Kootenai Care Network

What to expect during the first years

Now that you are a member of the Kootenai Care Network, here is what you can expect during the first years of participation. Although our ultimate goal is to build the infrastructure needed to effectively manage populations and to turn that expertise into results that influence contract negotiations, that will take time. Here are the first steps that will move us toward that goal.

After you join
One key component in Kootenai Care Network’s success will be sharing information on quality metrics. To accomplish this, the Network’s informatics team will need your cooperation as they work to build information bridges between your electronic medical records and the Network’s central data repository. They will also help you and members of your staff learn where to consistently input data elements so the information systems can find and extract it.

You will also be asked to attend orientation and educational sessions each year to ensure you are informed on the latest processes and procedures.

Fall 2015 – Spring 2016
In the fall of 2015, the physician-led quality committee will start to select quality metrics that apply to the various specialties within the Network and oversee the development of information systems that support reporting on those measures. You are encouraged to participate in governance and help make decisions that will affect the destiny of the entire group.

Care managers will be hired, trained and equipped to help you care for your sickest and most complex patients. Clinical programs will be developed to help keep at-risk patients healthy and out of crisis.

2016 Benefit Year
In January of 2016, we anticipate that the physicians in the Kootenai Care Network will become the “tier one” provider group for the employees and beneficiaries of Kootenai Health. This means that beneficiaries of Kootenai Health will incur the lowest co-payments if they use Kootenai Care Network providers. Kootenai Health wants to steer its employees into the highest quality, most cost-effective network available.

Fall 2016
Throughout 2016, the information systems of the Network will mature and start producing gap reports. These will allow you to see and better manage whether your patients are getting appropriate screening tests, immunizations and other preventive services.

You will also begin receiving performance reports to help you understand how well you are managing your patient population. It is not the intent of the Network to be punitive, but rather to provide additional resources and share best practices to help all providers improve performance against their own baselines.

2017 Benefit Year
During 2016, Kootenai Care Network will explore potential payment models with payors to reward the higher-quality, cost-effective outcomes of the Network. Some of these new contracts may go into effect in January of 2017.