Symptoms & Cures Newsletter 9/27/2018 | New Jersey Health Care Quality Institute



## **Scoring Payment Reform in the Garden State**

A PRESCRIPTION FOR BETTER HEALTHCARE IN NEW JERSEY

Two numbers struck me after reading Catalyst for Payment Reform's New Jersey Scorecard: 80 and 20. In our state's commercial market, the share of total dollars paid to specialists (outpatient and inpatient) is 80 percent compared with just 20 percent to primary care providers. The national figures are only slightly better: 75 and 25 percent.

What's wrong with this picture?

Nationally, the rise in health care spending is not sustainable. The health share of gross domestic product (GDP) is projected to rise from 17.9 percent in 2016 to 19.7 percent in 2026 — assuming annual increases of 5.5 percent annually. To control spending and achieve better health, purchasers and providers are working to improve the way we pay for health care.

As we move toward more coordinated and value-based care models, we need to right size our investment in preventive health and primary care. We need to shift funding to primary care and support technology that enables providers to electronically share clinical records, as well as communicate with patients and other providers caring for them. Primary care must be team-based, with care coordinators, nurses, mental health providers, social workers, and therapists. Comprehensive primary care is the essential underpinning for all other value-based care.

The Quality Institute has partnered with Catalyst for Payment Reform (CPR) to explore how well New Jersey is moving toward payment models tied to better care and reduced costs. The New Jersey CPR Scorecard is the first look ever in New Jersey at the pace of change by provider type. It is a good first step to track our progress.

If you don't know about CPR, the non-profit, national organization advocates for health care purchasers to get better value for their health care dollars. CPR leaders joined us on Tuesday at our Quality Breakfast where we released the Scorecard — and we also brought in health care leaders from around New Jersey to discuss its findings.

I was impressed with our panelists, including those who explained their challenging work to bring care coordination to the very center of their practice models. Carefully coordinating and following patients with chronic illness, for instance, can reduce emergency visits and hospitalizations, reducing costs and improving care.

Our providers on the panel said they invested heavily to strengthen care coordination of the patients within their primary care practices, but patients risked getting lost when they went outside their system to, say, nursing homes or specialists who did not always communicate back to the primary care practice. All acknowledged that the move to value-based payments is challenging.

But everybody in our audience and on our panel — both payers and providers — genuinely appeared to support the need for this work. They believe this is the right direction. Now we need greater investment in our primary care infrastructure, including health information technology, especially since New Jersey has a high percentage of small, independent primary care practices.

Our partnership with CPR and Tuesday's Quality Breakfast was intended to provide us with a baseline as we move toward payment reform. That's the right first step. We need to know where we are today before we can move forward.



Linda Schwimmer, CEO, the Quality Institute; Kate Gillespie, MBA RN NE-BC, AVP, Orthopedic and Spine Service Line, Virtua Health: Behnaz Baker, CIO and Director of Integration & Population Health, Riverside Medical Group; Dini Ajmani, Assistant Treasurer, Department of the Treasury; Jamie Reedy, MD, MPH-Summit Medical Group, PA and Summit Health Management, LLC; Christine A. Stearns, Director, Gibbons P.C.; Alex Binder, MBA, Vice President, Advanced Care Institute, VNA Health Group Andrea Caballero, MPA, Program Director at CPR; Alejandra Vargas-Johnson, CPR staff.



Michellene Davis, Esq., Executive Vice President and Chief Corporate Affairs Officer, RWJBarnabas Health. Davis leads social impact and community investment across the system and talked to us about transforming the overall health of communities.

Your program works to improve the health of residents beyond the hospital walls. Why did you

### make that a priority?

As the state's largest health care system, we realized we had a unique opportunity to do something bigger and broader beyond just what nonprofit healthcare systems are mandated to do. What we understood is that so much of what impacts health outcomes really happens outside of the walls of the hospital. So we wanted to become part of the solution rather than just ignore the problems that exist in society. We thought we could aim, of course, on continuing to provide high-quality,



culturally-competent clinical care within our facilities — but also to begin to address, with laser focus, the social determinants of health, those things that affect us outside of the clinical experience. We don't call this a program. It's really a mission change.

# Can you tell us about the evolution of the concept of hospitals as "anchor institutions" in their communities?

It's the recognition that hospitals are large-scale economic engines in their communities, but unless we are intentional about our presence we miss opportunities to create economic stimulus in those communities. So we simply wanted to make certain that we were turning our mind's eye toward our daily operations. Who are we hiring? How are we buying goods and services? Are we, in fact, helping to create economic revitalization in the communities where our hospitals reside with a level of high intentionality? We are shifting the way we approach our work in order to accomplish lasting impact.

# How do you see social determinants of health — and how are you impacting the lives of people in your hospital communities?

I see social determinants of health as economic instability, lack of education, food insecurity, the lack of affordable housing, and neighborhood and unsafe living environments. But really I think it's easy to look at where people live, work, play, worship, and age. We are taking an opportunity to view where these aspects of peoples' lives take place with a focus on where vulnerable populations exist at highest concentration. There's an initiative, Newark 2020, where we partner with the city and with other corporate entities to say, 'Listen, we have the ability to change the unemployment rate here by simply hiring individuals from here, by training them, and then creating pipelines and pathways for people to earn a livable wage.' We are an anchor institution in our communities, so we understand that means that some small employers will also need to build capacity. So we're willing to invest with our collaborative partners, like Rutgers Business School and others, to ensure that local vendors have the capacity to grow and scale their businesses.

### Can you provide some concrete examples?

We are conscious, across the System, to use our collective purchasing power to procure from local, minority, and women-owned businesses. In doing so, we are creating more equitable opportunities for individuals who have continuously and historically been denied. In addition, we are intentional about hiring individuals who live in the communities in which we are anchored. RWJBarnabas Health provides living wage careers with opportunities for advancement. Hiring and buying local stimulates economies in a sustainable way.

Other ways that we seek to improve the health of New Jersey residents, address the systemic issues of poverty to eliminate disparities and enhance equity is through the use of strategic policy and innovative programming in our local communities. For example, we host a greenhouse at Newark Beth Israel Medical Center. Its purpose is to offer fresh fruits and vegetables in an area that is a food desert. Beyond that it offers education on healthy cooking and nutrition. This hydroponic greenhouse is the first hospital-affiliated greenhouse in the state of New Jersey that accepts SNAP. It really helped us to begin discussions with the state around SNAP and WIC and the fact that automatic enrollment is required, or else, quite frankly, you are not providing access. Policy, combined with evidenced-based programming, is critical to move this work forward.

### Do you see RWJBarnabas Health hospitals and other hospitals leveraging the work of the Quality Institute to advance their population health goals?

Yes, absolutely. The work that we do is evidence-based and data-driven, so, as a result, we consistently turn to work that the Quality Institute is undertaking to create a framework — and then we work with community partners to design an initiative to ask, 'What are the elements of the social determinants of health?' I think that, secondly, all of this work happens in collaboration through a collective impact methodology, right? It is incumbent upon hospitals to partner with municipalities and the state and federal governments to effectuate change. And initiatives like the Quality Institute's Mayors Wellness Campaign enhance those partnerships.

### Finally, we often like to ask a question that sheds light on our subjects beyond policy. So can you tell us what people might be surprised to learn about you, and where people could find you on a sunny day away from work?

Because I am a lawyer by training and worked in state government, people are usually surprised to know that I studied as a sous chef in Italy. Cooking is my therapy. And on a sunny day you will likely find me sitting under a tree with a really great book and joyously being interrupted by the company of several of my nine Godchildren.

# **Upcoming Quality Institute Events**

\*September 27th 12:00-1:00 PM: Garden Practice Transformation Network webinar series presented by the QI Collaborative. Dr. Stephen Goldfine, the Chief Medical Officer of Samaritan Healthcare and Hospice, will address "Talking with Your Seriously Ill Patients about Their Goals of Care, and Accessing Palliative or Hospice Care." These webinars are free CE credit opportunities for eligible physicians and nurses. Register now!

**October 18th 8:30 – 10:00 AM**: Quality Institute Southern Regional Membership Engagement Event hosted by Jefferson Health at Jefferson Cherry Hill Hospital. Register now!

**October 25th 9:30 – 11:00 AM**: Quality Institute Northern Regional Membership Engagement Event hosted by Atlantic Health System at Morristown Medical Center. Register now!

\*November 13th – November 15th: Quality Institute's Mayors Wellness Campaign at the NJ State League of Municipalities in Atlantic City, NJ.

\*Open to the public; all other events are for Quality Institute members and invited guests only. For more information about membership, please contact Virginia Tesser at vtesser@njhcqi.org.



The Bruce Bradley Fellowship, sponsored by the Leapfrog Group, seeks to recognize corporate-health professionals who want to take an active role in steering employees and their families to safer, higherquality hospitals and health systems. Fellows will gain expertise in measurement of and advocacy for hospital quality and safety. This full-year fellowship will be awarded to 3 to 5 fellows in recognition of distinguished performance and a unique potential to make substantial contributions to their field. **Applications are due by October 19**. More information can be found here.



The Hospice & Palliative Nurses Foundation offers numerous scholarships for Nurses working in pediatric palliative care. Some of the available scholarships include:

- Certified Hospice and Palliative Pediatric Nurse (CHPPN®) online review course
- CHPPN® certification exam
- ELNEC Pediatric Palliative Care Train-the-Trainer Conference
- Hospice & Palliative Nurses Association RN Membership

Detailed information and application links can be found here.



## **New Member**

Please welcome Catholic Charities, Diocese of Trenton, as the newest member of the Quality Institute! Catholic Charities, Diocese of Trenton, provides a wide array of mental health and addictions treatment, and integrated health, housing, and crisis services for those in need, regardless of religious affiliation or ability to pay. Catholic Charities has an operating budget of \$46 million, employs more than 650 staff, and serves more than 100,000 people each year in Burlington, Mercer, Monmouth and Ocean counties.







One of the themes that emerged from our work to modernize the state's Medicaid program centered around the need to simplify the application process. That's why we're supportive of Senate Bill S499, which would streamline the process of New Jersey residents applying for Medicaid and NJ FamilyCare. Earlier this month, the Senate Budget and Appropriations Committee approved the bill.

The bill — which includes several elements of the Medicaid 2.0 Blueprint for the Future recommendations — calls on the Commissioner of Human Services to create a comprehensive approach to improving the application process, such as creating an information technology platform, and standardizing the process across the various agencies responsible for eligibility determination. Another key provision would measure the performance of the state contractors and county welfare agencies that conduct eligibility determinations. These measures would then be used to design a system of rewards and penalties based on performance.

If you want to learn more about the Medicaid 2.0 Initiative, please contact Matt D'Oria at mdoria@njhcqi.org. or Kate Shamszad at kshamszad@njhcqi.org.

Medicaid 2.0 is funded by The Nicholson Foundation.



# **Mayors Wellness Campaign**

The Chatham Borough Mayors Wellness Campaign hosted its inaugural Urban Track at their Sustainability Fair. This 3.3 mile walk along Chatham's sidewalks features local shops, historic markers, and a free healthy snack from the farmers market!



Councilwoman Victoria Fife with Chatham residents.

### **Conversation of Your Life**



Conversation of Your Life will be hosting a book discussion event with author Tracey Lawrence who will talk about the importance of advance care planning and how to get the conversation started on **October 6th 11am-12:30pm** at the Warren Township Library Branch 42 Mountain Blvd, Warren, NJ 07059. Register online or call 908-458-8450 to sign up.

Come to this Death Café event with Chaplains Ted Taylor and Laurie Dinerstein-Kurs, hosted by COYL, on **Oct. 9th 6:30pm-8pm** at the Perkins Restaurant 50 Princeton Hightstown Rd East Windsor, NJ 08520. Click here for more information.

COYL is active in Middlesex, Burlington, Gloucester, Somerset, Monmouth, Mercer, Bergen, and Camden counties and growing! We are expanding to Hudson, Essex, Union, Hunterdon, Cape May, and Atlantic counties. **If you are interested in joining a COYL Task Force in your community, please reach out to Adelisa Perez at aperez@njhcqi.org or at 609-452-5980.** 

Have questions about the MWC or COYL? Connect with Adrian Diogo at adiogo@njhcqi.org or Adelisa Perez at aperez@njhcqi.org.

COYL is a Mayors Wellness Campaign program that focuses on engaging communities in fruitful dialogue – the Conversation of Your Life – to let individuals' family, friends, and doctors understand and respect their end-of-life wishes through advance care planning.

COYL is generously supported by The Horizon Foundation for New Jersey.



### Groundbreaking: Collection of mHealth Research

Suzanne Miller, the Quality Institute Board Chair and Editor in Chief of the Translational

*Behavioral Medicine: Practice, Policy, Research (TBM)*, is excited to announce that TBM published a special virtual issue devoted to mHealth, which compiles the most read and cited articles on this topic. Written by top clinician-scientists and researchers in the field, this compilation explores how behavior change has been promoted through wireless and mobile technology and to improve health outcomes. Read now.



# **Quality Institute in the News**

09.26.2018 | *APP.com* / NJ Upends How Doctors Get Paid, So Why Do Vaccination, C-section Rates Lag? Despite incentives to promote good health, the report by Catalyst for Payment Reform found New Jersey has fewer vaccinations, more C-section deliveries and a tougher time controlling patients' high blood pressure, the report said.

### 09.14.2018 | U.S. 1 Princeton Info / Healthy People Need a Healthy Community

"So much about health and what it takes to be healthy is more than the medical system and straight medical care," says Linda Schwimmer, president and CEO of NJ Healthcare Quality Institute. For "humans to be healthy, thriving people," also requires housing, food, transportation, and connection to other services in the community.



Cheers to Quality Institute member Atlantic Health on their innovative approach to medical education. "In contrast with traditional programs, students [of Thomas Jefferson University, who partners with Atlantic Health] will follow a select group of patients, tracking their care in hospitals and community-based facilities," says an NJ Spotlight article from September 19th. Read the full article.

Congrats to Virtua Health for unveiling their new patient food pantry last week. Taking the "food is medicine" approach, Virtua's food pantry not only lets patients shop for healthy foods, but also shows them how to prepare healthy meals. What a great idea! Read the full story.

## 🎽 Industry Events

**10.4.2018** | NRHI Annual Affordability Summit. As a follow-up, and continuation, of their previous Affordability Summit, this NHRI event will delve deeper into the influence of the affordability of health care, specifically concentrating on health, price, and waste. This event's keynote speaker will be Dr. Stuart Altman, Sol C. Chaikin Professor of National Health Policy at The Heller School for Social Policy and Management, Brandeis University, whose work on the issues of federal and state health policy within the government, the private sector, and academia, extends over five decades. Register now.

**10.5.2018** | Tenth-Annual State of the State in Healthcare, sponsored by the New Jersey Association of Health Underwriters. This event will focus on how federal health care reform has, and will, affect New Jersey businesses and residents. Learn more here.

# **10.11.2018** | NJSNA/IFN 2018 Professional Summit: The Future of the Nurses Role In the Health Care System and Health Care Disparities.

Join NJSNA/IFN on October 11th for their 2018 Professional Summit, which will cover a breadth of topics, such as a panel of top nursing leaders in New Jersey, a Board of Nursing Update, and NJSNA's Annual Business meeting. Linda Schwimmer, the President and CEO of the Quality Institute will also be a featured panelist at this event. Learn more here.

**11.08.2018** | 68th Annual Roy A. Bowers Pharmaceutical Conference Harnessing Innovation and Value in Population Health Management: Predictive Modeling and Patient Stratification to Target Hight-Risk Populations and Improve Quality. Join Linda Schwimmer, the Quality Institute President and CEO, as she moderates the "Government Programs: Priorities, Legislative Impact and Other Areas of Focus Transitioning to Value-Based Care" panel. For further information and questions, please contact Debra Diller at Ddiller@pharmacy.rutgers.edu or at 898-445-6823.

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Health Care Policy 360 Health Matters Poll Mayors Wellness Campaign Medicaid 2.0 QI Collaborative The Leapfrog Group



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