patient and Provider
  - Cost and Quality Transparency
  - Accessible Health Care Choices
  - Aligned Incentives for wellness
- Multiple integrated network and community resources
- Aligned reimbursement/care management outcomes
- Rapid deployment of best practices
- Patient and provider interaction
  - Information focus
  - Aligned self care management
  - E-health capable

Integrated Health
Center for Innovation

Purpose and Mission

PPACA P.L. 111-148 Section 3021 Establishment of the Center for Medicare and Medicaid Innovation within CMS

- To test innovative payment and service delivery models that reduce program expenditures under the applicable titles.
- Preserve or enhance the quality of care.
- Preference shall be given to models that also improve coordination, quality, and efficiency of health care services furnished to Medicare and Medicaid beneficiaries.
CMS’s Regulatory Requirements: Defining ACOs

CMS must define:

– ACO eligibility criteria
– Quality and reporting requirements
– Methods for assignment of Medicare beneficiaries
– Payments and treatment of services
– Eligibility for shared savings
– Other issues determined by the Secretary
Questions?
Thank you!

David Saïen
CMS Regional Administrator,
San Francisco, Region IX

Centers for Medicare & Medicaid Services
90 Seventh Street
Suite 5-300
San Francisco, CA 94103

david.sayen@cms.hhs.gov
(415) 744-3501
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