



# Managing Costs through Payment Reform and Uncertainty

## DESCRIPTION

Medicare and Managed Care payer systems are transforming from Fee for Service models to new models including bundled/episodic payments, risk sharing or value-based purchasing models. Under the Bundled Payments for Care Improvement initiative, organizations will enter into payment arrangements that include financial and performance accountability for episodes of care. Under value-based purchasing models, providers will be rewarded by decisions that improve the health care delivery. These models should lead to higher quality, more coordinated care at a lower cost. Does this mean a lower reimbursement as well?

With all this uncertainty, there are things providers need to do in order to survive. Learn from an owner/operator perspective as the instructor discusses the possibilities of this dramatic change. How do you prepare? What should you know going into the future? What do you need to do to survive?

## DISCUSSION POINTS

1. Management information systems
2. Key data elements
3. How to manage costs by diagnosis per episode
4. How to manage and evaluate efficacy of ancillary services
5. Opportunities to negotiate payment amounts
6. What exactly is shared risk?
7. What are the risks?
8. How much will you be making in the bundled world?