



Lab 2: Implementation



If you require technical assistance, please contact *Kristian Motta* at <u>kmotta@rippleeffect.com</u>.

September 28, 2017 1:00-2:30 PM ET

Welcome and Introductions



Welcome



Edith Coakley Stowe Senior Manager Manatt Health (DC)



Dori Glanz Reyneri Senior Manager Manatt Health (DC)



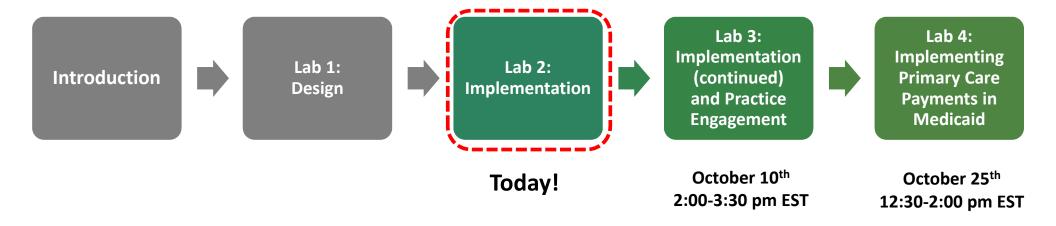
Susan Stuard Independent Consultant (NY)



Reni Ellis Consultant Manatt Health (NY)



Curriculum, Topics and Calendar





Today's Agenda

	Timeframe (ET)	Торіс	Facilitators/Presenters
1	1:05-1:10	Today's objective; alternative-to-FFS work flow recap	Susan Stuard
2	1:10-1:15	Interactive polling	Susan Stuard
3	1:15-2:10	Implementation Steps: • Examples • Q and A	Christiane LaBonte, CMS
			Vince Speenburgh,
			CDPHP
			Melinda Walter and
			Brian Keane,
			Independent Health
4	2:10-2:20	Interactive polling	Susan Stuard
5	2:20-2:30	Wrap Up	Susan Stuard







Objective for Lab 2

- Define each of the key implementation steps involved in developing any alternative-to-FFS payment for primary care practices, and highlight options around risk adjustment
- Identify problems and peer solutions at each step



Antitrust Statement

PAC Participants agree that all activities are in compliance with federal and state antitrust laws. In the course of discussion, **no financial information from payer participants will be shared with other payers or the general public.**

During meetings and other activities, including all formal and informal discussions, each payer participant will refrain from discussing or exchanging information regarding any competitively sensitive topics. Such information includes, but is not limited to:

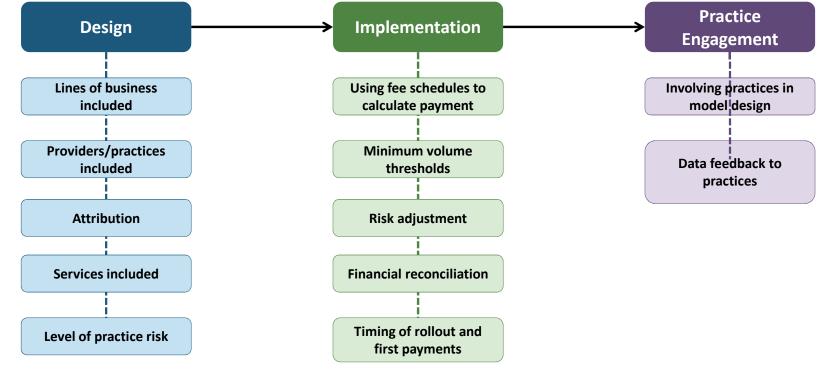
- PMPM
- Shared savings or incentive payments
- Information about market share, profits, margins, costs, reimbursement levels or methodologies for reimbursing providers, or terms of coverage



Alternative-to-FFS Work Flow



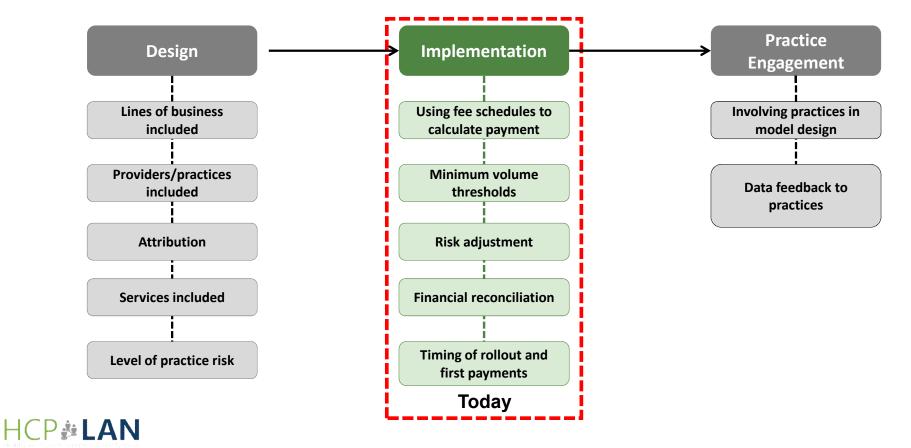
Track 2 Alternative to FFS Payment: Work Flow



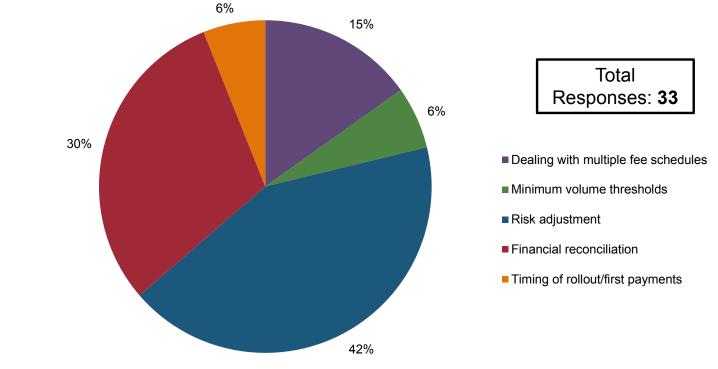
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Track 2 Alternative to FFS Payment: Work Flow



From September 14 session: Which of the following would you most like us to emphasize next time?





Interactive Polling



Polling Question #1a:

Which CPC+ Region are you from?

a) Arkansas

- f) Louisiana (Round 2)
- b) Buffalo (Round 2)
- c) Colorado h) Montana
- d) Hawaii
- i) Nebraska (Round 2)
- e) Kansas City
- j) New Jersey

Michigan

g)

If your region isn't listed or your organization is participating in multiple regions, please respond to the next question





Polling Question #1b:

Which CPC+ Region are you from?

- a) North Dakota (Round 2)
- b) Hudson/N Capital NY
- c) Ohio/N Kentucky
- d) Oklahoma
- e) Oregon

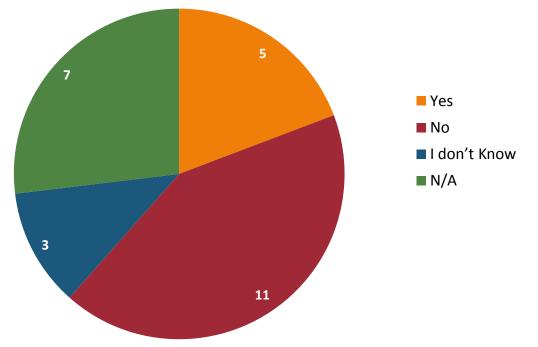
- f) Philadelphia
- g) Rhode Island
- h) Tennessee
- *i)* Payer in multiple regions





From PAC Survey, July 2017

If your organization plans to implement T2 FFS alternative by moving a portion of anticipated FFS revenue to prospective payment, have you established the percentage to be paid up front?





Section III.II.B: Progress by 'Bucket' of Work (Payment)

Polling Question #2:

If implementing a T2 alternative-to-FFS payment by moving some anticipated FFS revenue to prospective payment, have you established the percentage to be paid up front?

a. Yes

- b. No
- c. Don't know
- d. N/A or other

Please feel free to use the chat





Panel Introductions



Today's Panel



Christiane LaBonte CPC+ Team Center for Medicare and Medicaid Innovation CMS



Melinda Walter, MHA, CPC Manager, Provider Network Analytics Independent Health, Buffalo NY

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Vince Speenburgh Manager, Practice Transformation Capital District Physicians' Health Plan, Albany NY



Brian Keane Actuarial Analysis Manager Independent Health, Buffalo NY



Implementation Steps





- How does your health plan align its Track 2 payment to multiple fee schedules? Does this vary by lines of business?
- Do you have practice-specific fee schedules (e.g., large multi-specialty, rural providers) and how do you manage the crosswalk with these fee-schedules?
- Is the alignment with multiple fee schedules a manual process or handled by your claims processing system?
- What claims processing system configurations has your organization made to automate processing?
- How does CMS handle calculation of Track 2 payments for practices also participating in Medicare ACOs?



Polling Question #3:

If your organization plans to move some FFS payment to prospective payment, will you need to implement across multiple fee schedules?

- a. Yes
- b. No
- c. Don't know
- d. N/A

Please tell us details via the chat





Polling Question #4:

If your organization plans to move some FFS payment to prospective payment, is your claims processing system ready?

- a. Yes
- b. No
- c. Don't know
- d. N/A

Please tell us details via the chat





Polling Question #5:

What claims processing system(s) do you use? Please provide the product name and vendor name.

Please tell us details via the chat





Questions or Comments?



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If you have any questions you would like to take offline, please follow up with *Lauren lcard* at <u>lauren.icard@us.gt.com</u>



- Does your health plan have a member attribution threshold for Track 2 payments? Is this inclusive of lines of business or vary by each LOB?
- How does your health plan work with and/or modify Track 2 payments for practices that have small member counts?
- What is Medicare's minimum volume threshold for CPC+ practices? Does this vary between Tracks 1 and 2?



Questions or Comments?



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- How is CMS risk adjusting the CPCP for Medicare?
- Does your health plan risk adjust any portion of the Track 2 payment?
- What vendor or product does your plan use for risk adjustment?
- How often do you report risk adjustment information to practices?
- What are the pitfalls or implementation considerations for risk adjustment of Track 2 payments (i.e., pediatrics, other)?



Polling Question #6:

If your organization plans to move a portion of anticipated FFS payment to prospective payment, do you plan to risk adjust the prospective payment?

- a. Yes –same method as Track 1
- b. Yes different method from Track 1
- c. No
- d. Don't know
- e. N/A

Please tell us details via the chat





Questions or Comments?



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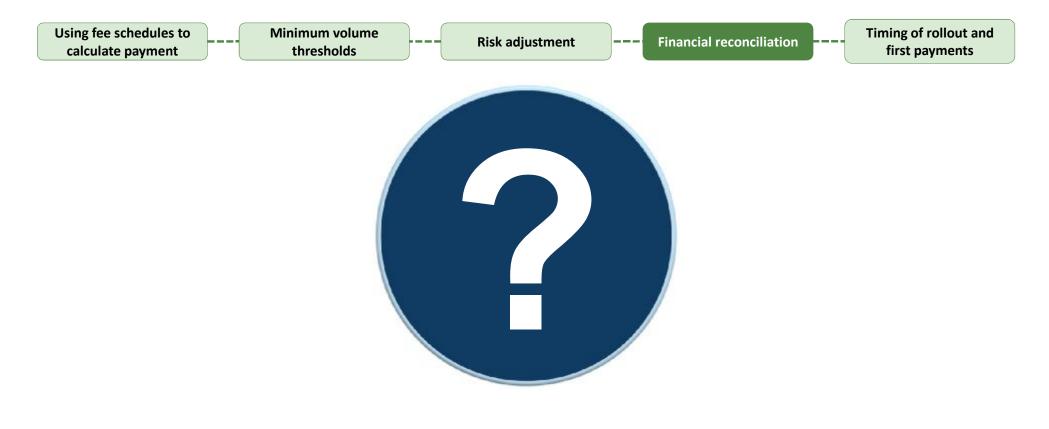
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- At what frequency does your health plan reconcile and/or check the adequacy of Track 2 payments (annually, semi-annually, quarterly, other)?
- Please provide high-level explanation of how your health plan undertakes reconciliation. What reports are needed? What red flags are you looking for?
- How do practices know whether they are likely to see an adjustment? How do you work with practices if an adjustment is necessary or there are concerns about inadequate payment?
- Are there special considerations for member cost sharing if applicable?



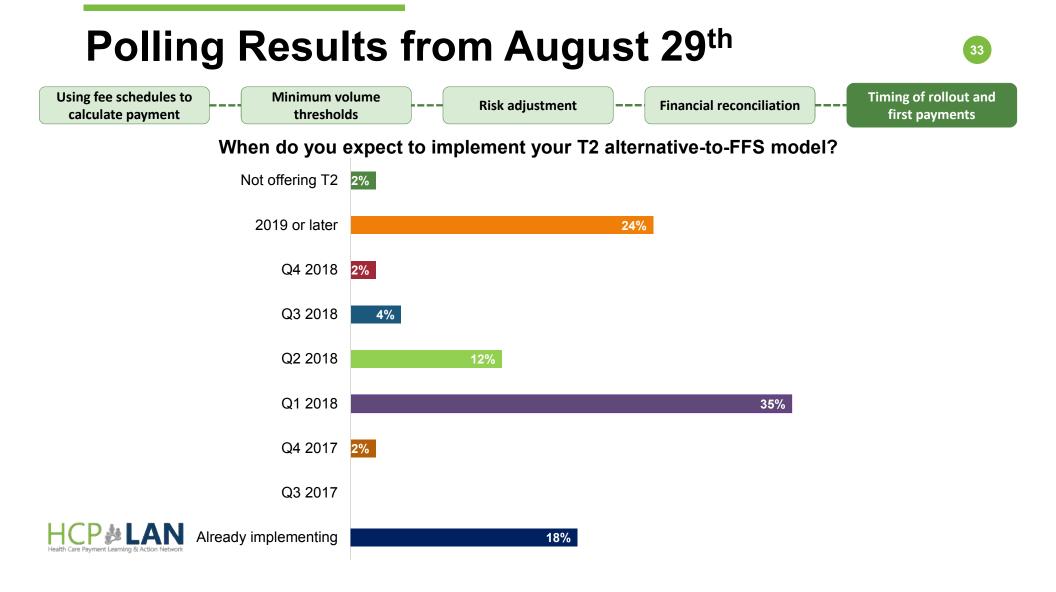
Questions or Comments?



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- How long did it take, or is it taking, for your plan to roll out the Track 2 payment? What has taken longer than expected? Did you pilot test with a small group or do a larger roll-out?
- What recommendations would you give to other payers regarding testing and pilot of the Track 2 payment?



Polling Question #7:

If your organization plans to move some FFS payment to prospective payment during 2018, will the rollout be widespread or on a smaller/pilot basis?

- a. Widespread : CPC+ Track 2 AND other practices
- b. Widespread: All CPC+ Track 2 practices
- c. Smaller/pilot group of practices
- d. Don't know
- e. N/A

Please tell us details via the chat





Polling Question #8:

Please tell us the current or planned length of time prior to financial reconciliation of the alternative-to-FFS payment

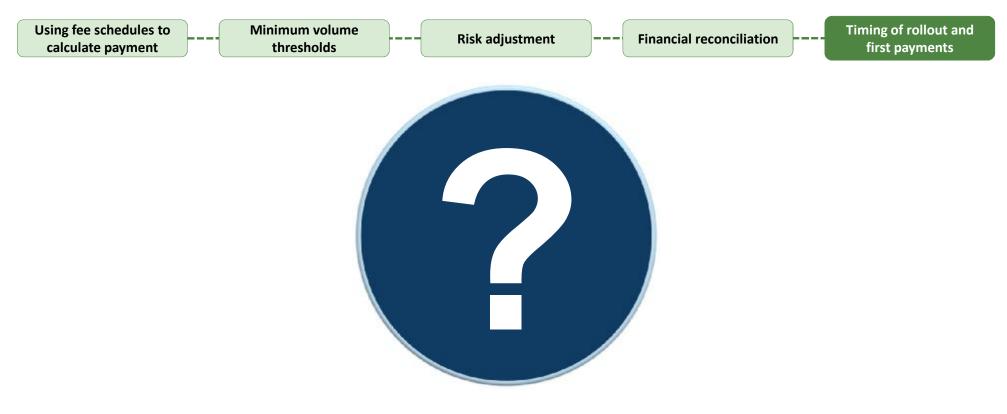
- a. Quarterly or more frequent
- b. Semi-annually
- c. Annually
- d. Don't know
- e. N/A
- f. Other

Please tell us details via the chat









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Interactive Polling



Polling Question #9:

Please rate your overall satisfaction with this event.

- a. Very satisfied
- b. Somewhat satisfied
- c. Somewhat dissatisfied
- d. Very dissatisfied

Please type additional thoughts in the chat, especially any suggestions for improvement





Polling Question #10:

Today's Lab enhanced my knowledge of the subject area.

- a. Strongly Agree
- b. Agree
- c. Disagree
- d. Strongly Disagree

Please type additional thoughts in the chat, especially any suggestions for improvement



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Polling Question #11:

In which aspects of alternatives to FFS was your knowledge enhanced? (Please select all that apply)

- a. Using fee schedules to calculate payment
- b. Minimum volume thresholds
- c. Risk adjustment
- d. Financial reconciliation
- e. Timing of rollout and first payments

Please type any additional thoughts in the chat.





Polling Question #12:

I will take action or work with others in my organization to take action based on today's lab.

- a. Strongly Agree
- b. Agree
- c. Disagree
- d. Strongly Disagree

Please use the chat to tell us what you will act on, or why the information was not actionable





Polling Question #13:

The PAC is helping my organization make progress towards its goals in CPC+.

- a. Strongly Agree
- b. Agree
- c. Disagree
- d. Strongly Disagree

Please type any additional thoughts in the chat, especially any suggestions for improvement.



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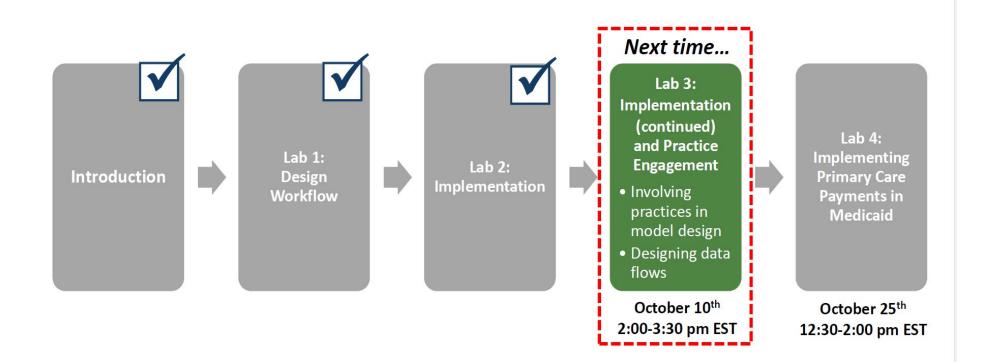






Next time







Polling Question #14:

In which of the following areas would additional discussion be helpful? (Please select all that apply)

- a. Using fee schedules to calculate payment
- b. Minimum volume thresholds
- c. Risk adjustment
- d. Financial reconciliation
- e. Timing of rollout and first payments
- f. All of the above

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g. None of the above

Please type any additional thoughts in the chat.



Polling Question #15:

At our next Lab we will discuss physician and practice engagement around alternative-to-fee-for service payments. What issues would you like to discuss with payer panelists?

Please type suggestions into the chat.



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