



Affordability Standards: Proposed Care Transformation Plan

Health Insurance Advisory Council
May 19, 2015

PCMH Definition

- A. Practice is participating in or has completed a formal transformation initiative (i.e., CTC-RI, PCMH-Kids or a payer-sponsored program) and/or practice has obtained NCQA Level 3 recognition.
- B. Within 12 months of seeking PCMH status under the Affordability Standards, Practice has implemented the following specific cost-containment strategies (strategy development and implementation at the practice level rather than the practice site level is permissible):
 - i. develops and maintains a high-risk patient registry that tracks patients identified as being at risk of avoidable intensive service use in the near future;
 - ii. practice uses data to implement care management, focusing on high-risk patients and interventions that will impact ED and inpatient utilization;
 - iii. implements strategies to improve access to and coordination with behavioral health services; expands access to services both during and after office hours;
 - iv. develops service referral protocols informed by cost and quality data provided by payers; and
 - v. Develops/maintains an avoidable ED use reduction strategy.
- C. Within 24 months of seeking PCMH status under the Affordability Standards, Practices demonstrate meaningful performance improvement over an annual two-year look back period.

PCMH Target

- ▶ By December 31, 2016, each insurer subject to the Affordability Standards increase the percentage of its primary care network functioning as a PCMH by 5 percentage points, compared to the baseline rate calculated by OHIC by September 1, 2015.

Stakeholder Activities in 2015 to Promote PCMH Adoption



- ▶ PCP Educational Campaign
- ▶ Care Manager Academy
- ▶ Care Management Coordination Work Group
- ▶ Annual Care Transformation Advisory Committee Meetings
- ▶ Standard Core Measure Set

Stakeholder Activities in 2016 to Promote PCMH Adoption



- ▶ PCP Transformation Support Activities
- ▶ Care Manager Academy
- ▶ Community Health Team Pilot
- ▶ Annual Care Transformation Advisory Committee Meetings
- ▶ Sustainable PCP Financial Model
 - ▶ Practices actively engaged in first-time PCMH transformation activity and without NCQA recognition Level 3 would receive both infrastructure and care management (care coordination for pediatrics) (CM) PMPMs. Practices are eligible to receive infrastructure payment for a maximum of 24 months or until NCQA PCMH Level 3 recognition is achieved, whichever occurs first. If the practice is part of ACO, the payer may make the CM PMPM payment to the ACO, but the ACO must use that payment to finance CM services at the practice site earning the payment.
 - ▶ Practices with NCQA Level 3 recognition would receive a CM PMPM and have an opportunity to earn a performance bonus. If the practice is part of an ACO, the payer may make the CM PMPM payment to the ACO, but the ACO must use that payment to finance the CM services at the site earning the payment.

Next Steps

- ▶ Final comment on the Care Transformation Plan due May 22nd.
- ▶ Plan will be submitted to the Commissioner who will then decide to accept, modify, or reject the plan.