



Comprehensive Health Care Payment Reform: What Will it Take to Get There?

April 2, 2015

7:30 a.m. Breakfast

8:15 a.m. Welcome and Introduction

The federal government announced a goal of moving 50% of provider payments from FFS to alternative approaches by 2018 and a group of private sector stakeholders have pledged to put 75% of their business into value-based arrangements by 2020. Are these goals achievable and what is necessary to get there?

Stuart Altman, Ph.D., Professor of National Health Policy, Brandeis University

8:30 a.m. Risk-Based Payment and Physician Compensation in Organized Delivery Systems

New findings from a survey of 32 large medical groups examining how they are paid, how they pay their physicians, and their stage of implementation for programs to help them meet the “Triple Aim.”

Presenters: Robert Mechanic, M.B.A., Senior Fellow, Heller School, Brandeis University
Darren Zinner, Ph.D., Scientist, Heller School, Brandeis University

Respondent: Robert Nesse M.D., Chief Executive Officer, Mayo Clinic Health System

9:15 a.m. Where Has Payment Reform Taken Off and Why?

A discussion with medical groups and health systems that have substantially increased the proportion of their business under alternative payment models including their reasons for change, achievements, key challenges and outlook for the future.

Panelists: Grace Terrell M.D., President and CEO, Cornerstone Health Care
Howard Grant, M.D., President and CEO, Lahey Health

10:15 a.m. Break

10:45 a.m. Aligning Physician Compensation with Organizational Imperatives

This session will examine how groups have begun to change their physician compensation practices to reward population management while addressing physicians’ concerns about such changes.

Panelists: Tom Graf, M.D., Chief Medical Officer for Population Health, Geisinger Health System
Nicolas Wolter, M.D., Chief Executive Officer, The Billings Clinic

11:45 a.m. Payer-Provider Partnerships to Share Risk and Improve Care

This session will explore models in which health plans provide analytic, infrastructure and other support services for delivery systems under payment arrangements where provider systems share financial risk for spending and quality performance.

Panelists: George Isham, M.D., Chief Health Officer, HealthPartners
Stuart Levine, M.D., Chief Innovation and Clinical Care Officer, Blue Shield of California

1:00 p.m. Lunch

1:15 p.m. Prognosis for Value-Based Payment Reform

In this session experts with diverse experience across payers and provider systems offer perspectives on the likely rate of growth of alternative payment models, challenges to efforts to move away from fee -for-service, approaches for managing these challenges and desired public policies.

Moderator: Stuart Altman, Ph.D., Professor of National Health Policy, Brandeis University

Panelists: Farzad Mostashari M.D., Chief Executive Officer, Aledade
Jordan Asher, M.D., Chief Medical Officer, MissionPoint Health Partners
Len Nichols, Ph.D., Director, Center for Health Policy Research and Ethics, George Mason University

2:30 p.m. Meeting adjourns