Primary Care Component Alignment – Top Tier and COHE
April 27, 2017

Presented to ACHIEV by
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Objectives for Today

• Review Top Tier Criteria
• Discuss Enhancements to COHE Program
• Update on Some Criteria
• Get Feedback on Upcoming Policy Decisions
Building on Workers Compensation Reform Foundation

**Vision:** To be the quality leader in workers’ compensation healthcare, achieving the best outcomes and quality of life for workers at the best value and using the simplest means.

**Objectives**

1. Improve outcomes for injured workers and the overall system.
2. Align system objectives and incentives so that no injured worker falls through the cracks.
3. Expand capacity for and improve quality of occupational health best practices for both primary and specialty care for secondary and tertiary prevention of disability.
4. Increase satisfaction of providers, employers, and injured workers with the workers compensation system.
Healthy Worker 2020
Innovation in Collaborative, Accountable Care

An Occupational Health Home for the Prevention and Adequate Treatment of Chronic Pain
Healthy Worker 2020 Vision:
To be the quality leader in workers’ compensation healthcare, achieving the best outcomes and quality of life for workers at the best value and using the simplest means.

<table>
<thead>
<tr>
<th>Healthy Worker 2020</th>
<th>Best Practices for:</th>
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</thead>
<tbody>
<tr>
<td><strong>Primary Occupational Health Care</strong></td>
<td>Ensure ongoing care provided to injured workers is delivered using available best practices.</td>
</tr>
<tr>
<td><strong>Surgical Care</strong></td>
<td>Ensure surgical care provided to injured workers is delivered using available best practices; explore the opportunity to use innovative payment methods.</td>
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<tr>
<td><strong>Chronic Pain and Behavioral Health Care</strong></td>
<td>Implement methods to prevent chronic pain and/or behavioral health issues from creating or extending disability. Create a stepped care pathway that includes collaborative care and appropriate clinical care steps.</td>
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<tr>
<td><strong>Physical Medicine</strong></td>
<td>Develop best practices for physical therapists that will encourage early use of active care with a focus on function.</td>
</tr>
<tr>
<td><strong>Catastrophic Care Services</strong></td>
<td>Implement internal and external support systems for IW with catastrophic injuries.</td>
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**Model of Care**

**Care Coordination**

**Opioid Prescribing Best Practices**

**Incentive Methods**

**Operations**
## Healthy Worker 2020
### Innovation in Collaborative, Accountable Care

<table>
<thead>
<tr>
<th>Service Area</th>
<th>COHE</th>
<th>Top Tier</th>
<th>Specialty Services</th>
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<tbody>
<tr>
<td><strong>Core Occ. Health Model/System</strong> <em>(Community and Organizational leadership, Mentors, Information systems)</em></td>
<td>✓</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Core Occ. Health Best Practice (BP) Cluster</strong> <em>(Assigned coordination, timely and complete ROA, APF, Barriers to RTW, Conference and Plan, Functional measures, PGAP, standard work/defined handoffs and plan, follow EBM guidelines)</em></td>
<td>✓</td>
<td>✓</td>
<td></td>
</tr>
<tr>
<td><strong>Surgical Best Practice Cluster</strong> <em>(Core Occ BP, Min DAW; Access timelines standards, documented RTW plan, Warranty and Bundle Purchasing)</em></td>
<td>+</td>
<td>+</td>
<td>✓</td>
</tr>
<tr>
<td><strong>Chronic Pain and Behavioral Health Collaborative Care Services</strong> <em>(Stepped care; regular consult with behavioral and/or pain expert; brief interventions; functional measures, EBM pain interventions)</em></td>
<td>+</td>
<td>+</td>
<td>✓</td>
</tr>
<tr>
<td><strong>Structured Multidisciplinary Pain Evaluation and Program</strong></td>
<td>+</td>
<td>+</td>
<td>✓</td>
</tr>
<tr>
<td><strong>Opioid Prescribing Best Practice Cluster</strong> <em>(Guideline compliant; functional measures; coordinate dose info.; taper and dependence)</em></td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td><strong>Structured Physical Medicine Best Practice Cluster</strong> <em>(Core Occ BP; standard referral criteria; active treatment; stepped care w/goals; fx measures)</em></td>
<td>+</td>
<td>+</td>
<td>✓</td>
</tr>
<tr>
<td><strong>Catastrophic Services and Centers of Excellence</strong> <em>(E.g. Chemical Illness; Catastrophic Burn, TBI, Spinal Cord Injury, Amputee, Multiple Trauma; enhanced case management, discharge and life plan)</em></td>
<td>+</td>
<td>+</td>
<td>✓</td>
</tr>
</tbody>
</table>
Top Tier of the MPN for Disability Prevention

- Identifies the best attending providers at preventing disability
- Increases the availability of best practices
- Achieves positive outcomes
- Provides an alternative to COHEs
- Simple for providers to understand and L&I to administer
- Aligns with other quality purchasing programs (such as COHE)

Healthy Worker 2020 Vision: To be the quality leader in workers’ compensation healthcare, achieving the best outcomes and quality of life for workers at the best value and using the simplest means.
Top Tier helps L&I achieve Healthy Worker 2020 Goals

Top Tier – of Core Occupational Health Best Practices
• Route 1: COHE High Adopter with access to COHE HSC
• Route 2: Top Tier Criteria plus systematic care coordination

Top Tier – of Surgical Occupational Best Practices
• Route 3: Surgical best practices high adopter plus care coordination
  • New program that combines ONSQP and SBP

Top Tier – (to be named) Occupational Health Best Practices
• Limited possible new best practices with care coordination may be identified (e.g. see clusters)
Top Tier Design Framework

• Primary Care Paths to Top Tier designation
  o A “stand-alone” path open to MPN providers.
  o A COHE path open to COHE high adopters.

• The paths should be:
  o Substantially equivalent.
  o Aligned with one another.
Review Alignment Table
Changes and Challenges

Changes

• Job Analysis/Job Description
• Barriers to Return to Work Best Practice

Challenges

– Claim Review Testing
– Assessment in different pathways
– Systematic Care Coordination
– Complex Claims Project
Policy Discussion – Primary Care Top Tier Assessment

Stand-alone path - open to MPN (attending) provider

- Assessment needed for all criteria
- Assessment based on application/attestation and data analysis from all of the provider’s state fund claims within the review period
  - *Manual review of claims for those not capable of assessment via data – awaiting data testing*
Policy Discussion – Primary Care Top Tier Assessment

COHE path open to COHE high adopters

- COHE high adoption status would satisfy COHE related criteria
- Current COHE program structure would mean:
  1. Assessment of COHE related criteria is based on the provider’s state fund COHE claims only
  2. Assessment of additional TT criteria based on either:
     1. all state fund claims or
     2. State fund COHE claims only
  3. High adopter status is not static – largely because it can be based on a small number of claims