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The LAN Primary Care Payer Action Collaborative (PAC)

Background

In 2015, the U.S. Department of Health and Human Services (HHS) launched the Health Care Payment Learning & Action Network (LAN) as a public-private partnership to accelerate movement to value-based payment and adoption of alternative payment models (APMs). The LAN’s objective is to extend Medicare goals to the private sector and states – that is, to shift 30% of U.S. health care payments into APMs by 2016, and 50% by 2018. The LAN reaches over 6,000 participants involved in payment reform nationwide, and LAN leadership encompasses a wide variety of voluntary stakeholders representing diverse perspectives from patients, consumers, providers, purchasers, states, and public and private payers.

In April 2016, the Center for Medicare & Medicaid Innovation CMS Innovation Center (CMMI) launched Comprehensive Primary Care Plus (CPC+), an initiative to support the delivery of advanced primary care. A hallmark of the CPC+ initiative is its multi-payer payment design, which will involve coordination across CMS, health plans, and State Medicaid agencies to support primary care practices in making significant and fundamental changes in how care delivery occurs across five primary care functions: 1) access and continuity, 2) care management, 3) comprehensiveness and coordination, 4) patient and caregiver engagement, and 5) planned care and population health. There are two tracks available to primary care practices in the CPC+ initiative. Based on the APM Framework, Track 1 is a category 3A APM and Track 2 is a category 4A APM.

As the LAN pivots from a conceptual learning phase into an action and implementation phase, we want to support payers currently engaging in multi-payer primary care APM implementation efforts, including CPC+, via the LAN Primary Care Payer Action Collaborative.

What is the Primary Care Payer Action Collaborative (PAC)?

The PAC is a LAN-supported action collaborative aimed at accelerating the adoption and sustainability of APMs. The PAC will enable payer collaboration in CPC+ regions and other select regions involved in multi-payer APMs to accelerate the support and alignment practices need to succeed in primary care APMs. (See activities depicted in Figure 1.) The PAC will include representatives from payer organizations participating in multi-payer primary care APM efforts, such as, and including, CPC+.
What does the PAC hope to achieve?

A critical element to the success of providers participating in CPC+ is whether the payer partners are able to develop solutions to APM implementation-related challenges. For this reason, the LAN is creating an environment for payers to collaborate by learning from challenges that have been faced and addressed in past attempts at APM implementation. These include areas such as alignment of data sharing systems for feedback to practices; aligned quality measurement implementation; and use of common benchmarking and patient attribution strategies. Recognizing that certain payers have learned from these past experiences, and that there is value in sharing knowledge with fellow payers, the LAN is establishing the PAC to accelerate this kind of learning. If payers are looking for help and/or to assist fellow payers in the implementation of the CPC+ model, the PAC is the ideal environment for your leadership.

Who is the PAC designed to support and how will it determine priorities?

The PAC will be a resource for both public and private payers participating in multi-payer primary care APM efforts, including payers in the CPC+ regions. The LAN and the CPC+ team at CMMI have developed an initial set of payer milestones or goals in areas such as quality measurement alignment and multi-payer data aggregation for discussion. The LAN will ask participating payers to identify the highest priority topics and challenges for which they are seeking support. From this the LAN will develop a series of events and collaborative learning agendas that add value to payers’ implementation efforts. PAC goals will be developed to help align efforts and support payer needs, but PAC participants will decide on the specific priorities for their regional markets that they believe will help them reach the larger CPC+ payer milestone domains mentioned above.

_The LAN will facilitate a PAC participant-driven agenda, potentially using resources such as the LAN’s Population-Based Payment White Papers on patient attribution, financial benchmarking, performance measurement, and data sharing. Other resources such as the Core Quality Measures Collaborative may be used as well._

With guidance from PAC participants, the LAN will translate the discussions from the collaborative learning events into the creation of practical tools for use in the CPC+ model as well as other future APM initiatives.

How will participating in the PAC help Payer Organizations?

Participation in the PAC will provide organizations with a structured resource to enable efficient sharing of ideas and promising practices, with the goal of helping participants accelerate implementation within their organization and with their partners. In the long term, participation will put payers in the position of being leaders in the movement toward accelerated, aligned adoption of APMs across the nation. Finally, by participating in the PAC, payers will provide the LAN with feedback on multi-payer APM implementation issues based on their organizations’ specific experiences, creating a bi-directional learning opportunity.
How will the PAC relate to the LAN’S Primary Care Payment Model (PCPM) Work Group?

The PAC is focused on implementation for payers that have already committed and been selected to partner in CPC+. In contrast, the PCPM Work Group’s charge is to develop recommendations on the critical components required to successfully position practices and other stakeholders that would like guidance and the insight of experts in helping to move toward adoption of primary care APMs.

What are the expectations for payers participating in the PAC?

The PAC is wholly voluntary. While the PAC hopes to support and amplify the potential of your organization’s engagement in CPC+, there is no CPC+ requirement that you also participate in the PAC, although it is encouraged. The time commitment of the PAC will vary, however, the LAN anticipates up to two to four hours of PAC activities taking place each month. Participants may be asked to devote additional time to review information and prepare for these activities. The success of the PAC in accelerating primary care transformation will be driven by the active participation of its members. Organizations will be asked to commit to engaging on all topics that arise in the PAC forums, in order to maintain the integrity of the effort. There will be no discussion of issues that could violate anti-trust regulations.

How can my organization GET INVOLVED?

If you would like more information, please contact Tanya Alteras at talteras@mitre.org. The LAN leadership is looking forward to this new phase of work that is focused on implementation and are actively seeking interested payers to participate.

About the LAN

The U.S. Department of Health and Human Services (HHS) established the Health Care Payment Learning & Action Network (LAN) in 2015 as a collaborative network of public and private stakeholders, including health plans, providers, patients, employers, consumers, states, federal agencies, and other partners within the health care community. By making a commitment to changing payment models, by establishing a common framework and aligned approaches to payment innovation, and by sharing information about successful models and encouraging use of best practices, the LAN is working to reduce barriers and accelerate the adoption of APMs.

The LAN currently oversees two Action Collaboratives: the Maternity Multi-Stakeholder Action Collaborative (MAC) and the Primary Care Payer Action Collaborative (PAC). Both seek to actively support stakeholders in adoption of alternate payment models (APM). The LAN’s leaders and members encompass a wide range of stakeholders representing diverse perspectives from patients, consumers, providers, purchasers, states, and public and commercial payers. LAN leadership and membership have committed to supporting the shared goal of accelerating APM adoption to achieve better care, smarter spending, and healthier people.

The LAN will not be in a position to offer PAC participants any financial support, or in-kind support in the form of “on-the-ground” personalized consulting or technical assistance. Rather, this is a voluntary effort
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aimed at supplementing the effort payers are already committing to by their engagement as payer partners in selected CPC+ regions.