

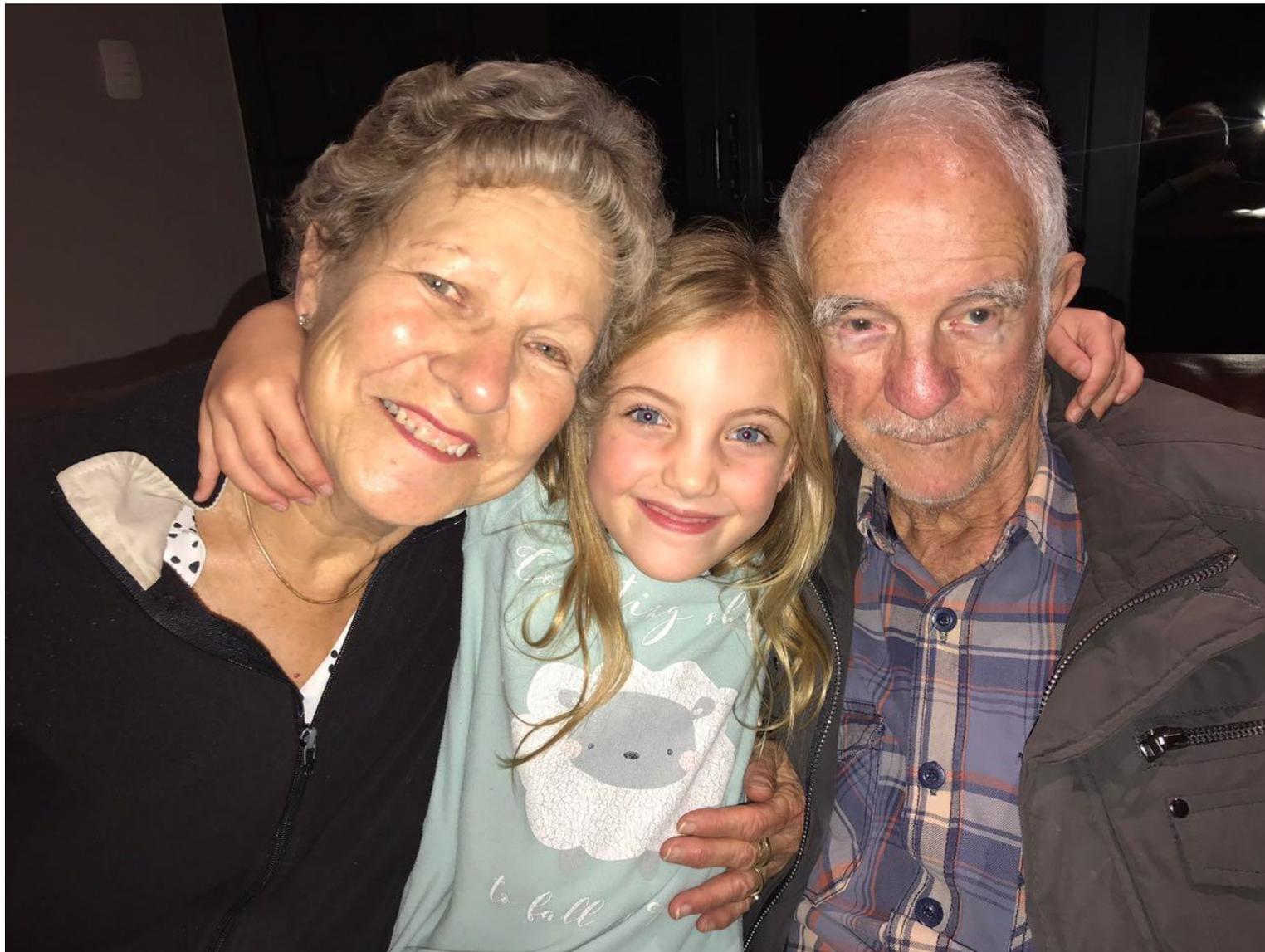
Benefits and considerations for Capitation and Fee for Service Payment Models

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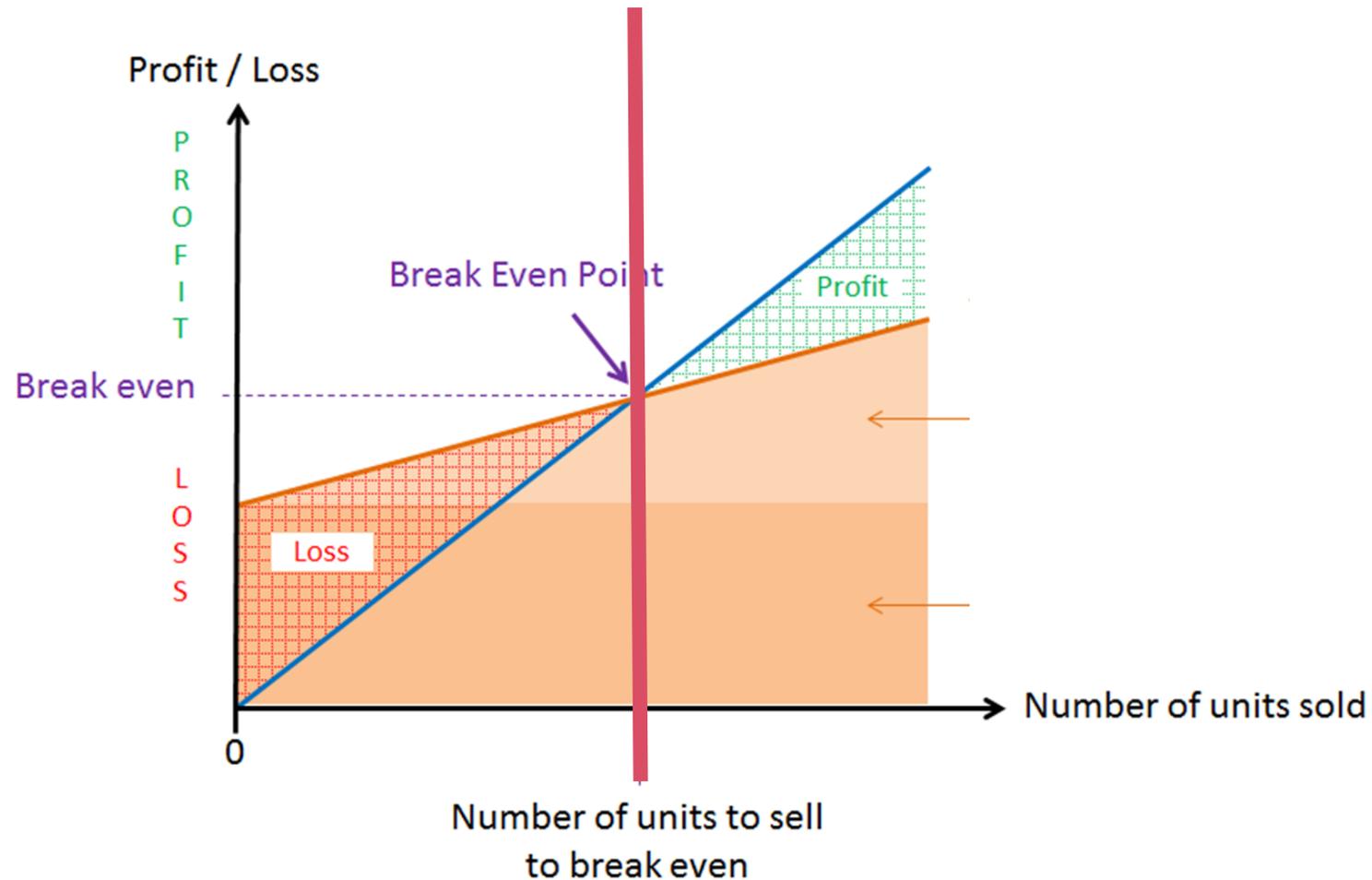
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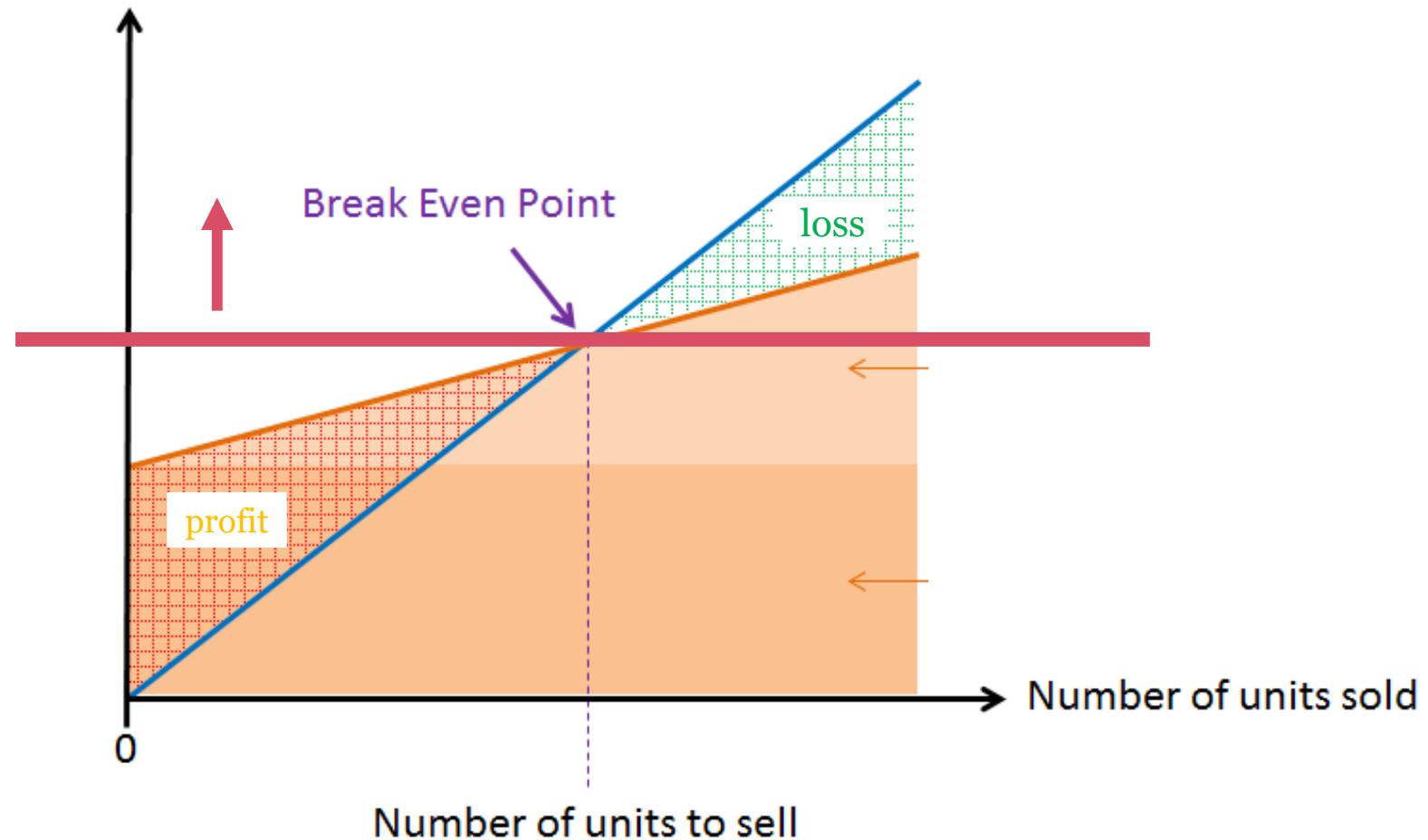
My Dad



Fee for Service is a payment model where services are unbundled and paid for separately



Capitation is the use of a fixed budget for the care of a population group, with providers working together to deliver services, which secure the outcome required



Benefits of capitation

1

Providers receive a fixed payment regardless of whether services are rendered

2

Payments are received before services are even rendered



Tennessee 1996: Capitation in Pharmacies implemented

Pharmacies were issued
with Capitation agreements

No control over which
medication physicians would
prescribe

For certain groups of patients,
capitation programs have not
been feasible
(high cost patients)

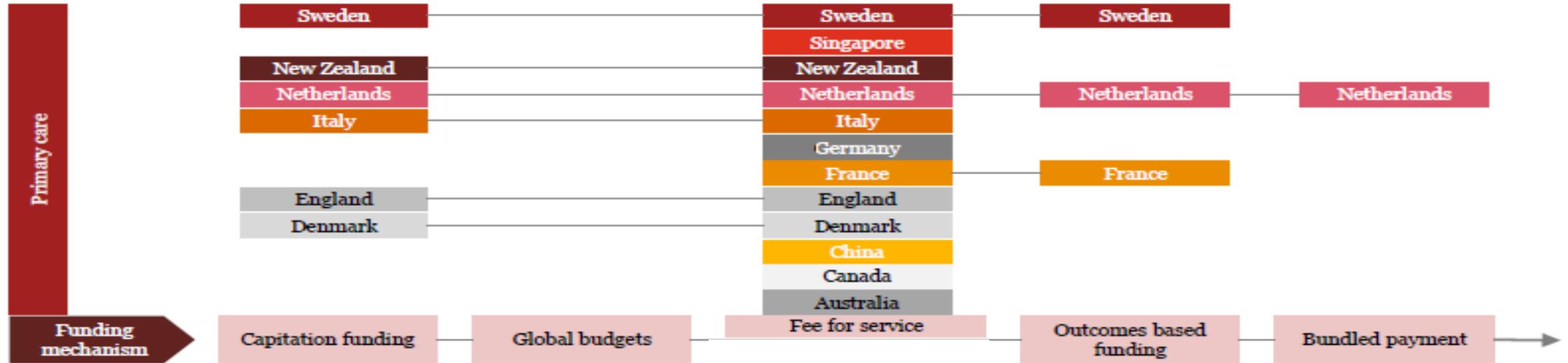
Specific population groups would
represent actuarial “outliers”.

If identified in advance,
payers agreed to pay higher
capitation rates or fee
for service payments.

Source: Dan Malone 1996. Carve outs and Pharmacy: Fashion or Fad? *Journal of Managed care Pharmacy* vol 2 no 4.

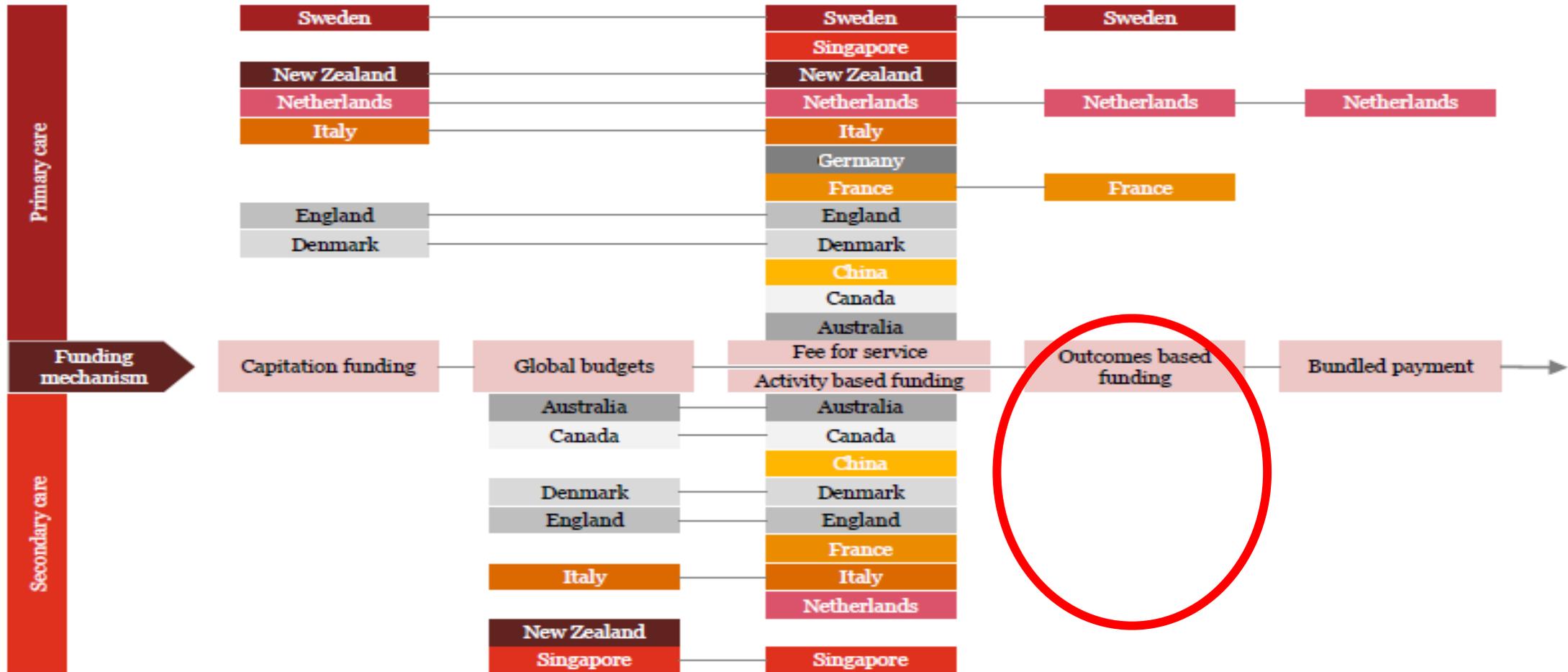
Global Reimbursement Models

Figure 1: Dominant funding models – selected countries



Global Reimbursement Models

Figure 1: Dominant funding models – selected countries



Source: adapted from the Commonwealth Fund '2015 International Profiles of Health Care Systems'
http://www.commonwealthfund.org/~media/files/publications/fund-report/2016/jan/1857_mossialos_intl_profiles_2015_v7.pdf

Health care Trends

Customer behaviour

**The changing role of the consumer
Consumer is becoming the primary
decision maker in their healthcare**

Changing workforce

**Integrated healthcare teams lead
by primary doctors**

Robots, Artificial intelligence and
technology incorporated into the
healthcare

Focus more on wellness and prevention

Focus on wellness and prevention.

Gene editing to eliminate diseases

Increased cost of treatment

**Genomic profiling to target
diseases**

Biologicals and biosimilars.

Shifts in healthcare delivery

**Measurements based on patient
outcomes.**

Why do we need to change?

We need outcome based healthcare transformation to secure the future sustainability of our healthcare system, in order to raise the quality levels and deliver the outcomes that matter to the patients.

Moving from the fee for services to outcome based

Fee for service model risks:

**Fragmented
Healthcare**

**Complicated
Multifaced hospital
episodes**

**Pay for Service
whether it has
worked or not**

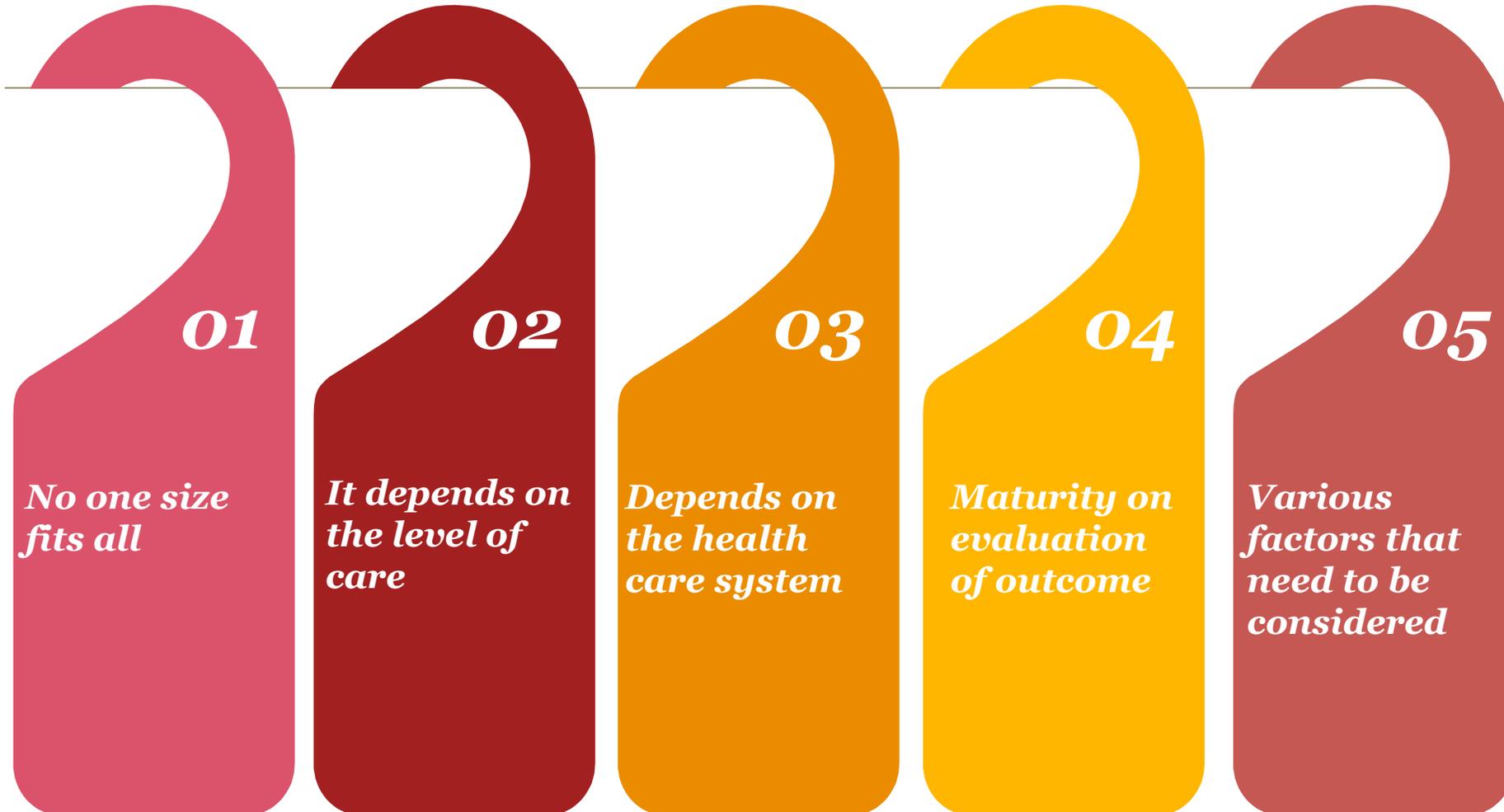
**Pay for Service
whether outcome is
successful or not**

Outcome based
pharmaceutical contracts

Herceptin for
Breast cancer

Herceptin for
Gastric cancer

So What?



Conclusion

Figure 14: The future of risk management in one word



Source: PwC, 2018 Risk in Review Study; Base: 1,258

Q. As you envision the future of your risk management function, please supply one adjective to describe that vision.

Thank you!

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