# HEALTH SYSTEMS TRANSFORMATION MEMBERSHIP SURVEY RESULTS:

# Preventive Medicine Physician Involvement

#### **BACKGROUND**

From May 19-June 9, 2014, ACPM conducted a survey of its membership to assess their knowledge of local, state, and national Health Systems Transformation (HST) efforts, gain a better understanding of training needs, and solicit assistance with developing educational materials for Preventive Medicine physicians. The survey was administered to inform a Centers for Disease Control and Prevention (CDC) cooperative agreement opportunity awarded to ACPM focused on educating physicians in HST. Major topic areas discussed by survey respondents are detailed below.

## **SURVEY RESULTS**

A total of 347 (15.4%) ACPM members responded to the survey. **Nearly 44% of respondents noted they have no experience with HST,** followed by those with 1-5 years experience (22.5%) and 21+ years of experience (13.3%). **However, 98.3% of respondents believe Preventive Medicine physicians can play a role in this area.** Nearly 80% would be interested in additional educational opportunities.

# USE OF TRAINING/SKILLS IN PREVENTIVE MEDICINE

Nearly 19% of responses to "How can Preventive Medicine physicians best be involved in HST?" related to using their training/skills. Specific areas include population health, epidemiology/biostatistics, systems approaches to care, data analytics, and health care management.

HOW CAN PM DOCS BEST BE INVOLVED?	
Use of Training/Skills in Preventive Medicine Physicians	92**
Serve as Leaders in HST Process	49
Active Participation with Ongoing Activities	44
Policy and Advocacy	39
Research and Publication	36

<sup>\*\*</sup>All numbers represent the total count of responses for each topic area

#### LEADERSHIP IN HST

Over 10% of responses to this question indicated Preventive Medicine physicians can serve as leaders, innovators, or consultants in HST projects, such as providing technical support to ACOs or incorporating preventive services into new systems.

# **ACTIVE PARTICIPATION WITH ONGOING ACTIVITIES**

Approximately 9% of responses to this question underscored Preventive Medicine physicians should actively participate in ongoing HST activities. Examples include serving on boards and commissions, participating in Quality Improvement projects, developing population health/prevention-focused initiatives, and participating in HST focus groups or forums.

# **POLICY AND ADVOCACY**

Eight percent of survey responses to this question believe that Preventive Medicine physicians can be involved in HST policy development and implementation and advocacy. This includes setting policy for reimbursement and organization of care, maximizing preventive services coverage, and immunization system reforms. Physicians can advocate for longer patient visits for wellness assessments, new funding and reimbursement models, and inclusion of public health data in electronic health records and health insurance exchanges.

# **RESEARCH AND PUBLICATION**

Over 7% of respondents to this question believe Preventive Medicine physicians can be involved in HST through research and publication opportunities. Physicians can perform evaluation, review and develop guidelines for patient care, develop and evaluate pilot projects, and develop models for decision-making.



# **HEALTH SYSTEMS TRANSFORMATION OVERVIEW**

# WHAT IS HEALTH SYSTEMS TRANSFORMATION?

ACPM defines health systems transformation as systems-based approaches to improving population, community, and individual health by incorporating and addressing the determinants of health and increasing the efficiency and effectiveness of health care.

SAMPLE OECD COUNTRIES	US\$/PERSON (PPP)*
France	4,121.20
Germany	4,650.90
United Kingdom	3,172.20
United States	8,388.80

PPP=Purchasing Power Parity; currency conversion eliminating the differences in price levels between countries

Data from the Organization for Economic Co-Operation and Development StatExtracts, 2012

A look at U.S. health care expenditures compared to similarly developed countries in 2012 reveals a marked disparity among these countries. As a result of these differences, as well as rising health care costs and lower health outcomes; policy makers, businesses, health departments, health insurers, and others have begun examining ways to reduce health care costs while increasing the care satisfaction for both providers and patients.

# WHAT DOES HEALTH SYSTEMS TRANSFORMATION LOOK LIKE?

Health systems transformation, as described by the "Triple Aim," can vary significantly based on the setting. At its best, health systems transformation is defined by a clear vision and philosophy of creating the healthiest population through a coordinated public health and health care delivery system which is committed to prevention, evidence-based care and cost-efficient practices. Typically, health systems transformation impacts the degree of organizational "patient— and family—centeredness" and shared decision-making; budget, financing, and "total cost of care" perspectives; quality improvement practices; quality and cost transparency initiatives; technology adoption and deployment; and system— and community-based partnerships and policy incentives.

# THE TRIPLE AIM IS...

- 1 Improving Population Health
- 2 Reducing Per Capita Cost of Care
- 3 Improving the Experience and Outcomes of Patients

# **ADDITIONAL RESOURCES**

Office of the National Coordinator for Health Information Technology. A 10-Year Vision to Achieve an Interoperable Health IT Infrastructure. <a href="http://www.healthit.gov/sites/default/files/ONC10yearInteroperabilityConceptPaper.pdf">http://www.healthit.gov/sites/default/files/ONC10yearInteroperabilityConceptPaper.pdf</a>

**Grantmakers In Health.** Transforming Health Care Delivery: Why It Matters and What It Will Take. <a href="http://www.gih.org/files/FileDownloads/Transforming%20Health%20Care%20Delivery%20Primer%20March%202012.pdf">http://www.gih.org/files/FileDownloads/Transforming%20Health%20Care%20Delivery%20Primer%20March%202012.pdf</a>

Institute for Healthcare Improvement. Triple Aim for Populations. <a href="http://www.ihi.org/Topics/TripleAim/Pages/default.aspx">http://www.ihi.org/Topics/TripleAim/Pages/default.aspx</a>

Please visit the ACPM website for a more complete list of resources: <a href="http://www.acpm.org/?page=HSTransform">http://www.acpm.org/?page=HSTransform</a>



# CMMI STATE INNOVATION MODEL (SIM) AWARDS OVERVIEW

### WHAT IS CMMI?

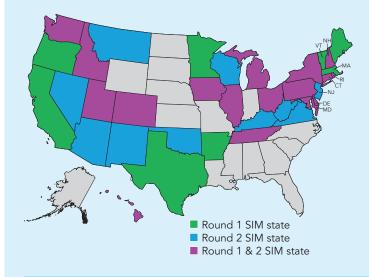
The Center for Medicare & Medicaid Innovation (CMMI), housed in the Centers for Medicare & Medicaid Services (CMS), was created by Congress through passage of the Patient Protection and Affordable Care Act of 2010. This legislation required that CMMI develop "new payment and service delivery models in accordance with the requirements of section 1115A of the Social Security Act."

For more information on CMMI, please visit the CMS website: <a href="http://innovation.cms.gov/initiatives/index.html#views=models">http://innovation.cms.gov/initiatives/index.html#views=models</a>

## CMMI FOCUSES ON SEVEN CATEGORIES FOR INNOVATION:

- Accountable Care
- Bundled Payments for Care Improvement
- Primary Care Transformation
- Initiatives to Accelerate the Development and Testing of New Payment & Service Delivery Models
- Initiatives focused on the Medicaid & CHIP population
- Initiatives focused on Medicare-Medicaid Enrollees
- Initiatives to Speed the Adoption of Best Practices

## **CMMI SIM AWARD STATES**



### **CMMI STATE INNOVATION MODEL AWARDS**

The State Innovation Model (SIM) awards provide "support to states for the development and testing of state-based models for multi-payer payment and health care delivery system transformation with the aim of improving health system performance for residents of participating states."

Round One SIM awards were announced in 2013, providing nearly \$300 million to 25 states for testing and design of State Health Care Innovation Plans. These plans will support collaboration across stakeholders to meet the goals of improved health system performance at lower costs.

Round Two SIM awards, announced in late 2014, provided \$660 million to 32 states to test, design, or further refine State Health Care Innovation Plans.

For more information on SIM award activities, please visit the CMS website: <a href="http://innovation.cms.gov/initiatives/State-Innovations/">http://innovation.cms.gov/initiatives/State-Innovations/</a>

Please contact ACPM staff at <a href="http://www.acpm.org/general/?type=CONTACT">http://www.acpm.org/general/?type=CONTACT</a> if you are an ACPM member and interested in being involved with the SIM award at your state level.



