



Incentivizing the Outcome: Paying for Population Health at Hawaii Federally Qualified Health Centers

-Pay-For-Performance Project

AAPCHO's "Incentivizing the Outcome: Paying for Population Health at Hawaii Federally Qualified Health Centers" Project, also known as the Pay-for-Performance (P4P) Project, is funded by the Robert Wood Johnson Foundation. With a network of four Federally Qualified Health Centers (FQHCs) and one health plan located in Hawaii, the intent of the project is to examine whether a team-level P4P incentive program improves health outcomes, emergency room, and hospitalization measures for low-income Asian American & Native Hawaiian and Other Pacific Islander (AA&NHOPI) populations served by FQHCs.

ABOUT PAY-FOR-PERFORMANCE

The project's Pay-for-Performance (P4P) model is based on monetary incentives that are provided to health centers from health plans. In this program model, the health plan rewards health centers who meet pre-determined performance measures (e.g. lowering HbA1c levels) and in effect, improve the quality of care and deliver more efficient services to their patients. Team-based P4P rewards health center teams which consist of physicians and enabling services providers, such as medical assistants, interpreters, and case managers.

PROJECT GOALS AND OBJECTIVES

AAPCHO's Pay-for-Performance Project aims to help health centers assess the effectiveness of P4P incentives on health outcomes for a low-income AA&NHOPI population served by FQHCs.

PROJECT PARTNERS

- AlohaCare (Honolulu)
- Bay Clinic, Inc. (Hilo)
- · Kalihi-Palama Health Center (Honolulu)
- Waianae Coast Comprehensive Health Center (Waianae)
- · Waimanalo Health Center (Waimanalo)

PROJECT YEARS

The project consists of five phases spanning three years:

- Phase 1: Planning (January June 2009)
- Phase 2: Data Collection 1 (July December 2009)
- Phase 3: Data Collection 2 (January June 2010)
- Phase 4: Data Collection 3 (July December 2010)
- Phase 5: Evaluation (January November 2011)





PROJECT MEASURES

The Pay-for-Performance (P4P) Project will clarify the important role of P4P in improving the health outcomes of high-risk populations with multiple conditions, such as diabetes and psychosocial conditions.

Project measures include:

- · Average hemoglobin A1c (HbA1c) values
- Number of patients visiting the emergency room for mild/acute problems, with a
 Federal Poverty Level (FPL) ≥ 200% and have diabetes or cardiovascular disease
 and a psychosocial condition
- Number of patients with a FPL ≥ 200%, who were hospitalized for diabetes or cardiovascular disease and a psychosocial condition

These measures were selected by project partners to evaluate the impact of P4P on the quality and efficiency of care provided to low-income AA&NHOPI patients with multiple conditions. If the project incentives are effective in improving diabetes outcomes and patient utilization of ER visits and hospitalizations, project sites plan to expand on Payfor-Performance methods for other measures of care for their patient populations.

PROJECT DELIVERABLES AND OUTCOMES

Local level

- Improved health status of the target, high-risk AA&NHOPI population
- Improved quality of care provided at project FQHCs National level
- Contribution to the limited research and data about P4P incentives and the implications for low-income AA&NHOPI populations
- Demonstration of quality improvement in P4P incentive programs
- Promotion of a team-focused culturally and linguistically appropriate model of care
- Increased knowledge of outcome and utilization measures, which are incentivized through a team-level strategy