

Provider Access and Standards

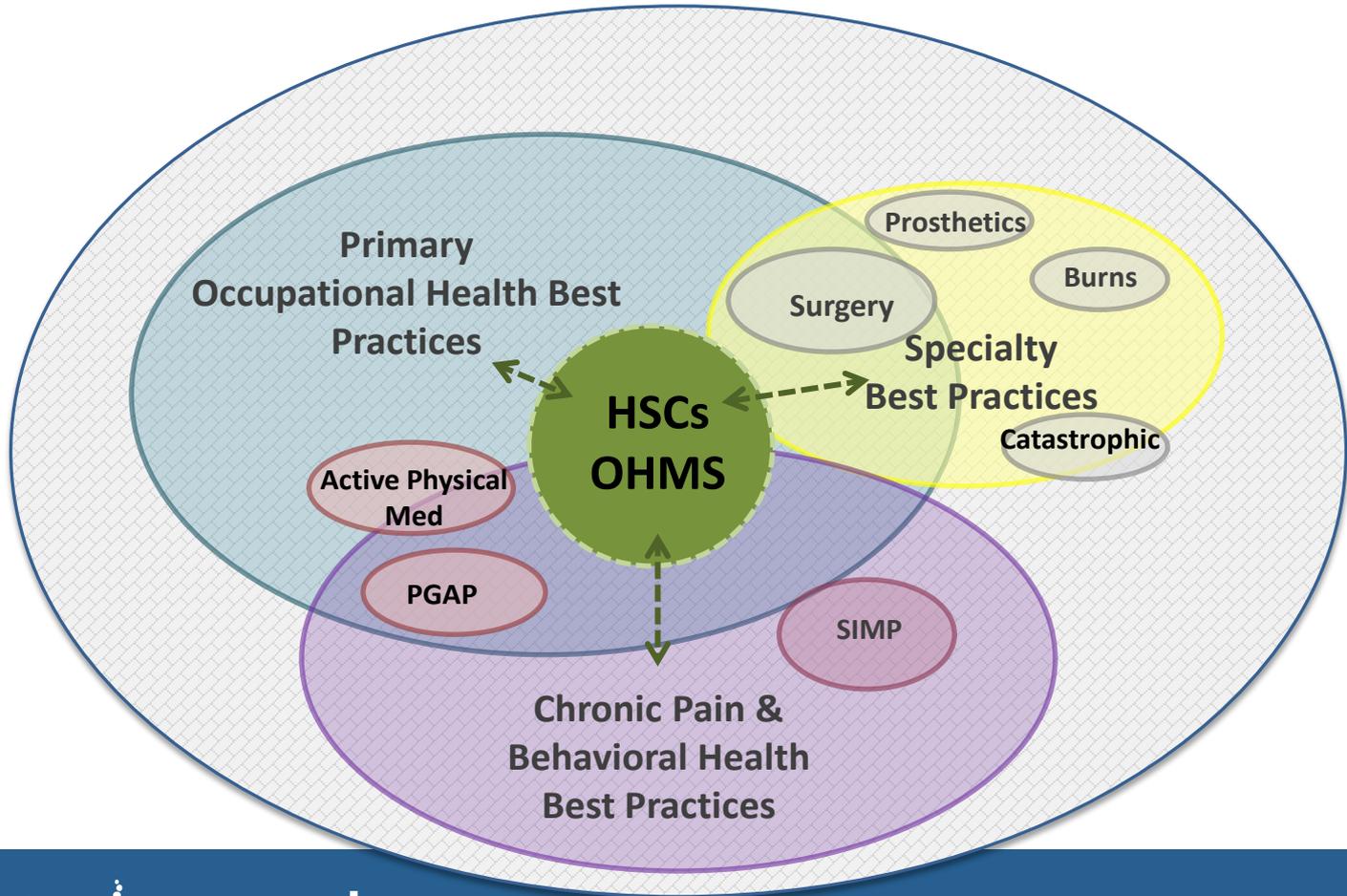
Presented by Susan Campbell and Leah Hole Marshall, JD

ACHIEV, April 28, 2016

Healthy Worker 2020

Innovation in Collaborative, Accountable Care

An Occupational Health Home for the Prevention and Adequate Treatment of Chronic Pain



OCCUPATIONAL HEALTH **BEST PRACTICES**

WORKING TOGETHER TO KEEP PEOPLE WORKING

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.



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L&I Provider Needs: Data Discussed Jan. 2016

1. Geographic Location - WHERE do we need?

- L&I Heat Maps
- HCA Accountable Community of Health
- COHE Service Areas

2. Provider Capacity - HOW MANY do we need?

- Panel Size - Research, Federal, State, Other Payer
- L&I Provider Network and Active Biller Counts

3. Provider Types - WHO do we need?

- L&I Provider Counts
- UW Workforce Planning
- WA MHIP, L&I Healthy Worker 2020

4. Provider Standards - WHAT do we need?

- Quality, Timeliness, Patient Volume



L&I Provider Needs: Discussion

1. Provider Capacity – HOW many?

- Traditional focus on panel size will not get us to a robust network of quality providers
- Broad network has tradeoffs

2. Provider Types - WHO do we need?

- Examples from current collaborative care implementation (COHE and MHIP)
 - » Focus on skills

3. Provider Standards - WHAT do we need?

- Quality
- Timeliness
- Accepting Patients



Gap Analysis for COHE

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- Legislative report on COHE
- Discussion on the “meta-questions” and data analysis



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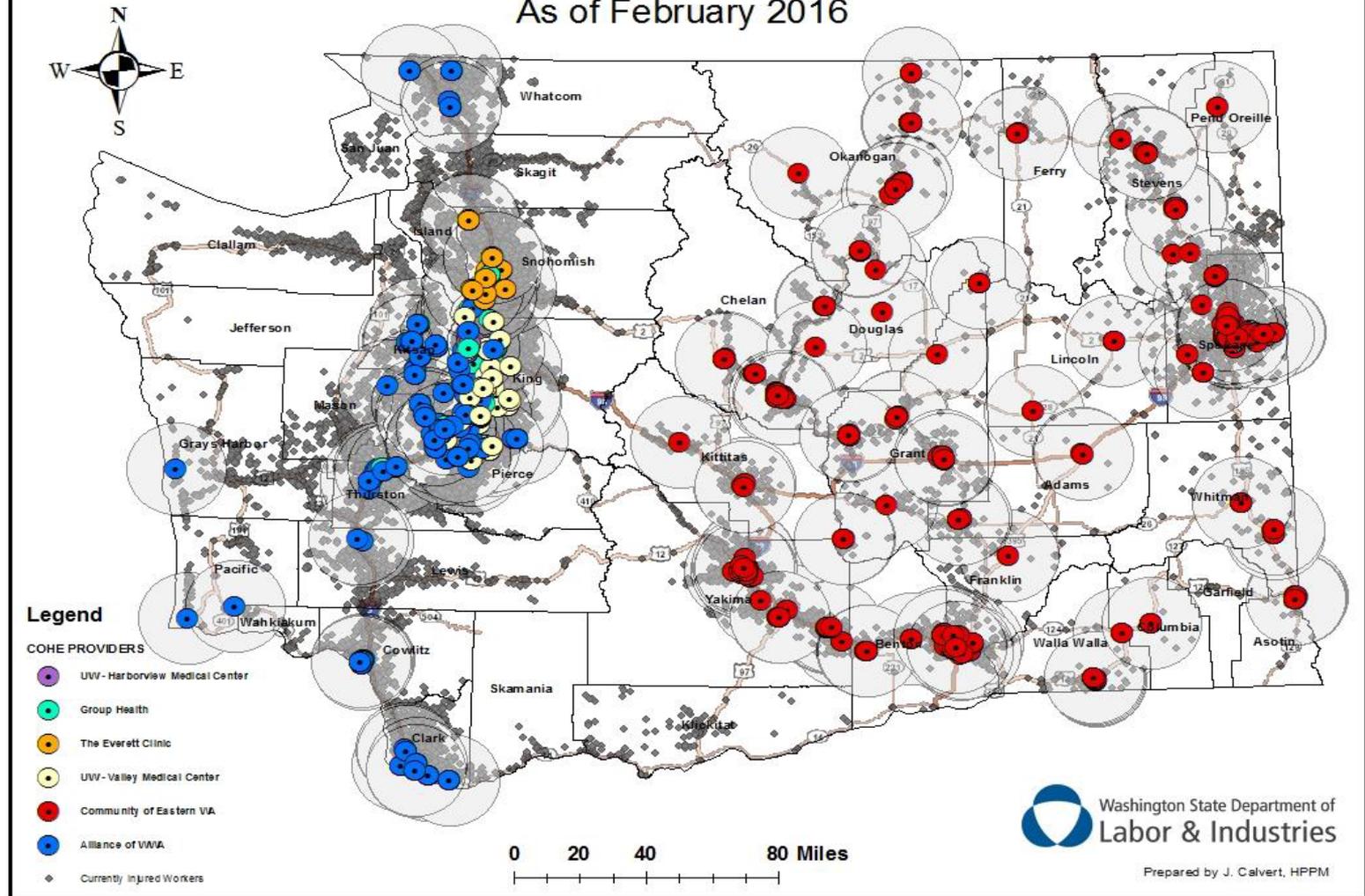
Slide 7

Measures for the legislative report and ACHIEV

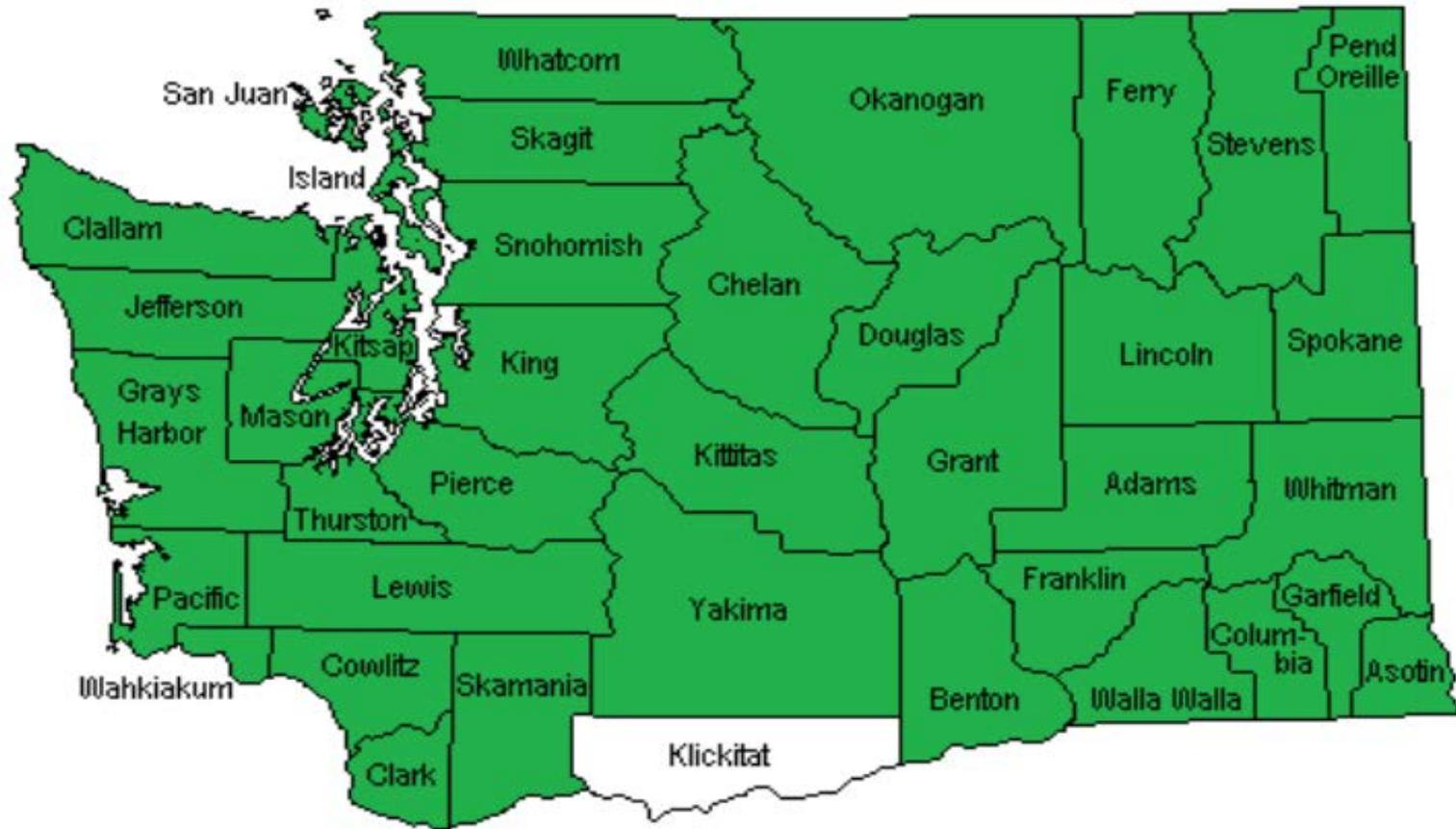
- Percent of workers who live within 15 miles of one or five COHE providers
 - ❖ currently at 94% and 93.5% respectively
- Number of counties covered in COHE contracts.
 - ❖ Klickitat is the only one not yet covered in a contract.
- Percent of statewide claims initiated by a COHE provider.
 - ❖ Currently ~ 50%



All Injured Workers With 15-mile Radii From Current Active COHE Providers As of February 2016



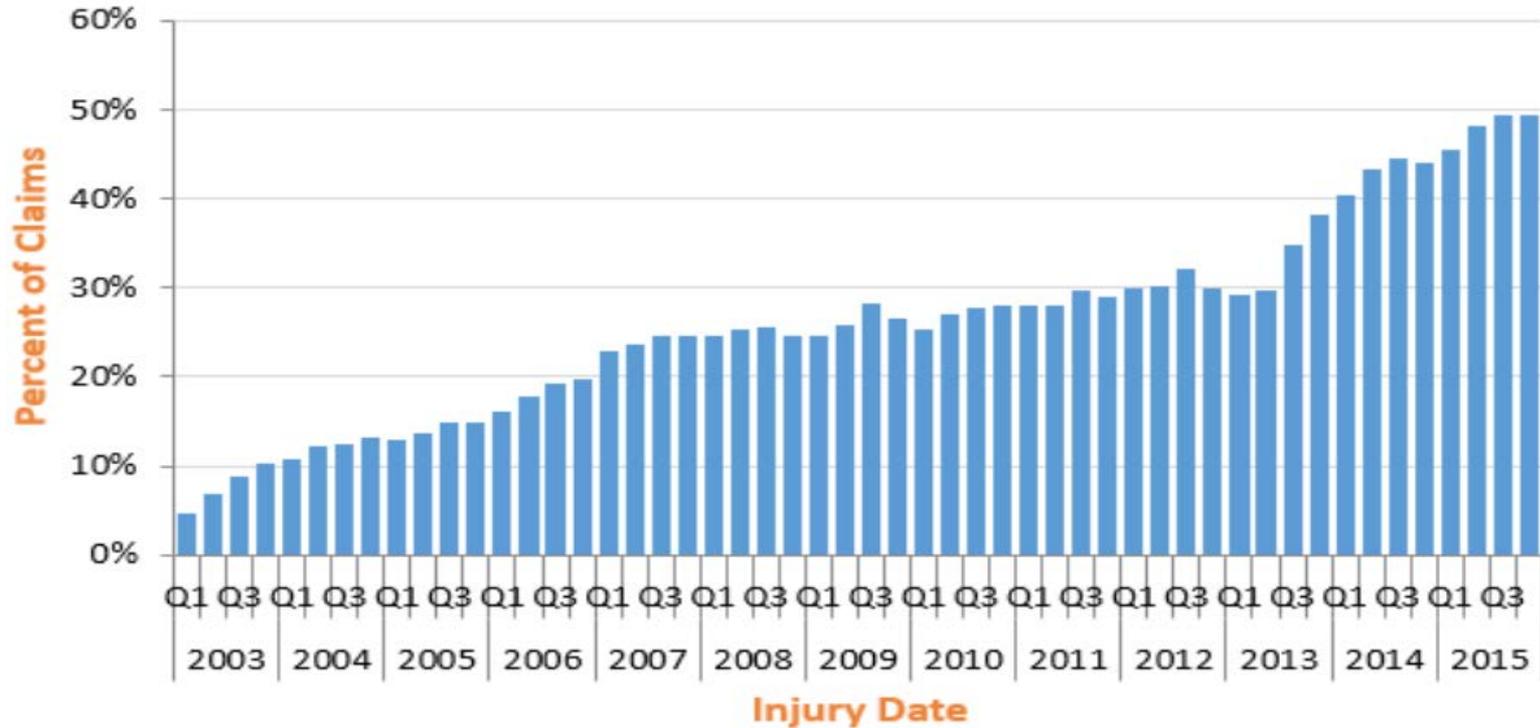
COHE Counties



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Percent of Claims Initiated by a COHE Provider



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“Meta” Questions

- COHE effectiveness
- Can a COHE be too big? Can a COHE be too small?
- What is our target for COHE access in counties and/or regions?
 - Which providers should we target?
 - Can we get to 80% of claims initiated in COHEs?
- Consistency with purchasers other than L&I (HCA).
- Providers to include in COHE gap analysis
- Others?



Health Care Authority Accountable Communities of Health Regions



Healthier Washington is Governor Inslee's multi-sector partnership to improve health, transform



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Region	% providers in COHE	% initiated claims in COHE 1/1/15-3/31/16
N Central Comm. of Health	64%	88%
Better Health Together	55%	84%
G. Columbia Comm. Health	48%	81%
Olympic	24%	52%
Pierce	19%	45%
King	15%	38%
No Sound Comm. Of Health	15%	21%
Southwest	15%	24%
Cascade Pacific	7%	14%



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