

Hawai'i Health Partners News

January 2016

Celebrating Our TOP 10 Accomplishments of 2015

Aloha and Happy New Year!

We had a great 2015, and we expect we'll have an even better 2016. But before we move forward, let's look back at some of the many things we accomplished together in 2015. In no particular order, here are the top 10:

1. Grew our membership to over 700 physicians and approximately 86,000 patients.
2. Achieved great ambulatory quality for more patients than any other physician organization in the state – HHP achieved the third highest ambulatory quality overall, but unlike the other leading physician organizations, provided consistently high quality across more PCP practices and patients.
3. Launched our Complex Care program and grew enrollment to 198 patients.
4. Decreased avoidable ED visits to less than 36 percent of total ED visits.
5. Saved lives with excellent sepsis care – improved care and decreased mortality rates for sepsis patients (now below 7 percent) played a role in saving approximately 100 lives since 2010 and 25 in just the first three quarters of 2015.
6. Helped ALL of our PCPs achieve PCMH Level 3 certification.
7. Earned and distributed \$1.5 million in Quality Performance Program (QPP) bonuses.
8. Earned and distributed nearly \$1 million in Shared Savings Program (SSP) bonuses.
9. Established multiple pathways for HHP members to network and collaborate, including clinical workgroups, CME events and our annual membership meeting on both O'ahu and Kaua'i.
10. Simplified and focused the 2016 QPP and SSP measures. This coming year, the measures will introduce newer concepts such as patient activation and expand to include more physicians and patients.

Let's celebrate our accomplishments while preparing for the coming year. 2016 brings many new opportunities, but also many challenges. To overcome these challenges, we'll need to continue to strengthen relationships and improve collaboration.

Thank you for your continued support and hard work. Together we will continue to make a difference in transforming health care in Hawai'i.



MEASURE OF THE MONTH:

New Learning Opportunities for Members

HHP Learning Modules (QPP & SSP)

DEFINITION: Earn points for watching learning modules related to HHP topics AND passing knowledge assessment quiz.

* Learning modules will be made available by April 1, 2016.

| TOPIC | POINTS AVAILABLE |
|--|------------------|
| LACE Scores (QPP) | 0.5 |
| Sepsis (QPP) | 0.5 |
| Patient Activation Measure Score (SSP) | 0.5 |
| Chronic Kidney Disease (SSP) | 0.5 |
| TOTAL | 2 |

Continuing Medical Education

DEFINITION: View or attend three (3) HHP-sponsored CME sessions in 2016. Three (3) CMEs + 80 percent performance on each knowledge assessment = 1 point.

CME sessions will occur the third Wednesday of every month, and topics will include the following:



- Advance care planning
- Chronic kidney disease
- Cardiovascular healing
- Measuring depression
- Diabetes
- Hypertension
- Aftercare for stroke patients
- Women's health
- More

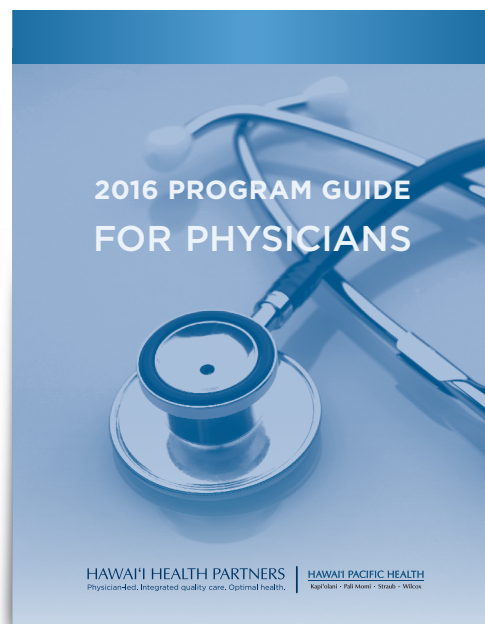
Why these measures matter:

The new measures provide more opportunities for members to receive important, relevant education supporting several of our 2016 initiatives. They also apply to all members and offer additional opportunities for everyone to earn QPP and SSP points.

The four online learning modules will be shorter in length – approximately 15 minutes each – and we will be exploring new ways to make our monthly CME offerings available to all.

For more information about how to achieve points on this measure, see pages 20, 27 and 28 in HHP's 2016 Program Guide for Physicians.

Questions or comments about this measure? Email HHP Marketing Manager Brian Driscoll at brian.driscoll@hawaiiipacifichealth.org to share with the HHP team.



Ornish Program Brings 4-step Approach to Reversing Heart Disease



ornish
reversal program

Heart disease accounts for more deaths in the United States than any other illness. Conventional medical and interventional approaches don't address underlying disease processes, much less reverse coronary stenosis.

However, nearly four decades of peer-reviewed clinical research demonstrate that we can reverse coronary stenosis and ischemia, and improve cardiac risk factors, by applying rigorous lifestyle changes to patients' lives – often without the need for additional medication or surgery.

For that reason, Straub Clinic & Hospital is now offering the Dr. Dean Ornish Program for Reversing Heart Disease™. The program consists of four elements:

- 1. A whole foods, plant-based diet naturally low in fat and refined carbohydrates**
- 2. Moderate aerobic exercise**
- 3. Stress management techniques**
- 4. Psychosocial support**

This program shows patients how to make and sustain these changes. Recognizing the value of this approach, the Centers for Medicare & Medicaid Services and HMSA have recently approved the Ornish program for 72 hours of reimbursement as "intensive cardiac rehabilitation."



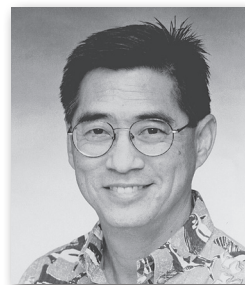
Participants experience the program with a small consistent group who all have the common goal of reversing their heart disease and improving their well-being. A dedicated, multi-disciplinary health care team guides participants every step of the way:

- **Certified delivery team**
- **Registered dietitian**
- **Stress management specialist**
- **Exercise physiologist**
- **Program medical director**
- **Nurse case manager**
- **Group support facilitator**

The Ornish Program is currently covered by HMSA and Medicare for patients who qualify. You can refer any interested patients to Straub Clinic & Hospital at 808-522-4114.

MEMBER SPOTLIGHT: KEITH T. MATSUMOTO, MD

Keith T. Matsumoto, MD, graduated from the University of Hawai'i John A. Burns School of Medicine in 1979. He works in Honolulu specializing in pediatrics, and is affiliated with Kapi'olani Medical Center for Women & Children. Dr. Matsumoto serves on the Hawai'i Health Partners (HHP) Board of Managers as secretary/treasurer and chair of the Finance Committee.



Keith T. Matsumoto, MD

HHP: From a financial perspective, and just overall, where do you see health care headed? What is HHP's role in this transition?

MATSUMOTO: Locally and nationally, health care financing is headed toward a bundled payment/capitation model; the time table for this transition appears to be accelerating faster than we have been expecting. HHP and other ACOs will be key to aligning the clinical and financial aspects in this transition.

Healthy lifestyles, preventive health/medicine and population health will be major drivers in the future. Health care providers standing or working alone will not have the ability or capacity to have a significant impact. HHP was formed to help address these challenges.

HHP: Regarding both quality and cost, where do you see Hawai'i versus the rest of the country? What unique challenges do we face?

MATSUMOTO: For several years, Hawai'i Pacific Health's performance regarding quality measures, and HHP's since its inception two years ago, has consistently ranked with the top organizations nationally despite Hawai'i having health care costs below the national average. Consider that with the backdrop of Hawai'i's cost of living being well above the national average.

One of the unique challenges we face is the predominant role of HMSA and its major influence in establishing community pricing. Although one may argue that its dominance has kept a lid on payment to providers, the community at large has benefited by the fact that health care costs make up a smaller percentage of Hawai'i's GDP compared to the mainland, allowing more to be allocated to non-medical community needs. Also, health care transformation may be less onerous dealing with one or a few insurers versus multiple insurers.

HHP: Why do you think anyone would be reluctant to join an ACO?

MATSUMOTO: For doctors who have been independent, especially in solo or very small practices, joining an ACO means giving up some autonomy. But as mentioned previously, health care is changing, and singular, independent providers not aligned or affiliated with a larger organization will face a difficult, if not impossible, environment in which to continue practicing.