

ATTACHMENT APR

DELIVERY SYSTEM REFORM INCENTIVE PAYMENT (DSRIP) PROGRAM ACCOUNTABLE CARE ORGANIZATION (ACO) PY3 ANNUAL PROGRESS REPORT RESPONSE FORM

PART 1: PY3 PROGRESS REPORT EXECUTIVE SUMMARY

General Information

Full ACO Name:	Wellforce Care Plan with Fallon Health
ACO Address:	10 Chestnut Street, Worcester, MA 01608

Part 1. PY3 Progress Report Executive Summary

1.1 ACO Goals from its Full Participation Plan

PY3 ACO program goals	
Goal #	Goal Category & Description
1	Cost and Utilization Mgmt. (Medical Trend):
1.a	<i>Sub goal #1: Reduce medical/surgical avoidable readmissions per one-thousand by 7,5%</i>
1.b	<i>Sub goal #2: Reduce behavioral health/SUD avoidable admissions per one-thousand by 7.5%</i>
1.c	<i>Sub goal #3: Reduce avoidable ER utilization per one-thousand by 7.5%</i>

1.2 PY3 Investments Overview and Progress toward Goals

Due to the pandemic it is difficult to gauge the progress against our goals. During the year several changes were made including Wellforce hospitals reducing their rates and Fallon Health reducing their admin load.

Of course, the biggest unexpected impact was the pandemic which artificially lowered demand for services. As a reference point our 2019 Cost to Premium ratio was 102.7%. In 2020 that same ratio was closer to 83%. It is not possible to determine how much of the change in services was COVID vs. the model of care.

1.3 Success and Challenges of PY3

Challenges:

COVID-19 presented the biggest challenge to the ACO in 2020. The reduction of in person services and mandated social distancing resulted in fewer direct touchpoints between patients and the model of care.

Successes:

The model of care pivoted to one solely based on remote contact. A meaningful number of providers were able to move to telehealth platforms. Engagement via the phone was substantially higher than previous periods since so many individuals were home for extended periods of time. Finally, as mentioned above lower provider and admin rates were instituted across the ACO and Fallon. Wellforce also directed portions of the model of care to focus primarily on transitions of care for patients with high needs.