

Close Collaboration is Key to Finding the Solutions to Major Healthcare Cost, Quality Issues

By J. Bart McMullan, M.D.
*Chair, High Value Patient
Centered Care Initiative
Oregon Health Leadership Council*



The national conversation around how to improve healthcare and reduce overall costs is top of mind for many Americans. While no single solution currently exists, I've learned that one thing is certain: defining a successful approach will require a collective effort by all of those involved in providing, financing and receiving healthcare. By combining the knowledge and experience of healthcare providers, health plans, hospitals, purchasing groups and patients, we can develop a new and innovative model of care that addresses the

needs of all involved.

In early October, fourteen medical groups, five health plans and four of the State's purchasing groups in Oregon will do just that by launching an unprecedented pilot program designed to improve care and reduce costs for thousands of patients across the state. The High Value Patient Centered Care initiative will focus on patients with chronic and complex conditions who sometimes don't get the care they need, and subsequently suffer negative outcomes and drive higher costs. By providing better-coordinated care, we hope to improve their satisfaction and quality of care, all while reducing costs.

This patient-centered model coordinates the work of all the individuals responsible for treating patients with these conditions. Under this pilot project, a specially trained nurse acts as a navigator, developing a personal relationship with patients to understand exactly how best to care for them. This nurse then coordinates between other members of the team, including the patient's primary care physician, medical specialists, hospitals and health plans.

The High Value Patient Centered Care project is one of the very exciting collaborations of multiple stakeholders, business, health plans, providers and the State, brought together under the Oregon Health Leadership Council (OHLHC) to reduce the rate of increase in health care costs and premiums.

This pilot program is already a remarkable project. The willingness of health plans and medical groups to quickly come together and to use a single model of care delivery and a new payment approach will allow us to focus on the most effective and efficient ways to provide care, and to measure the effectiveness of this model in improving quality and reducing costs. Success will require ongoing collaboration, coordination, transparency and collective learning. Utilization measures will be provided to each medical group on a quarterly basis to help support their work. Those measures are still in development, and will likely include the number emergency room visits and hospital readmissions (decreases will show success), level of prescriptions refilled (increases will show success), and other indicators that

demonstrate patients are receiving better up-front care.

We believe this model has a high probability of success and will be scalable to larger populations and more groups of providers. If we are as successful as others – such as the Boeing Company, which has implemented this type of program – this project should provide employers with a means to improve the health and productivity of employees.

The other projects OHLC is implementing or working on will also help address some of the health-care-related costs employers are facing. These include:

- The development of a new value-based benefit plan that is

designed to achieve up to a 10 percent reduction in premiums, while addressing the underuse of effective care, chronic care management and prevention. This benefit plan also addresses the overuse of care based on preference or supply, rather than evidence.

- The implementation of consistent clinical guidelines for high-cost medical imaging, designed to improve patient safety and reduce costs.
- Efforts to reduce the administrative costs between health plans and providers by making it easier for physicians to transact business on health plan websites.

These efforts also require collaboration among all involved to make it work. Having those closest to the issue develop solutions is a key to success. I would encourage the healthcare industry to support these and other efforts to help control costs, improve quality and improve patient satisfaction.

J. Bart McMullan., M.D has been a leader in Oregon's health care industry for over 30 years, and helped form the OHLC. He is currently the Chair of the OHLC High Value Patient Centered Care initiative. Prior to his retirement, he was President of Regence BlueCross BlueShield of Oregon.

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