

UPMC Center for High-Value Health Care

ACTIVITY REPORT 2011-2014

COLLABORATION

INNOVATION

VALUE

UPMC Insurance Services Division

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www.upmchighvaluehealthcare.com

Visit us online to download a PDF and view a brief introductory video of this report.



Innovation. Collaboration. Value.

Welcome to the UPMC Center for High-Value Health Care



Diane P. Holder

President and Chief Executive Officer, UPMC Health Plan

President, UPMC Insurance Services Division

Executive Vice President, UPMC

Chief Executive Officer, UPMC Center for High-Value Health Care



Donna J. Keyser, PhD, MBA

Senior Director, UPMC Center for High-Value Health Care

Co-Chair, UPMC-University of Pittsburgh Collaborative Work Group

Our name says a lot about us. The **UPMC Center for High-Value Health Care** suggests quality, affordability, and service. Our pursuit of these values is consistent with our mission. But this name tells only part of the story. It does not explain how the UPMC Center for High-Value Health Care is able to expertly leverage UPMC's integrated delivery and financing system to design, implement, and test models of care that promote what the Institute for Healthcare Improvement calls the "Triple Aim" — a framework for enhancing the patient experience of care, improving the health of populations, and reducing the per capita cost of health care.

As a nonprofit research organization housed within UPMC Insurance Services Division, the Center works to expand and strengthen collaborations across UPMC, the University of Pittsburgh, and other academic and community partners. By integrating the perspectives of patients, payers, providers, and policymakers with academic training and expertise, we have created a unique research enterprise that reflects and promotes the interests, knowledge, and values of all key stakeholders.

Since its inception in 2011, the Center has supported research and quality improvement efforts specifically designed to advance the health and health care of UPMC Insurance Services Division members and the communities that UPMC serves. Center staff assists with the development of research proposals, administers and/or manages externally funded projects, and supports project implementation and evaluation in order to expand the base of knowledge that all stakeholders can use to reach their goals.

We also translate research into practice through an active agenda of publication, presentation, and professional networking. These efforts help to ensure that important lessons learned will have a real-world impact.

As health care reform continues to take hold across the nation, public and private funding agencies have become increasingly interested in supporting research to improve the quality,

effectiveness, accessibility, and cost effectiveness of health care. The direct involvement of health systems, health care payers, patients, and communities is essential for furthering this agenda. By building on ongoing work across UPMC Insurance Services Division and by strengthening our longstanding affiliation with the University of Pittsburgh, the UPMC Center for High-Value Health Care has elevated the Pittsburgh region to a position of leadership in local, state, and national health care reform.

We are proud to share the Center's unique story with you. Through descriptions of our activities and the perspectives shared by our partners, we hope that you will gain a fuller understanding of what the Center does, who we work with, and the positive impact that our research has on how health care is provided at UPMC and across the nation. You can download a PDF or view a brief introductory video of this report online at www.upmchighvaluehealthcare.com.

Thank you for your interest in and support of the UPMC Center for High-Value Health Care. Together with our collaborators, we look forward to continuing our meaningful work and improving the delivery of health care for years to come.

Sincerely,

Our Mission

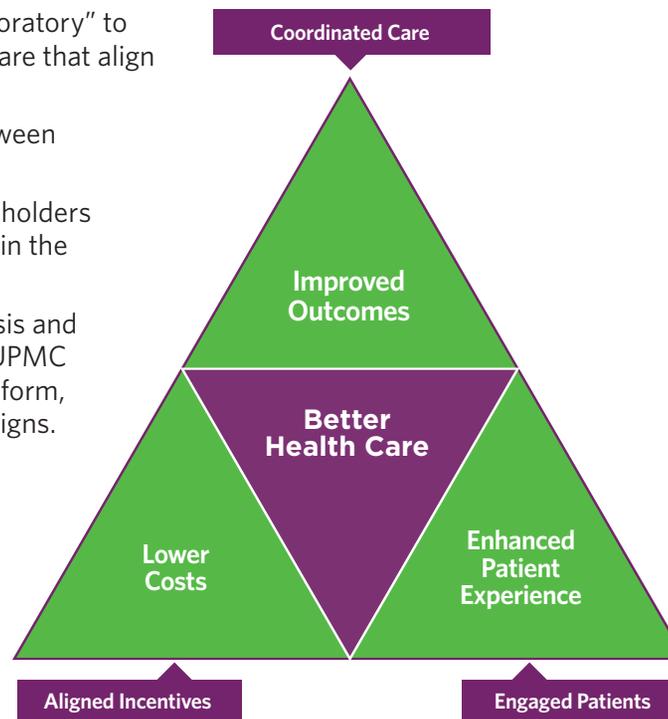
Advance U.S. health care policy and practice through the development and implementation of innovative service delivery and payment models that support value-driven health care for our members, the communities we serve, and society at large.

Our Vision

Establish the UPMC integrated health enterprise as a valued partner in national, state, and local efforts to improve health care quality and efficiency, as well as the overall health of our nation's population.

Our Approach

- Leverage the UPMC payer-provider “laboratory” to design, implement, and test models of care that align with the Triple Aim.
- Build and strengthen collaborations between academic and community partners.
- Incorporate perspectives of all key stakeholders to produce results that are built to work in the real world.
- Use advanced data collection and analysis and predictive modeling capabilities within UPMC Insurance Services Division to inspire, inform, and evaluate new health care model designs.

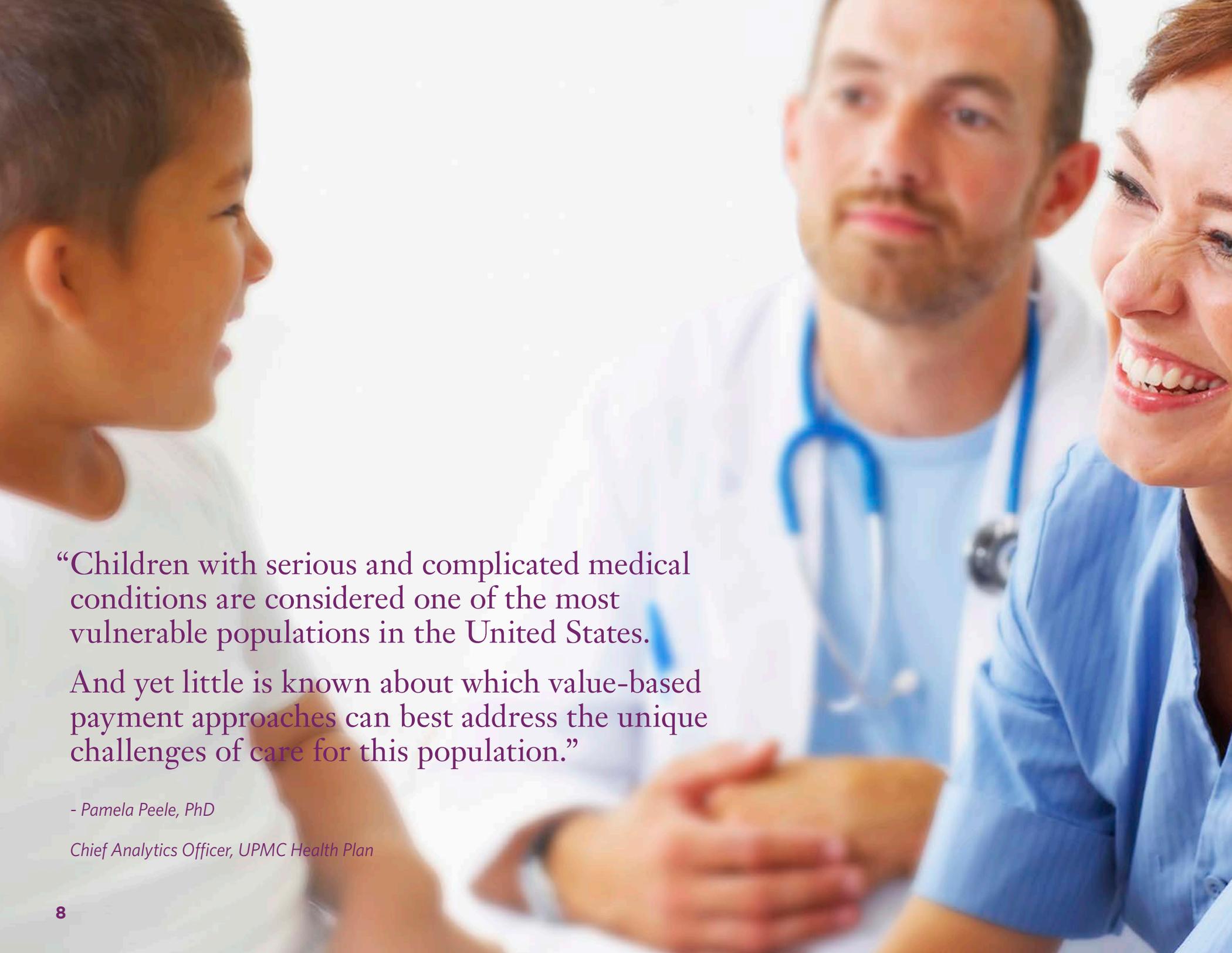


By the Numbers:

- 13 projects funded since the Center's inception in 2011
- \$11,983,095 in funding awarded since August 2009 (learn more about the Center's funding on page 28)
- More than 30 research publications in peer-reviewed journals
- More than 100 formal presentations of research for stakeholders, academic, and health care institutions annually

Our Innovative Service Delivery and Payment Models

The UPMC Insurance Services Division seeks to improve the quality and efficiency of health care for its members. The Center's work supports this goal by enhancing the value of service delivery and payment innovations that support flexibility in how care is delivered, involve consumers in the management of their own health and health care, and enhance provider accountability for the costs and quality of care.



“Children with serious and complicated medical conditions are considered one of the most vulnerable populations in the United States.

And yet little is known about which value-based payment approaches can best address the unique challenges of care for this population.”

- Pamela Peele, PhD

Chief Analytics Officer, UPMC Health Plan

Redefining Medicaid payment reform for our most vulnerable populations

In 2012, UPMC *for You*, the physical health Medicaid managed care organization of UPMC Insurance Services Division, was awarded a \$440,000 grant from the Robert Wood Johnson Foundation (RWJF) to develop a new pathway for Medicaid payment reform. The UPMC *for You* High-Value Care for Kids initiative is one of only four projects that Robert Wood Johnson Foundation funded out of 50 that were submitted in response to its 2011 nationwide call for proposals around “Payment Strategies for High Value Care.” The Center is actively involved in administering and managing this grant.

The UPMC *for You* High-Value Care for Kids payment model has three components that were identified by stakeholders as having the greatest potential for enhancing care value for children and adolescents with medically complex conditions:

- Prospective funding for care coordination and enhanced payments to support other needed clinical services not currently reimbursed through fee-for-service.
- Consumer-directed accounts that enable patients and families to work together with their primary care providers to identify and purchase the best clinical or nonclinical goods and services for meeting patient needs.
- Shared savings if the total cost of care for the population during the performance period is less than the historical spend for the same population.

This innovative model seeks to improve the coordination and quality of care for UPMC *for You* members in Allegheny County who face serious and complex medical issues, while at the same time reducing the total cost of care. In collaboration with Children’s Hospital of Pittsburgh of UPMC, including Children’s Community Pediatrics and General Academic Pediatrics; families, advocates, and policymakers; UPMC *for You*’s work in this area will promote more flexible, coordinated, and efficient service delivery. The process and outcomes will be documented in a “how-to” manual that other stakeholders can use as a roadmap for implementing similar or related payment reforms across the nation.



Deborah Moss, MD, PhD, co-director of the UPMC *for You* High-Value Care for Kids project, conducts a checkup with a Medicaid patient at the Children’s Hospital of Pittsburgh of UPMC medical office building in Oakland, a neighborhood of Pittsburgh.

Photographer: James Knox, Pittsburgh Tribune-Review

Monica and her daughter
Kiyleaha serve as an example of
how the UPMC *for You* High-
Value Care for Kids initiative
can benefit families dealing with
a serious medical condition.



UPMC *for You* High-Value Care for Kids: Monica and Kiyleaha's story

Monica and her daughter Kiyleaha face many challenges. Monica's child has ataxia-telangiectasia, a rare and progressive degenerative disease. Living with "A-T" is never easy. What gives Monica some comfort is the knowledge that, at minimum, things are now less stressful than they could have been, thanks to the new payment model supported by UPMC *for You* High-Value Care for Kids.

The stress results from the gap that exists between what Medical Assistance deems "medically necessary" for a child with A-T and what a mother knows her child needs to improve her quality of life.

It was Kiyleaha's physician at Children's Community Pediatrics of UPMC, Deborah Moss, MD, PhD, who alerted Monica to the UPMC Center for High-Value Health Care's initiative that enables patients and families to work with primary care providers to identify and purchase the best clinical or nonclinical goods and services that meet the patient's needs.

It was through this program that Monica was able to provide what she calls "miscellaneous" items that are nonetheless vital to her daughter's well-being. These include a special nutritional supplement that Kiyleaha enjoys and that helps her gain weight, and money for an after-school program and a summer program for Kiyleaha, which enables Monica to work during the day.

"It's a definite stress relief," Monica said about the program. "Taking care of a child with this disability can be very expensive. You can't put a dollar amount on it. I appreciate any and all the help that I can receive. I am truly grateful."

As Kiyleaha gets older, Monica realizes that those needs could change. Items like a motorized wheelchair, or a special chair and desk for doing homework might be required. But her uncertainty about what she will need is now matched by an equally-secure feeling.

"As time goes on, you can never know what will come up. But it gives me peace of mind that if there's something Kiyleaha needs, I can get it for her," says Monica. "I can count on this program."

Alexis Miller, formerly a project manager at the Center, was honored by the Association of Community Affiliated Plans (ACAP) in 2014 for her work on the Robert Wood Johnson Foundation grant. ACAP's "Making A Difference" award is presented annually to an employee of an ACAP health plan whose work goes beyond the norm and exemplifies the ACAP principles of Advocacy, Care, Access, and Public Good.



Alexis is pictured here (second from left) with UPMC Health Plan executives Sharon Czyzewski, Vice President, Human Resources; John Lovelace, President, UPMC *for You*; and Pamela Peele, Chief Analytics Officer.

Photographer: Melissa Faye Shaner

"Over the last few years, UPMC Physician Services Division, Community Medicine Inc., has been working with UPMC Health Plan to implement the PCMH model in our primary care practices. Within one year, practices engaged in the PCMH and shared savings program have achieved improvements in quality as well as significant reductions in cost. We now have 70 practice sites that are fully engaged in team-based care. We look forward to involving our 50 other locations in this amazing and fruitful journey."

- Francis Solano, MD

*Vice President,
UPMC Physician Services Division*

*President,
Community Medicine, Inc.*

Transforming the nation's primary care infrastructure

UPMC Health Plan is working with its provider partners to transform primary care practices into patient-centered medical homes (PCMH). The PCMH is a promising model for improving access to high-quality, coordinated care for more Americans at lower cost. However, sustainable and scalable approaches for achieving widespread primary care transformation have yet to be fully implemented.

In 2012, "Results from a Patient-Centered Medical Home Pilot at UPMC Health Plan Hold Lessons for Broader Adoption of the Model," was published in *Health Affairs*, a leading journal of health policy thought and research. This manuscript was developed by UPMC Insurance Services Division and Center staff and provides early results from the UPMC Health Plan's PCMH program. Analyses indicate that members served by sites participating in the pilot achieved lower medical and pharmacy costs, more efficient service delivery (such as lower hospital admissions and readmissions), and less frequent use of hospital emergency departments than those in the rest of the UPMC network. The report recommends various approaches that could spur adoption and spread of the model.

More recently, UPMC Health Plan has initiated a Shared Savings program through which physicians at participating PCMH practices

receive care coordination support in addition to a portion of financial savings if the total cost of care for Health Plan members declines and quality metrics meet or exceed benchmarks.

Combining the PCMH model and Shared Savings programs has been shown to result in significant near-term cost savings while improving and maintaining care quality, thus serving as an important first step toward more fundamental payment reform that supports sustainable improvements in primary care. The results were presented at the June 2014 AcademyHealth Annual Research Meeting, a leading national organization that serves as a central hub for professionals who work in health services and policy research.

The UPMC Center for High-Value Health Care is an organizational affiliate of AcademyHealth.

Find the *Health Affairs* article with this citation:

Results from a Patient-Centered Medical Home Pilot at UPMC Health Plan Hold Lessons for Broader Adoption of the Model. *Health Affairs*, 31, no. 11 (2012):2423-2431.

Authors:

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- Sandra McAnallen, Senior Vice President, Clinical Affairs and Quality Performance, UPMC Insurance Services Division
- Diane Holder, President, UPMC; President, UPMC Insurance Services Division; President and CEO, UPMC Health Plan

Read the *Health Affairs* article and download the 2014 AcademyHealth Annual Research Meeting presentation at www.upmchighvaluehealthcare.com.



Our Integrated Approaches to Care

The Center and its collaborators recognize that high-quality health care is not a “one size fits all” proposition. By implementing and evaluating patient-centered, integrated approaches to care, we promote the health and well-being of our members in ways that are important to them.

Optimizing behavioral health care delivery

In collaboration with Community Care Behavioral Health Organization (Community Care) — the behavioral health Medicaid managed care organization of UPMC Insurance Services Division — the UPMC Center for High-Value Health Care was awarded one of the first PCORI contracts in the country in 2012 for a project entitled “Optimizing Behavioral Health Homes by Focusing on Outcomes that Matter Most for Adults with Serious Mental Illness.” People with serious mental illness are at increased risk for physical health problems and early death. Health care systems often struggle to meet the needs of these vulnerable individuals. Building on an integrated care model developed by Community Care, this study compares the effectiveness of two promising approaches for enhancing the health, wellness, and recovery of our adult members with serious mental illness who receive care in rural community mental health centers.

The first approach supports patient self-management through a web portal with information on health conditions, personal health care use data, and health tracking tools and wellness programs along with peer support in wellness activities. The second approach connects patients with registered nurses at community mental health centers to help coordinate their care, improve communication between providers and payers, and provide patient wellness support and education. In each case, wellness training and support is provided to all community mental health center staff. The results of this study will advance health system improvement efforts to avoid untimely death and chronic disease among people who have serious mental illness by providing insight into a more personalized approach to care.

“While there are proven strategies that can prevent and manage significant medical conditions that are common among adults with serious mental illness, providers need a better understanding of how to shape and deliver these interventions so that they can effectively support the outcomes that matter most to patients.”

- James Schuster, MD

Chief Medical Officer, Community Care

*Vice President, Behavioral Integration,
UPMC Insurance Services Division*



Amplifying the patient's voice

The Center and Community Care were awarded a second PCORI contract in 2013 for "Amplifying the Patient's Voice: Person-Centered vs. Measurement-Based Approaches in Mental Health." Prescribers of psychotropic medication play an important role in supporting the recovery of people with serious mental illness. Medication visits with nurses and doctors are complex, agenda-packed, very brief (often only about 15 minutes), and offer little time for discussion. Frequently, these interactions are not centered on the patient's needs and preferences, and individuals in service are left feeling unheard and dissatisfied. For individuals with serious mental illness, involvement in decision making about medication use is essential for achieving individual recovery goals.

Advancing the work of an existing collaboration between Community Care, Dr. Pat Deegan, and Dartmouth Psychiatric Research Center, this study explores how technology can be used in the care process to amplify the voices of our members, support shared decisions, and improve treatment outcomes. Two promising approaches for promoting shared decision making are being compared. One approach uses standardized quantitative assessment of patient symptoms to guide clinical decision making, and the other involves a working alliance between the patient and the prescriber with a focus on promoting self-care and recovery. The results will benefit UPMC Health Plan's members by providing information to make personalized health care decisions and support improvements in delivery system processes.

"People can recover from mental health conditions, and this study will help us understand how technology can support effective treatment and help folks meet their goals of returning to work, school, and a full life in the community."

- Patricia E. Deegan, PhD

*Pat Deegan, PhD & Associates, LLC,
Dartmouth Psychiatric Research Center
Project Co-Principal Investigator*



Learn more

Read the Mathematica article about the Connected Care project at www.upmchighvaluehealthcare.com.

Cultivating enhanced care coordination and information sharing through Connected Care

Adults with serious mental illness have higher rates of physical health comorbidities than the general population, yet these individuals experience challenges in seeking routine medical care. Coordination among health care payers and providers can improve outcomes for this population. Connected Care is an approach for integrating care management and sharing real-time information across UPMC's behavioral and physical health managed care plans.

Initially, Connected Care was part of the Rethinking Care Program — a national initiative of the Center for Health Care Strategies (CHCS) and supported by the Kaiser Permanente Community Benefit — that sought new ways to improve care quality and decrease spending for high-need, high-cost Medicaid beneficiaries. In a report published by Mathematica in October 2012, Connected Care was shown to reduce rates of hospitalization and readmission for members with serious mental illness after two years of implementation. Results have been used to improve communication, information

sharing, and member access to resources, such as transportation and other community services, and to enhance the broader system of care for members with serious mental illness and complex medical conditions in the greater Pittsburgh region and throughout Pennsylvania.

Given the success of Connected Care, in 2011, the Center and Community Care were awarded a grant from CVS Charitable Trust to expand implementation of the program in McKeesport, Pennsylvania. The second largest city in Allegheny County after Pittsburgh, McKeesport has a high concentration of underserved adults with serious mental illness and chronic physical health conditions. Community Care, UPMC *for You*, and primary care and behavioral health providers in McKeesport worked together to increase member enrollment in Connected Care and to obtain stakeholder perspectives on the flow of information from health plans to providers to ensure timely, accessible, and complete information is available to promote enhanced communication around individual care.

Staff from participating behavioral and physical health facilities in the McKeesport region provided important insight on:

- Best practices for health care screening and monitoring.
- How to improve processes for sharing health information between physical and behavioral health providers.
- How to improve coordination of medication prescribing practices between providers.
- Innovative strategies for addressing barriers to health care coordination, such as educational opportunities for staff and reducing stigma for individuals receiving services.

All Together Better Health Conference

Community Care's Behavioral Health Home model was one of four innovative integrated care models designed and implemented by the UPMC Insurance Services Division and showcased in a panel session at the All Together Better Health Conference held in Pittsburgh on June 6-8, 2014.

Panelists from UPMC, pictured from left to right:

- Judith W. Dogin, MD, Senior Medical Director, Community Care
- Denise Stahl, MSN, ACHPN, Executive Director, Palliative and Supportive Institute of UPMC
- Deborah K. Redmond, MBA, MHA, RPT, formerly Vice President, Clinical Affairs, UPMC Insurance Services Division
- Lyndra Bills, MD, Regional Medical Director, Community Care
- Sandra McAnallen, MA, BSN, RN, Senior Vice President, Clinical Affairs and Quality Performance, UPMC Insurance Services Division



Photographer: Melissa Faye Shaner

View the presentation slides from this panel session at www.upmchighvaluehealthcare.com.



Supporting PCORI's mission

The Patient-Centered Outcomes Research Institute (PCORI) is an independent, nonprofit organization authorized by Congress to provide information about the best available evidence to help patients and their health care providers make more informed decisions. PCORI's research is intended to give patients a better understanding of the prevention, treatment, and care options available, and the science that supports those options. Center staff and other UPMC representatives serve as ambassadors to PCORI from the Pittsburgh region.



Photographer: Melissa Faye Shaner



Photographer: Melissa Faye Shaner

Jane Kogan, PhD, Director, UPMC Center for High-Value Health Care, describes an approach for developing a successful PCORI proposal at the University of Pittsburgh Cancer Institute 2013 Annual Research Conference.

James Schuster, MD, MBA, and Kim MacDonald-Wilson ScD, CRC, CPRP, play an integral role in facilitating the Center's PCORI contracts. James serves as Chief Medical Officer of Community Care and Vice President, Behavioral Integration, UPMC Insurance Services Division. Kim is Director, Recovery and Transformation at Community Care. Both are also senior faculty members at the Center.

Our Technology-Supported Interventions

UPMC is a worldwide leader in developing technologies that solve important health care challenges. The Center's work builds on these efforts by testing innovative technology-supported interventions that help our members live healthy, productive, and meaningful lives.

“By encouraging employees and their families to get involved with their medical care decisions, we can improve overall health and produce cost savings for our employees, our members, and their families.”

- Michael Parkinson, MD, MPH, FACPM
Senior Medical Director, Health and Productivity
UPMC WorkPartners



Photographer: Melissa Faye Shaner

UPMC MyHealth: Revealing best practices for population health management

Managing the health and costs of the U.S. health care workforce is a national health care priority. UPMC MyHealth is an incentivized and comprehensive wellness, prevention, and chronic disease management program for UPMC employees and other UPMC Health Plan group health members. All members who complete an online health risk assessment receive automated feedback on their health and potential risks, prioritized modifiable lifestyle risk factors, dynamic “what if” scenario modeling, and recommendations for improving risk levels. They are also provided access to online educational materials and self-help tools, telephonic health coaching, and group support related to managing lifestyle issues, such as alcohol and tobacco use; emotional health and stress; exercise, nutrition, and weight; and chronic diseases, including depression, diabetes, heart disease, and respiratory health.

A five-year observational study conducted by UPMC Health Plan gauged the impact of UPMC MyHealth on the health and costs of over 13,500 UPMC Health Plan participating group health plan members. The evaluation demonstrated significant improvements in health risk status and an increased use of preventive and chronic disease management services. The study concluded that incorporating incentivized health management strategies into employer-sponsored health insurance benefit plans can serve as a useful tool for managing the health and wellness of health care workers and can also contain costs. The results were presented at the June 2013 AcademyHealth Annual Research Meeting. A manuscript developed by UPMC Insurance Services Division and UPMC Center for High-Value Health Care staff was published by the *American Journal of Preventive Medicine* in 2014.

Read the article

in the *American Journal of Preventive Medicine* about UPMC MyHealth, and download the 2013 AcademyHealth Annual Research Meeting poster presentation at www.upmchighvaluehealthcare.com.



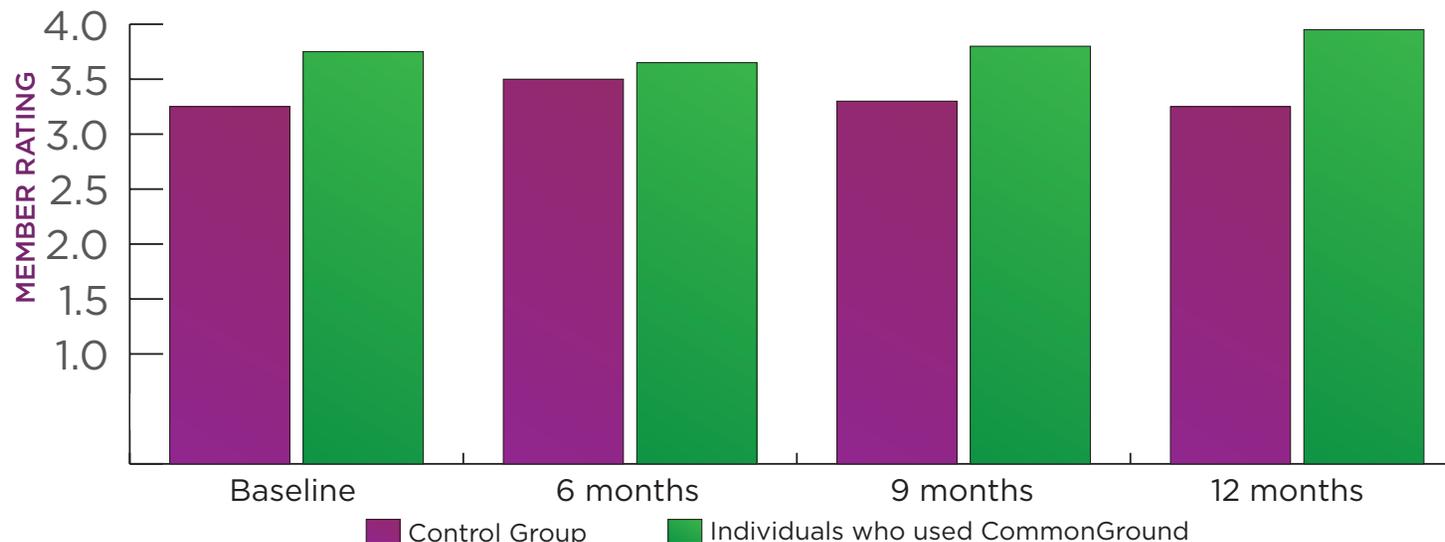
Through this project, utilization of CommonGround in mobile technology reached nearly 70 percent of the targeted population.

Expanding the use of CommonGround through mobile technology

Despite ongoing efforts to deliver more personalized care, the patient experience in mental health care remains predominantly provider-driven. CommonGround is a web application that supports person-centered care, recognizing and reinforcing the individual's own capacity to move toward recovery not only through the use of prescribed medicine but also through their own resources and strategies. Working with our members and practitioners of Community Treatment Teams at Mercy Behavioral Health, the UPMC Center for High-Value Health Care and Community Care received funding from Staunton Farm Foundation to develop an effective and sustainable training and support process for the use of CommonGround via mobile technology, such as cell phones and iPads.

Prior to the application of mobile technology, many people with serious mental illness who could benefit from the use of CommonGround lacked access to this recovery-oriented program. As a result of CommonGround's wider accessibility, Community Care members with serious mental illness were able to become more involved in their mental health recovery process. This project enabled Mercy Behavioral Health's Community Treatment Team staff to understand the challenges and issues faced by the members they serve and provided an effective new channel through which to give support. The quality of interaction between members and health care providers improved, and the member's role in recovery-oriented, community-based services was sustained for a longer period of time.

Rating of Quality Time Spent With Doctor



Community Care members who used CommonGround gave a higher rating than the control group for the quality of time spent with their doctor. They also rated the helpfulness of Mercy Behavioral Health's Community Treatment Team in their recovery more favorably than the control group.



Based on the success of the pilot through LEAD Pittsburgh as evaluated by the Center, the SCoRE exam was made available in the 2014-15 school year to freshman college students who received a Pittsburgh Promise grant.

Supporting individuals to manage behavioral health risks and conditions

Developing and evaluating the use of technologies that help individuals manage behavioral health risks and conditions can enhance the patient experience, improve individual health outcomes, and reduce overall health care costs. The UPMC Center for High-Value Health Care is engaged in several partnerships with a range of stakeholders and organizations to better understand the factors that both promote and create barriers to the use of innovative technologies.



Developed by U² Interactive — a company based in Pittsburgh that was formed through a partnership with the UPMC Insurance Services Division and Ultrasis, a corporation based in the United Kingdom — Beating the Blues US is a clinically-proven, cost-effective online Cognitive Behavioral Therapy program for mild-to-moderate depression, stress, and anxiety. Beating the Blues US has been proven to help individuals manage their mood and stress levels, which in turn can improve management of and outcomes for other chronic conditions, such as diabetes and heart disease. The Center is collaborating with U² to implement and evaluate the use of this program in member populations across UPMC Insurance Services Division.



The Student Curriculum on Resiliency Education (SCoRE) was developed by the 3-C Institute for Social Development in cooperation with LEAD Pittsburgh, a nonprofit organization that advocates for treatment innovation and access to address issues surrounding anxiety and depression. SCoRE is an interactive, computer-based program designed to help students transitioning from high school to college to succeed academically by promoting important life skills, including stress management and resiliency techniques. The Center is working with LEAD Pittsburgh to develop and test effective strategies for ensuring broad use of the program.

Students who completed SCoRE revealed positive stress-relief techniques, effort to improve social relationships, enhanced goal-setting capabilities, and many other important resiliency-promoting behaviors.



The Center is also part of a national stakeholder learning collaborative focused on advancing the use of technology to support shared decision making (SDM) in behavioral health care delivery. Sponsored by the Substance Abuse and Mental Health Services Administration, this group meets routinely via webinars and in-person to review research and practices around the current state of SDM, including definition and measurement, development of electronic and other decision aids, integration of decision support aids into existing health information technology, and personal experience in a behavioral health system in need of transformation. Participants include researchers, providers working to integrate SDM into care, payers, policymakers, users of mental health services, and innovators of SDM strategies.

Project Funding Overview

The UPMC Center for High-Value Health Care coordinates the research and quality improvement activities of UPMC Insurance Services Division that are supported through external funding from public and private organizations, as well as through subcontracts and service agreements with collaborators, such as the University of Pittsburgh.



A total of \$11,983,095 has been awarded to UPMC Insurance Services Division entities, including the Center, from August 1, 2009, through March 31, 2017. The entities received 97 percent of these funds directly from the funding organization to support eight projects. The remaining 3 percent has been awarded from academic and government partners through subcontracts or vendor agreements to support five projects.



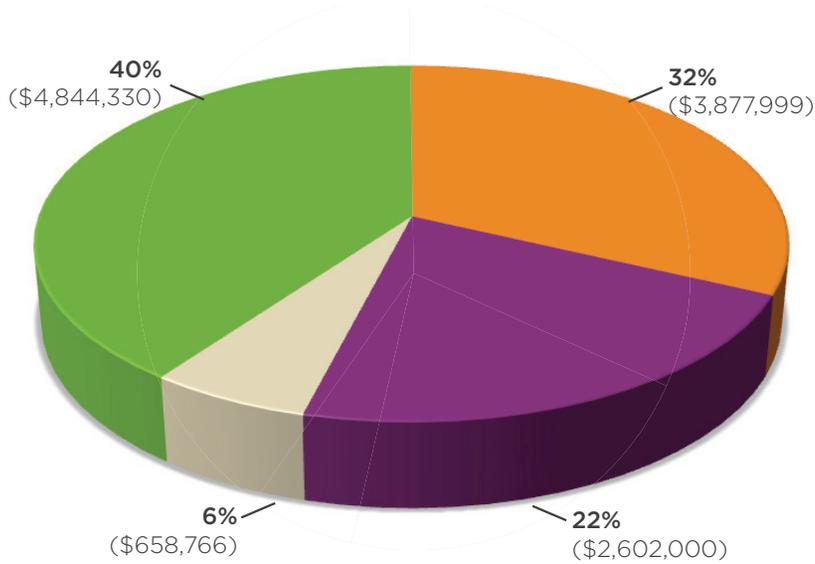
Funding partners

- The Beckwith Institute
- Centers for Medicare & Medicaid Services
- CVS Caremark Charitable Trust
- National Institutes of Health
- Patient-Centered Outcomes Research Institute
- Pennsylvania Department of Public Welfare
- Robert Wood Johnson Foundation
- Staunton Farm Foundation
- Substance Abuse and Mental Health Services Administration
- UPMC Rehabilitation Institute

Project Funding Overview

Total Project Funding

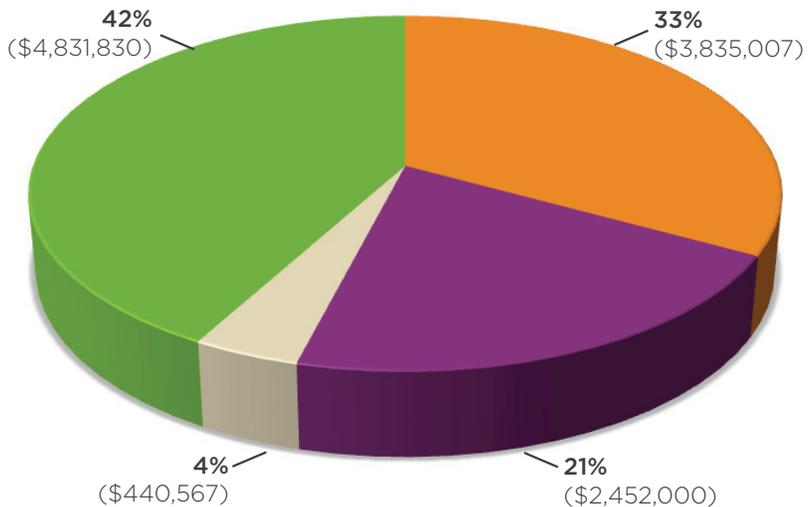
(Funding awarded from August 1, 2009 through March 31, 2017)



- UPMC Center for High-Value Health Care
- UPMC for You
- Community Care
- UPMC Health Plan

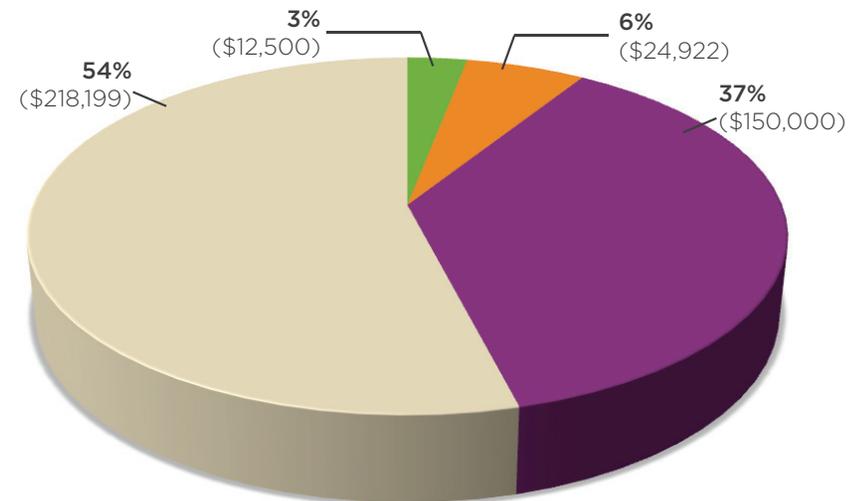
Primary Funding Allocation

(Funding awarded from August 1, 2009 through March 31, 2017)



Secondary Vendor Funding Allocation

(Funding awarded from December 1, 2010 through March 31, 2017)



Our Work Ahead

In the years ahead, the Center will continue to build new partnerships, support innovative research and quality improvement efforts across UPMC, and translate knowledge into practice.

Over the past three years, the UPMC Center for High-Value Health Care has made substantial progress in advancing the Triple Aim of optimal health system performance for our members in western Pennsylvania and beyond. The Research and Quality Improvement Committee (RQIC) is one example of our work in this area. (A photo of the RQIC is below; see description on next page.)

In addition, the UPMC-Pitt Collaborative Work Group was established at the Center's inception by leaders from both institutions and has provided a unique forum for cultivating and accelerating this effort. As of January 2014, the UPMC-Pitt community ranked second nationally in PCORI funding.

There is still much work to be done. We are confident that with the enthusiasm and commitment of our many stakeholders, we will be able to realize our vision of establishing the UPMC integrated health enterprise as a valued partner in national, state, and local efforts to improve health care quality and efficiency for our members, as well as the overall health of our nation's population.



Photographer: Melissa Faye Shaner

"The UPMC Center for High-Value Health Care serves as an important mechanism for coordinating research and quality improvement efforts across UPMC and the University of Pittsburgh. By capitalizing on our mutual strengths and sharing resources and learning, the UPMC-Pitt community brings valuable knowledge to bear on health and health care delivery for the best interests of UPMC Insurance Service Division members, UPMC patients, and many other stakeholders in our community and beyond."

- Loren H. Roth, MD, MPH

Associate Senior Vice Chancellor for Clinical Policy and Planning, Health Sciences, University of Pittsburgh

Distinguished Service Professor of Psychiatry, University of Pittsburgh

Senior Advisor, Quality, UPMC Health Plan

Professor of Health Policy and Management, Graduate School of Public Health, Secondary Appointment, University of Pittsburgh

Below:

In September 2014, the Center hosted a pre-recorded viewing of the “Stealing Smart” session of TEDMEDLive 2014 for about 30 stakeholders and partners from UPMC and the University of Pittsburgh. The session’s speakers demonstrated how some of the best solutions to problems in health and medicine come from other places than where the problem originated or is usually addressed. The event gave an opportunity for the attendees to network, share ideas, and discuss the research and concepts presented by the speakers. The Center will continue to leverage opportunities like this in the future, in order to build a more collaborative environment and spur innovative thinking. This photo represents a handful of key individuals of who attended.

From left to right: Elizabeth Venditti, Western Psychiatric Institute and Clinic/UPMC; Michael Schneider, University of Pittsburgh; Bruce Rollman, University of Pittsburgh; Anthony Delitto, University of Pittsburgh; Jane Kogan, UPMC Center for High-Value Health Care; Joel Stevans, University of Pittsburgh; Kristin Schroeder, Western Psychiatric Institute and Clinic; Mary Racek, Western Psychiatric Institute and Clinic; Donna Keyser, UPMC Center for High-Value Health Care; and Johanna Bellon, University of Pittsburgh

Opposite page:

The Research and Quality Improvement Committee (RQIC) comprises leaders from across the UPMC Insurance Services Division. This Committee is responsible for overseeing the Center’s ongoing quality improvement and patient-centered initiatives with practices and clinicians across the UPMC network. The RQIC meets monthly to discuss the progress of these initiatives, explore new opportunities, and provide ongoing systems-level clinical and business intelligence to research and quality improvement activities. This group’s continued leadership is important for ensuring a bright future for the Center.

From left to right: Jane Kogan, UPMC Center for High-Value Health Care; Chronis Manolis, UPMC Health Plan; Rick Pro, UPMC Health Plan; Sharon Hicks, Community Care; Carol Regueiro, UPMC Health Plan; Rebecca Culyba, UPMC Center for High-Value Health Care; Donna Keyser, UPMC Center for High-Value Health Care; Stephen Perkins, UPMC Health Plan; and Loren Roth, UPMC Health Plan



Photographer: Melissa Faye Shaner

Our Leaders and Core Staff

The UPMC Center for High-Value Health Care is directed by a five-member Corporate Board and coordinated through a multidisciplinary oversight committee. Committee members include 18 representatives from across the UPMC Insurance Services Division, with Dr. Pamela Peele, Chief Analytics Officer, serving as senior management advisor. The Center's work is conducted in collaboration with affiliated investigators and faculty and managed by a core staff.

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- Sheryl A. Kashuba, Esq., Secretary
- Loren H. Roth, MD, MPH
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UPMC Insurance Services Division

Colleen Walsh

Senior Director, Quality Improvement
UPMC Health Plan

Core staff

- Donna J. Keyser, PhD, MBA, Senior Director
- Jane N. Kogan, PhD, Director
- Rebecca J. Culyba, PhD, Senior Program Administrator
- Cara Nikolajski, MPH, Program Administrator
- Gina Snyder, Project Analyst
- Atina Jenkins, Senior Administrative Assistant



Sitting, left to right: Rebecca Culyba, Stephen DiGioia (former part-time Center staff), Jane Kogan, Cara Nikolajski.
Standing, left to right: Atina Jenkins, Alexis Miller (former part-time Center staff), Gina Snyder, Donna Keyser.

Photographer: Melissa Faye Shaner

Want to collaborate with us?

Visit our website to view our guidelines for collaboration on research projects and to learn how to submit a request form.

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UPMC Center for High-Value Health Care
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