



The Wellmark ACO:

Improving Quality and Reducing the Rate of Increase in Costs

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Wellmark Blue Cross and Blue Shield

Providers and Payers Working Together



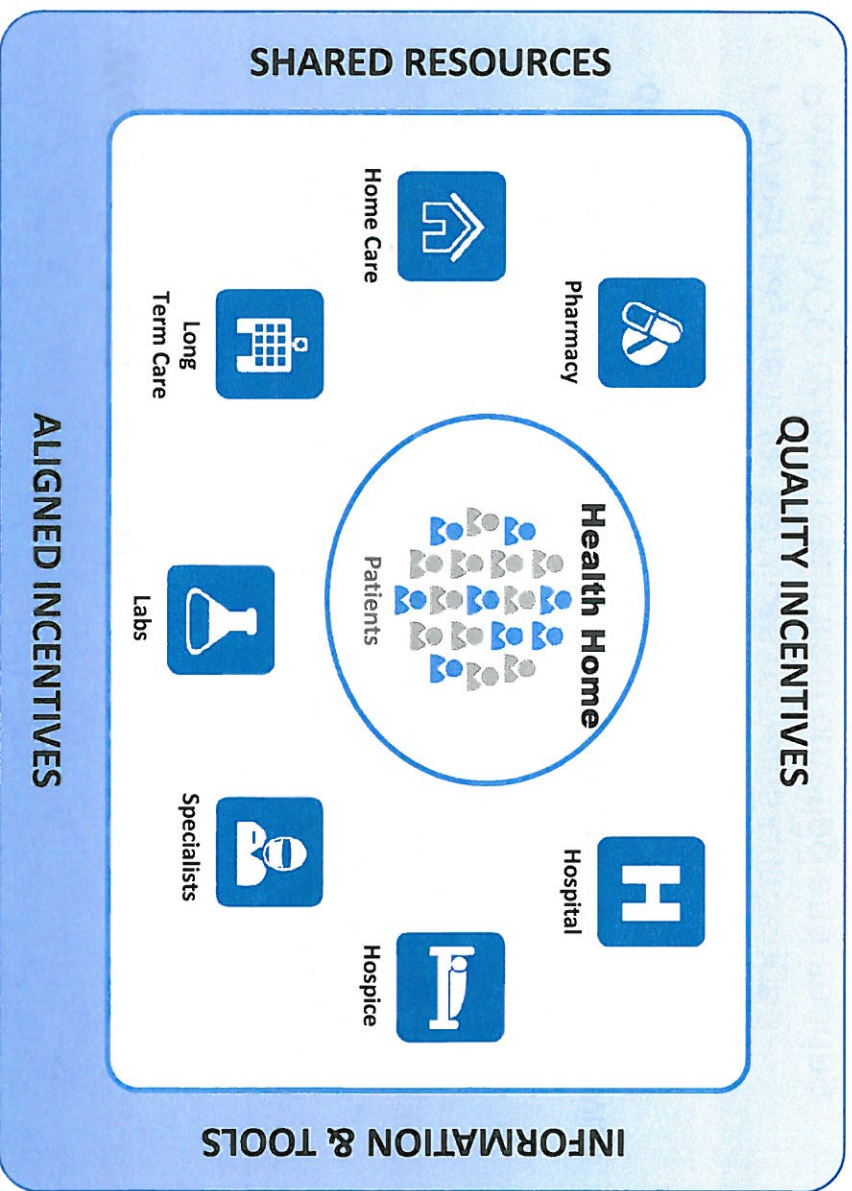
Aligned Incentives:

Create an environment for providers that incents them to deliver value-based care versus volume.

Share Scalable

Resources: Share existing care management resources and eliminate duplication.

Provide Data: Equip providers with information that assists them in managing a population.



Unique Differences Compared to Medicare



Category	Description
Fully Insured Members	<ul style="list-style-type: none">Initially, ACOs financially responsible for fully insured, attributed members only.ACO and Wellmark will “practice” and then jointly recruit self-funded employers to participate.
Two Financial Targets	<ul style="list-style-type: none">Measure financial performance against two trend targets:<ul style="list-style-type: none">Wellmark Trend TargetCPI Target
Quality Index Score	<ul style="list-style-type: none">Measure quality performance using Quality Index Score<ul style="list-style-type: none">Single composite score measuring six domains and 18 measures.Claims-based measurement of population outcomes.Influenced by provider intervention and supported by external evidence.
Potentially Preventable Events (PPEs)	<ul style="list-style-type: none">PPEs are imbedded in the Quality Index Score.Indicate an improvement opportunity in health care delivery.
Clinical Risk Groups (CRGs)	<ul style="list-style-type: none">Unique approach that incorporates the “whole” person rather than disease states.More than 1,000 CRGs than can be aggregated into nine health statuses.



Holistic Measure of the Care of a Population

- Created in collaboration with physicians
- 18 individual measures
- Measured with Z scores
- Valuable information for consumers

QIS Domains		Outcomes
1	PATIENT EXPERIENCE	Studies have shown that patient experience has an impact on clinical outcomes – the better the experience, the better the health outcomes.
2	PRIMARY AND SECONDARY PREVENTION	Measures the performance of physicians educating, immunizing, and screening to prevent disease.
3	TERTIARY PREVENTION	Measures the effectiveness of a provider in addressing acutely ill patients to manage their care in the most appropriate setting.
4	CONTINUITY OF CARE	Measures how well the physicians engage and manage their patients in the health care system and is correlated with lower rates of hospitalizations and higher patient satisfaction.
5	CHRONIC AND FOLLOW-UP CARE	For patients who suffer from chronic conditions, this measure ensures that they receive appropriate care and support to better manage their health.
6	POPULATION HEALTH STATUS	This is an indicator of whether the entire member population becomes healthier, maintains, or becomes sicker.

An aggregate score that accounts for each measure within all six domains.

