

CIN Checklist #2: Does Your Organization Have the Participants and Value-Based Metrics to Lead Care Transformation?

An aligned physician base is key to establishing a clinically integrated network (CIN) that can succeed in a value-based payment environment. How far has your organization moved toward building a performance-focused physician network that can monitor and manage the utilization of health care services and ensure quality of care? Use the following list to determine if you have established a network that can provide the value needed.

YOU HAVE:

- Assessed the market, geographic area, and specific specialty coverage needs and priorities when considering a physician or practice CIN participant.** Other considerations could be:
 - Baseline quality metrics criteria used for selection
 - Baseline financial performance requirements
 - Strategic fit and sustainability analysis
 - Cultural fit with the group practice, Independent Physician Association (IPA), hospital, health system or CIN
- Incorporated recruitment/alignment efforts and assimilation plans in the organization's strategic and financial planning assumptions.**¹ Use a high-level "due diligence" screening tool to help in selecting or aligning participants.
- Created a participation agreement outlining the expectations and performance-based requirements for network participants.** Some potential requirements may include: use of EHR technology, compliance with clinical protocols and care pathways developed by the network, participation in network contracts, or collaboration with other network participants.
- Established baseline clinical performance and quality guidelines.** Since physician compensation may be tied to productivity, quality of care, level of service or other strategic goals specific to the organization, understanding value-based metric requirements is key. Solicit physician feedback prior to rollout, and involve experts across all specialties in the creation of evidence-based care standards. Ensure that a physician review process for updating standards is in place. When developing value-based metrics, ask the following questions:
 - What clinical or operational areas do we want to improve?
 - What areas interest our hospital/physician partners or buyers?

¹A Guide to Physician Integration Models for Sustainable Success. Health Research & Educational Trust and Kaufman, Hall & Associates, Inc., Chicago: September 2012. Accessed at www.hpoe.org.



- **Started to monitor the performance of doctors as it relates to clinical/financial outcomes and patient satisfaction in order to identify productive providers.** Physician and network accountability is key in today's value-based healthcare environment. When creating physician "report cards," start off by asking:

- What experience do our physicians have with performance metrics?
- What data can we get to monitor performance against metrics?

Many successful healthcare organizations have a physician compensation committee which meets on an ongoing basis, not just during renegotiations. Goals related to quality, access, cost of care, service and other metrics are continually reviewed to determine if the goals support the organization's optimal performance.

- **Consulted an outside "integration expert" with experience engaging and enabling physicians, as well as assessing provider performance against industry standards.** When selecting an outside partner, evaluate how long the firm has been in operation, how many physicians it has managed, the average client turnover, its performance record and overall success with value-based models. Since care coordination and improved performance on clinical metrics will ultimately decrease the overall cost of care, look for a partner with expertise in these areas.