

# How Highmark Is Achieving the Triple Aim for ESRD Patients



### Patients with ESRD >

- Demonstrate needs that are often unmet by the traditional fragmented fee-for-service healthcare system

### Clinical Needs and Utilization

- Comprise 0.2% of the entire patient population
- Comprise 1% of the Medicare population but 7% of overall costs
- Are hospitalized nearly 2 times per year
- Have a 35% readmission rate

### Quality and Patient Experience

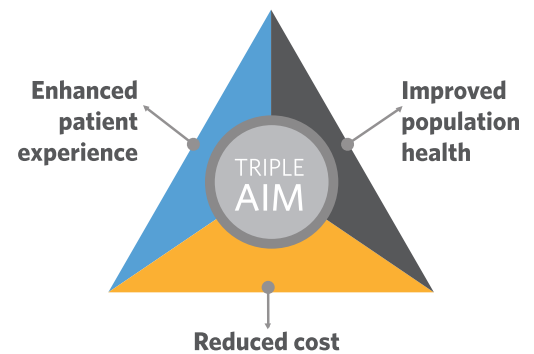
- Take more than 19 pills a day
- Dialyze 12-15 hours a week, if receiving in-center hemodialysis
- Have a 78% diabetes comorbidity rate
- Have a 98% hypertension comorbidity rate
- Spend approximately 11 days per year in the hospital

## THE GOAL Achieve the Triple Aim

The shift toward value-based healthcare is providing a substantial opportunity to improve patient care experiences and clinical outcomes while reducing costs.

While many providers and health plans are deploying chronic care management programs for the general patient population, few are pulling ahead of the curve to launch comprehensive models of care that address the unique needs of the highest-risk, most medically complex outlier groups, such as patients with end stage renal disease (ESRD).

Highmark, the fourth largest Blue Cross Blue Shield Association health insurer in the country, is among a select few that have pulled ahead of the curve by launching a comprehensive model of care for ESRD patients. Developing and fine-tuning the care model for this high-cost, low-volume group has allowed Highmark to continuously achieve the **Triple Aim: enhanced patient experience, improved population health and reduced cost.**



## THE CHALLENGE Managing Medically Complex ESRD Patients

Highmark recognized that its Medicare Advantage and commercially insured ESRD patients would benefit from an enhanced level of complex care management. In 2013, the population had more than \$13 million in addressable costs, with an average of two hospitalizations and 13 hospital days per patient per year.

Highmark members benefited from an aligned health system and a physician network that enhanced care coordination for approximately 30 percent of its ESRD population. However, capability gaps and lack of care team alignment remained challenges.

How would Highmark implement a comprehensive care management program for ESRD patients that would improve the quality of care delivery and patient quality of life, while simultaneously reducing costs?

## Case Study

### Achieving the Triple Aim >

#### Four-Year Results<sup>1</sup>

#### Enhanced Patient Experience

- **42% decrease** in central venous catheter rate
- **29% reduction** in admit rate
- **36% reduction** in hospital bed days, resulting in more days at home with family
- Advanced Care Plans **increased from 15% to 62%** of the population (**313% increase**)
- **Increased** depression screenings **from 31% to 95%** of the population (**208% increase**)

#### Improved Population Health

- **26% improvement** in Medicare Advantage inpatient utilization
- **37% improvement** in commercial inpatient utilization
- **29% improvement** in controllable admissions

#### Reduced Costs

- More than **\$12 million in cost reduction** over 4 years<sup>2</sup>
- **21% addressable cost savings**<sup>3</sup>

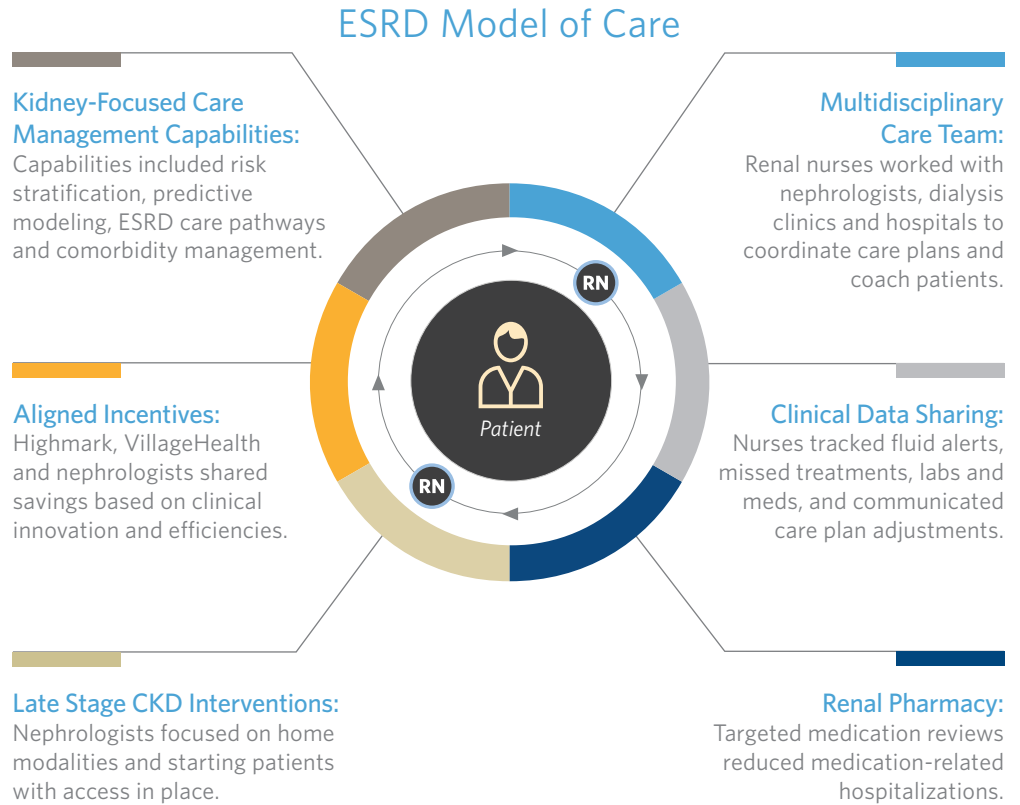
1. Clinical metrics tracked by VillageHealth. Admission and cost metrics based on claims data.

2. Per contract methodology

3. Commercial members experienced a 44% decline in inpatient care costs, 41% decline in professional costs, 47% increase in prescription drug costs, and 29% decline in other medical expenses. For Medicare Advantage members, these cost changes were (29%), (15%), 48% and (16%) respectively.

## THE SOLUTION An Innovative ESRD Model of Care

Highmark wanted to partner with an industry leader that could provide advanced care management capabilities and deploy a collaborative model to align incentives. Highmark developed a partnership with VillageHealth to implement an ESRD model of care that encompassed kidney care management and dialysis coordination.



## THE IMPACT Improved Outcomes and Reduced Costs

By partnering with VillageHealth to create a comprehensive, evidence-based program to manage ESRD patients across the care continuum, Highmark advanced the Triple Aim.

Year-over-year comparisons that span the duration of the program show continuous reduction in admits, central venous catheters (CVCs) and addressable costs.

As a result, Highmark improved ESRD patient quality of care, enhanced patient quality of life and reduced unnecessary costs by more than \$12 million over four years.

### Annual Results

	Year 1	Year 2	Year 3	Year 4
Admit Rate Reduction vs. Baseline	24%	29%	25%	37%
CVC Rate Reduction vs. Baseline	17%	47%	48%	54%
Addressable Cost Savings vs. Annualized Targets	10%	26%	22%	24%