

The LAN's Primary Care Payer Action Collaborative (PAC): Calling All CPC+ Payers to Join Efforts on Transforming Care

PAC Focus: Implementing CPC+ “Track 2” Alternatives to FFS Payments

Why Focus on Alternatives to FFS Payments?

Multi-payer payment transformation in support of practice transformation is at the heart of Comprehensive Primary Care Plus (CPC+). Evolving beyond a strictly visit-dependent, fee-for-service (FFS) approach to payment promotes greater flexibility for practices to deliver comprehensive primary care in the setting that best meets their patients' preferences and with less administrative burden. CMS' CPC+ Track 2 alternative to the FFS model envisions a “sweet spot” between upfront payments and reduced FFS, where practices will become “incentive neutral” toward physically bringing a patient into the office for a billable service.

How the PAC Can Help

Recognizing payer needs in CPC+ and responding to initial PAC participants' feedback, the PAC is focusing efforts on bringing more payers together to work through practical strategies for implementing Track 2 alternatives to FFS payments successfully. From August through October 2017, the PAC's work will concentrate on operational issues—the “nuts and bolts” of designing and implementing an alternative to FFS payments—and helping payers align within their region to ease provider burden. The PAC's overarching mission is to serve as a catalyst for collaboration that results in shared learning and regional progress toward implementing FFS alternatives for CPC+ Track 2 practices.

Commit to Collaboration and Shared Value through the PAC

Payer collaboration is the PAC's cornerstone. The greater participants' willingness to share their experiences and lessons learned in payment reform, the greater the return on investment for all PAC members.

The PAC asks all participants to commit to:

- Working within their organizations and with other payers in their CPC+ region to demonstrate they are making progress toward implementing a Track 2 alternative to FFS payments by the respective implementation date for either Round 1 or Round 2
- Completing an initial capabilities survey and progress reports
- Actively participating in the PAC, including sharing experiences, progress, and knowledge resources with other PAC participants and the PAC support team

We will share more about the time commitment once we get further along, although at this time we anticipate approximately four to six hours of PAC activities each month, likely virtual events or phone calls.

More on the PAC

Launched by the [Health Care Payment Learning & Action Network \(LAN\)](#) in 2016, the PAC is a national table for public and private payers from across the country to share approaches to implementing innovative payment models in primary care. As a forum for exchanging promising practices and lessons learned across regions, the PAC is uniquely positioned to help payers tackle common challenges and drive successful solutions at the regional level.

The PAC is open to payers participating in one or more of the 18 regional initiatives of Comprehensive Primary Care Plus (CPC+), a multi-payer care delivery and payment model of the Centers for Medicare & Medicaid Services (CMS).

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