

Value-based care brings better outcomes, lower costs

An integrated approach that makes delivering care simpler and more affordable

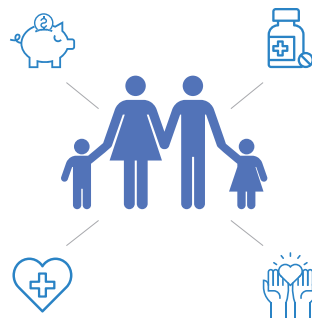
Providers at Associates in Family Medicine have high praise for Empire's Enhanced Personal Health Care (EPHC) and what it's done for their practice. They credit EPHC for allowing them to deliver whole-person, high-quality care to their patients while saving costs.



James Sprowell, MD
Chief Executive Officer



James Kesler, MD
Primary care doctor



Madelyne Bean, PharmD
Pharmacist



Ali Matheson, MSW
Social worker and care manager

Quality care

EPHC is Empire's value-based care initiative that moves away from the fee-for-service model to a model that holds providers accountable for achieving health care cost and quality outcomes. Empire's local care teams work closely with participating providers to help them change the way they deliver patient care. These providers also receive specialized support, data and incentives to help them deliver improved care coordination, appropriate utilization and better disease management. At Associates in Family Medicine, this payment model has made a big difference.

"(EPHC) has made my job easier and it's kept my patients healthier," said Dr. James Kesler, a doctor in the practice. "EPHC gave us a vehicle to actually practice the type of medicine that we see makes a difference.

For the longest period of time, it's been fee for service. Now, I think we're doing a better job of keeping people healthy. That paradigm shift is a huge deal."

Fee-for-service payments drive up health care costs and potentially lower the value of care.¹

Team approach

With Empire's support, the practice has been able to bring in expertise it wouldn't be able to afford otherwise. They've hired clinical coordinators who reach out to patients and develop care plans, a pharmacist who helps patients understand and adhere to medications, and a social worker who works with patients who need behavioral health care. In addition to increasing its staff, the practice has also expanded its offerings. This includes integrated behavioral health, clinical pharmacy expertise and specially trained nurses for targeted care.

"Per-patient per-member per-month fees help provide us the funding we know is going to be there so we can hire these staff. In addition to that, we have the opportunity to gain incentives based on quality and overall cost of care. Those things reward the physicians in the practice for all the hard work everyone's doing," said Dr. James Sprowell, the practice's chief executive officer.

Patient-centered

With staff dedicated to value-based care, the providers can maintain and improve the health of each patient.

“It ends up being this really great collaborative team that's able to focus on what we each do best and be able to make sure we're helping the patient,” said pharmacist Madelyne Bean.

“I think that health care has become extremely complicated and our patients' lives are just as complicated,” said social worker and care manager Ali Matheson. “So, we found out that providing this higher level of care and walking them through the steps to reach their goals is going to lead to more successful outcomes, which is going to not only better the patient in reaching those goals, but also provide health care cost reduction.”

Prevention

Another important part of the EPHC approach is prevention and screenings. “So much of getting people healthy and keeping them healthy happens outside the exam room,” said Dr. Kesler.

87% of women who have breast cancer are correctly identified by mammography²

Because Associates in Family Medicine providers receive specialized data from Empire BlueCross BlueShield (Empire) that lets them know which patients are due (or overdue) for critical screenings, they can reach out to patients to get them done. An example of this is mammography screening for breast cancer.

“If we really do a good job, and get those mammograms in on time, and follow up on those mammograms, sooner or later we're going to reduce the number of breast cancer cases,” said Dr. Sprowell. “If we can avoid just a few of those, not only do we prevent a tragedy in a family, we've saved the health care system a ton of money.”

The data also shows which patients are at a higher risk for certain chronic conditions and may need interventions to help close gaps in care. This data enables the specially trained staff to identify and reach out to patients in greatest need of care. At Associates in Family Medicine, this is when care coordinators reach out to patients due for screenings, the pharmacist works with patients to make sure they take their medications regularly and properly, or the social worker reaches out to those who may be in need of behavioral health care.

\$5,342 average annual savings when patients with diabetes and other chronic conditions adhere to their drug regimens.³

The providers at Associates in Family Medicine have relied on the enhanced support and incentives they've received from Empire to help them grow and evolve their practice. And how is it evolving? “It's increased not only the amount of (staff), but also the breadth of our offerings – now including integrated behavioral health as well as clinical pharmacists and specially trained nursing staff,” said quality improvement coordinator Beth King.



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¹ Center for American Progress website: *Alternatives to Fee-for-Service Payments in Health Care* (accessed May 2018): americanprogress.

² Susan G. Komen Foundation website: ww5.komen.org.

³ FierceHealthcare, Study quantifies healthcare costs for medication adherence and non-adherence, August 2016.