

Medicaid Managed Care Public Forum

Kaiser Permanente – an Overview

September 17, 2013



What Kaiser Permanente offers to the Virginia Medicaid Programs



1. A unique integrated care delivery model that is unlike other choices available to Northern Virginia Medicaid and FAMIS members.
2. Quality programs, focusing on evidence-based preventive care and chronic disease management, supported by a comprehensive IT platform.
3. Patient access to providers and personal health information through our online portal, My Health Manager.
4. Superhubs in VA, MD and DC which offer co-located primary and specialty services, advanced imaging, outpatient surgery and 24/7 availability to Urgent Care and our Clinical Decision Units.

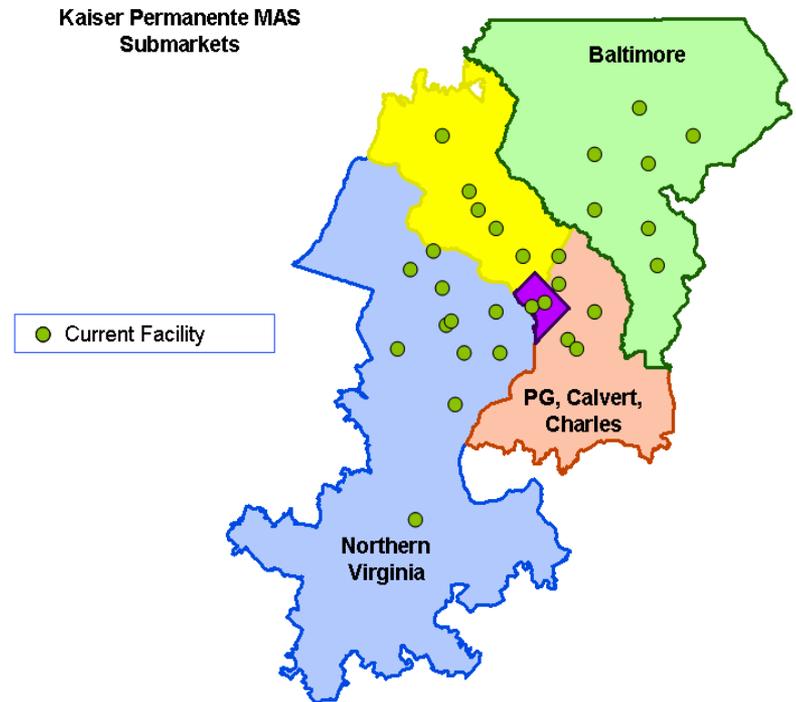
Kaiser Permanente in the Mid-Atlantic



With the largest multi-specialty physician group practice in the region, supported by state-of-the-art technology, Kaiser Permanente offers our members superior quality, market-leading convenience, and the most highly coordinated care in the Mid-Atlantic.

Fast facts:

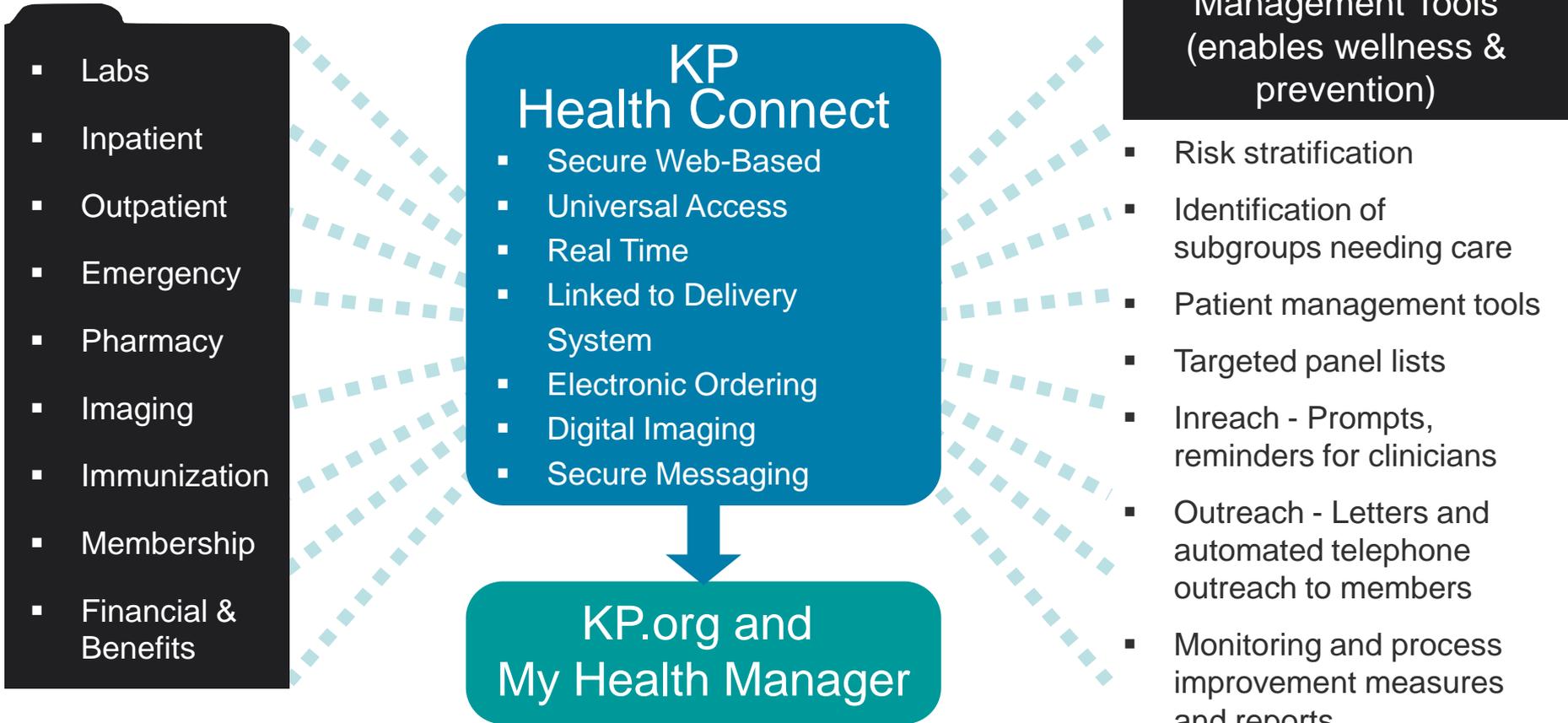
- Located in the District of Columbia, Maryland and Virginia
- 500,000 members, including 124,000 Federal enrollees
- Nearly 1,000 Mid-Atlantic Permanente Medical Group physicians
- 6,000 employees
- 30 medical facilities
- 24 hours/7 days /365 days care available
- Unparalleled online example tools and EMR



Fulfilling our vision of integrated care



Comprehensive clinical data access and workflows to achieve coordination, elimination of waste, and quality are in place



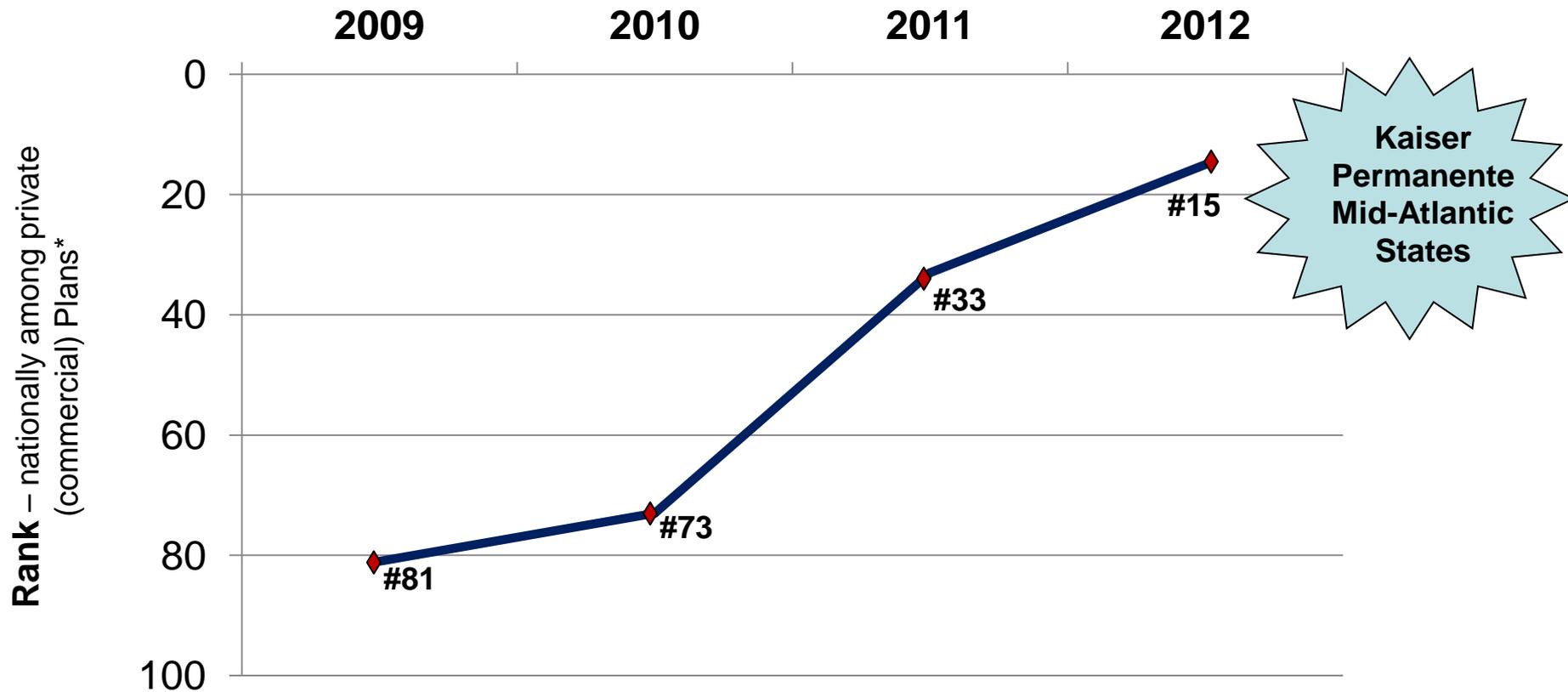


$$\text{Value} = \frac{\text{Quality} + \text{Patient Experience (Access + Service)}}{\text{Cost Effectiveness (\uparrow Efficiency)}}$$

Strategy Execution Delivers Value Over Time



National Committee for Quality Assurance (NCQA) 2012 (2011 Reporting Year) Health Kaiser Permanente Plan National Rankings



*National Committee for Quality Assurance ranking of health plans in the U.S.

CAREPOINT- Quality is driven by integration – Proactive Care (Inreach) at every visit in every department



Hyperspace - OPHTHALMOLOGY SPRGFLD - Production - HCPRODMAM PRODMAM

Epic Home Sch Inbskt Chart Enc Tel Enc Refill Enc Msg Enc Pt Sec Msg Pt R

Ambassador, Physician

Ambassador, Physicia* MRN: 18158567 Age: 42 Yr Sex: F PCP: Z Dont Book Zztest M* PCP Loc: Kensington

Proactive Care

Care Management Summary Sheet (CMSS)

Patient: AMBASSADOR,PHYSICIAN MRN: 18158567 DOB: 02/10/1969 Gender: F
 PCP: Z DONT BOOK ZZTEST MAS PROVIDER (M.D.) PCP Apt: Phone: (000) 000-0000 Language
 Last BP: 1) 2) Last MAM: 02/06/2008 Last PAP:

Recommended Care

- Arrange mammogram.
- Arrange Pap
- Patient current smoker. Advise to quit, offer strategies, and document.
- DIABETES: hemoglobin A1c due.
- DIABETES: microalbumin due.
- DIABETES: If B/P > 140/90, consider starting lisinopril, HCTZ, or atenolol (GOAL: 130/80).
- High CVD risk: Should be on aspirin (81-325MG) daily unless contraindicated.
- High CVD risk: lipid panel due (LDL is missing).

Diseases / Risks				Cr, K, Microalb, A1c, ALT, Theophy (Last : Date Type	
CVD	DM	HTN			
LOW	MOD	NO BP			
All Meds (Last 20 dispenses in 12 mo)					
Date	Drug	Qty	RFD		

CAREPOINT- Quality is driven by integration – (Outreach) enabled by population tracking tool



http://carepointmas.dwny.ca.kp.org - POINT: Care Management - Microsoft Internet Explorer

Care Management

Back | POINT | Home | **Panel** | Asthma | CVD | HF | Diabetes | HTN | CAD | CKD | Unscreened cancer

Personalized For MARY GERKEN Thursday, June 02, 2011

Panel Management

Location Directory | Live Help | Help | Print | Export | Provider Batch Export

Display By: [v] | Sorting Order: Ascending [v] | Detailed View | Region: MA | Area: NOVA-MA | Facility: O-MA | Department: IM FO | SubDept: INTERNAL MED FR OAKS

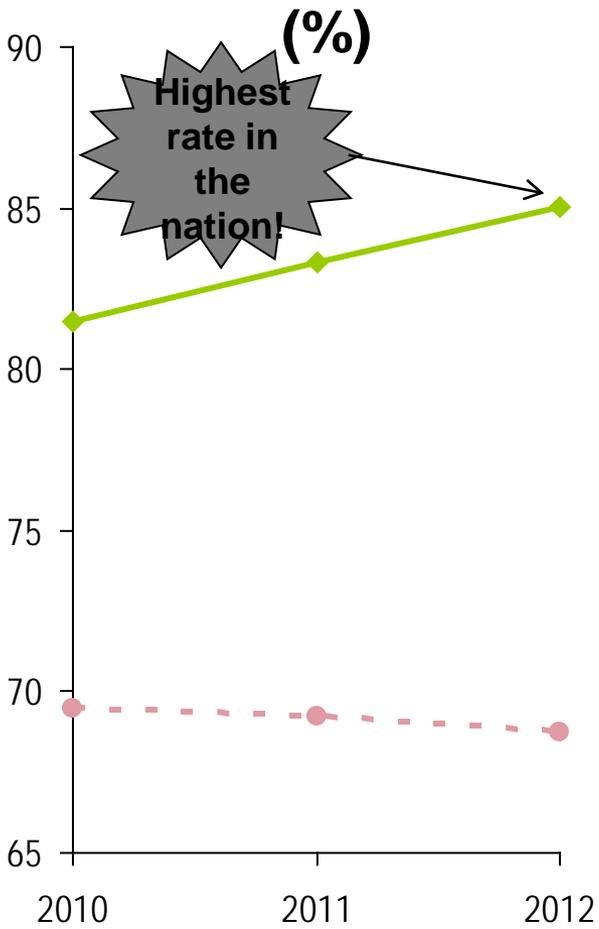
PCP	Patient Count	Mammograms Overdue	Mammograms Coming Due	Pap Smears Overdue	Pap Smears Coming Due	Needing Colorectal screen	Needing Pneumovax	A1c >= 9.0	DM LDL >= 100 and no LLRx	CAD LDL >= 100 and no LLRx	HTN BP >= 140/90	Persistent asthmatic no IAI	beta-agonist overuser no IAI							
	Pats.	Pats.	Pats.	Pats.	Pats.	Pats.	Pats.	%	Pats.	%	Pats.	%	Pats.	%						
AKBARY, WASEL S (D.O.)	722	72	94	111	149	162	33	22.8 %	11	8.9 %	4	3.2 %	2	3.6 %	40	11.1 %	2	15.4 %	3	4.2 %
BENALFEW, YODIT B (M.D.)	927	114	155	145	189	165	37	14.9 %	11	6.7 %	5	3.1 %	1	1.2 %	71	13.3 %	1	4.2 %	4	4.3 %
GOLEMBIESKI, MICHAEL E (M.D.)	728	36	59	25	44	159	41	14.9 %	26	15.7 %	12	7.2 %	4	3.3 %	65	13.8 %	1	4.8 %	7	10.3 %
KELLY, KATHLEEN A (M.D.)	709	74	91	87	135	105	30	18.4 %	13	9.3 %	8	5.7 %	2	3.7 %	37	10.5 %	1	4.3 %	4	2.7 %
MCCLAIN, PAUL H (M.D.)	589	26	31	34	45	78	20	7.7 %	18	10.2 %	0	0 %	1	1 %	39	8.5 %	0	0 %	1	2.9 %
MUKHERJEE, SARA (M.D.)	636	40	59	56	99	63	11	5.9 %	11	6.1 %	3	1.7 %	0	0 %	33	8.3 %	0	0 %	1	1.3 %
NA	1	1	1	1	1	1	0	0 %	0	0 %	0	0 %	0	0 %	0	0 %	0	0 %	0	0 %
NANDURI, KUSUMA K (M.D.)	798	124	165	177	227	209	45	30.2 %	16	12.8 %	5	4 %	1	2.5 %	43	12.5 %	0	0 %	1	1.3 %
TESFAZION, ISAIAS (M.D.)	781	59	87	68	105	161	30	14.7 %	18	9.8 %	10	5.5 %	1	1.2 %	50	10.8 %	0	0 %	6	7.7 %
	5891	546	742	704	994	1103	247	15.1 %	124	9.9 %	47	3.7 %	12	2 %	378	11.2 %	5	3.7 %	27	4.1 %

Quality through prevention – Cancer Screening

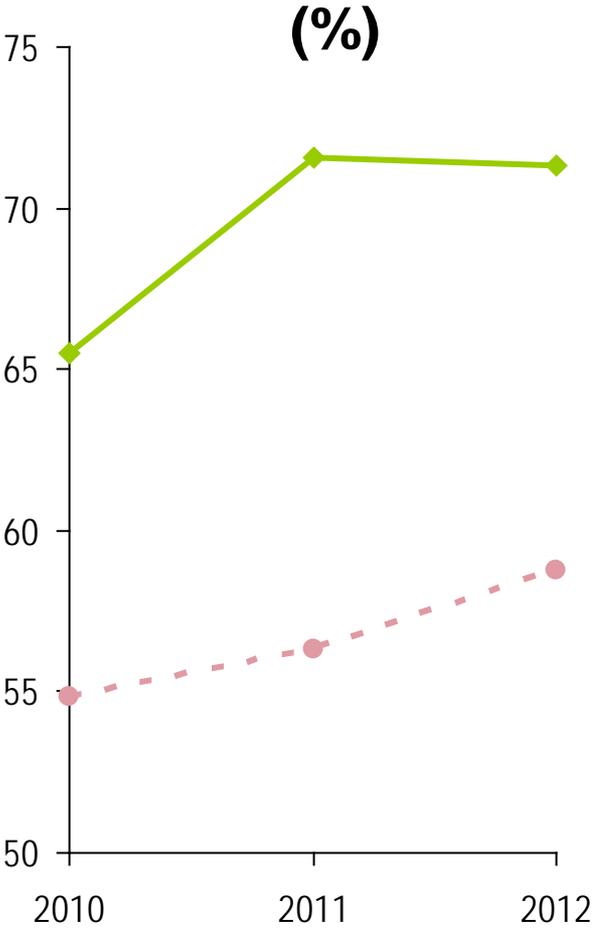


◆ KPMAS
● Nat'l Avg

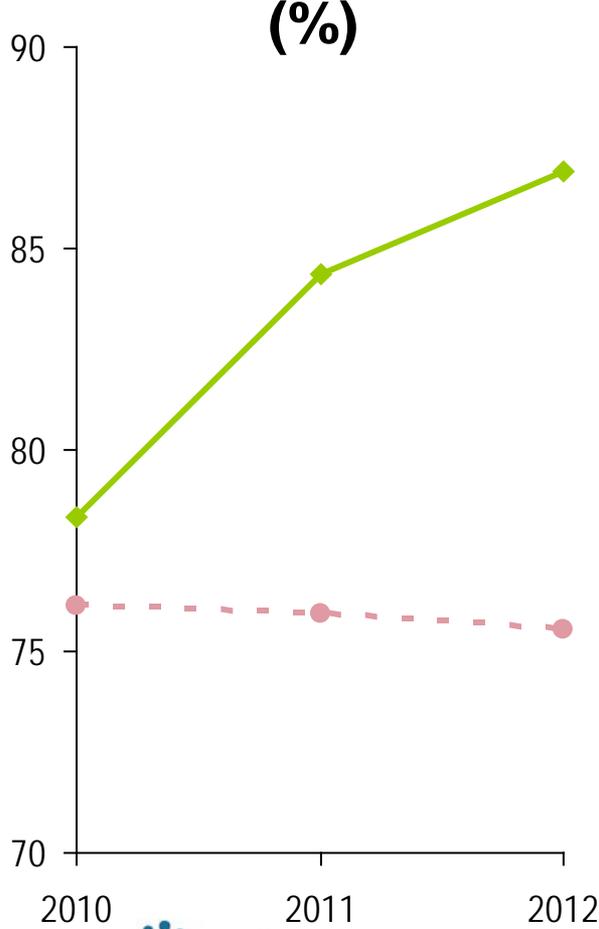
Breast Cancer



Colorectal Cancer



Cervical Cancer

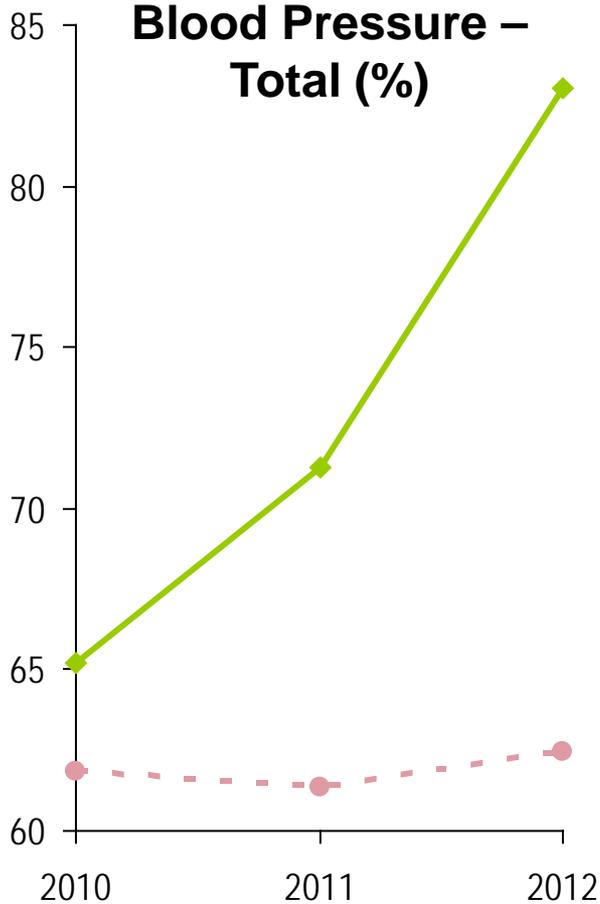


Quality through coordinated care management – Chronic Conditions

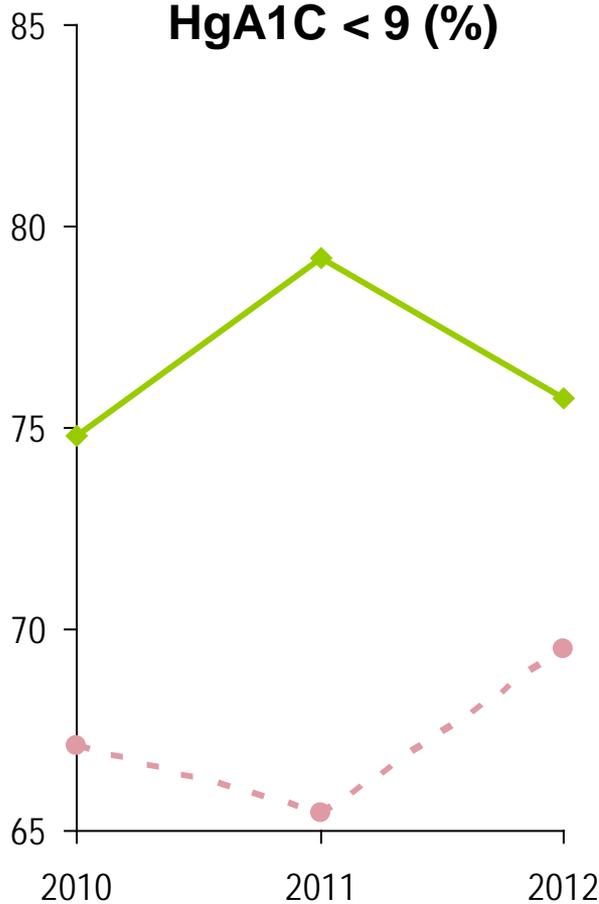


◆ KPMAS
● Nat'l Avg*

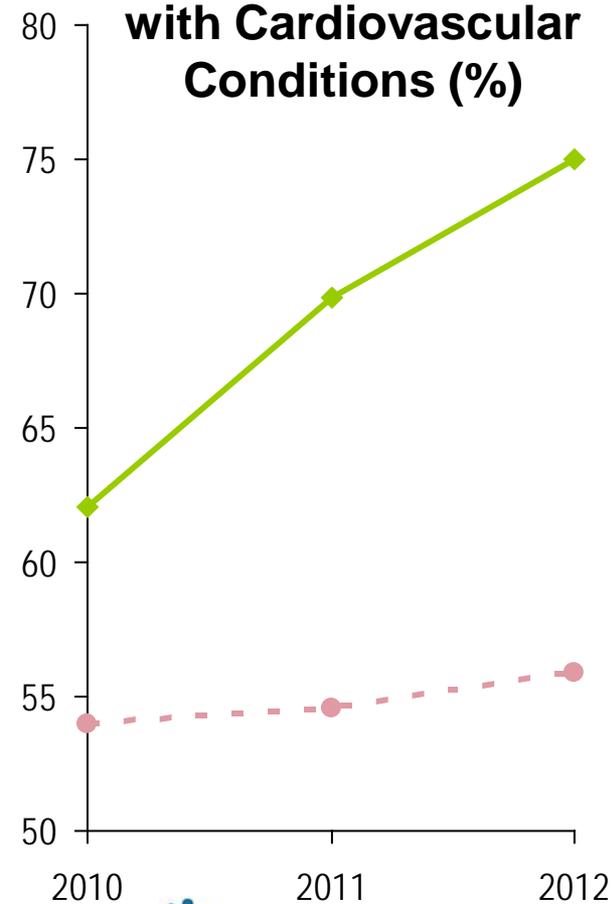
Controlling High Blood Pressure – Total (%)



Diabetics with HgA1C < 9 (%)



LDL-C <100; Patients with Cardiovascular Conditions (%)



Value Equation- Specialty Access Time to Seen-Internal



MONTHLY SNAPSHOT OF SPECIALTY CARE ACCESS - January 2009

	ALL	CAR	DRM	END	ID	NEP	NEU	ONC	OPH	ORT	PHY	PLS	POD	PUL	RHE	SPS	SUR	URO
NOVA	15.5%	56.4%	15.9%	22.9%	64.7%	41.7%	17.9%	27.1%	51.6%	65.1%	28.6%	0.0%	22.3%	21.5%	28.9%	31.2%	59.2%	28.3%

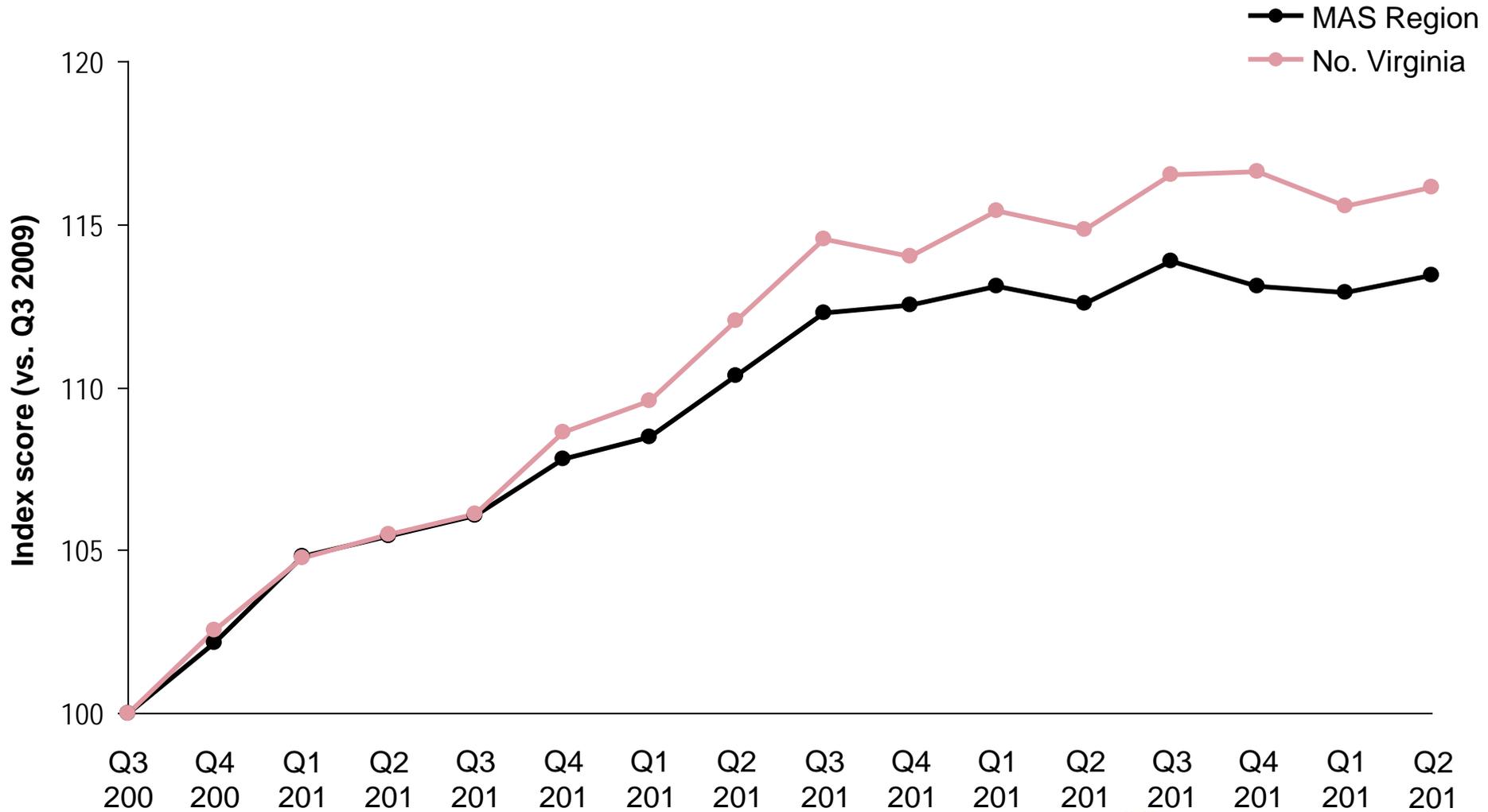
MONTHLY SNAPSHOT OF SPECIALTY CARE ACCESS - April 2013

	ALL	ALT	CAR	DRM	END	ENT	GI	ID	NEP	NEU	ONC	OPH	ORT	PAI	PHY	PLS	POD	PUL	RHE	SPS	SUR	URO	VAS	SLP-MD
NOVA	94%	87%	88%	91%	82%	81%	86%	92%	78%	83%	85%	94%	87%	84%	87%	88%	93%	92%	91%	92%	83%	81%	93%	92%

- Initiate to Seen within 10 days for 80 % or more. Meeting the goal
- Initiate to Seen within 10 days for less than 80 %. Not meeting the goal

Value Equation- Service – Member Patient Satisfaction Survey

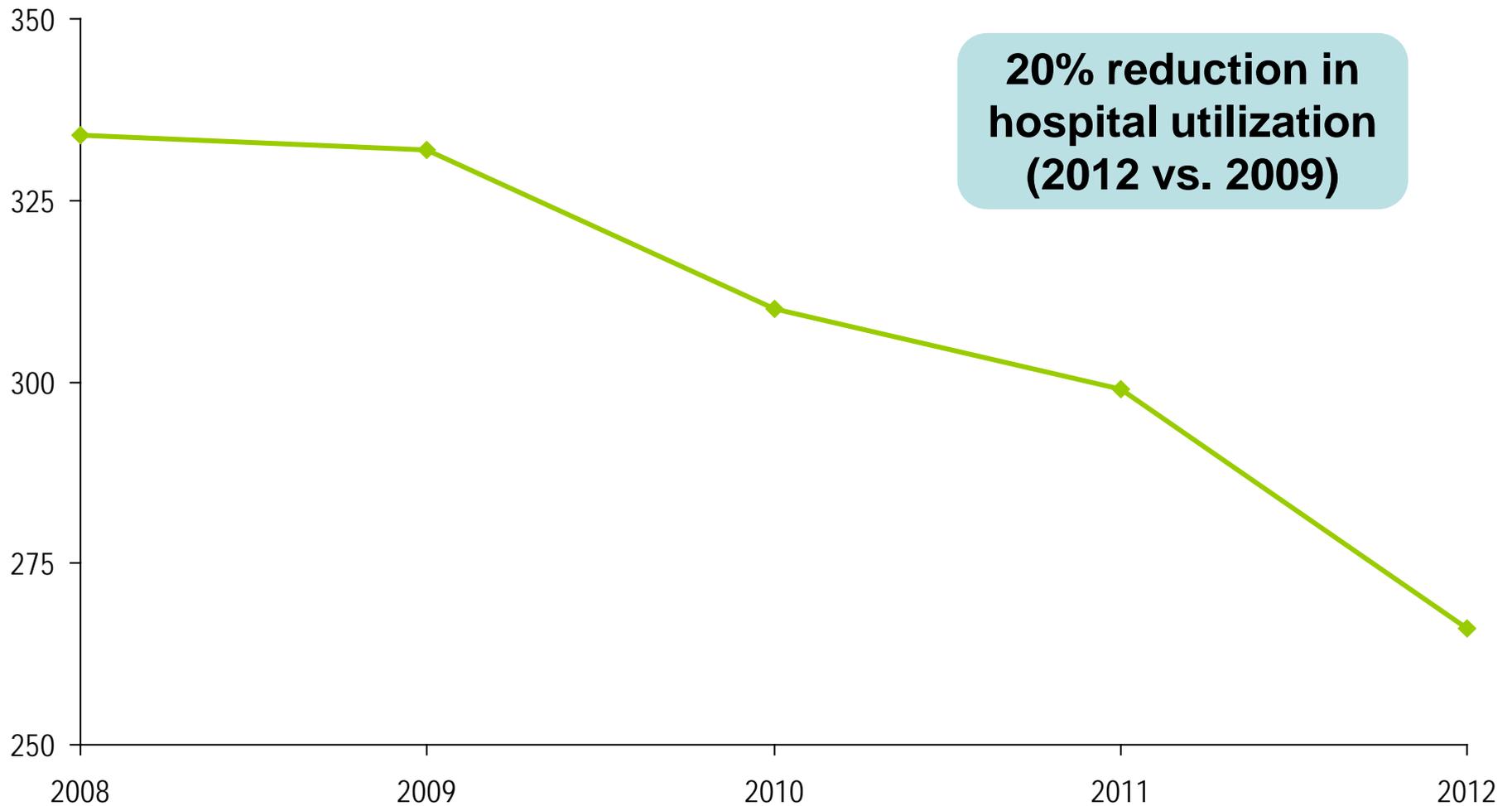
Total Service Score over time



Internal data based on proprietary Member Patient Satisfaction Survey; data is indexed to 100 as of Q3 2009.
 September 25, 2013 | © 2013 Kaiser Foundation Health Plan, Inc. For internal use only.

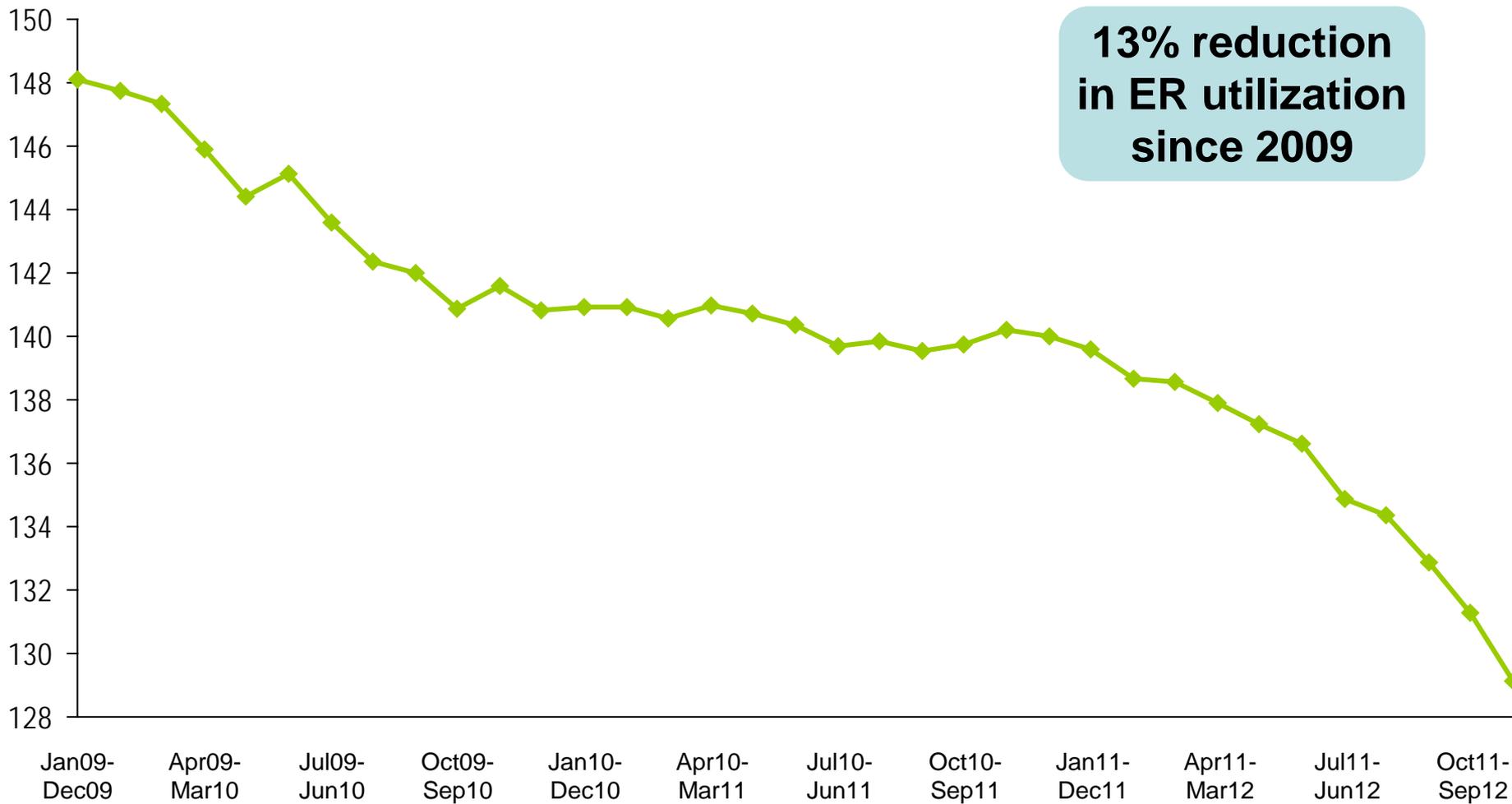


Integration drives efficient use of resources: Hospital Days/1,000*



* Excludes psychiatric data, blended rate including both Commercial **and** Medicare

Integration drives efficient use of resources: ER Visits/1000 (rolling 12 month periods)*



Our doctors are recognized as leaders in their field.



114 top doctors in Northern Virginia Magazine

110 super doctors in Washington Post Magazine

53 top doctors in Washingtonian Magazine

