fact sheet

STATE INNOVATION MODEL

For Payers

WHAT IS SIM?

Maine's State Innovation Model (SIM) award is a $33 million grant from the US Centers for Medicare and Medicaid Innovation that seeks to bolster work currently underway in our state to **reduce healthcare costs**, **strengthen healthcare quality**, and **improve patient experience**.

Organizations around the state like the Maine Health Management Coalition, Maine Quality Counts, HealthInfoNet and the Maine Centers for Disease Control and Prevention are working together to make sure that healthcare works for Maine patients.

SIM IS PAYMENT REFORM

DID YOU KNOW?

THE US HAS THE **HIGHEST** PER CAPITA HEALTHCARE COSTS IN THE WORLD[1]

STIMULATING VALUE-BASED INSURANCE DESIGN Value-Based Insurance Design (VBID) is a form of health benefits that provide incentives to consumers/patients that opt for care that is both high quality and low cost. It also incentivizes healthcare providers to choose lower cost care options when a range of equally effective approaches to care are available for a given patient.

The SIM award has allocated resources to explore VBID in more detail and assess its potential for increasing healthcare value in Maine. To do this, the Maine Health Management Coalition (MHMC) convenes the VBID Workgroup, which is charged with examining VBID examples around the country and identifying best practices in value-based insurance design. They are also responsible for creating a means to rank insurance plans according to adopted VBID metrics and encouraging Maine businesses to adopt the new benefit model.

MAKING COST AND QUALITY TRANSPARENT We know that what gets measured gets improved, so in an effort to strengthen the quality and lower the cost of healthcare in Maine, the State Innovation Model award will provide additional funding to develop new quality and cost metrics that will be publicly reported on the Maine Health Management Coalition's website, www.getbettermaine.org. Patients will be encouraged to use the information to find top performing doctors and hospitals, and employers and payors will be encouraged to use the information in their benefit designs.

ENGAGING CONSUMERS IN PAYMENT AND SYSTEM REFORM Engaging patients in payment and delivery system reform is crucial. As the end users of our healthcare system, patients will be the ones that ultimately accept or deny the changes taking place. Because some of the reforms might be construed as negative by patients, like the use of narrow networks in Value-Based Insurance Designs, the Maine Health Management Coalition will be spearheading a consumer engagement campaign to inform the public of what is changing and why it

is important. They will produce videos, print materials, and will engage consumer advocates, Area Agency on Aging advisors, navigators, free care providers, brokers, human resource specialists, and Maine payer staff in trainings so that they better understand the changes taking place.

SIM IS COMMUNITY HEALTH

A key goal of the SIM initiative is to create healthy communities across Maine. The State Innovation Model seeks to accomplish this by allocating important resources to a variety of projects that help to prevent chronic illnesses, link individuals and communities with local health resources, and engage the public in health system reforms aimed at lowering the cost of healthcare. The following are just a few of the projects that the SIM award is supporting.

COMMUNITY HEALTH WORKERS The Maine Community Health Workers (CHW) Initiative is a program being run by the Maine Center for Disease Control and Prevention (CDC) that is working to set up a network of community health workers to help under-served populations get access to needed healthcare services. They will be stationed across the state, beginning with five pilot sites, to help provide culturally appropriate health education and outreach; to link individuals, communities and healthcare providers with social services; and to assure people can access the services they need.

At the end of the three-year pilot period, the CHWs hope to demonstrate the value of integrating CHWs into the healthcare team; to provide models for state-wide replication; and to build a core group of experienced CHWs who can provide leadership for ongoing development of the system.

DIABETES PREVENTION The National Diabetes Prevention Program (NDPP) is a proven program that helps to prevent type 2 diabetes by encouraging individuals to make modest lifestyle changes. Maine CDC and SIM grant partners are working with insurers to test how this program can improve health outcomes and reduce healthcare costs in a number of different contexts around the State.

MAINECARE ACCOUNTABLE COMMUNITIES The MaineCare Accountable Communities initiative is a shared-savings arrangement with providers that commit to coordinating the care of their patients. Communities that demonstrate cost savings and meet quality performance benchmarks share in savings generated under the model. An estimated 50,000 members will be attributed through these Accountable Communities in 2014, and an additional 25,000 members will receive some of their care through the communities. In whole, almost 30% of the MaineCare population will benefit from the Accountable Communities Initiative in this first round.

DID YOU KNOW?

EACH YEAR
WE WASTE AN ESTIMATED
$55 BILLION
ON MISSED PREVENTION
OPPORTUNITIES

[2]

SIM IS COLLABORATION

If the SIM award is about nothing else, it is about working together to create connections and common solutions to some of the biggest problems facing our communities today. The following are opportunities for you to get involved

with SIM payment reform work currently underway in Maine.

Accountable Care Implementation Subcommittee The ACI Steering Group is a multi-stakeholder workgroup that was established by Maine Health Management Coalition (MHMC) members interested in becoming actively engaged in payment reform pilots and initiatives. The Steering Group identifies shared priorities to address barriers to implementing system redesign and payment changes, to facilitate primary care based Accountable Care Organizations (ACO), and to accelerate common measurement, payment and benefit design to support advanced models of care delivery. The MHMC provides facilitation, staffing, technical assistance and data support to the steering group.

Contact: Frank Johnson, fjohnson@mehmc.org

Payment Reform Subcommittee The SIM Subcommittee on Payment Reform provides guidance and oversight to those aspects of the Maine State Innovation Model project that support the development and alignment of new payment models. The subcommittee also assists in ensuring the coordination of the range of SIM-sponsored efforts that impact payment reform. Specifically, the Payment Reform Subcommittee helps guide the SIM work related to value-based insurance design; work around the identification and reporting of total cost of care, including behavioral health care; an Accountable Care Organization learning collaborative facilitated by the Maine Health Management Coalition; and the development and implementation of alternative, innovative payment models. The subcommittee works to develop consensus on core measures sets for ACO performance and assists in guiding the claims based analytics and performance measures used for public and provider reporting, including payment reform. This subcommittee is also be concerned with efforts to educate and engage the public around issues related to payment reform.

Contact: Frank Johnson, fjohnson@mehmc.org

Value-Based Insurance Design Workgroup The Value-Based Insurance Design (VBID) Workgroup is a multistakeholder group of health plans, purchasers and providers that are tasked with developing a VBID template that can be used by payers across the state. The group will be examining VBID examples around the country and will work to develop an evidence-based, preference sensitive, and supply sensitive structure for the plan.

In addition to the VBID Workgroup, three subgroups will also be convened to deal with specific issues concerning administration, clinical measures and wellness.

Contact: Robin Allen, rallen@mehmc.org

FOR MORE INFORMATION, VISIT MAINE.GOV/DHHS/SIM

1. K. Davis, K. Stremikis, C. Schoen, and D. Squires, Mirror, Mirror on the Wall, 2014 Update: How the U.S. Health Care System Compares Internationally, The Commonwealth Fund, June 2014.
2. Maine Diabetes Prevention and Control Program. Health Fact Sheet: Diabetes in Maine. Published August 2011. Retrieved (June 2014) at http://www.maine.gov/dhhs/mecdc/population-health/dcp/documents/factsheet.pdf