



# Value Based Payment

Presentation to ACA House of Delegates

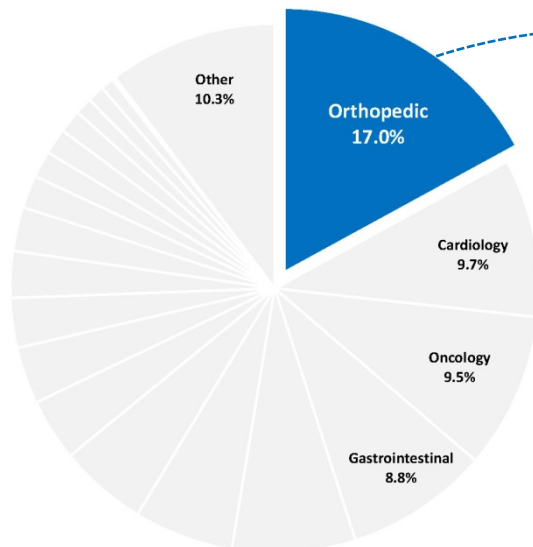
3/17/2017

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# Context

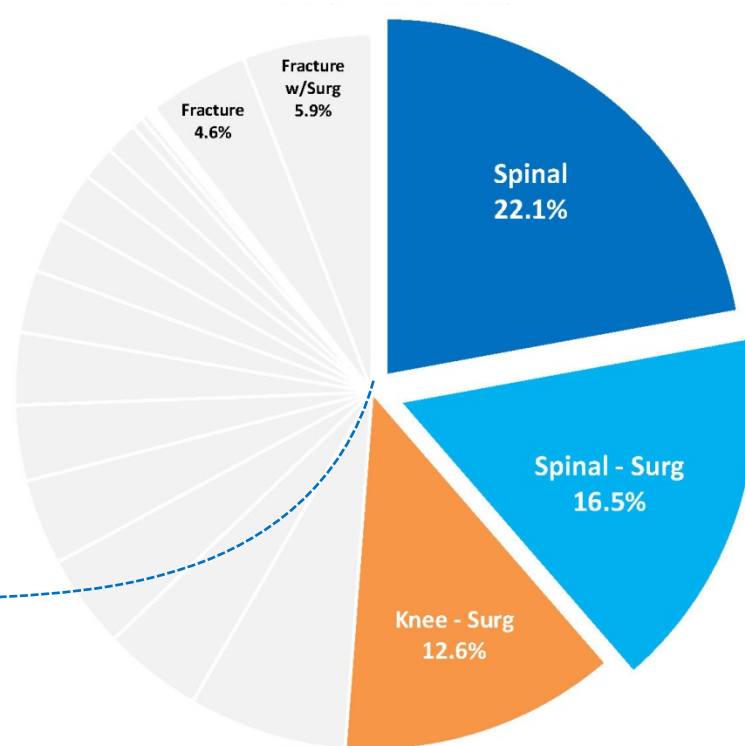
1

Distribution of Health Care Expenditures

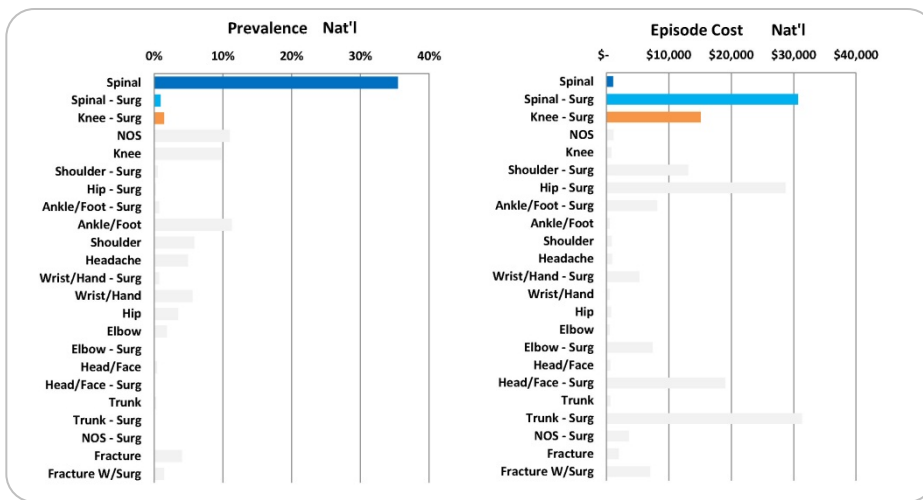


2

Distribution of Musculoskeletal Expenditures



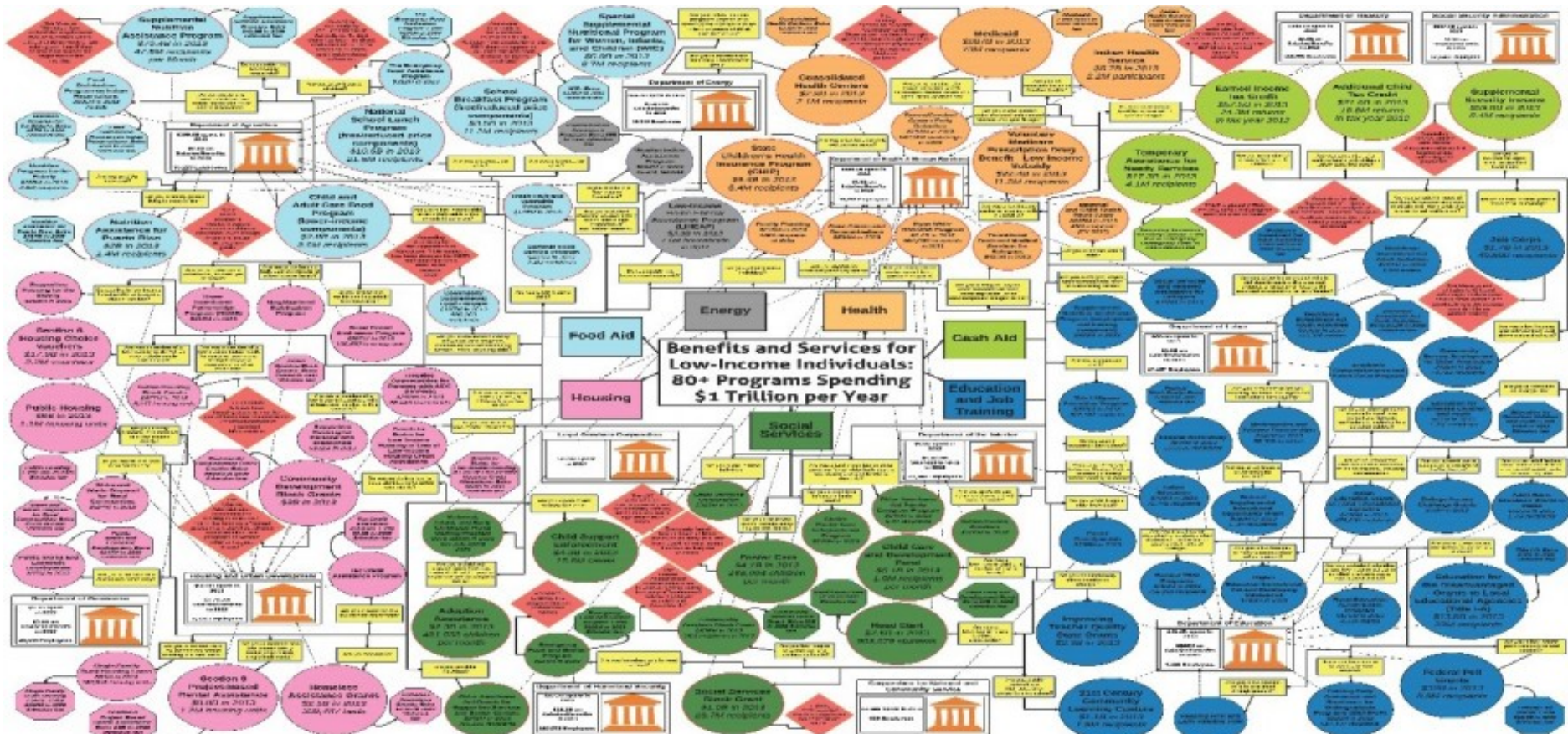
3



[illegible]



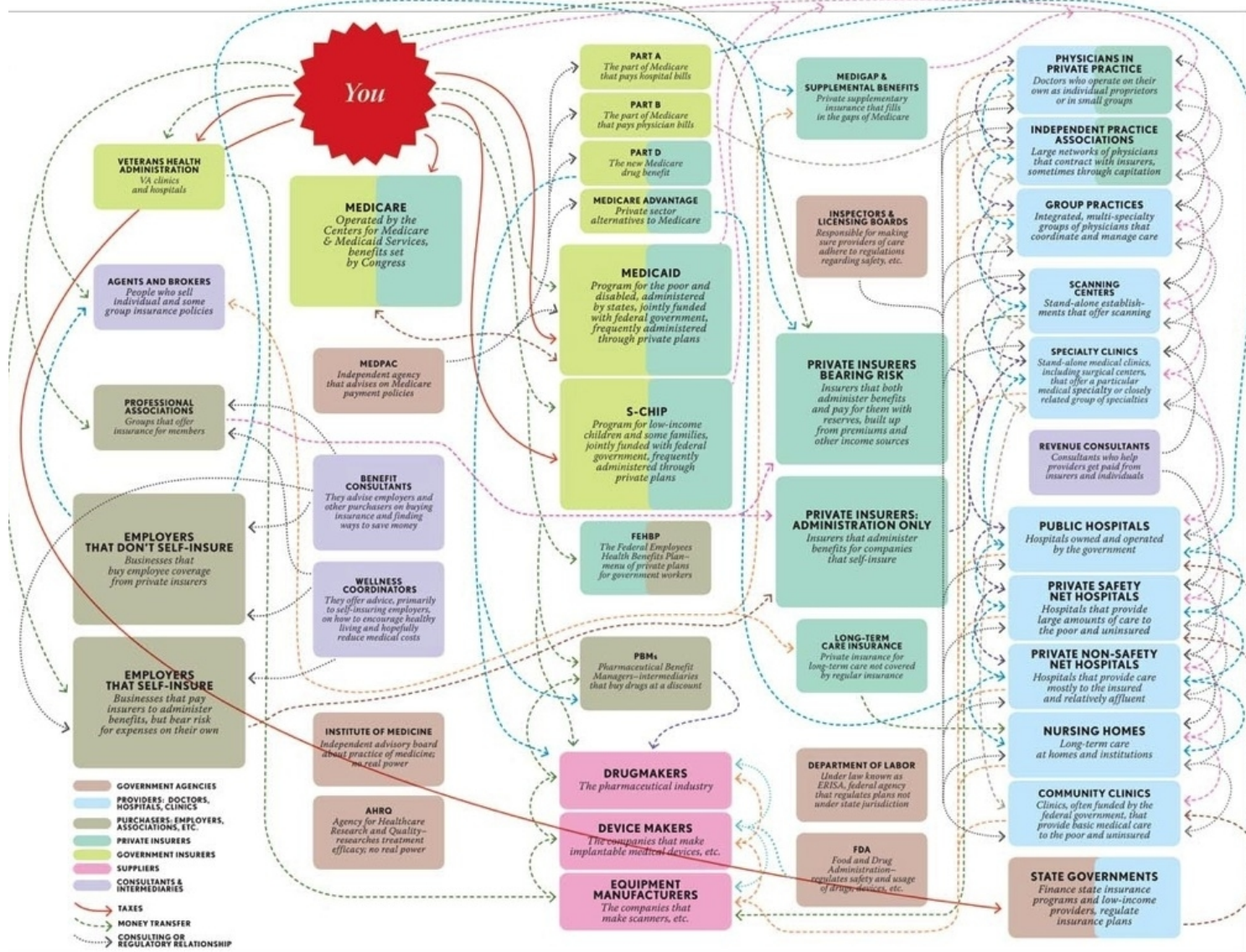
# Our Health Care System Is Complex



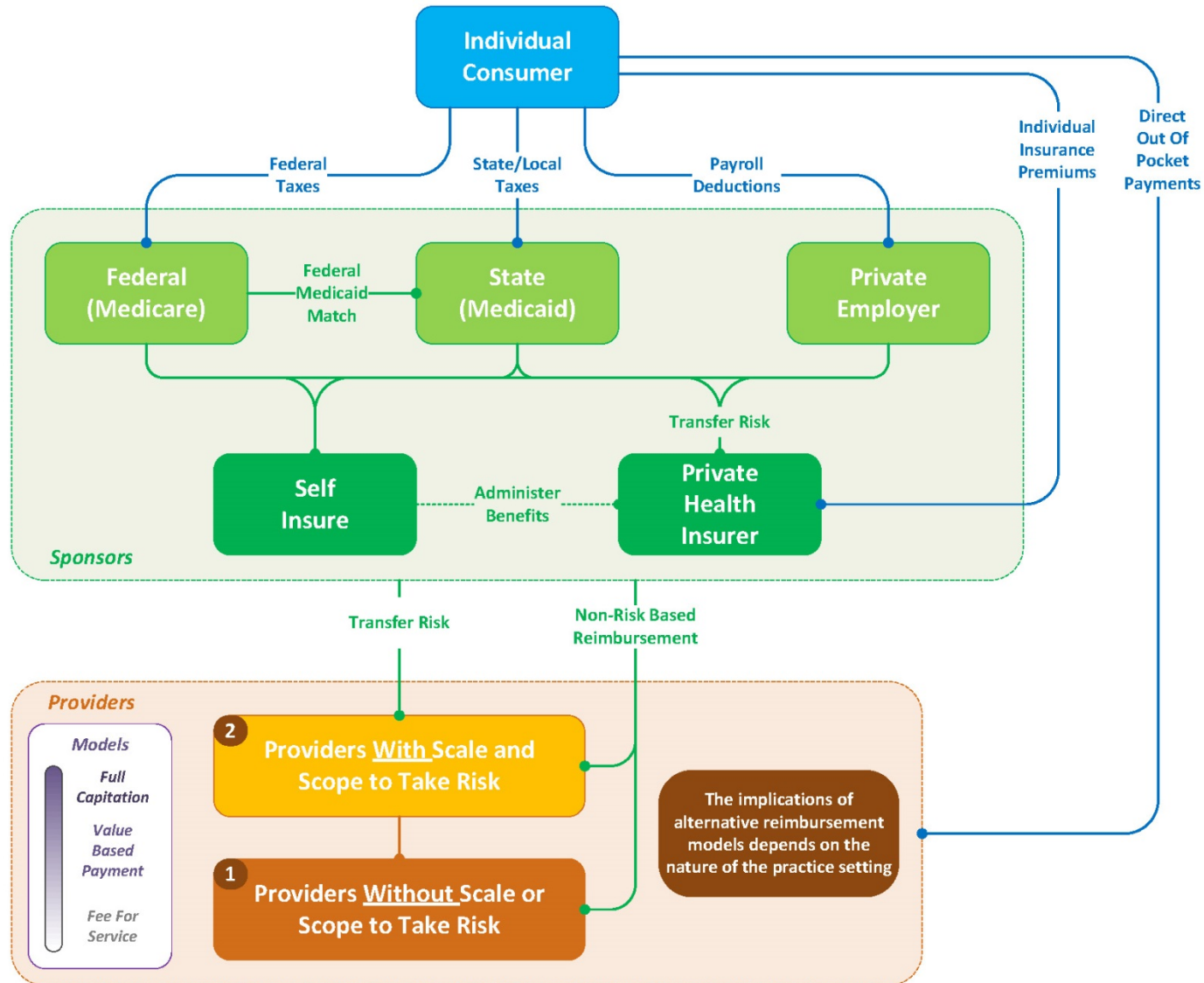
Source: House Ways and Means Committee staff, using Congressional Research Service reports and other data.



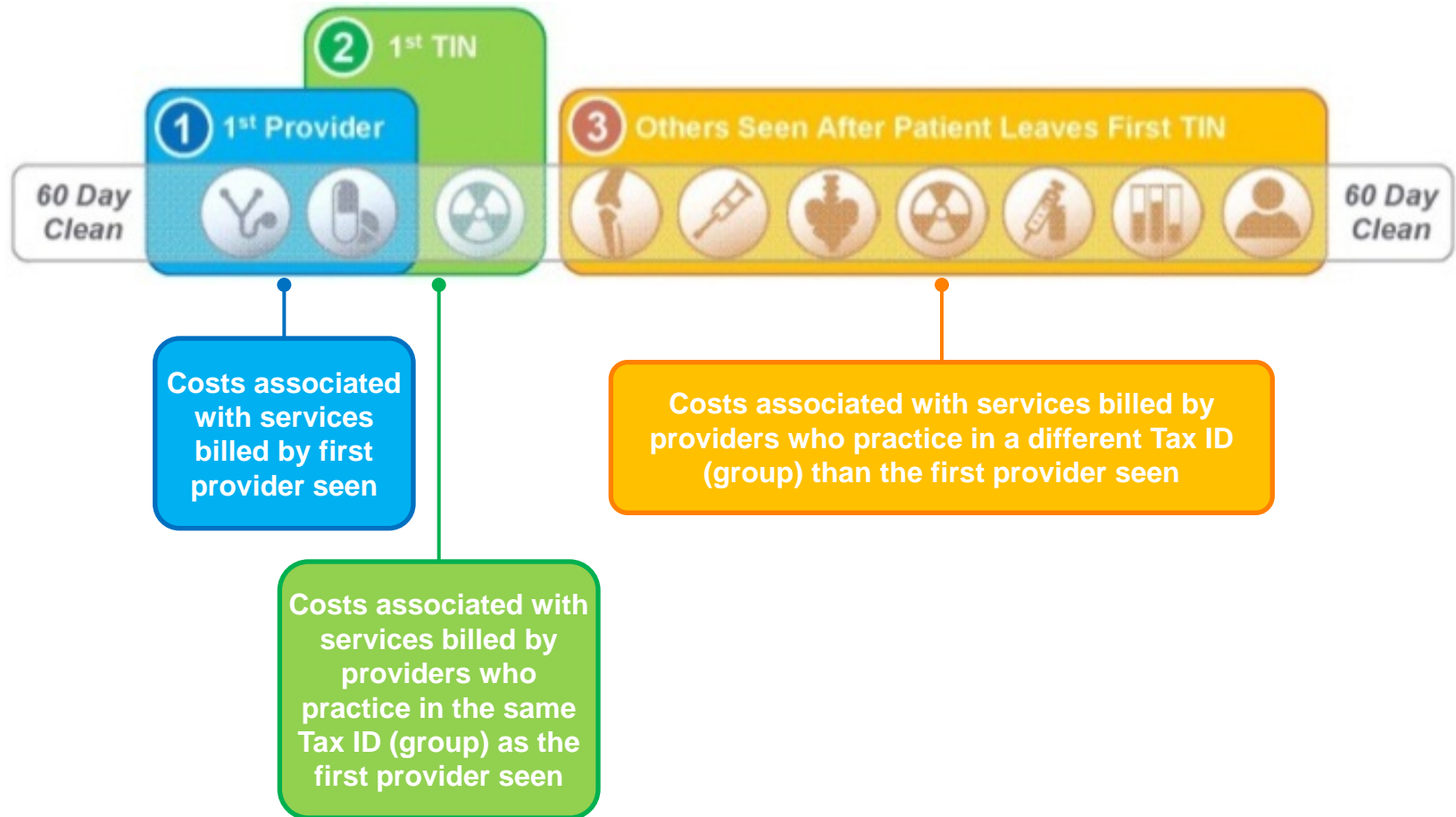
# Our Health Care System Is Complex



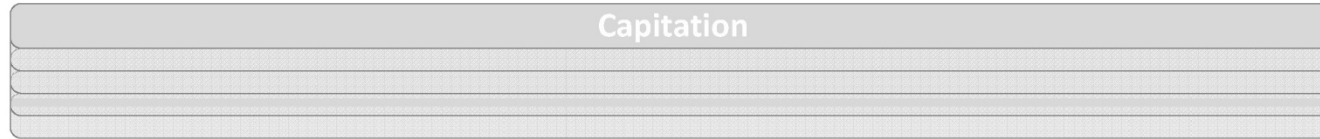
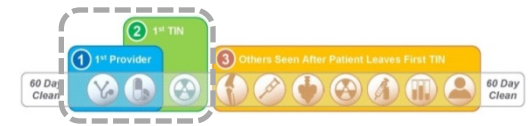
# A Simplistic View



# Context – Anatomy of an Episode



# 1 For DCs Not Able to Take Risk



Episodic Bundle

Episodic Bundle

Services Performed During Same Episode By Providers Other Than Chiropractor

Per Diem

Per Diem

Per Diem

Per Diem

Per Diem

Per Diem

Per Diem

Per Diem

Services Performed During Same Episode By Providers Other Than Chiropractor

Fee For Service

97xxx

CMT

Xray

E/M

97xxx

CMT

97xxx

CMT

97xxx

CMT

97xxx

CMT

97xxx

CMT

97xxx

CMT

E/M

Services Performed During Same Episode By Providers Other Than Chiropractor

1

2

3

4

5

6

7

Visits

# and type of episodes

+

Services performed by non-DC

+

Number of visits

+

Within visit service mix

+

No Risk



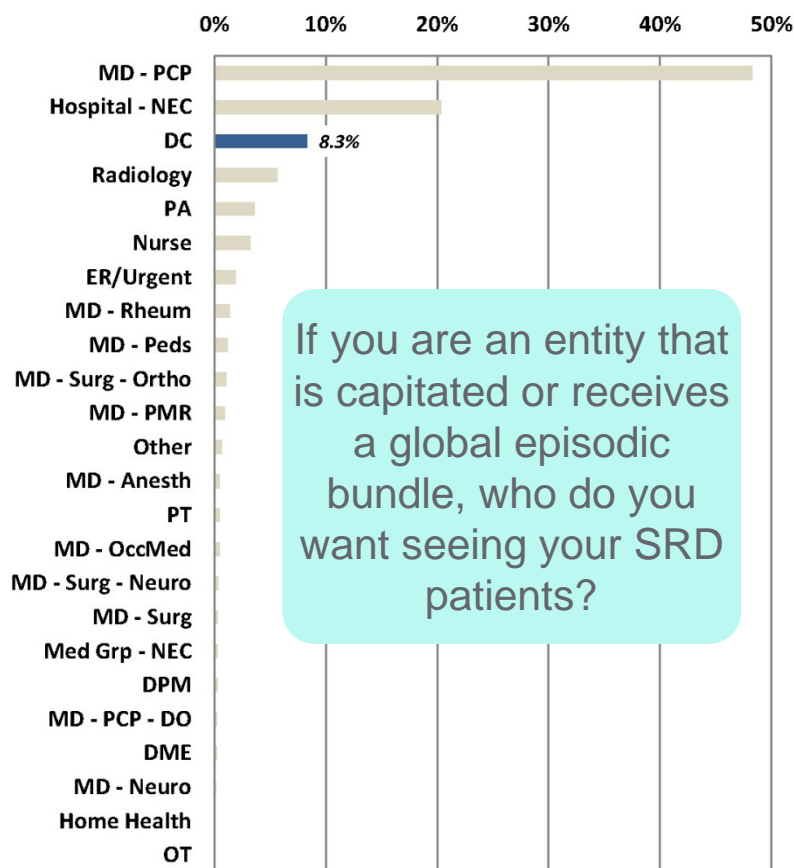
## 2 Implications For DCs Within Entities Able to Take Risk

### Integrated Delivery System In Minnesota



#### Non-Surgical Spine Entry Point

5,191 Episodes Starting With *Delivery System Name*



If you are an entity that is capitated or receives a global episodic bundle, who do you want seeing your SRD patients?

#### Non-Surgical Spine Total Episode Cost By Entry Point

5,191 Episodes Starting With *Delivery System Name*

