
MHDC: “A Massachusetts Vision for Improving
Care Transitions”

*What are Health Plans Doing to Improve
Members’ Care Experiences?*

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Safer Health Care is the Key to Unlocking Savings: Part One

- According to a recent *New England Journal of Medicine* article, one-fifth of all Medicare patients discharged from the hospital are re-admitted within 30 days, and one-third within 90 days
- Hospital readmissions among fee-for-service beneficiaries cost Medicare \$17.4 billion in 2004

Safer Health Care is the Key to Unlocking Savings: Part Two

- According to the Commonwealth Fund's *State Scorecard*, Massachusetts ranked 41st among the 50 states in hospital readmissions
- If Massachusetts were to improve its performance to the level of the best-performing state (Vermont), 5,748 fewer hospital re-admissions would occur among Medicare beneficiaries, resulting in a savings of \$73 million from the reduction in re-admissions for the population over the age of 65

Health Plans in MA

The country's *best* health plans

- Consistently set the standard for quality care
- Centered on the patient
- Emphasis on health and wellness to improve members' care experiences and health outcomes



Best Health Plans

The #1 health plans for Commercial and Medicaid coverage
are based in MA

U.S. News & World Report & NCQA's The State of Health Care Quality: 2008

What are Health Plans Doing to Reduce Readmissions?

- Care management programs aim to improve quality and outcomes for patients, as well as save money
- Heart failure is leading cause of hospitalization among the elderly
- A study from the Commonwealth Fund and published in *Health Affairs* in January 2009, found that “chronic care management programs that employ multidisciplinary teams and in-person communication lead to fewer readmissions for heart failure patients”

What are Health Plans Doing to Reduce Readmissions? (Cont.)

- Program patients had 25% fewer readmissions and 30% fewer readmissions days than patients receiving routine care
- Based on national estimates of hospitalization and readmission rates for patients with heart failure, study authors estimate that a 3% reduction in readmissions per month could result in 14,700 to 29,140 fewer hospital stays annually

What Can We Do To Improve Care Transitions?

- Promote increased collaboration between health care professionals
- Invest in technology and systems to support evidence-based care
- More consumer engagement
- Expansion of chronic disease management programs
- **Payment systems that reward excellence and align incentives**

Questions and Answers