

State Efforts to Control Health Care Costs

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Where Innovation Is Tradition

Fiscal Cliff? US to Default????





Two Roads to Fiscal Balance



Innovation Center Portfolio

ACO Suite:

- Shared Savings Program
- Pioneer ACO Model
- Advance Payment ACO Model
- Accelerated and Learning Development Sessions

Primary Care Suite

- Comprehensive Primary Care Initiative (CPCI)
- Federally Qualified Health Center Advanced Primary Care Practice Demonstration
- Multi-Payer Advanced Primary Care Practice (MAPCP) Demonstration
- Independence at Home
- Medicaid Health Home State Plan Option

Bundled Payment Suite

- Bundled Payment for Care Improvement

Dual Eligible Suite:

- State Demonstration to Integrate care for Dual Eligible Individuals
- Financial Alignment to Support State Efforts to Integrate Care
- Demonstration to Reduce Avoidable Hospitalizations of Nursing Facility Residents
- Medicaid Health Home State Plan Option

Diffusion and Scale Suite:

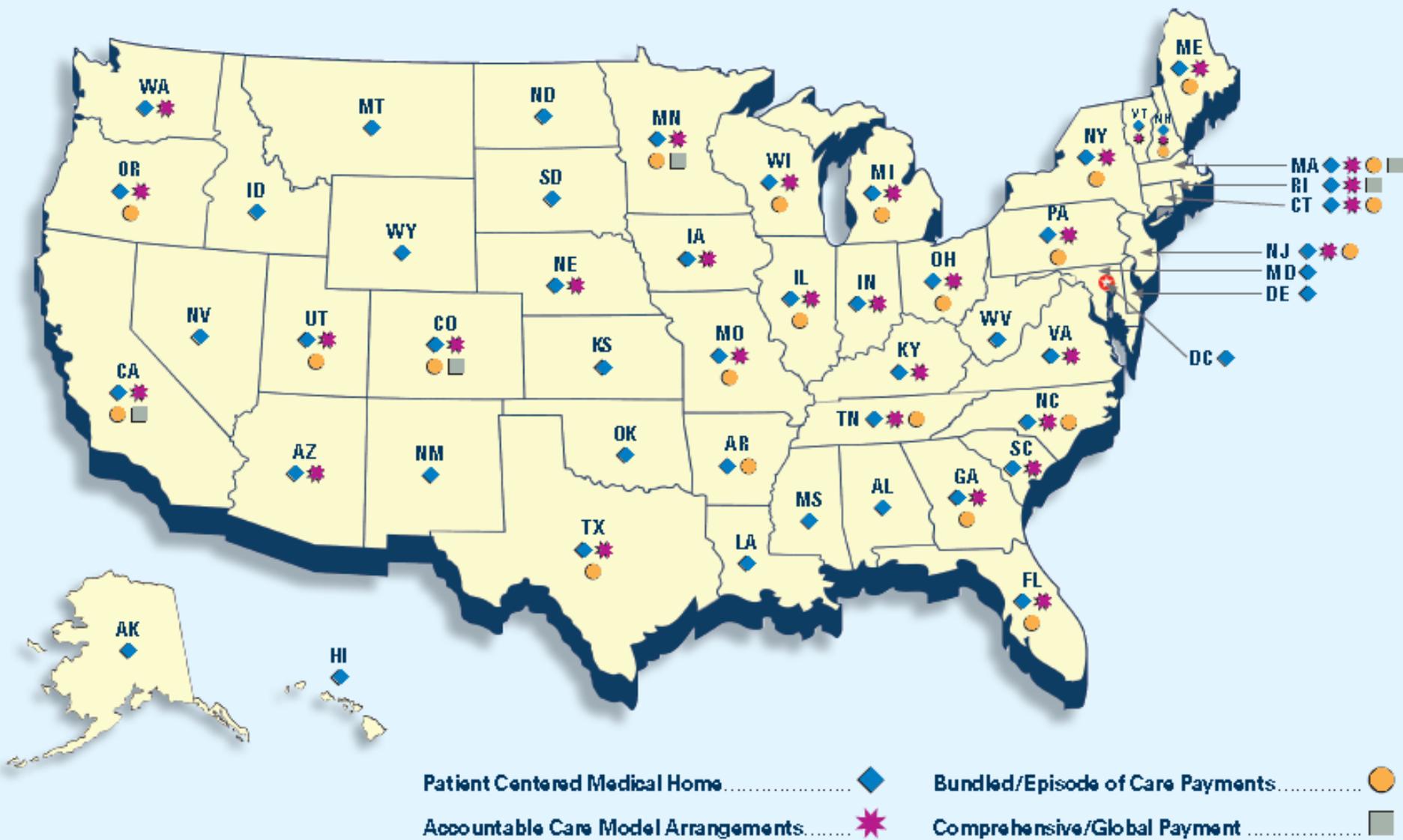
- Partnership for Patients
- Million Hearts Campaign
- Innovation Advisors Program
- Care Innovations Summit

Healthcare Innovation Challenge

Rapid Cycle Evaluation and Research

Learning and Diffusion

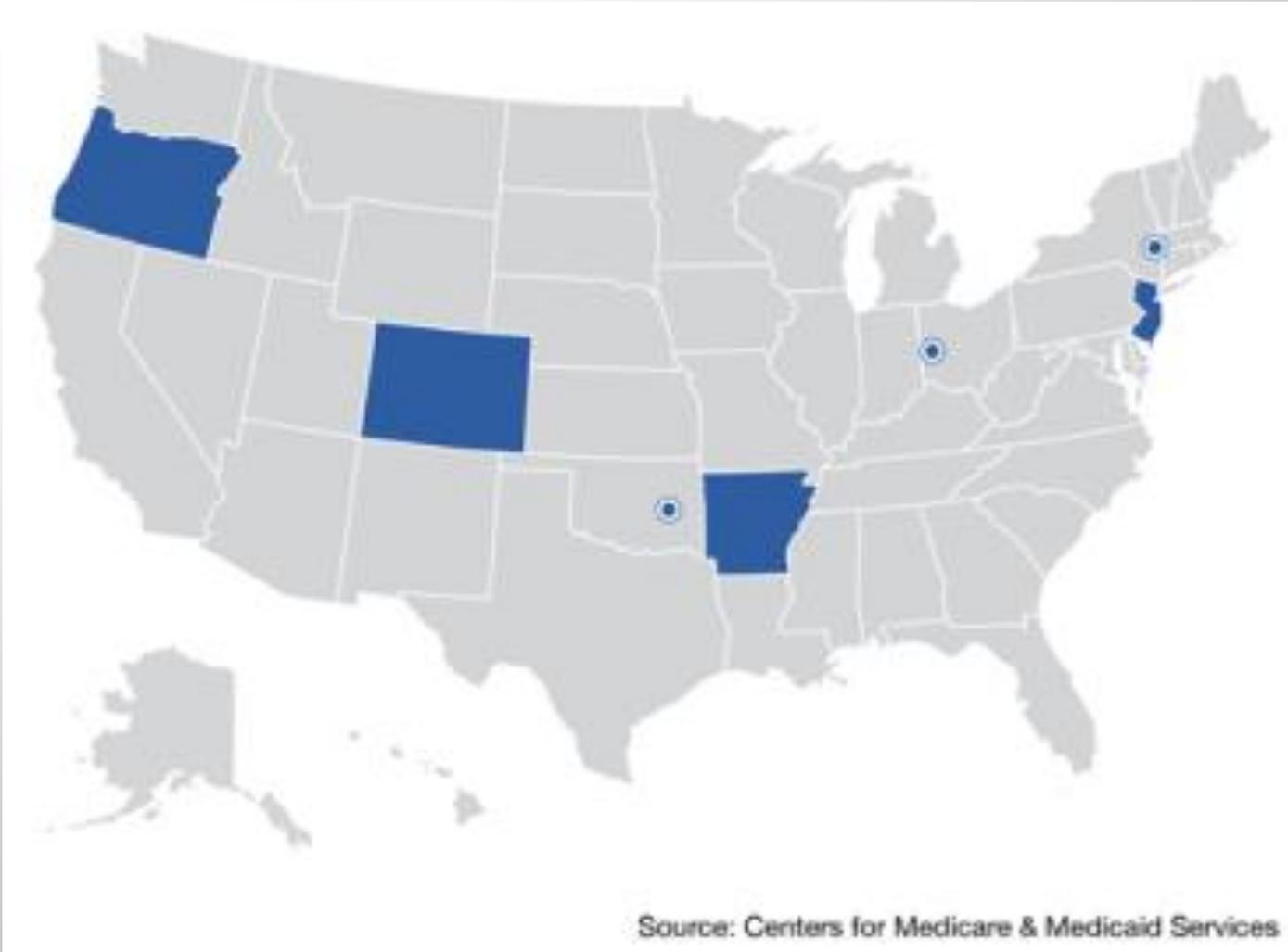
Alternative Delivery and Payment Models—Private Sector Initiatives



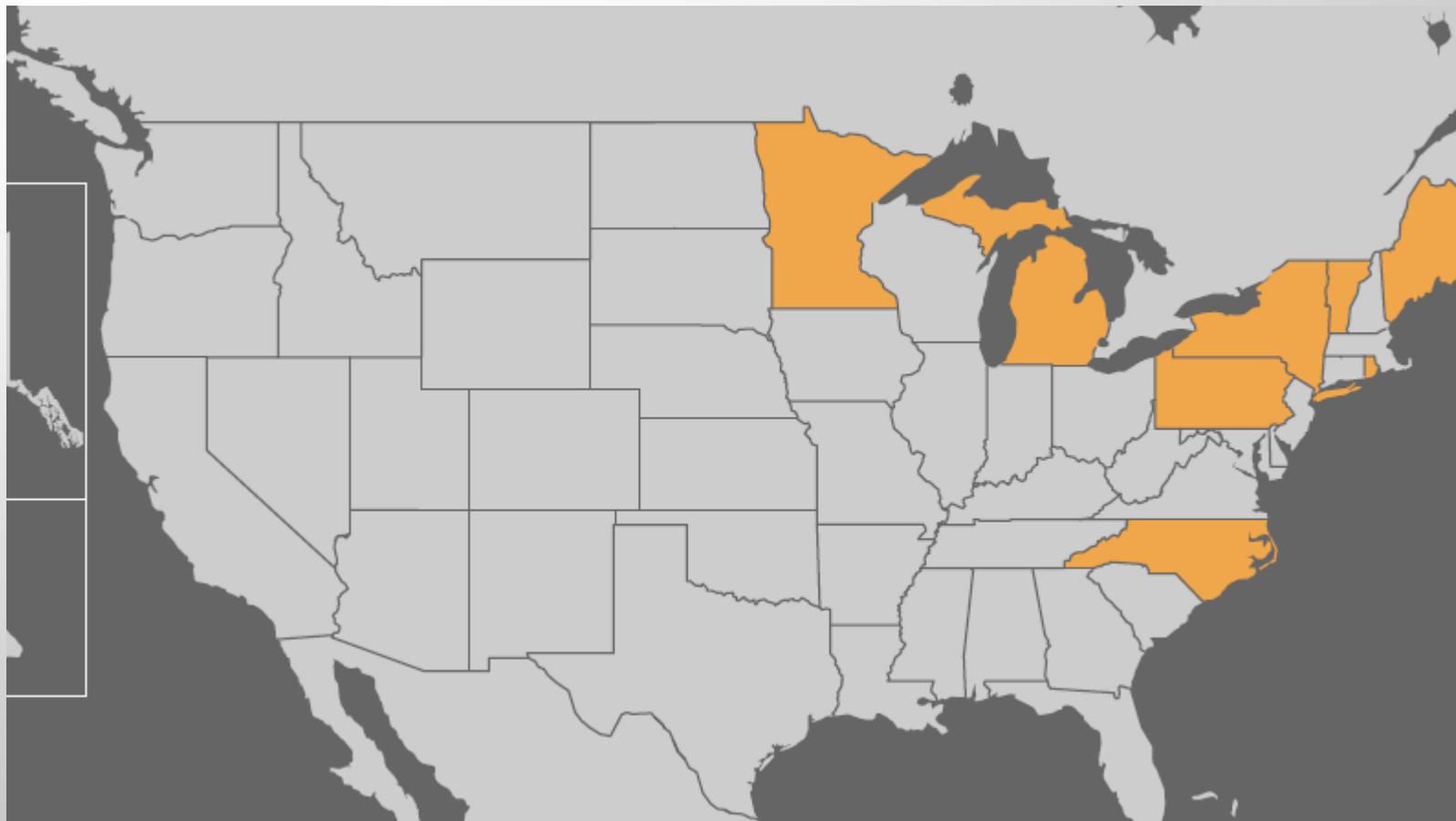
NOTE: Icons may represent multiple partnerships within the state

*The map is current as of February 2013. As new programs are identified the map will be updated accordingly.

Comprehensive Primary Care Initiative

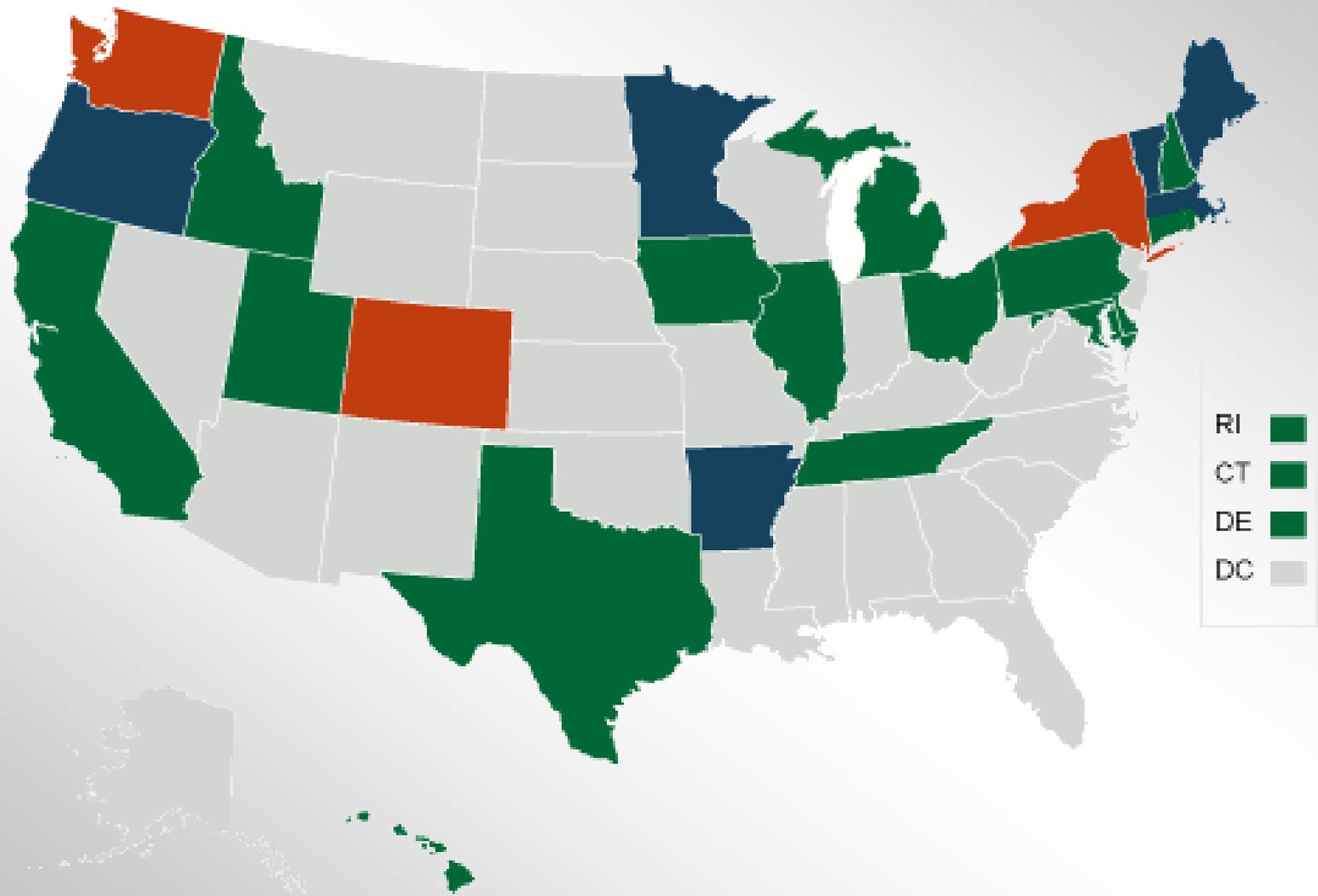


Multipayer Advanced Primary Care Practice demonstration states



State Innovation Model Awards

Model Testing Awards Model Pre-Testing Awards Model Design Awards



State Innovation Models: Theory of Action

Hypothesis to be tested: New service delivery and payment models will be more effective and produce better outcomes when they are implemented as part of a broad-based, Governor-led, statewide initiative that brings together multiple payers and stakeholders -- and uses the levers of state government to effect change

States can be strong partners in transforming health care because they:

- Pay for a large percentage of health care services
- Have broad regulatory powers over health care providers and payers
- Regulate public health, social service, and educational services
- Can convene multiple parties
- Are closer to the actual delivery of care
- Can integrate state health information exchange infrastructure and capabilities to support accountable care

Virginia Health Innovation Center

- Created on 2010 recommendation of Virginia Health Reform Initiative Advisory Council
- 501c3, housed at state Chamber of Commerce
- Seed money from stakeholder associations
- Surveyed state, got over 400 “examples”
- 6 task forces creating SIM, CMMI proposals
- Led by private actors in cooperation with state