

HAWAII Independent Physicians

Hawaii IPA Newsletter Hawaii Independent Physicians Association Newsletter

In This Issue

Executive Medical Director Update

Maui Medical Director, Dr. Colleen Inouye Update

Quality Committee Update

Payment Transformation: Making the most of 2017

New Payment Transformation Guidelines

Upcoming Events

New Admin Contact

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November 2017

Executive Medical Director Update, Dr. Josh Green

Dear Hawaii IPA colleagues,

I hope this message finds you well. We are in the middle of a very dynamic period of change in healthcare in Hawai'i.

Major changes to the Hawaii healthcare landscape in 2017 include the operational transition for Maui Memorial Medical Center from the state to Kaiser (effective July 1, 2017), payment transformation (we were in the pilot, the rest of the state went live 1/1/17) as proscribed and launched by HMSA, and the back and forth debate in Washington DC about an Obamacare repeal and replacement (on hold for now).

Each of these significant events are sure to shape the way we physicians practice medicine in Hawaii in the coming years, and as you know, the leadership of the Hawaii IPA is constantly dialed into and meaningfully impacting these realities with the interests of our members in mind.

We continue to be totally focused on finding ways to make sure that independent physicians are able to continue to practice medicine in the way that they would like, whenever we are able to influence the debates. This includes sitting on all of the major committees that come out of the insurance industry, representing the IPA on national policy questions, leading our respective specialty organizations, and weighing in whenever we can to better position our members.

It is very likely that the physician organizations in Hawaii will continue to consolidate as they did last year (from 22 to about 12) and we will look to friends across the state to foster and grow alliances that make independent practice possible. As your medical director, I welcome any ideas that you have to make it possible for we physicians to continue to best care for our patients, in a way that is independent from significant distraction or administrative burden. It will always be an uphill climb in some ways because most of the revenue and much of the power in healthcare systems resides at the insurer and hospital level, however people trust us as their healthcare providers to put them first and to practice medicine in the way that we were trained to do. We will do exactly that.

Please stay in touch and we hope to see you over the holidays for both Hawaii IPA business activities and social time together. Recommend new providers to our organization when you can so that we can continue to grow together.

Sincerely,

Josh Green, M.D. Medical Director Hawai'i IPA

Update from Maui Medical Director & Treasurer, Dr. Colleen Inouye

After observing the year-long pilot project my emphasis is upon the Total Cost of Care (TCOC). It affects the PCPs now, Specialists soon, and HIPA, and HMSA. The PCPs, who performed at a particular level this past year, found that HIPA shared monies from HMSA. Those PCPs who did not receive any monies, please consult with our employees, the National Kidney Foundation (NKF), and find out how to improve for a potential pay-out next year. For all PCPs it is very important that you utilize the next few months in 2017 to code accurately. This will affect your monies in 2018. As a word to the Specialists, the TCOC can be greatly affected by your actions. Please consider site of care, what you order, and/or device selection when you provide care to your patient.

For an update about Maui- we, independent physicians, are navigating the changes that occurred with the transition of Maui Memorial state management to Kaiser. Also, the independent physicians are standing strong with the philosophy of HIPA in that it was created to help and assist independent physicians and practices. Strength can be found in a unified voice!

Dr. Colleen Inouye, M.D. Maui Medical Director & Treasurer Hawai'i IPA

Quality Committee Update, Dr. David Saito

Hawaii IPA does well for our quality scores. For the pilot year in review Hawaii IPA physicians received 78% of the maximum quality payment for Commercial HMSA, 88% for Akamai Advantage and 71% for HMSA QUEST. HIPA as a physician organization earned 86% of the maximum quality payment for Commercial, 106% for Akamai Advantage and 91% for HMSA QUEST. We hope to do even better for 2017.

Things to do before the end of the year for 2017 physician organization (PO) Payment Transformation performance

measures, participants will need to log on to Cozeva and complete Physician Engagement. All members have received instructions from the National Kidney Foundation (NKF) coaches. Additionally, Sharecare engagement needs to be completed. All physicians must complete them. The more physicians that complete these, the higher performance bonus HIPA receives. Make sure you ask your NKF coaches about this. For patients diagnosed with hypertension, controlling blood pressure is a PO performance measure. For members 18-85 years of age who have a diagnosis of hypertension, BP needs to be adequately controlled for 2017.

Total Cost of Care (TCOC) is another quality measure the POs are measured on. HIPA was the only one of two POs receiving this bonus. This was distributed among the participating physicians with scores above 60%. The QSC will be working on improving TCOC. Among the measures being reviewed are hospitalizations, re-admissions, preventable hospitalizations, and ER use.

It was felt that HIPA needed to improve communication of quality issues and Payment Transformation. A Quality Bulletin has been published to make sure members participating in Payment Transformation received detailed information about the issues and the happenings. The Bulletin will be published on an as needed basis. Please read this Bulletin for important and valuable information.

Patient attribution continues to be problematic. HMSA is in the process of changing it. Urgent Care Centers will not be able to be assigned as PCPs. There are still difficulties with Urgent Care physicians who also serve as PCPs for their own practices. As of Mid-October for HMO, Akamai Advantage and QUEST Integration the patient is attributed to a PCP either via PCP Selection faxed to HMSA or member calls HMSA to change PCP. For PPO, the patient is attributed to the PCP who has affirmatively added the patient on Cozeva (this must be done manually on Cozeva, asked your NKF coach if you do not know how to do this). Note: attribution changes must be submitted 2 weeks prior to the end of the month to assure HMSA assigns the member to the PCP for that month for PMPM payment. If you are unsure of this process ask you NKF coach.

To summarize important points:

- 1. Complete Physician Engagement and Sharecare engagement on Cozeva
- 2. If diagnosed with hypertension, keep BP adequately controlled
- 3. Read the Quality Bulletin
- 4. Keep up with patient attribution

Dr. David Saito Chair, Quality Steering Committee Hawai'i IPA

Payment Transformation: Where to focus your efforts in the last months of 2017

HMSA's recently published a letter regarding where PCP's should focus their efforts as 2017 comes to a close to

maximize quality monies.

Highlights:

1. PCP Engagement Measures

Any engagement measure that is not completed may mean a reduction of 4 to 5 percentage points off the PCP's basic PMPM rate in July 2018.

* **Sharecare Engagement**: Completing your Sharecare profiles. Take a photo, email it to HMSA at PS_Admin@hmsa.com , log in with an HMSA-issued username and password to your Sharecare account and review the content of your profile.

* **Patient survey**: HMSA will survey a sample of each PCP's patient panel in December-January and ask members whether they had an in-person visit with their PCP, or if the PCP called, interacted through HMSA's Online Care, emailed, texted or mailed material to them.

* **Engagement with ecosystem**: PCPs must submit an attestation in Cozeva® between Oct. 1 and Dec. 31, 2017 to attest whether they refer patients to programs in the ecosystem, such as HMSA programs, or any other community health programs.

2. PCP Performance/Quality Measures

* **Review of Chronic Conditions**: Complete the review and coding of any outstanding chronic conditions with a service date by Dec. 31, 2017. Any supplemental data (e.g., Disconfirmations) is due by Dec. 31, 2017.

* **Supplemental data** for all other Pay for Quality or Performance measures: Must submit by Jan. 31, 2018.

* **Request for Reconsideration f**or all measures: Due by Dec. 31, 2017.

* **Sharecare RealAge Test**®: As a reminder, numerator data is now posted for this measure, but it will not be scored in 2017. To read HMSA's most recent full update regarding this measure, please click <u>here</u>. To order RealAge materials, please fill out the <u>order form</u> and submit to HMSA.

3. PO Performance Measures

PCPs are being asked to rate their POs on two measures through a SurveyMonkey tool available NOW until Dec. 31. PCPs can access the survey <u>here</u>.

If you have any questions, please contact your Quality Coach. To view the full HMSA letter, click <u>here</u>.

Additional Payment Transformation Updates

The HMSA Payment Transformation Guide has been updated and is now available in the Useful Links section on the Hawaii Healthcare Information Network (HHIN) <u>home page</u>. More information on Payment Transformation can be found in the HMSA provider Resource Center <u>here</u>.

If you have any questions, please contact your Quality Coach.

Upcoming Events

What

:Webinar Training: Quality Changes, Risk Adjustment, & Care for Older Adults **When:** Tuesday, November 14th 12:30 p.m-2:00p.m. For more information or to sign up, please follow HMSA's instructions on the attached <u>form</u>.

Administrative Changes- New Contact

We would like to formally welcome Julie Warech to the Hawai'i IPA team.

We are sad to say goodbye to Ericka Steele who has been a vital part of Hawaii IPA for the last several years. We wish her the best in her future endeavors.

We are, however, pleased to introduce all of our members to Julie Warech, our new administrative contact. Julie comes to us as a graduate of Swarthmore College with a BA in Anthropology and most recently from the University of Hawai'i at Manoa, where she received her Masters degree. Julie has worked in a wide range of positions in academia, foundations, and state-level politics. Her recent stint as a committee clerk for the Human Services Committee for the State of Hawai'i has led to a passion in healthcare policy and she is excited to get involved in healthcare from a more grassroots level and learn about the field from the perspective of independent physicians and their everyday world.

Please contact her for any of your administrative needs. She can be reached at (808) 524-4041 or by email at julie@hawaiiipa.com.

As always, Hawaii IPA is here to service YOU and Julie looks forward to helping you in the future. Please let her know if there is anything she can do to assist you and help you make the most of your membership in Hawai'i IPA.



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