

Collaborative Relationships Between Providers & Health Plans Are Key

By Rich Maturi
*Senior Vice President,
Healthcare Delivery Services
Premera Blue Cross*



Dave Brooks, the CEO of Providence Regional Medical Center in Everett, had an excellent column in last month's edition regarding a national event recognizing the delivery of low-cost, high quality healthcare in the Everett area. The Washington, DC event "How Do They Do That: Low-Cost, High-Quality Healthcare in America" offered some real lessons about how to improve healthcare; obviously a timely topic.

What I was reminded of while preparing for and participating in the event was the profound impor-

tance of health plans and providers working together to improve healthcare delivery. It was an honor to represent Premera while joining Providence and The Everett Clinic in Washington, DC.

We believe it is essential to have productive, collaborative relationships with providers. It would not be possible to achieve "low-cost, high-quality" care otherwise. In fact, there are some other visible ways in which Premera is partnering with local providers, beyond this great event in which we all participated:

The Quality Score Card:

Premera's Quality Score Card contains quality and clinical performance data as well as patient satisfaction scores for some of the state's most-prominent medical groups. These 15 multi-specialty groups – which collectively serve more than a quarter million Premera members – publicly support and participate in the program.

This was the first Washington score card developed collaboratively by a health plan and multi-specialty medical groups and it has since set a standard for quality assessment in the state. We believe this program is a tremendous example of the amplified value of our collaborative relationships with providers.

Since 2002, the Quality Score Card continues to demonstrate strong value because provider organizations have themselves seen the importance of information sharing and have actually encouraged more sharing rather than less. Building on a foundation of trust, the Score Card has inspired meaningful discussions with providers across the state about measuring and reporting quality. It is now an important and pioneering statewide indicator of quality care.

New programs to realign incentives in healthcare delivery:

A significant portion of the conversation in the healthcare reform debate has been centered on reforming payment structures to reward healthier patient outcomes rather than volume of services delivered. In terms of federal reform, the most logical place for that to happen is Medicare. While Premera supports such reform, such payment system reform may or may not be a substantive component of what Congress produces, but we in the private sector should and are moving forward now.

Indeed, Premera is not waiting for legislation to drive change. We are working with prominent providers across Washington to implement programs that will realign incentives in a variety of clinical settings.

The first initiative, an outcomes-based payment program with Swedish Health Services for their Community Health Medical Home in Seattle's Ballard neighborhood, was implemented in November. Similarly, in Everett we are working with The Everett Clinic and Providence on a number of new initiatives to improve access to primary care, management of chronic disease, reduce avoidable hospital readmissions, and promote access to palliative care.

These are important steps forward to improving healthcare – though federal reform remains necessary. Premera supports healthcare reform, including guaranteed access to coverage without concern for pre-existing conditions. Likewise, reform should also take seri-

ous steps to reduce medical costs through support for Medicare payment reform, a focus on prevention and wellness, and investment in comparative effectiveness research.

Even as Congress moves forward with related efforts, great care must be taken to avoid unintended consequences that may cause more problems than they solve. Poorly crafted insurance market reforms could inadvertently send premiums soaring. Likewise, using a government-run “public plan” to expand a Medicare system that underpays providers would have equally troubling impacts in Washington State – as leaders in the physician and hospital community have noted, including in a significant July 24 article in the Puget

Sound Business Journal detailing such concerns.

While healthcare reform remains a complex challenge, collaborative relationships between health plans and providers are working now, regardless of what happens in Congress. While success is happening, particularly thanks to the good work of key partners such as Providence and The Everett Clinic, achieving real change is neither easy nor rapid. It's clear from our experience collaborating with leading providers that low-cost, high-quality is not only achievable, it is a result we must continually strive for in the years to come.

Rich Maturi is Senior Vice President for Healthcare Delivery Services at Premera Blue Cross.

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