



# **Chautauqua County: A Transitioning Rural Medical Neighborhood**

Chautauqua Region Associated Medical Partners, LLC

Chautauqua Integrated Delivery System, LLC

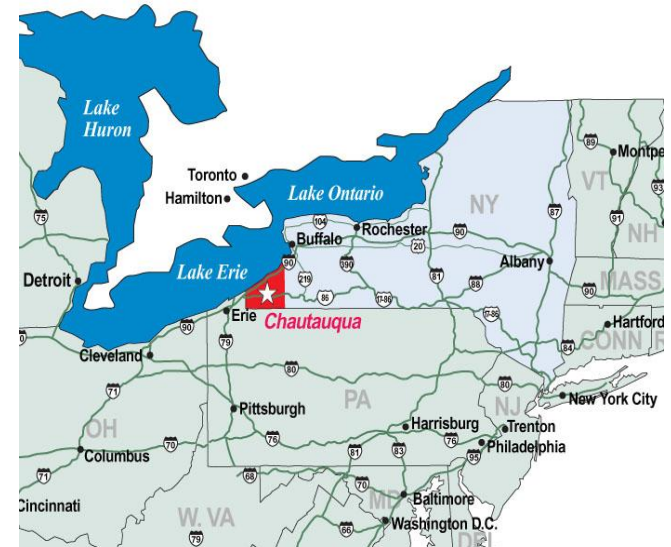
Chautauqua County Health Network

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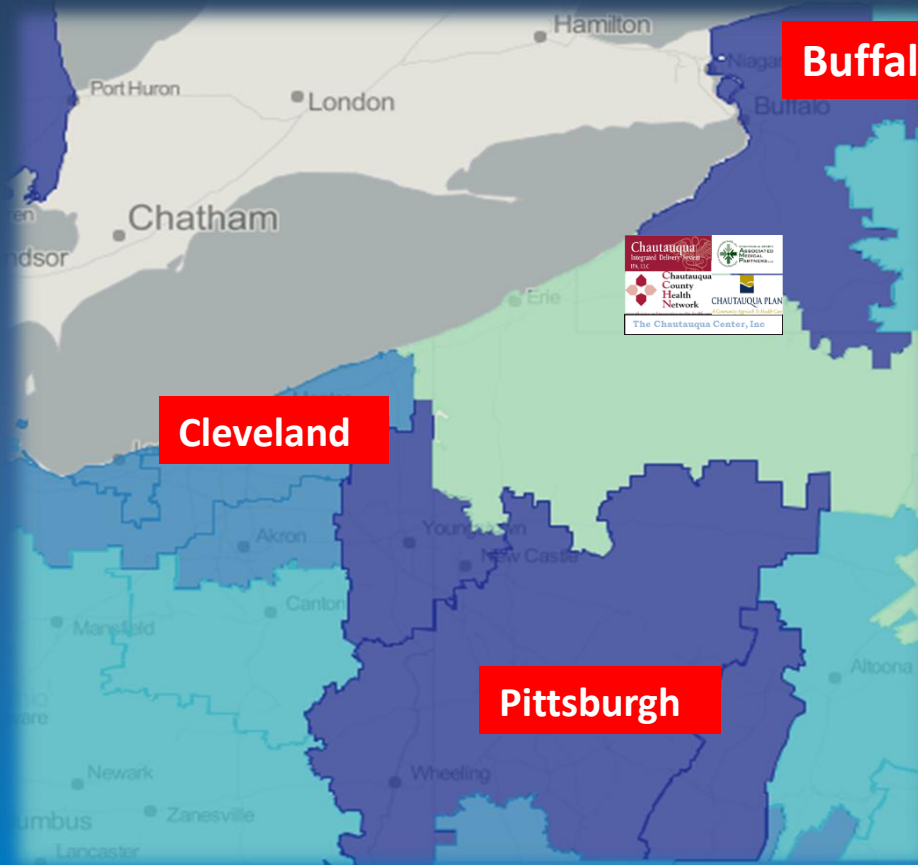
# Chautauqua County, New York

- Population: 130,000+
  - Low income and geographic HPSA's
- Clinical Services:
  - 3 NFP Hospital Organizations-4-hospitals
    - no CAH's
    - all community-336 beds
  - Approx 100+ physicians
  - 5 SNF Organizations – 8 facilities; 1,130 beds
  - Tertiary Care in Erie, PA; Cleveland, OH; Rochester, NY; and Buffalo, NY
  - One FQHC opened 1/13
  - Two primary care and two dental clinics (Article 28)
- 27,000 Medicare Beneficiaries-40% Medicare Advantage
- 32,000 Medicaid enrollees
- Provider Sustainability = Pay for Performance and Other QI incentive
  - Lowest wage index in the nation
  - Erosion of HMO/Managed Care Market
  - Clinical Integration strategy since 2009 anticipating payment reform
  - Accountable Care Act-focus on PCMH and Care Management



# Chautauqua & Direct Affiliates

## 4 Referral Centers in 3 States, 1 HIE & too Many EHRs





# Synergy of Multiple Enterprises has made the ACO possible



Founded 1995



Founded 1997

Our Community of Doctors



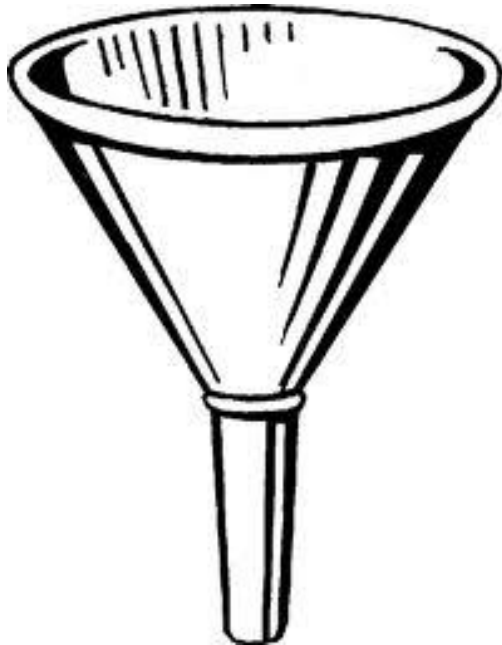
Founded 2012

# Portrait of Chautauqua's Provider Community

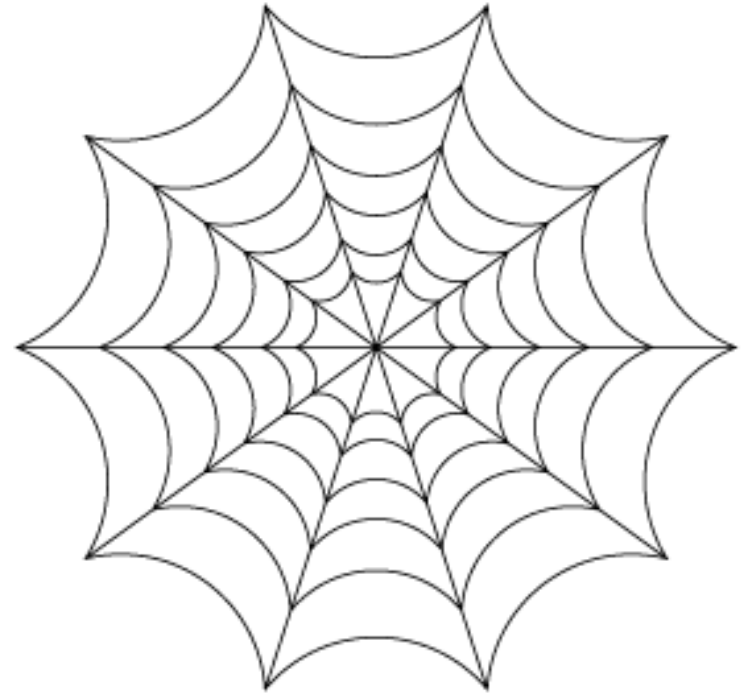


# Differing Approaches to Integration

## Conventional Wisdom



## Chautauqua Health Connects





# AMP Profile

- MSSP participation only-July 2012 cohort
- 7000 beneficiaries
- 8 Independent PCP's-35 physicians
- 3 Independent Hospital Organizations-4 facilities
- 2 Independent SNF Organizations – 3 facilities
- No specialties
- No advance payment
- Track 1-upside gain share only
- 3.4% savings target-no savings PY1/PY2 ?



# AMP Board Composition

## 12 Members (currently)

- 5 PCP (1 vacancy)
- 3 Hospital Organizations
- 1 SNF
- 1 CCHN-Citizen Advisory Board Chair
- 1 MFFS Beneficiary
- 1 IDS (IPA)





# Clinical Integration Projects AMP is Working on Together

- Increasing data sharing between participants
- Standardization of data entry, screening, and referral
- Reducing readmissions
- Building Care Management
- Consumer Engagement
- Episodes of Care



# **Our Plan**

**Build Patient Centered Medical Homes  
and**

**Centralize the Medical Neighborhood (Community)  
to Support Them**

**Focus: Medicare Beneficiaries**

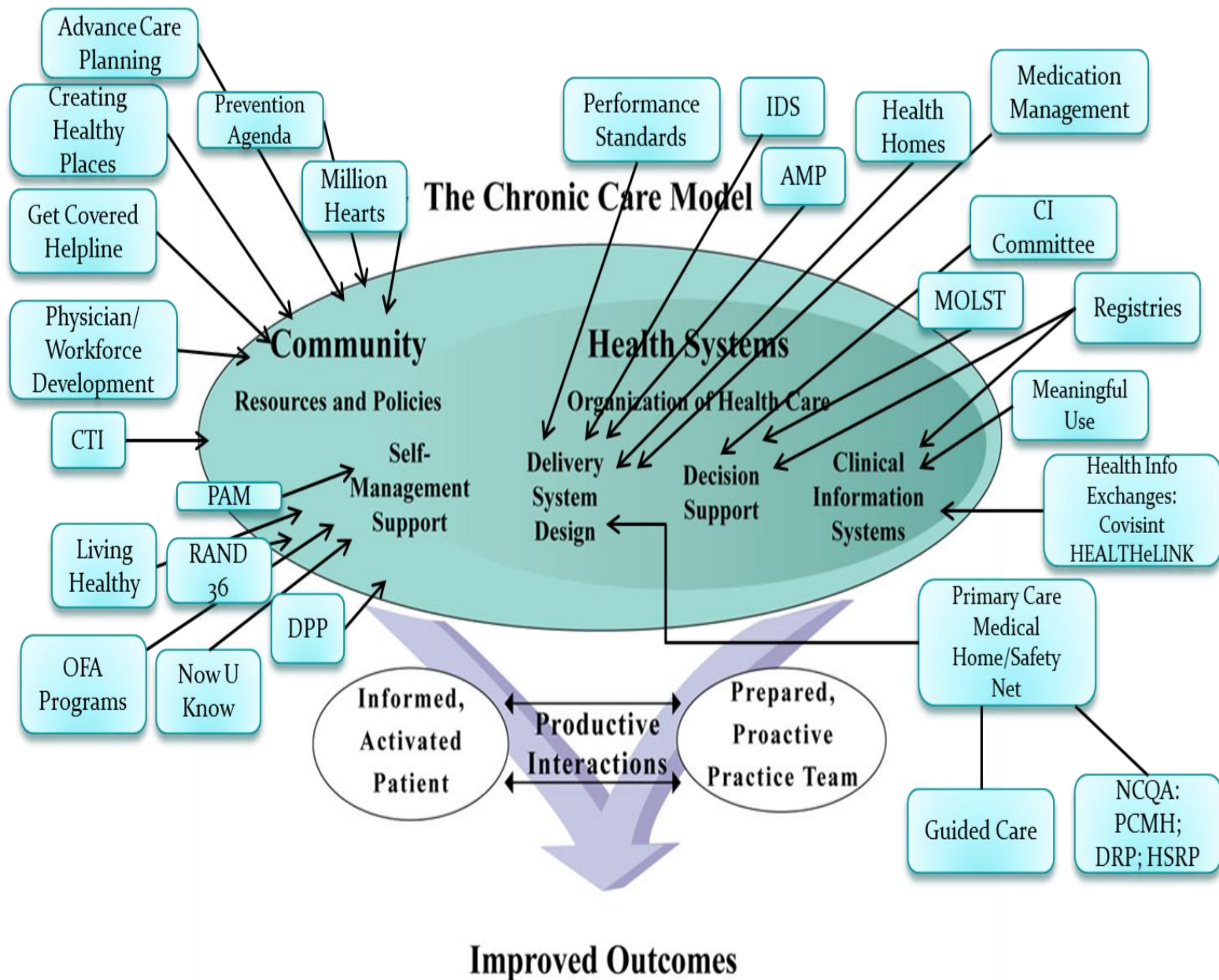
# Collective Impact

The commitment of a group of individuals/organizations from different sectors to a common agenda for solving a complex social problem

- Premise is that no single organization can create large-scale, lasting social change
- No “silver bullet” solution to systemic problems
- Strong organizations are necessary but not sufficient for large-scale change
- More rigorous and specific than collaboration

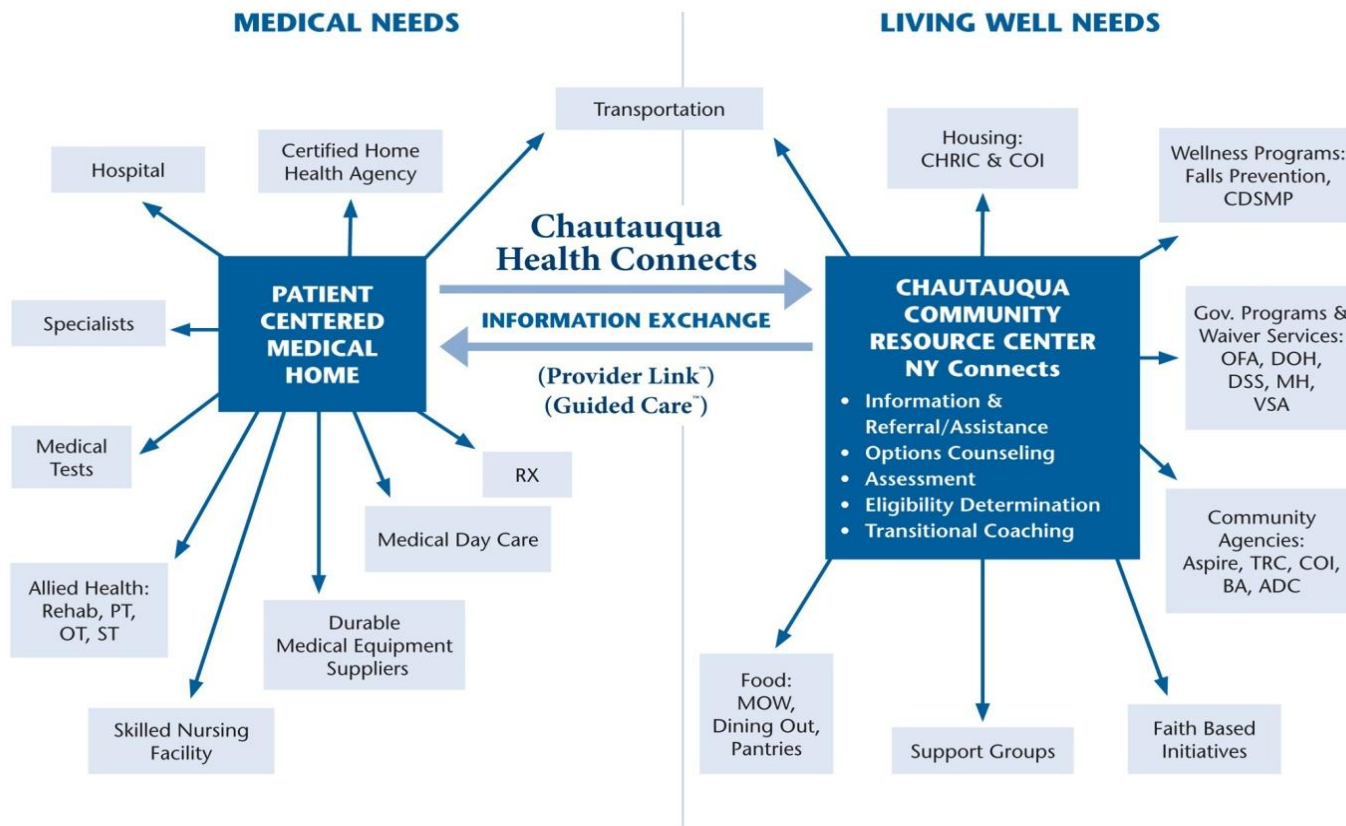
# **5 Conditions of Collective Impact Success**

- Common Agenda
- Shared Measurement System
- Mutually Reinforcing Activities
- Continuous Communication
- Backbone Organization



# Chautauqua Health Connects Health Information Exchange

## The Chautauqua Model: Maintaining Seniors with Long Term Health Needs





# Key Partners

- County and Local Agencies (e.g. Office for the Aging, LHU, etc.)
- NYSDOH-especially Office of Rural Health
- NYSOFA
- State Hospital Association
- P<sup>2</sup> Collaborative of WNY-AF4Q
- HEALTHeLINK (RHIO)-Beacon
- HRSA Office of Rural Health Policy and ONC
- Health Foundations: W&CNY and NYSHealth
- HIT Consultants
- HIT Vendor
- Payers-CMS and commercial
- Elected Officials-State and Federal