OVERVIEW

Today, 5% of patients account for nearly half of the nation’s spending on health care. The needs of this patient population extend beyond care for their physical ailments to social and behavioral services which are often of central importance to their overall well-being.

Improving care management for this population while balancing quality and associated costs is at the forefront of national health care goals. Improving only medical care for high-need patients will not address all of the challenges they face, nor will it lower the cost of care. To be successful, care models will need to address the social risk and behavioral health factors that play an outsized role in the lives of these individuals.

What is the role of policy makers?
The seven items listed below are opportunities for action that policy makers can take to improve and ensure high-quality care for some of our nation’s most vulnerable patients. Policy solutions must engage all aspects of care delivery, such as providing mental health support for home health aids and family caregivers, as well as accounting for existing system constraints and complexities. Policies need to consider both state and federal perspectives to be broadly adopted.

WHAT POLICY MAKERS CAN DO

☑ Increase and expand efforts to engage patient and caregiver involvement in discussions around policy options for improving care and reducing costs for high-need patients.

☑ Modify existing regulations, such as 42 CFR Part II and data-sharing rules in the Health Insurance Portability and Accountability Act of 1996 (HIPAA), to improve data flow among and within agencies and providers.

☑ Incentivize adoption and use of interoperable electronic health records that include functional, behavioral health, and social factors.

☑ Harmonize and coordinate Medicare and Medicaid programs to increase access to needed services and to reduce the burden on patients and caregivers.

☑ Explore the expansion of programs to mitigate financial strain of caregiving, like Medicaid’s Cash & Counseling.

☑ Continue payment policy reforms and alignment initiatives to incentivize pay-for-performance instead of fee-for-service.

☑ Create state- and community-level data-sharing tools which include integrated claims databases that link and share information across payers, service sectors, and provider networks, such as the Predictive Risk Intelligence System (PRISM) that Washington State developed to support care management for high-risk Medicaid patients.

SPREADING AND SCALING CARE MODELS

Although having supportive policies in place can enable models to spread and scale, many care models do not scale because specifics of the model are not considered, such as the adaptations away from ideal conceptualizations to meet the on-the-ground realities or interpersonal dynamics and the role of leadership in success. Areas where policy changes could accelerate care models’ widespread adoption and sustainability include:

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<td>Payment policies should incentivize integration of social services and medical care. This could include combining Medicare and Medicaid funding streams for dual-eligible patients into an integrated benefit structure that allows flexibility to address patient needs.</td>
<td>Measures for assessing the performance of care for high-need patients should indicate the degree of care coordination, quality of life, independence, and overall mental and physical health. Policies should offer incentives to providers to treat high-need patients.</td>
<td>Academic health centers and professional societies should develop training and certification opportunities focused on caring for high-need patients, including training on team-based care, patient engagement, and care coordination across health and social sectors.</td>
<td>Coordinated federal, state, and local government initiatives must identify barriers that currently inhibit data flow among clinicians and organizations treating high-need populations and work to minimize those barriers while respecting privacy and data security.</td>
<td>Federal and state governments, working with their local partners, will need to engage in a coordinated strategy to incentivize the provision of evidence-based social support services in conjunction with the delivery of medical services.</td>
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Examples of successful care models can be found at nam.edu/HighNeeds

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