

# **Primary Care Reimagined**

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# Blue Shield of California We are rebels with a cause

We are a non-profit, tax-paying health plan on a mission to create a healthcare system that is worthy of our family and friends and sustainably affordable for everyone.



7,500+ employees



4.8M
Californians served across all 58 counties



\$24B

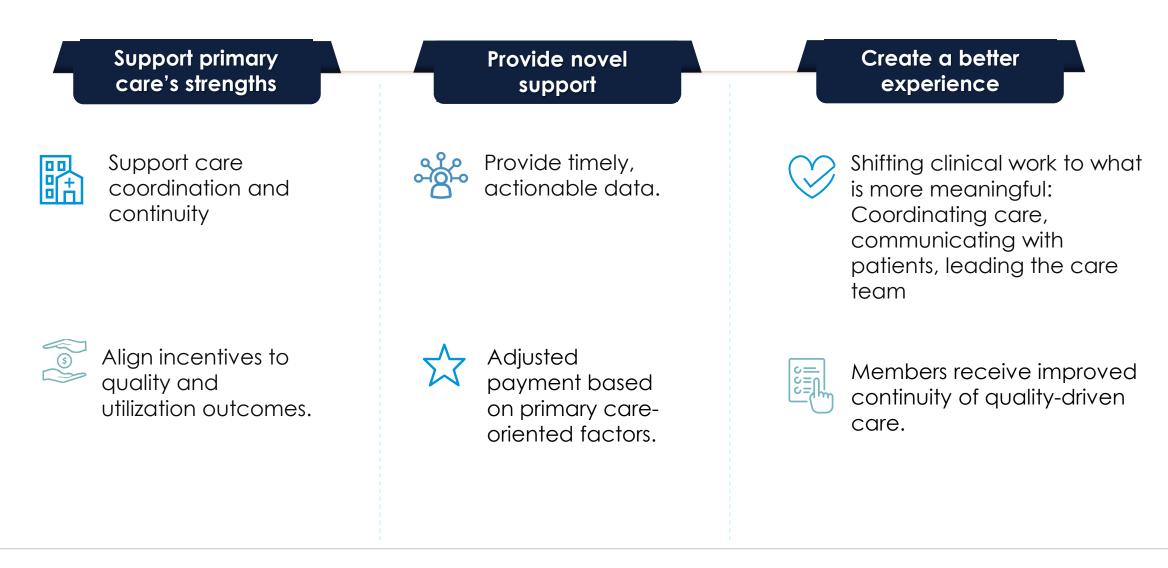


\$97M

in revenue

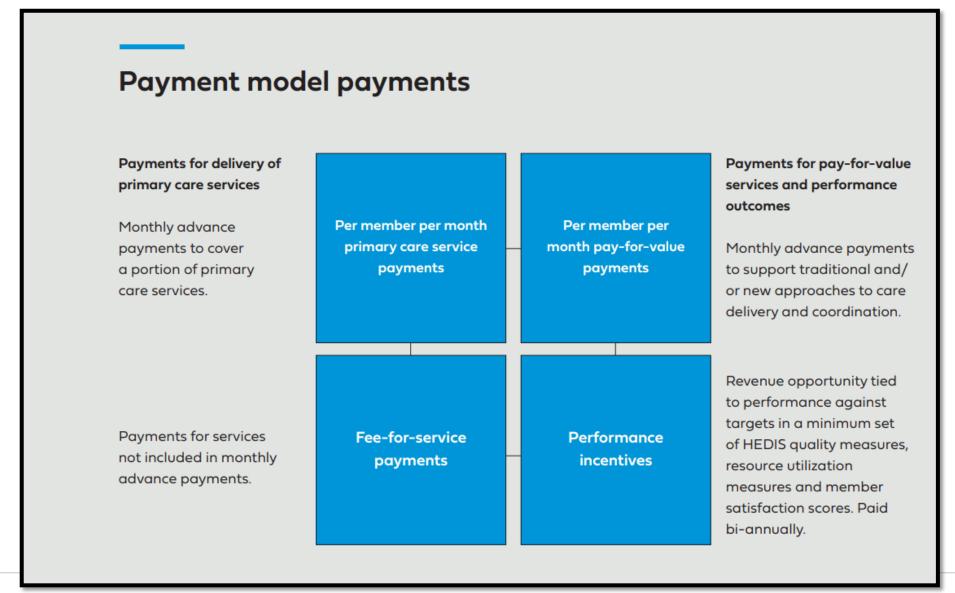
Invested in communities

# Blue Shield is investing in primary care to support a healthcare system worthy of our family and friends



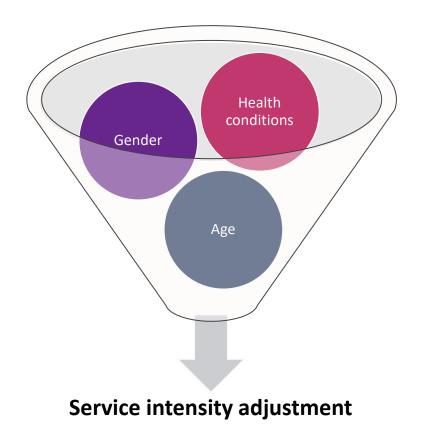
### **Primary Care Pay-for-Value Hybrid Model**

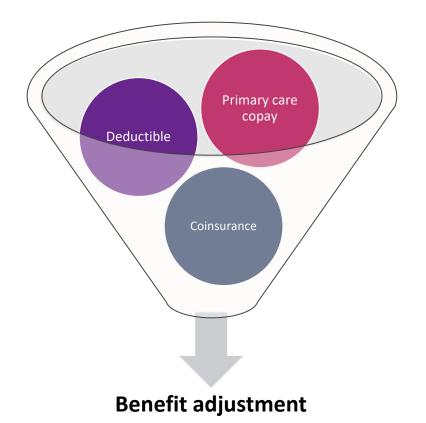
Effectively transitioning practices from pay-for-volume to pay-for-value reimbursement



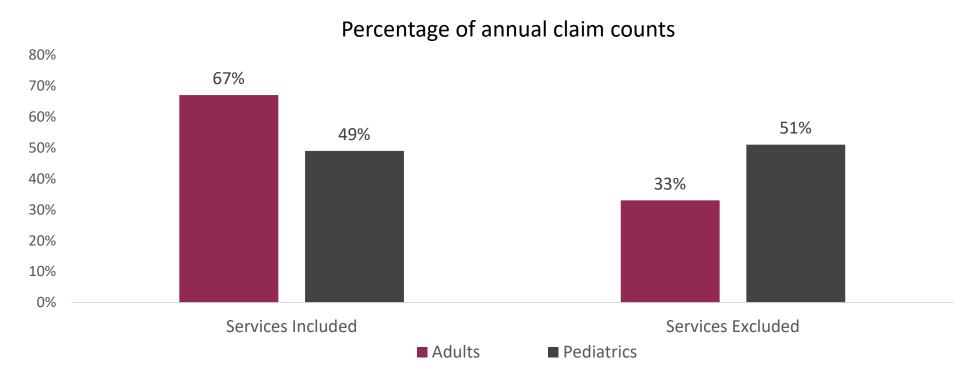
### Base payment member-level adjustments

Applying an adjustment to the PMPM amount accounts for differences in patient risk and cost share.





#### Base Per Member Per Month inclusions and exclusions



#### **Standard inclusions:**

- Evaluation & Management visits (E&M)
- Pathology and lab
- Non-Oral Drugs

#### Standard exclusions:

- Immunizations
- Annual wellness visits
- Durable Medical Equipment
- Surgery
- Radiology

- Prior authorization procedures
- Expensive injectable medications
- Chemotherapy

## Blue Shield has adopted a core set of Primary Care Performance Metrics

#### **Adult performance measures**

Measure type	Measure name
Resource utilization	<ul> <li>Emergency Room (ER) visits per 1,000 members</li> <li>Inpatient Admits (IA) per 1,000 members</li> </ul>
Clinical quality	<ul> <li>Hemoglobin A1C &lt;8.0%</li> <li>Controlling high blood pressure</li> <li>Breast cancer screening</li> <li>Colorectal cancer screening</li> </ul>
Member experience	Member experience survey administered by Blue Shield

#### **Pediatric performance measures**

Measure type	Measure name
Resource utilization	Emergency Room (ER) visits per 1,000 members
Clinical quality	<ul> <li>Childhood immunization status: Combo 10</li> <li>Immunizations for adolescents: Combo 2</li> <li>Weight assessment and counseling for nutrition and physical activity</li> </ul>
Member experience	<ul> <li>Member experience survey administered by Blue Shield</li> </ul>

### **Resources to Support Primary Care Payment Models**



New contract amendment



Regulatory approval



Pay for Value platform



Provider educational resources



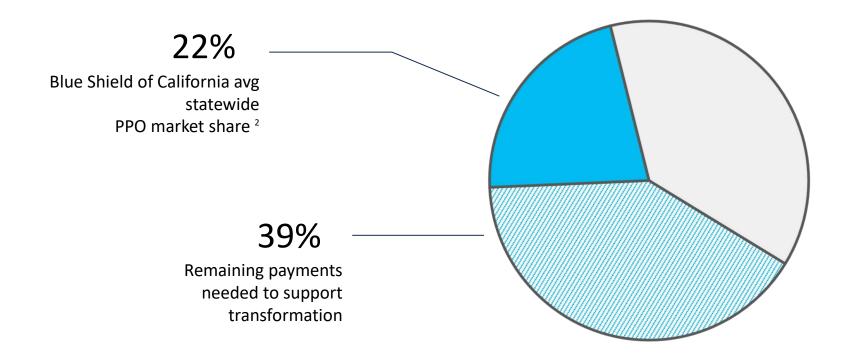
Claims processing modifications



Internal provider contract and support resources

# Multi-payer alignment is essential for scale and success, but competitive market hinders adoption

63% of payments via capitation needed to transform PCP practice 1



<sup>1-</sup> High levels of capitation payments needed to shift primary care toward proactive team and non-visit care. (2017). https://www.healthaffairs.org/doi/10.1377/hlthaff.2017.0367

<sup>&</sup>lt;sup>2-</sup> Competition in Health Insurance: A comprehensive study of U.S. markets. (2021). https://www.ama-assn.org/system/files/competition-health-insurance-us-markets.pdf

# California Advance Primary Care Initiative: a novel concept to drive measure harmonization

Multi-payer <u>commitments</u> to align, standardize investment & innovation across primary care networks in California















Quality Measures



Technical Assistance



Performance Incentives



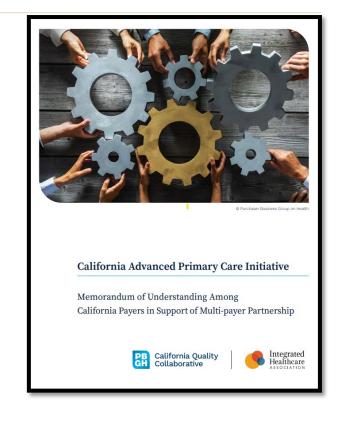
Increased Investment



Provider Manual



Performance Insights





## Three key takeaways

- Primary Care Hybrid Models can be a successful way of paying for primary care
- There are multiple resources needed to launch and be successful with a primary care hybrid model
- We are harmonizing measures and payment methodology with purchasers, providers, and payers

# Thank you