

# Organized Systems of Care

(Accountable Care Organizations)

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# Organized System of Care



- An Organized System of Care is a provider led, population-based, coordinated care process that achieves benchmark performance for quality, cost and patient experience with care.

# The Population



- Each Organized System of Care serves a defined population.
- The attributed population of PCP's aligned with an Organized System of Care defines the population of the OSC.
- The overall performance of the OSC is determined by the services delivered to this population.

# Care Relationships within an OSC



There may be one, or many, OSC's identified within a PGIP-affiliated PO.

Each Primary Care Practice Unit will be limited to participation within a single OSC.

Care entities within the OSC may be evaluated based on their own, separately determined, attributed populations. (This is a consequence of complex care relationships.)



- The relationship between hospitals and OSC's may be
  - ✓ 1 to 1,
  - ✓ 1 to many, or
  - ✓ many to 1
- Hospital performance will be assessed based on performance to its attributed population.



- BCBSM Payment Model
  - fee-for-service, with higher office visit fees based on population-based performance
  - On July 1, 2010, **all** PCMH-designated practices within PGIP organizations that have defined participation in an OSC that achieves benchmark performance (Top 20 percent of PGIP population) will receive 120 percent of TRUST for office visits services.



- Expect to continue to increase number of PCMH designated practices
- Possible requirement for formal practice transformation assistance (e.g., LEAN)
- Possible redistribution of weights



- Continue to define OSC's based on performance
- Begin PGIP initiatives that support development of OSC capabilities and functions.
- Reward PO's for participation and performance in these initiatives will follow the usual pattern.
- An OSC leadership group will recommend future directions and criteria for OSC designation.



PGIP is currently looking into opportunities to bring in:

- Dermatologists
- ER physicians
- Gastroenterologists
- Neurologists
- Orthopedic Surgeons
- Otolaryngologists
- Radiation Oncologists
- Rheumatologists

