

COKER VALUEPATH™ SERVICES: SUCCESSFULLY NAVIGATE THE PATH TO VALUE

By Ellis “Mac” Knight, MD, Senior Vice President/CMO | Coker Group

Change tends to occur almost imperceptibly. Have you ever noticed how your children don’t seem to have grown at all, until grandma comes for the Holidays and points out how big they’ve gotten!

Despite the expectation for some moment of significant changes in the healthcare system, the movement of the industry toward value-based reimbursement models has taken longer than most of us expected. Even now, the transition from volume to value, seems to come not in quick jolts, but instead, in small incremental shifts that many don’t even recognize as part of the overall volume to value transformation.

Consider the recent announcement that BCBS of GA will no longer pay for what they consider unnecessary visits to the emergency department (ED). While some might not see this as a value-based decision, it most certainly is, as value-based reimbursements hinge on only paying for those services that are felt to bring value to the consumer. While it can be argued that ED visits are not the right place to start limiting payments for care based on value (EMTALA laws still require providers to see and evaluate all patients regardless of whether the payer will reimburse for those services), the systematic elimination of what is considered non-value added care delivery is something that we should expect to see more of in the coming months and years.

Even larger shifts in the paradigm, such as the roll-out of the Medicare Access and CHIP Reauthorization Act (MACRA) earlier this year, tend to occur via baby steps, with reporting of MACRA data starting this year and actual payment increases or decreases coming two years from now.

Nevertheless, this slow and incremental pace of change will likely continue unabated and those who do not prepare for the consequences of value-based reimbursements by re-tooling the system toward a value-based care delivery model will end up behind the curve or worse, end up failing as the industry adapts and leaves them behind.

Coker Group and our ValuePath™ set of services stands ready to assist provider groups of all types (hospitals, healthcare systems, physician practices, ancillary

providers) through this era of major change. Whether you need help aligning your physician compensation models with new value-based reimbursement agreements, organizing providers into clinically integrated programs (the foundation of value-based care delivery), building the IT systems necessary to deliver high value (quality/cost) care, re-designing clinical workflows and care processes, or negotiating value-based payer contracts (such as bundled payment agreements) Coker can help.

Our financial, IT, practice management and clinical experts can assist you in planning and implementing a value-based strategy custom built to your needs. We have extensive experience in this area and we gain more with every client we assist.

And remember, don't wait. Those kids will be grown before you know it!

Please share your thoughts about Coker ValuePath™ and any questions you may have about how these services can help your organization by contacting Ellis “Mac” Knight, MD, Senior Vice President/CMO at mknight@cokergroup.com or by calling 678-832-2021.