The Accountable Care Journey:
Getting Started

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What is accountable care?

The healthcare system of the future will focus as much on preventative care and fostering healthy habits from birth, as it does on combating disease and disabilities. At the center of this transformation is accountable care. It's a journey that begins with a community commitment to create an environment of individual responsibility for health and happiness, and continues with healthcare workers’ commitment to be fully present at work and focused on quality and customer service. This includes an emphasis on clear communication and dialogue that fosters trust and cooperation among coworkers and their patients.

Within an accountable care system, clinicians, healthcare workers and patients all work together to support active programs of caring outreach to individuals in the community most at risk for significant health issues. Programs are also established for community members with medium- and low-risk profiles that model, encourage and support positive lifestyles. The negative impact of stress on individual health, morale and productivity is recognized and accounted for in a holistic approach to wellness.

What characteristics exist in an accountable care culture?

Successful accountable care cultures include certain characteristics within the community and the healthcare, public and private sector organizations that serve them:

- **Community wellness champions** – these are respected and visible community members who continually reiterate the wellness message: for instance, physicians, government and business leaders, and sports and media celebrities.

- **Health insurance plan design incentives** – employers and the forthcoming health insurance exchanges should offer products and services that facilitate and support efficient healthcare decision making by consumers.

- **Active participation of primary care physicians and their extenders** – this requires stronger roles from increasingly well-trained nurses, physician assistants, health coaches, nutritionists and other care providers.

- **Forums to agree upon and communicate evidenced-based quality processes** – physicians must own the process of reducing the substantial variation in treatment practices and costs, which exists across the country and even between county lines.

- **Transparency** – everyone in the system has responsibility for health improvement, so everyone should have access to the data, facts and pricing involved.
Who is ultimately responsible for improving health and the healthcare system that supports it?

**You** are. Whether you are a patient or a doctor, a hospital system CEO or a state governor, the VP of HR for a major corporation or a small business owner—you are responsible.

**What can healthcare employers do to support and foster accountable care?**

Healthcare organizations are unique because they are healthcare providers and employers. By involving department heads, well-known and respected physicians, as well as senior management and human resources, a culture of accountable care can be created within the healthcare organization that will spread to the community. Review of claims adjudication, care coordination and chronic disease management activities—within the healthcare organization and its insurance carrier or third party administrator—will yield bountiful information about the organization’s readiness for accountable care delivery.

The same tools that large, self-funded employers have used for years to manage the cost of their medical benefit plan can be used to create a flow of data—between the payer, healthcare organization and physicians in the community—that supports and measures progress toward accountable care. Of course everything goes to waste without an effective communication program, which incorporates several forms of media and online tools for modeling the financial impact of plan options and health-related behavior choices. The healthcare organization that will be successful in its community is the one that can demonstrate success at providing cost-effective, efficient care under its own medical benefit plan.

**How can the community physician be integrated?**

Bringing physicians into the accountable care model starts with two simple and direct messages:

- **Join us** – hospital and health system employers across the country are integrating with physicians in their community either by acquisition or alignments, and each side has assets to offer. Cost-containment goals are difficult to achieve without physician input on best practices, and payer and system data warehouses are meaningless without clinical dashboards in physician offices.

- **Partner with us** – partnership is needed to create an integrated system. This arrangement enhances primary care focus, manages the transformation from a fee-for-services to a fee-for-outcomes payment approach, determines target metrics for bonus payments and establishes care coordination and case management resources.
How can existing data be turned into actionable information?

Today, data on utilization, cost and quality comes from two sources. One includes claims, self-reported health status appraisals, blood draws and demographic data on employees and their families who are covered under employer and payer plans. The other consists of quality data prepared for the Centers for Medicare & Medicaid Services (CMS) and internal quality reviews. Tomorrow, data from integrated electronic medical records (EMR) networks may also be available.

An experienced data warehouse manager, preferably with a strong actuarial pedigree, is instrumental. This expert can take employer and payer data feeds, scrub the data, make it available remotely and work with the integrated delivery network (IDN) to create the desired reporting, dashboard and analysis packages as well as quality scorecards.

What common elements exist in successful accountable care environments?

A productive environment for accountable care starts with a comprehensive and robust data warehouse that tracks claims, financial, engagement and quality data. The output should include an easy-to-use interface that displays population health metrics at the community and physician panel levels. It should also be able to attribute patients to a medical home, risk adjust individual physician panels for comparison purposes, calculate shared savings payments and feed case management and care coordination systems.

In addition, case management and care coordination (medical home) activities are performed at the physician’s office or a central IDN unit that supports the physicians and facilities. Predictive modeling and patient dashboard outputs from the data warehouse drive these activities.

To enhance recoupment of withheld CMS funding and promote positive social media chatter, ongoing customer service (Hospital Consumer Assessment of Healthcare Providers and Systems) and physician-led, evidenced-based training on delivering quality is embedded in the culture.

Finally, independent scorekeepers not associated with the payers, physicians or facilities are used to audit and measure actual activity and outcome metrics against agreed upon goals.
What resources does Gallagher have to support healthcare providers on their accountable care journey?

Gallagher Healthcare Practice is a division that focuses exclusively on healthcare providers and their risk management issues. Our work with over 230 hospitals and systems gives us the experience needed to facilitate, guide and inform the journey.

Our Healthcare Analytics Consulting Practice is a division of actuaries, auditors and analysts who have been performing data warehousing and reporting, predictive modeling and metric scorekeeping for large, self-funded plans for years. They also have worked with many healthcare providers to develop network products including contracting, plan design, pricing and state filing. Our accountable care platform includes physician patient attribution, panel risk adjusting, reporting dashboards and result scorekeeping.

HealthCAREdge is a care coordination and case management platform fed by our data warehouse and powered by Quantum Health, with its Patient Information Virtual Integration Tool case management and care coordination system and staff of registered nurses.

HealthCAREfficiency is a clinical process improvement and chronic condition management consulting partnership that we have developed with two multibillion dollar leaders in the field.
About the Author

Robin Mancuso is the Benefits & Human Resources Managing Director for the Healthcare Practice at Arthur J. Gallagher & Co. In his role, Mancuso provides leadership in the identification and assessments of healthcare industry trends and in the development of the resources, services and tools to help healthcare clients successfully navigate and profit from these changes. He has chaired annual industry events and expositions and has presented at a number of venues including ASHHRA (American Society of Healthcare Human Resource Administrators), ASNY (Actuarial Society of Greater New York), HANYS (Hospital Association of New York State) and HHRAM (Healthcare Human Resources Association of Minnesota). Mancuso earned his bachelors from Hamilton College in Clinton, NY and a CEBS designation from the Society of Certified Employee Benefit Specialists.

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