

PILOTING PROMETHEUS®: EMPLOYERS, PLANS AND PHYSICIANS

working together to reward greater quality and value.



Real payment reform won't happen overnight. But for one employer coalition, a three-year pilot shows a promising way forward.

The half-trillion dollar question

What's the most effective way to reduce potentially avoidable complications (PACs)? Nationally, these care defects consume around 40 cents of every dollar spent on patients with chronic conditions. One innovative employer coalition is tackling the issue head on. In partnership with the area's health care providers, it's begun a three-year pilot to test PROMETHEUS Payment®.

Key pilot goals

Reduce PACs by at least 6% in Year 1. The coalition seeks to promote a patient-centered environment and help physicians act in teams – without disrupting current operations. Other goals include making patients more aware of their responsibilities, helping employers improve plan design, and helping providers increase overall quality and efficiency.

The PROMETHEUS concept

Package payment around a comprehensive episode of medical care that covers all patient services related to an illness or condition. Providers are compensated for the care they collectively deliver; the top performers earn the most.

Program design

At first, the focus is on improving management of three chronic conditions: diabetes, hypertension and coronary artery disease (CAD). Providers who follow well-established clinical guidelines and avoid PACs should generate substantial savings, which will be pooled and distributed to top performing physicians and member companies.

Calculating budgets

The prices of all treatments for a given condition are added up and risk-adjusted to form an Evidence-informed Case Rate™ (ECR). This acts as a budget for the entire care episode, covering services across all providers that would typically treat a patient for that condition.

It's not capitation

Capitation systems, which provide one flat fee for patient care, often fail to compensate providers fairly. But PROMETHEUS increases payment by adjusting for risk factors like patient demographics and severity of illness. Plus, it provides an allowance for PACs. As a result, it's fairer to physicians—especially those who deliver the best outcomes.

What's in it for providers

The pilot puts accountability for care where it belongs: in the hands of physicians. As in any functioning market, those who create the most value will earn the highest compensation. Providers can also access a wealth of data to compare their performance to industry baselines, and engage in continuous improvement efforts. →

What's in it for employers

This pilot is designed to increase value by driving down costs, improving quality, and providing a powerful catalyst for change. It supports the coalition's mission to continuously improve the value of health care services to member companies, employees and their families.

What's in it for patients

Patients stand to receive better care at lower costs (to them and their employers), from coordinated care teams working together to enhance their overall health.

Next steps

If the pilot proves successful, PROMETHEUS will be expanded to other chronic conditions, such as congestive heart failure, asthma, and chronic obstructive pulmonary disease, and eventually to a wider range of conditions as well.

With costs rising at unsustainable rates, it's time to put payment reform into practice—and your organization can play a central role. Let us design a PROMETHEUS pilot for you.

Contact us at info@HCI3.org or visit www.HCI3.org, www.BridgesToExcellence.org, or www.PrometheusPayment.org.