



Value Based Care Certificate Program

What is it?

The Value Based Care Certificate Program is a collaboration between Humana the University of Houston (UH), and Coursera to create a publically ,available online training platform to prepare clinicians and administrators for VBC reimbursement and operating models. The VBC certificate program is comprised of six courses and a capstone project.

Why is it needed?

The current trajectory of health care spending is on an unsustainable path. As health care professionals, we are responsible for shaping a sustainable health care system. Value Based Care demonstrates that we can deliver on the triple aim and thus it is imperative that we prepare clinicians for the future of health care.



Who is involved?

- University of Houston Faculty
- Humana Leaders
- Coursera



How are we doing it?

- Leveraging UH and Humana thought leadership to create content that provides both existing clinicians and students with tangible tools for success
- Hosting weekly collaborative workgroup sessions to develop meaningful courses with real-world clinical examples



When will it be available?

- Pilot launch to UH Faculty and Humana associates will be September 2020
- External launch on Coursera.com will be December 2020

Value Based Care Certificate Program

Course One: Introduction and Background

- Describe the major components of the U.S. healthcare insurance landscape and related differences in premiums and funding.
- Describe the key differences in the Fee-For-Service (FFS) versus Value-Based Care (VBC) model.
- Describe relationship between the health insurance landscape, quality measures and outcomes in healthcare, and the fundamental premise of VBC.
- Apply the concept of value to your current workplace.

Course Two: Population Health

- Define population health and population health management.
- Identify the determinants and outcomes of population health.
- Identify social needs in contrast to social determinates.
- Describe key factors that impact population health management.
- Describe the relationship between population health management and the fundamental premise of VBC.

Course Three: Managing Processes to Improve Outcomes

- Learners will list the types of office-based models, services, and processes that relate to improving quality/outcomes.
- Learners will describe the types of supporting functions that relate to improving quality/outcomes.
- Learners will formulate a basic understanding of the relationship between managing processes for purposes of improving quality/outcomes and the fundamental premise of VBC.

Course Four: CMS Reimbursement Mechanisms

- Learners will describe the key CMS value-based models, reimbursement mechanisms and program impacts.
- Learners will describe the relationship between the Healthcare Effectiveness Data and Information Set (HEDIS) and CMS Stars performance measures systems.
- Learners will formulate a basic understanding of the relationship between the key CMS reimbursement mechanisms and the fundamental premise of VBC

Course Five: Revenue and Expense Management

- Learners will define revenue and expense management.
- Learners will describe the key aspects of revenue and expense management.
- Learners will formulate a basic understanding of the relationship between revenue and expense management and the fundamental premise of VBC.

Course Six: Basic PDSA / Quality Improvement and Organizational Effectiveness

- Learners will formulate a basic understanding of the relationship between using a basic PDSA cycle for quality improvement and developing organizational effectiveness with the fundamental premise of VBC.

Capstone Project

- Learner will conduct a capstone project to demonstrate their comprehension of the content