

Health Care Payment Learning & Action Network

Primary Care's Role in Advancing High-
Quality Accountable Care



June 8, 2023, 11:00 AM – 12:30 PM ET

Agenda

Time	Agenda Item	Facilitator
5 min	Welcome	<ul style="list-style-type: none">• Mark McClellan
5 min	CMS Opening Remarks	<ul style="list-style-type: none">• Chiquita Brooks-LaSure
10 min	CMMI Point of View: Advancing Accountable Care	<ul style="list-style-type: none">• Liz Fowler
35 min	Aligning Local Approaches to Accountable Care	<ul style="list-style-type: none">• Mark McClellan• State Speaker Panelists
5 min	CMCS Point of View: In Support of Local Approaches to Advance Accountable Care	<ul style="list-style-type: none">• Dan Tsai
25 min	Enhancing the Accountable Care Curve	<ul style="list-style-type: none">• Jeff Micklos• Judy Zerzan-Thul
5 min	Closing Remarks	<ul style="list-style-type: none">• Judy Zerzan-Thul

Welcome!



Mark McClellan,
LAN Executive Forum Co-Chair
Director
Duke-Margolis Center for Health Policy

CMS Opening Remarks



Chiquita Brooks-LaSure
Administrator
Centers for Medicare & Medicaid Services

CMMI Point of View



Liz Fowler

Deputy Administrator and Director
Center for Medicare and Medicaid Innovation

Aligning Local Approaches to Accountable Care

Why Pursue Multipayer Alignment?



Accelerate participation in new payment and delivery models to improve provider performance



Create a single set of payer agnostic expectations so providers pursue aligned goals for all patients



Improve capabilities to address costs and disparities through data, infrastructure, shared best practices

- **The need for a directional approach**
 - Reality: Not feasible to move rapidly to fully aligned measures, data sharing, and other activities
 - Stakeholders have directionally aligned priorities but different contracting systems, constraints, and infrastructure capabilities
- **Goal: Develop processes that overcome challenges and create multipayer framework**
 - Greater flexibility for commercial participation and supports CMS/states in alignment agenda across key areas: measure equity meaningfully, improve resource allocation for underserved populations, and in improvement in primary care, behavioral health, maternity, etc.

What could direction alignment look like in practice?

- Process for Directional Alignment:
 - Develop initial steps and processes to achieve shared goals across foundational elements (examples below). Processes should support variability and comparability
 - Phase in alignment over time; as critical mass builds, expand to more complex strategic priorities (ex: customizing more technical model components) while remaining directionally consistent

Payers may:	Performance Measurement & Reporting	Health Equity Measures & Initiatives	Aligned Payment Approach	Timely and Consistent Data Sharing	Technical Assistance
	<ul style="list-style-type: none">• Align measure specifications to a core set• Include additional measures as desired to support local and regional patient populations	<ul style="list-style-type: none">• Collect demographic data and support stratification of performance data• Integrate screening for Health-Related Social Needs (HSRNs)	<ul style="list-style-type: none">• Choose what type of non-FFS incentives and payment structures to implement	<ul style="list-style-type: none">• Collaborate with state/federal/commercial partners to establish data sharing priorities and share experience• Be able to access improved data infrastructure	<ul style="list-style-type: none">• Share experience and promising practices with other payers and providers• Attend state- or region-specific calls to share lessons learned and maintain commitment

Panelists



Mark McClellan, LAN
Executive Forum Co-Chair

Director

Duke-Margolis Center for
Health Policy (Moderator)



Peter Walsh

Chief Medical Officer

Colorado Department of
Health Care Policy and
Financing



Ryan Schwarz

Chief of Payment and Care
Delivery Innovation

MassHealth



Elisa Wrede

Project Manager for
Primary Care

Office of the Secretary,
New Mexico Human
Services Department

CMCS Remarks



Dan Tsai

Deputy Administrator & Director, Center for
Medicaid and CHIP Services
Center for Medicare and Medicaid Services

Enhancing the Accountable Care Curve

Moderators



Jeff Micklos,
LAN Accountable Care Action
Collaborative Co-Chair
Executive Director
Health Care Transformation Task Force



Judy Zerzan-Thul, LAN Executive Forum
Co-Chair
Chief Medical Officer
Washington Health Care Authority

LAN's Accountable Care Definition

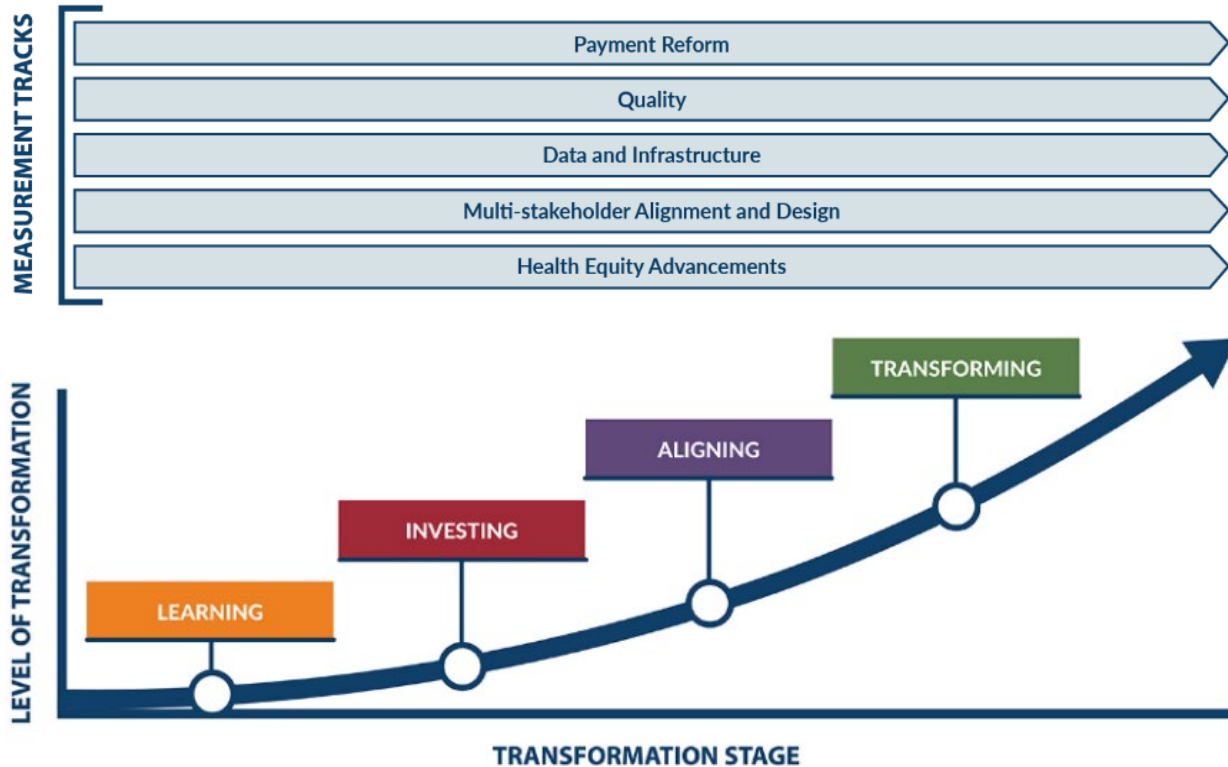
In 2022, the LAN developed the **accountable care definition** to recognize that accountable care is multidimensional, and that payment is one of multiple enablers. The LAN prioritized the development of the following uniform accountable care definition:

“Accountable Care” centers on the patient and aligns their care team to support shared decision-making and help realize the best achievable health outcomes for all through equitable, comprehensive, high quality, affordable, longitudinal care.





Accountable Care and APM Adoption

The ACC serves as a helpful tool for organizations to visualize their accountable care journey. It expands upon certain elements addressed in the APM framework and realizes that while accountable care arrangements are often built in tandem with APM structures, **true accountable care expands on elements necessary for accountable care not addressed in the APM framework.**

Accountable Care Curve



APM Framework

			
CATEGORY 1 FEE FOR SERVICE - NO LINK TO QUALITY & VALUE	CATEGORY 2 FEE FOR SERVICE - LINK TO QUALITY & VALUE	CATEGORY 3 APMS BUILT ON FEE-FOR-SERVICE ARCHITECTURE	CATEGORY 4 POPULATION - BASED PAYMENT
	A Foundational Payments for Infrastructure & Operations <small>(e.g., care coordination fees and payments for HIT investments)</small>	A APMs with Shared Savings <small>(e.g., shared savings with upside risk only)</small>	A Condition-Specific Population-Based Payment <small>(e.g., per member per month payments, payments for specialty services, such as oncology or mental health)</small>
	B Pay for Reporting <small>(e.g., bonuses for reporting data or penalties for not reporting data)</small>	B APMs with Shared Savings and Downside Risk <small>(e.g., episode-based payments for procedures and comprehensive payments with upside and downside risk)</small>	B Comprehensive Population-Based Payment <small>(e.g., global budgets or full/percent of premium payments)</small>
	C Pay-for-Performance <small>(e.g., bonuses for quality performance)</small>		C Integrated Finance & Delivery System <small>(e.g., global budgets or full/percent of premium payments in integrated systems)</small>
		3N Risk Based Payments NOT Linked to Quality	4N Capitated Payments NOT Linked to Quality

Accountable Care Curve Demo

Share your experience!

- It is critical the Accountable Care Curve be an **actionable, informative, and valuable** tool – and future revisions and updates to the Accountable Care Curve will depend on your feedback!
- As you explore the Accountable Care Curve, share your thoughts, including:
 - **Feedback** on usability as a learning tool, and its applicability to your organization
 - **Examples** of your own organizational advancements towards accountable care
 - **Key resources** that can be added to specific capabilities
- Submit your feedback, examples, and key resources to the LAN (HCPLAN@deloitte.com)

Let's hear from you!

Poll and Audience Q&A

Closing Remarks



**Judy Zerzan-Thul, LAN Executive Forum
Co-Chair**

Chief Medical Officer
Washington Health Care Authority

Looking Ahead

Registration is live for the final event in our Spring/Summer Event Series!



State Transformation Collaborative Blueprint Public Launch

July 27, 3-4:30 PM ET

All Spring/Summer Series events will be recorded and uploaded to <https://hcp-lan.org/>

LAN SUMMIT

Health Care Payment Learning & Action Network

SAVE the DATE
October 30, 2023

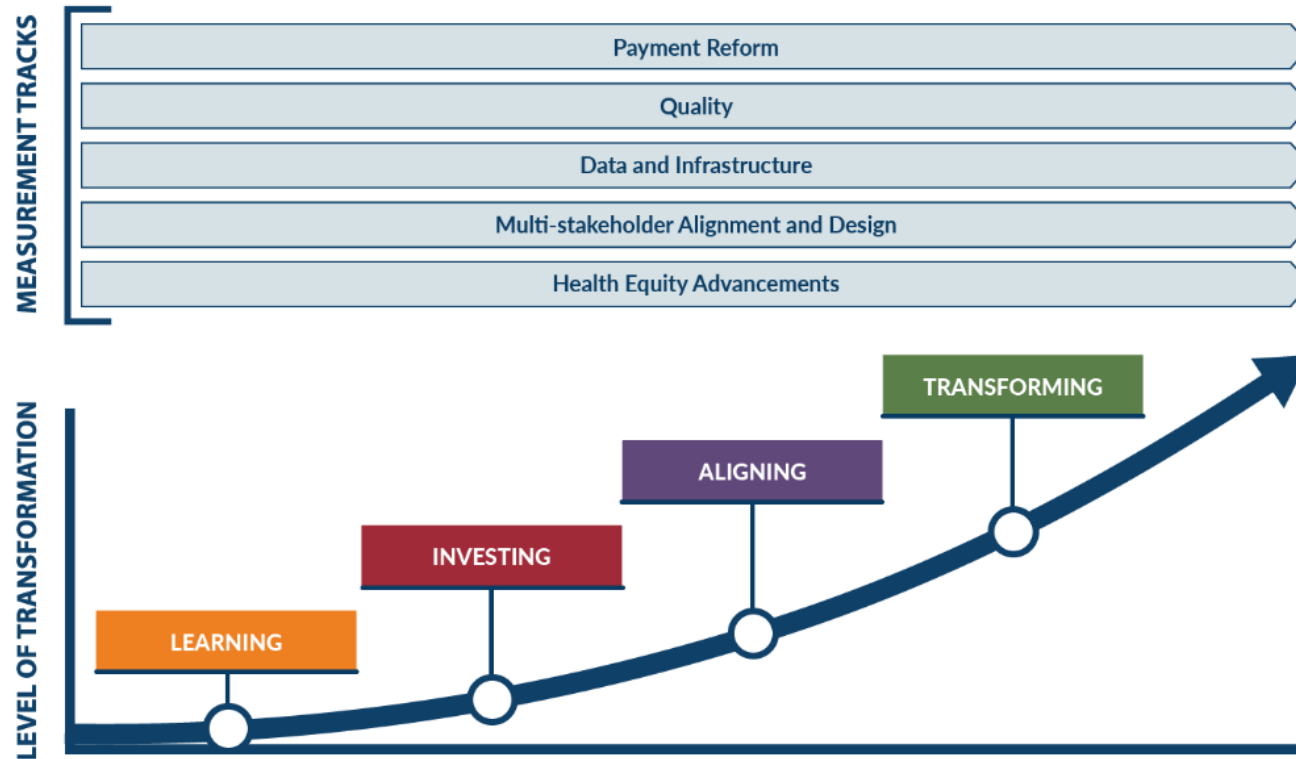


Coming to you **IN PERSON** at the Grand Hyatt in **Washington D.C.**

Accountable Care Curve

Encouraging Action Toward Accountable Care

The Accountable Care Curve informs a tailored approach to enhancing stakeholder capabilities for driving accountable care.



Accountable Care Curve

Milestones

Measurement Track	LEARNING	INVESTING	ALIGNING	TRANSFORMING
Payment Reform	<ul style="list-style-type: none"> Engages with LAN: <ul style="list-style-type: none"> Signed up for the LAN listserv Attended LAN Summit or other LAN event(s) 	<ul style="list-style-type: none"> Participates in, administers, or covers shared savings arrangements (Category 3A) 	<ul style="list-style-type: none"> Grows participation in downside risk arrangement- that support accountable care, with links to quality, and well-coordinated specialized care (CMMI model, Category 3B). Begin to see shifts in affordability 	<ul style="list-style-type: none"> Population-based payment or shared savings options that support accountable care with downside risk arrangements (Category 3B or 4), to strengthen primary care, well-coordinated specialized care, and more affordable care for both patients and purchasers
Quality		<ul style="list-style-type: none"> Establishes quality goals and supports necessary data collection to measure progress toward goals 	<ul style="list-style-type: none"> Uses evidence-based care and shared-decision making to achieve better outcomes and person-centered care 	<ul style="list-style-type: none"> Uses standardized system-wide processes to improve patient experience and drive high-quality, predictable outcomes for all
Data and Infrastructure		<ul style="list-style-type: none"> Invests in improved data/infrastructure (e.g., interoperability, advanced EMRs, modernized systems, participation in APM Measurement Effort) 	<ul style="list-style-type: none"> Significantly invests in data sharing that enables measurable progress on payment reform, quality, affordability, and equity (e.g., participation in HIE) Relevant members of the care team have access to data for purpose of care coordination 	<ul style="list-style-type: none"> Implements advanced data sharing infrastructure, activities (interoperable data collection, use, and sharing) to measure progress on payment reform, quality, affordability, and equity
Multi-stakeholder Alignment and Design		<ul style="list-style-type: none"> Uses industry best practices and lessons learned to support movement toward accountable care 	<ul style="list-style-type: none"> Participates in multi-stakeholder efforts to advance accountable care or multi-stakeholder models/arrangements for measurable progress in system-wide regional, state, or national goals 	<ul style="list-style-type: none"> Initiates, sets priorities, provides the infrastructure for multi-stakeholder efforts to advance accountable care or multi-stakeholder models/arrangements for measurable progress in system-wide regional, state, or national goals
Health Equity Advancements		<ul style="list-style-type: none"> Commits to improving equity (e.g., publicly announcing equity goals or commitment, commitment to HEAT guidance) 	<ul style="list-style-type: none"> Commits to improving equity (e.g., publicly announcing equity goals or commitment, commitment to HEAT guidance) Develops a plan for health equity 	<ul style="list-style-type: none"> Significantly invests in equity (e.g., measures or targets initiatives to improve equity, industry equity accreditation or similar, implementation of HEAT recommendations) Measures and reports outcomes disparities and affordability

Accountable Care Curve

Interactive Measurement Tracks

This interactive tool provides illustrative examples of capabilities organizations might pursue in their efforts to advance along the Accountable Care Curve. Organizations do not necessarily need to pursue all of these capabilities to realize a certain stage of accountable care.

Payment Reform

Quality

Data and Infrastructure

Multi-Stakeholder Alignment and Design

Health Equity Advancements

Payment Reform Capability Examples

LEGEND:  Purchaser |  Provider |  Payer

(Click on any of the Transformation Stage, sub-headings, and capabilities below to learn more!)










Learning










Investing










Aligning

Transforming

Contracting Methodologies

- Implement pay for reporting   
- Implement pay for performance payment model   
- Analysis to identify APM opportunities   

- Implement shared savings payment model   
- Enhance provider contracting (generating transparent model, payment model design)   
- Implementing bundled payments   

- Develop shared savings/losses payment model   
- Enhance product and price transparency (episode-level pricing)   
- Management of performance risk sharing 
- Use/application of risk adjustment 
- Create risk adjustment methodologies (risk methodology, benchmarking, etc.) 

- Management of population-based payment models   

Accountable Care Curve

Payment Reform

Quality

Data and Infrastructure

Multi-Stakeholder Alignment and Design

Health Equity Advancements

Measurement Track: Payment Reform

INVESTING



Purchaser



Provider



Payer

Learning

- Implement pay for reporting
- Implement pay for performance pay
- Analysis to identify APM opportunities

Capability: Implement shared savings payment model

Definition:

Participate in payment models which set a benchmark target for cost within a defined population, and evaluate performance based on whether the provider achieves the benchmark (subject to quality, minimum savings rates, or other factors). In this model, providers are not subject to any losses for failing to achieve the target, which allows for a lower-financial risk environment to gain experience in these types of arrangements.

Resources:

- [Building Stronger Business Practices for Value-Based Payment Readiness: Examples from the Field – National Council for Mental Wellbeing](#)
- [Strategies for Success in CMMI's Most Innovative Models – Premier](#)

Implementing bundled payments

Use/application of risk adjustment

Create risk adjustment methodologies (risk

Transforming

... of population-based payment