



# PRIMARY CARE REFORM COLLABORATIVE

JULY 15, 2024



# AGENDA

- I. Call to Order
- II. Board Business- May 13, 2024, Meeting Minutes Approval/Meeting Schedule
- III. Workgroup updates
- IV. Cristine Vogel (OVBHC) Final 2023 Primary Care Spend- 20 min.
- V. Payors Forum – 10 min each payor
- VI. Questions and Answers- 15 min.
- VII. Next Meeting September 16, 2024, 3pm- 5pm



# CALL TO ORDER

- Dr. Nancy Fan, Chair
- Senator Bryan Townsend, Senate Health & Social Services Committee
- Representative Kerri Evelyn Harris, Chair House Health & Human Development Committee
- Andrew Wilson, Division of Medicaid and Medical Assistance
- Dr. James Gill, Medical Society of Delaware
- Dr. Rose Kakoza, Delaware Healthcare Association
- Vacant, Delaware Nurses Association
- Kevin O'Hara, Highmark Delaware
- Steven Costantino (Proxy for Secretary Josette Manning)
- Faith Rentz, State Benefits Office/DHR
- Deborah Bednar, Aetna
- Maggie Norris-Bent, Westside Family Healthcare
- Cristine Vogel (Proxy for Insurance Commissioner Trinidad Navarro)



# BOARD BUSINESS

- May 13 2024, Meeting Minutes Approval
- Meeting Schedule



# WORKGROUPS UPDATE

Name/ Affiliation	Stakeholder Representation	Work Group
Lori Ann Rhoads The Medical Society	Provider Group	Value Based Care Model
Anthony Onugu United Medical	Provider Group/ ACO	Value Based Care Model
Kathy Willey *	ACO	Value Based Care Model
Andrew Wilson DHSS	DHSS Representation	Value Based Care Model
Dr William Ott	Payor	Value Based Care Model
Kristin Dwyer Nemours	Payor	Value Based Care Model
Brian Frazee, DHA	Provider Group	Value Based Care Model
Cristine Vogel, OVBHC	DOI Respresentation	Value Based Care Model
Cari Miller, DHIN Lab Corp Chair	Health Information Technology	Quality Measures and Provider Benchmarks
Lara Brooks, CVS Health/Aetna	Payor	Quality Measures and Provider Benchmarks
Dr Michael J. Bradley	Provider	Quality Measures and Provider Benchmarks
Donna Gunkel, United Medical	Provider/ ACO	Quality Measures and Provider Benchmarks
Maggie Norris Bent, WestSide Family H	Provider	Communications
Mark Thompson, Medical Society of D	Provider	Communications
Dionna Reddy, DHCC	DHSS Representation	Communications
Dr. Diane Bohner, Christiana Care	Employer Physician	Practice Model
Lisa Adkins, Nemours	Health Care System	Practice Model
Dr. Susan Conaty-Buck,	Independent Nurse Practitioner	Practice Model





# 2023 Primary Care Investment: Results & Lessons Learned

Cristine Vogel, MPH, CPHQ

Director, Office of Value-Based Health Care Delivery

July 2024

# AGENDA



- 2023 Final Primary Care Investment Results
- 2023 Key Findings from Year One
- Lessons Learned and Improving 2024



***Striking a balance with investing more dollars  
into our primary care system  
while improving the value of care provided***



# 2023 Final Primary Care Investment by Carrier



2023 Primary Care Investment (Delaware Attributed Members)						
		Aetna	Cigna	Highmark	UHC	TOTAL
All Markets	Total Spend %	9.6%	9.7%	8.0%	9.1%	8.2%
	Total Payments	\$1,866,000	\$758,400	\$19,576,000	\$155,920	\$22,356,320
	Total DE Members	2,660	1,000	26,700	225	30,585

## Key Findings for 2023:

- Over \$22 million was invested in primary care during Year One
- All market segments combined for each carrier show that Aetna, Cigna, and United HealthCare were above the 8.5% requirement; Highmark fell short of the 8.5%
- Approximately 30,000 DE members were attributed, this represents only about 35% of patients that could be attributed to PCPs

# 2023 Final Primary Care Investment by Carrier (Delaware Attributed Members)



		Aetna	Cigna	Highmark	UHC
Individual	Spend %	9.9%		7.3%	
	Payment Amount	\$1,551,000		\$10,800,000	
	Shortfall	\$0		\$1,724,000	
	DE Members	2,100		14,800	
Large Group	Spend %	8.2%	9.7%	8.4%	8.9%
	Payment	\$315,000	\$758,400	\$3,955,000	\$71,600
	Shortfall	\$11,500	\$0	\$28,900	\$0
	DE Members	560	1,000	5,300	95
Small Group	Spend %			9.6%	9.3%
	Payment			\$4,821,000	\$84,320
	Shortfall			\$0	\$0
	DE Members			6,600	130
All Markets	Total Spend %	9.6%	9.7%	8.0%	9.1%
	Total Payments	\$1,866,000	\$758,400	\$19,576,000	\$155,920
	Total DE Members	2,660	1,000	26,700	225

# Highmark's Individual Market Data



Highmark Individual Market 2023		
	2023 Projections PMPM	2023 Final PMPM
Incentive Programs	\$0.63	<b>\$0.39</b>
Capitation	\$0	<b>\$0</b>
<b>Risk Settlements</b>	\$10.53	<b>\$0.19</b>
Care Management	\$23.41	<b>\$20.09</b>
Other	\$4.00	<b>\$5.11</b>
Primary Care: Claims	\$32.96	<b>\$34.85</b>
Primary Care: Non-Claims	\$38.57	<b>\$25.78</b>
% PC Spend	8.6%	<b>7.3%</b>

## Key Findings:

- Providers earned significantly less than projected on performance-based payments, creating over \$10 PMPM shortfall or Highmark over-projected in this category
- Highmark's prospective care management payment fell short of \$3 PMPM

# 2023 Key Findings from Year One



## Key Findings:

- Spending in Primary Care has increased in 2023
  - Total population (commercial, fully insured) was 6.3% or \$42 million, up from 4.7% in 2022
  - The “attributed” group resulting in \$22 million
- By the end of 2023, all carriers had developed a value-based care program
- Most carriers engaged in quality incentive programs; Highmark and Aetna also engaged in risk settlement arrangements
- Prospective payment (capitation and care management) amounts varied from \$0 (Cigna) to \$22 PMPM (Highmark)

# Lessons Learned and Improving 2024



- Portion of the primary care spend associated with risk settlements needs to be realistic, attainable, and closely monitored
- Evaluate the impact that high-cost claimants may have within certain market segments
- Understand provider readiness and carrier value-based program designs
- Actively work with carriers so any potential shortfalls are invested into the primary care system before the year ends
- Enforcement for non-compliance will be implemented in 2024 (additional monitoring, reporting, corrective action plan or market conduct exam)

# UPDATE ON PAYOR VALUE BASED CARE MODELS AND SB 120

Medicaid

MCO representatives

Highmark

Kevin O Hara

Aetna

Deborah Bednar



# UPDATE ON PAYOR VALUE BASED CARE MODELS AND SB 120

- 1. From their perspective, where have they seen the largest increase in payments to practices*
- 2. what has been the increase in the participation ( or lack of) in Value based models since SB120*
- 3. and what would they suggest as recommendations for multiplayer alignment, which could be framed out in more detail with the workgroup.*



# QUESTIONS AND ANSWERS





# PUBLIC COMMENT



# NEXT MEETING

**MONDAY Sept 16<sup>th</sup> , 2024**

**TIME: 3:00pm – 5:00pm**

**Anchor Location:**

The Chapel

Herman M. Holloway Sr. Health and Social Services Campus

1901 N. DuPont Highway

New Castle, DE 19720





THANK YOU