

OHIC NEWS

OHIC Continues Health System Reform Efforts—Transforming Care Delivery and Payment Models

Plans establish targets to move away from fee-for-service, improve care delivery

New plans to transform health care delivery and payment in Rhode Island were recently approved by Health Insurance Commissioner Marie Ganim.

The Care Transformation and Alternative Payment Methodology Advisory Committees, comprised of provider, insurer, and consumer representatives, convened several public meetings to discuss and develop these plans. Draft plans were distributed for public comment, and revisions were incorporated into the final plans signed by Commissioner Ganim on January 24.

“We must continue to push costs down and improve our overall health,” Commissioner Ganim said when she announced the new plans.

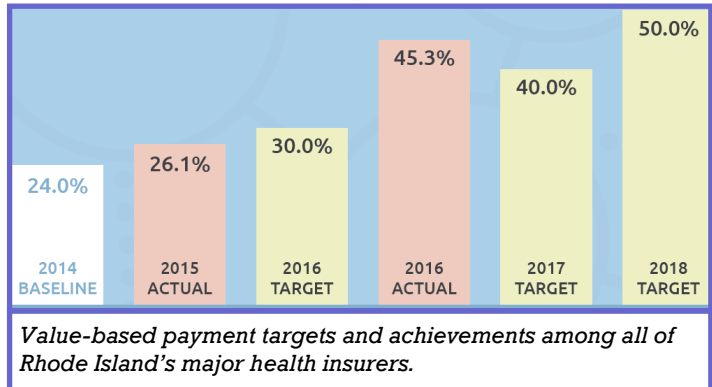
The 2018 Care Transformation and Alternative Payment Methodology Plans set targets for the state’s major health insurers that will transition Rhode Island to a value-based healthcare system.

Care Transformation – Supporting and Enhancing Primary Care

OHIC first established [Affordability Standards](#) in 2010 which began to boost investment in primary care. [Research](#) points to a strong primary care infrastructure improving patient outcomes and [slowing cost growth](#).

Under the current version of the Affordability Standards, a Care Transformation Plan is developed annually by a stakeholder advisory committee to establish specific targets in primary care through supporting wider adoption of the Patient-Centered Medical Home (PCMH), a model of care delivery that emphasizes prevention and overall wellness and that focuses on coordinated, accessible, team-based care through the primary care provider.

Rhode Island is currently ranked [third in the nation](#) for PCMH-designated practices per capita. This year’s Care Transformation Plan requires 50% of practices contracting with insurers that have not yet attained PCMH designation to do so by November 30, 2018. By the end of 2019, 90% of current contracting practices are required to have attained PCMH.



The plan also includes several OHIC-led initiatives to Support medical practices in attaining the PCMH designation.

Alternative Payments Methodologies – Paying for Value, not Volume

OHIC is also focused on supporting insurers’ transition away from fee-for-service payments to providers that tie pay to the number of services performed and toward new models that are based on paying for quality and value.

The Alternative Payment Methodologies Plan for 2018 features several different payment models, including a new target for “risk-based contracts.”

Risk-based contracts between providers and insurers involve medical practices taking on some amount of financial risk. Practices entering these agreements stand to gain or lose money based on the quality of the care they provide and patient outcomes, incentivizing higher-value health care. Under the new plan, 10% of an insurer’s enrollees should be covered under a risk-based contract by the end of 2018 and 30% by the end of 2019.

The plan also sets targets for other types of non-fee-for-service payment models and establishes an overall goal of 50% of insurer payments to be under some kind of alternative method in 2018 and 2019.

The 2018 Care Transformation and Alternative Payment Methodology Plans are available on the [OHIC website](#).

Quarterly Public Comment Meeting Scheduled for February 20 at Cranston Public Library

Health insurance purchasers and other members of the public will have an opportunity to bring their comments and concerns directly to the Health Insurance Commissioner and OHIC's advisory council at a public meeting in Cranston next month.

In partnership with the [Greater Cranston Chamber of Commerce](#), the Office of the Health Insurance Commissioner (OHIC) and the Health Insurance Advisory Council (HIAC) will hold their next Quarterly Public Input Meeting on Tuesday, February 20 from 4:30-6:00 PM at the central branch of the Cranston Public Library, 140 Sockanosset Cross Road, Cranston.

OHIC and HIAC hold these public hearings in communities throughout the state in order to hear from healthcare consumers – including individual and employer purchasers of health insurance – and share with them information about OHIC's efforts to improve insurance affordability, access, and quality in Rhode Island.



Members of the public are encouraged to participate in the next Quarterly Public Input Meeting, February 20 in Cranston.

"Public involvement is very important to OHIC, and we are looking forward to hearing from members of the community in Cranston," said Health Insurance Commissioner Marie Ganim.

An agenda for the meeting will be posted in the coming weeks. For more information, visit the HIAC page on the OHIC website: <http://www.ohic.ri.gov/ohic-hiac.php>

Upcoming Meetings

- **State Innovation Model (SIM) Steering Committee**
Meets second Thursday of each month
Thursday, February 8, 5:30 PM
HP Conference Room 203
301 Metro Center Blvd., Warwick
- **Cost Management Strategies Workgroup (OHIC)**
Wednesday, February 14, 10:00 AM—12:00 PM
RI Quality Institute Washington Conference Room
50 Holden Street, Providence
- **Health Insurance Advisory Council (HIAC)**
Meets third Tuesday of each month
Tuesday, February 20, 4:30-6:00 PM
Cranston Public Library
140 Sockanossett Cross Road, Cranston
- **Cost Management Strategies Workgroup (OHIC)**
Wednesday, February 28, 10:00 AM—12:00 PM
Location TBD



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