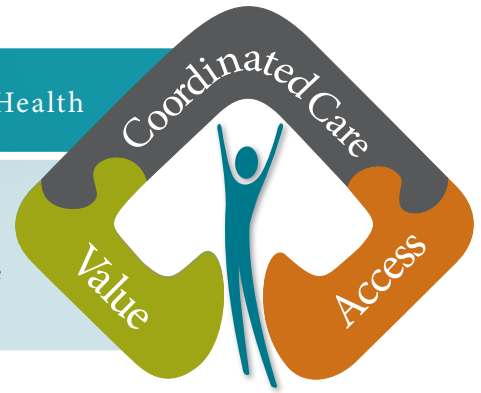


## LEAD THE WAY | Transforming America's Health

We envision a nation with an affordable health care system that leaves no one behind. To achieve this vision, we must continue working together toward a health care system that delivers high value and clinical excellence across the continuum of care.



### How is Trinity Health Transforming Health Care Delivery?

Trinity Health is transforming health care delivery in a number of ways, including the development of clinical integration programs, patient-centered medical homes and accountable care initiatives. Accountable care involves a group of providers — primary care physicians, specialists, hospitals, long-term care providers, etc. — who agree to be held financially accountable for the cost and quality of care delivered to a defined patient population. The providers then share in any savings or other monetary bonuses achieved as a result of their efficiencies.

All of these initiatives require the purposeful development and organization of key sets of core capabilities within a multi-purpose, “all-payer” accountable care platform. Managed well, this platform can:

- Provide patient-centered, coordinated, efficient, and effective care
- Align the continuum of services (home care, physician services, hospital services, long-term care) to promote the best patient experience possible
- Focus on effectively managing chronic conditions, reducing unnecessary use of high-cost services
- Allow acceptance of financial risk for full accountable care
- Provide incentives for high-value care delivery

### KEYS TO A SUCCESSFUL ACO

- |  |  |
|--|--|
| <ul style="list-style-type: none"> <li>▶ Sound medical management program</li> <li>▶ Clinical protocols and clinical practice guidelines</li> <li>▶ Strong foundation in primary care</li> <li>▶ Performance reporting and benchmarking</li> </ul> | <ul style="list-style-type: none"> <li>▶ Seamless transitions between care providers</li> <li>▶ Ways of managing high-cost and high-risk patients</li> <li>▶ Electronic records and web-based Health IT</li> <li>▶ Pay-for-performance bonus system</li> </ul> |
|--|--|

### What Can Policymakers Do to Support Accountable Care Organizations?

The Affordable Care Act promotes ACOs in Medicare and Medicaid, and commercial health plans are piloting ACOs. To facilitate the success and expansion of this innovative delivery model, policymakers should:

- Align data collection, exchange, reporting requirements and performance measures with the work of the Centers for Medicare & Medicaid Services' quality reporting programs.
- Ensure sufficient investment in primary care capacity to address the primary care professional shortage. Support educational loan repayment programs for primary care providers and provide Medicaid and Medicare reimbursement for graduate medical education training programs.
- Remove major legal and regulatory impediments to clinical integration. Focus on the five major federal laws that affect provider collaboration and incentives to change provider behavior — the Stark laws, Civil Monetary Penalties, anti-kickback, anti-trust and IRS restrictions on payment to physicians.
- Develop patient-centered performance measures. Reward providers who implement effective, evidence-based, processes that demonstrate improved outcomes, including patient-centered medical homes.
- Create payment structures that support the adoption and use of health information technology and the development of statewide health information exchanges. They support real-time exchange of patient health information — critical to providing patient-centered care.
- Fund Center for Medicare and Medicaid Innovation's multi-stakeholder ACO demonstrations and/or pilot programs.
- Consider innovative benefit designs that empower beneficiaries to be equal partners in attaining improved outcomes and reduced costs, and to share in decision-making with ACO providers.