

PBGH stands behind the Triple Aim 2011-2015

1. Improve Population Health | 2. Enhance the Patient Experience | 3. Reduce or Control Cost



Program & Organizational Metrics – Level One – 2015 Metrics

Engaging Consumers

ALL national health plans publicize physician fee schedules and tie to benefits.

30% of consumers report using patient ratings of doctors when choosing a physician

25% more consumers report participating in a decision making process when considering treatment

Paying for Value

20% of health plan payments to providers are based on quality and efficiency ratings

Bend member purchaser cost trend to **CPI+1**

Redesigning Care Delivery

PBGH dashboard is **adopted** and results **published**

7% increase in overall satisfaction rating of routine and chronic care

25% increase in proportion of routine and chronic care patients who receive "right care"

25% reduction in preventable hospital and ER admissions

PBGH Organizational

Add **5** net new members

Improve member satisfaction & retention

Improve employee satisfaction & retention

Develop impact study for key stakeholders

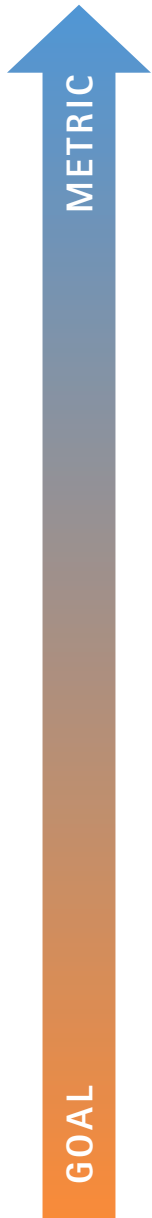
Advancing Policy

Project Metrics – Level Two

Project goals must contribute to the Program & Organization level goals and will likely be cross functional e.g. Better Maternity Care will reduce costs (Paying for Value) and improve shared decision making (Engaging Consumers)

Staff Metrics – Level Three

Program & Organizational Metrics – Level One – 2015 Metrics



<p>Engaging Consumers</p> <p>ALL national health plans publicize physician fee schedules and tie to benefits.</p> <p>30% of consumers report using patient ratings of doctors when choosing a physician</p> <p>25% more consumers report participating in a decision making process when considering treatment</p>	<p>Paying for Value</p> <p>20% of health plan payments to providers are based on quality and efficiency ratings</p> <p>Bend member purchaser cost trend to CPI+1</p>	<p>Redesigning Care Delivery</p> <p>PBGH dashboard is adopted and results published</p> <p>7% increase in overall satisfaction rating of routine and chronic care</p> <p>25% increase in proportion of routine and chronic care patients who receive "right care"</p> <p>25% reduction in preventable hospital and ER admissions</p>	<p>PBGH Organizational</p> <p>Add 5 net new members</p> <p>Improve member satisfaction and retention</p> <p>Improve employee satisfaction and retention</p> <p>Develop impact study for key stakeholders</p>	<p>Advancing Policy</p>
<p>Engaging Consumers</p> <p>Consumers have necessary information about total cost and quality to make informed decisions about, plans, providers and/or treatment options</p> <p>Patients use consumer reported satisfaction of doctors online</p> <p>Patients are active participants in treatment decisions</p>	<p>Paying for Value</p> <p>Payment reform motivates providers to partner with high quality and cost efficient specialists</p> <p>Financial incentives are aligned toward managing total cost of care</p>	<p>Redesigning Care Delivery</p> <p>Uniform measurement tool for redesigned care delivery models and their effectiveness</p> <p>Newly redesigned care programs have improved how care is delivered and are demonstrating better outcomes</p> <p>PCPs are partnering with cost efficient and high quality specialists to deliver care</p>	<p>PBGH Organizational</p> <p>Be a driving force for change</p> <p>Represent the voice of our members to key stakeholders</p>	<p>Advancing Policy</p> <p>To be a recognized expert and advocate for policies that advance Value Based Purchasing goals including: influencing federal payment policy; ACO rules; spending of HIT incentives; quality measures used to pay for value</p> <p>Private/public partnerships drive policy solutions that redesign care delivery and payment reformPBGH</p>