

BlueAlliance

Transforming health care delivery

Collaborating with providers
for more efficient, effective
health care



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CHANGING THE WAY WE PAY

Employers, health care systems and Blue Cross Blue Shield of North Dakota—we all struggle with rising costs while seeing limited improvements in health.

The answer isn't simply to cut costs. Rather, it's to collaborate with providers on more efficient, effective care and better health outcomes.

That solution is underway.

BCBSND worked with North Dakota physicians to design a new, improved contracting methodology—one that pays for the value, not the volume of care. New payment methodologies like this are the means to ensure an affordable, sustainable health care system in the future, while increasing the quality of care.

While there's no quick fix in transforming care delivery and realizing significant savings, now is the time to begin.

BlueAlliance

CURBING ESCALATING COSTS

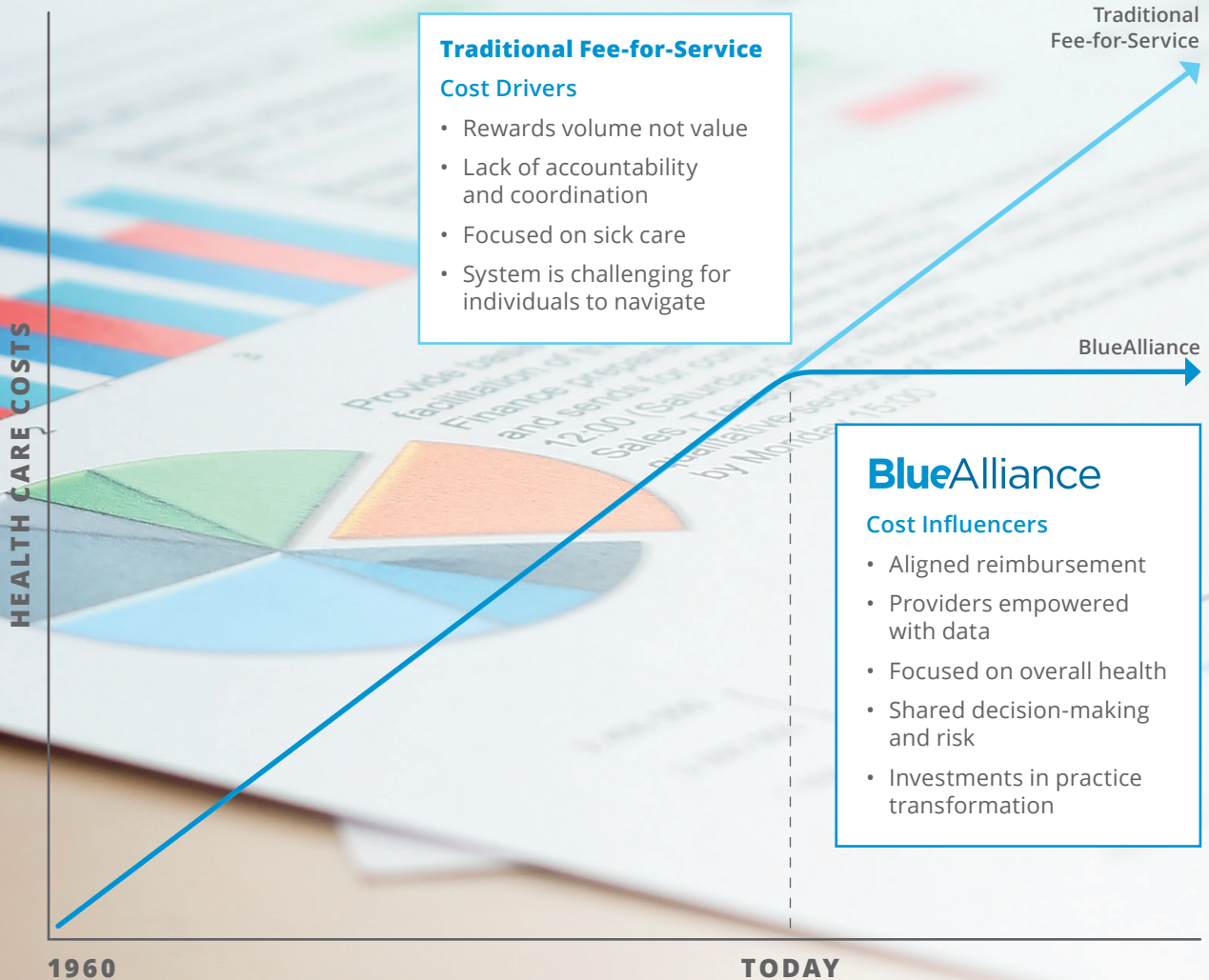


Traditional Fee-for-Service Contracts

Traditionally, doctors and hospitals get paid for every test ordered, every procedure performed and every service provided.

BlueAlliance Contracts

We work with physicians to focus on coordinated care that helps first to prevent health issues and second to address illness. Then we pay based on the outcomes of that care.



Traditional Fee-for-Service Cost Drivers

- Rewards volume not value
- Lack of accountability and coordination
- Focused on sick care
- System is challenging for individuals to navigate

BlueAlliance Cost Influencers

- Aligned reimbursement
- Providers empowered with data
- Focused on overall health
- Shared decision-making and risk
- Investments in practice transformation

WHAT IS BLUE ALLIANCE?



BlueAlliance is a contractual agreement with clinics and hospitals that pays for care coordination, improved outcomes and lower costs. It includes innovative approaches that support doctors in transforming their practices while paying them based on how well they care for the health of an entire population.

BlueAlliance Attributes

Focused on members

At a minimum, providers must be working toward a patient-centered medical home model, ensuring members have comprehensive, team-based care that is well coordinated, accessible, and focused on quality and safety.



Co-designed by providers

BCBSND is working alongside North Dakota providers to design and monitor this quality-based program.



Pay for performance

Providers are rewarded on quality care outcomes for BCBSND members, evidenced by services that meet specific quality metrics.



Preventive in nature

Together, BCBSND and providers focus on keeping members healthy through preventive care.



Deeper partnerships

BCBSND collaborates with providers to optimize performance, increase transparency and engage members to live healthier lives.



Flexible

Providers vary in their readiness to transition to a new model of care delivery; BlueAlliance meets them where they are and works with them toward deeper levels of the program.



Attacks key cost drivers

BlueAlliance ensures an affordable, sustainable health care system in the future by addressing problems that unnecessarily escalate the cost of care.

HOW ARE PROVIDERS MEASURED?



1
2
3

Measures in three categories define how providers will be reimbursed. Metrics are consistent across providers, eliminating variations in care.

Patient Experience

- Do members have access to a primary care provider?
- Are they satisfied with the care?
- Are transitions and next steps clear?

Cost and Efficiency

- Which hospital admissions can be prevented through proactive care?
- Which ER visits can be prevented through proactive care?
- What is the facility doing to improve the quality of care?

Clinical Quality

- Are children getting in for their well-child visits?
- Are women getting recommended screenings for breast cancer?
- Are members regularly screened for depression?

PROVIDERS PARTICIPATE AT DIFFERENT LEVELS



Understanding that transforming care takes time and providers are at different points in the process, BlueAlliance offers flexibility. And it provides financial incentives to move deeper into the PCMH model of care.

LEVEL 1

Patient-Centered Medical Home (PCMH)

Providers that contract with us at level one demonstrate progress toward national standards for operating as a PCMH. They receive a care management payments to coordinate the care of patients attributed to them.

LEVEL 2

PCMH + Shared Savings

At level two, providers can share in demonstrated cost savings when they demonstrate progress toward national standards for a PCMH and also meet quality care metrics.

LEVEL 3

PCMH + Risk Sharing

Providers earn the most when they are demonstrating progress toward national standards for a PCMH and are willing to share the cost for utilization of health care services for their patients that exceed predetermined targets.

Patient-Centered Medical Home (PCMH)—At the Core

What is PCMH?



Puts members at the center of their own care, working closely with a primary care provider who proactively helps them navigate the broader health care system (specialists, pharmacy, hospitals, behavioral health facilities, etc.).



Primary care providers invest in building relationships with members, earning their trust and helping them reach their health care goals.



BCBSND delivers health intelligence and technology tools for both providers and members to enable this collaborative relationship.

BETTER HEALTH— BETTER BOTTOM LINE



\$6-9

PaMPM net savings

*Per attributed member per month

Estimated annual savings of \$840 million over traditional payments

Marked Quality Improvements

- **Lower Utilization** (*avoidable hospital admissions, ER visits*)
- **Better Control of Chronic Conditions** (*diabetes, hypertension*)
- **Improved Delivery of Preventive Care**
- **Improved Patient Experience**

EVERYONE BENEFITS



Employees

- Improved outcomes
- Simplified, personalized health care
- Better patient experience
- Proactive in their care and live healthier lives



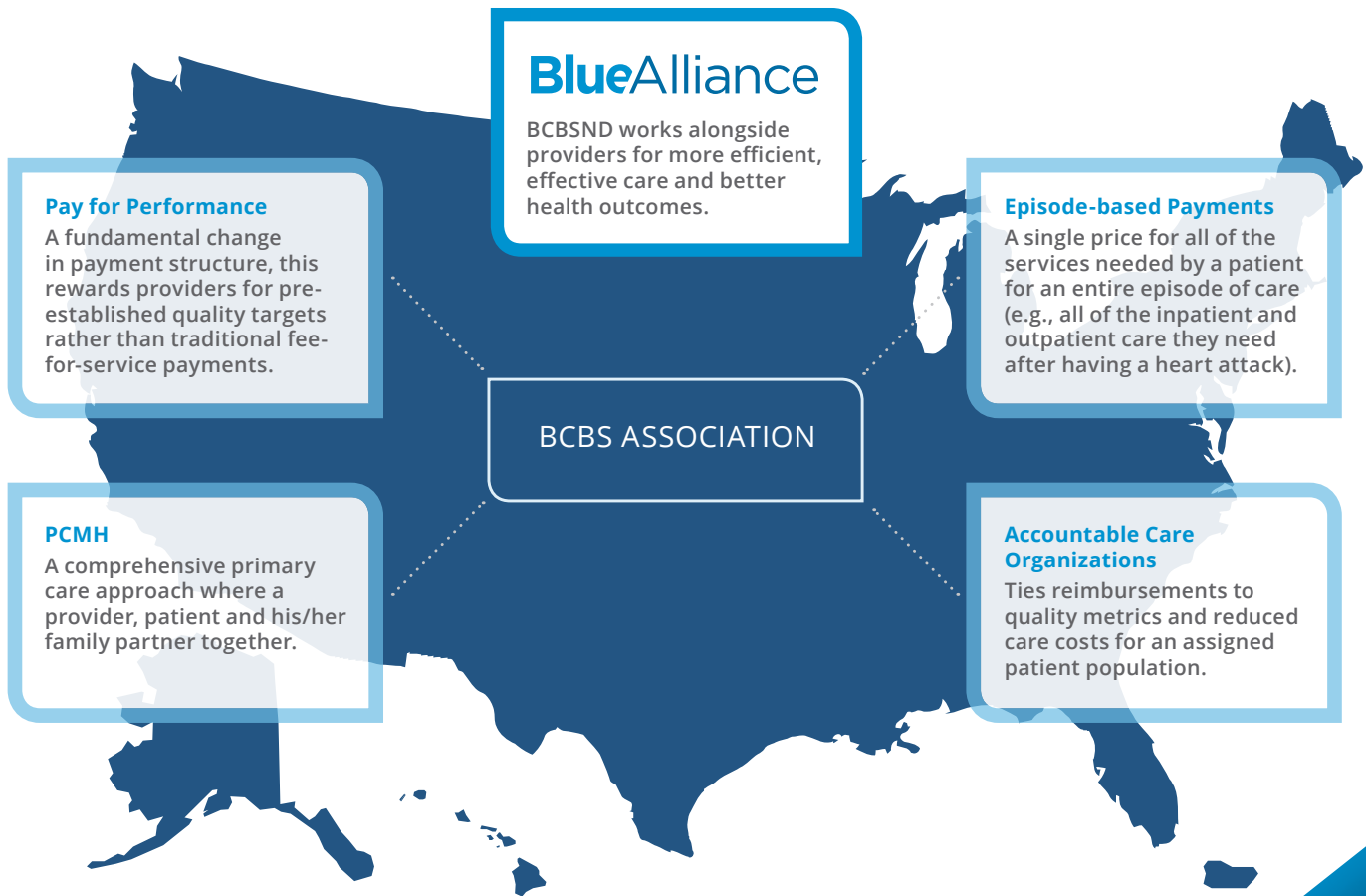
Employers

- Mitigate unsustainable increases
- Save without sacrificing quality
- Healthier employees = productive workforce

BEST OF BOTH—LOCAL SOLUTIONS AND A NATIONAL AFFILIATION

While BlueAlliance is the solution that addresses North Dakota concerns, through our affiliation with the Blue Cross Blue Shield Association, employees in other states are seamlessly placed into similar value-based/quality care programs in their respective communities.

Value-based Programs Throughout the United States



Please contact your BCBSND Account Manager for more information.



Blue Cross Blue Shield of North Dakota is an independent licensee of the Blue Cross & Blue Shield Association

Blue Cross Blue Shield of North Dakota (BCBSND) complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, gender identity, sexual orientation or sex. BCBSND does not exclude people or treat them differently because of race, color, national origin, age, disability, gender identity, sexual orientation or sex. BCBSND:

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- Provides free language services to people whose primary language is not English, such as: qualified interpreters and information written in other languages.

If you need these services, please call Member Services at 1-844-363-8457 (toll-free) or through the North Dakota Relay at 1-800-366-6888 or 711. If you believe BCBSND has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability, gender identity, sexual orientation or sex, you can file a grievance with: Civil Rights Coordinator, 4510 13th Ave. S. Fargo, ND 58121, 701-297-1638 or North Dakota Relay at 800-366-6888 or 711, 701-282-1804 (fax), CivilRightsCoordinator@bcbsnd.com (email) (unencrypted emails present a risk.)

You can file a grievance in person or by mail, fax, or email within 180 days of the date of the alleged discrimination. Grievance forms are available at <http://www.bcbsnd.com/report> or by calling 1-844-363-8457. If you need help filing a grievance, the Civil Rights Coordinator is available to help you. You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights, electronically through the Office for Civil Rights Complaint Portal, available at <https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>, or by mail or phone at: U.S. Department of Health and Human Services, 200 Independence Ave. S.W. Room 509F, HHH Building, Washington, DC 20201, 800-368-1019 or 800-537-7697 (TDD). Complaint forms are available at <http://www.hhs.gov/ocr/office/file/index.html>.

Español (Spanish) – ATENCIÓN: Si habla español, tiene a su disposición servicios gratuitos de asistencia con el idioma. También hay disponibles ayudas y servicios auxiliares adecuados para proporcionar información en formatos accesibles sin cargo. Llame al 1-844-363-8457 (TTY: 1-800-366-6888 o 711) o hable con su proveedor.

Deutsch (German) – ACHTUNG: Wenn Sie Deutsch sprechen, steht Ihnen kostenfreie fremdsprachliche Unterstützung zur Verfügung. Außerdem sind kostenlos entsprechende Hilfsmittel und Dienstleistungen zur Bereitstellung von Informationen in barrierefreien Formaten erhältlich. Rufen Sie 1-844-363-8457 (TTY: 1-800-366-6888 oder 711) an oder sprechen Sie mit Ihrem Anbieter.

中文 (Chinese) – 注意: 如果您說中文, 我們可以為您提供免費的語言協助服務。亦免費提供適當的輔助工具和服務, 以無障礙格式提供資訊。請撥打 1-844-363-8457 (聽障服務專線 TTY: 1-800-366-6888 或 711) 或與您的醫療服務提供者討論。

Oromoo (Oromo) – XIYYEEFFANNOO: Afaan Oromoo dubbattu yoo ta'e, tajaajilli gargaarsa afaan hiikuu kaffaltii malee ni argama. Gargaarsi dabalataa gargaaraadhaaf tajaajilli sirrii ta'ee fi odeeffannoo bifa dhaqqabamaa ta'een kennuunis bilisaan ni argama. Bilbili 1-844-363-8457 (TTY: 1-800-366-6888 or 711) ykn dhiyeessaa kee waliin haasa'i.

Tiếng Việt (Vietnamese) – CHÚ Ý: Nếu quý vị nói Tiếng Việt, có sẵn các dịch vụ hỗ trợ ngôn ngữ miễn phí cho quý vị. Chúng tôi cũng cung cấp miễn phí các dịch vụ và hỗ trợ bổ sung thích hợp để cung cấp thông tin ở các định dạng dễ tiếp cận. Xin gọi 1-844-363-8457 (TTY: 1-800-366-6888 hoặc 711) hoặc nói chuyện với nhà cung cấp của quý vị.

Ikirundi (Bantu – Kirundi) – Wiyubare: Nimba uvuga Ikirundi, wemerewe ubufasha bwo kuronka ururimi ku buntu. Wemerewe kandi ubufasha bukwiye bw’inyongera na serivisi vyo gutanga amakuru mu buryo bworoshe ku buntu. Hamagara kuri 1-844-363-8457 (TTY: 1-800-366-6888 canke 711) canke uvugane n’ujejwe kugufasha.

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Kiswahili (Swahili) – ZINGATIA: Ikiwa unazungumza Kiswahili, huduma za msaada wa lugha bila malipo zinapatikana kwa ajili yako. Vifaa na huduma saidizi zinazofaa ili kutoa taarifa katika miundo inayoweza kufikiwa pia hupatikana bila malipo. Piga simu 1-844-363-8457 (TTY: 1-800-366-6888 au 711) au zungumza na mtoa huduma wako.

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Tagalog (Tagalog) – PAUNAWA: Kung nagsasalita kayo ng Tagalog, mayroong kayong magagamit na libreng tulong na mga serbisyo sa wika. Mayroon ding mga angkop na auxiliary na tulong at serbisyo para magbigay ng impormasyon sa mga naa-access na format na makukuha ng walang singil. Tumawag sa 1-844-363-8457 (TTY: 1-800-366-6888 o 711) o makipag-usap sa iyong provider.

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Diné (Navajo) – YÁ’ÁT’ÉÉH NITSÁHÁKEES: Díí Diné bizaad bee yáníft’go, t’áa íiyisí t’áa bee yáhoot’ééł dóó baa áháya’ át’é. T’áa jíík’ehígíí bee na’ách’aq’ holne’ dóó t’áa shikaadéé’ danilíí’ígíí t’áa jíík’ehgo bee hóló, dóó t’áa íiyisí doo béesh bee hadooleet da. 1-844-363-8457 bee hojii’ (TTY: 1-800-366-6888 dóó 711), dóó naaltsoos nínízingo bee iiná bee nił hane’ígíí nihił ch’á hodool’j’.