

Figure 5: Impacts of Utilization on Payments in CPC+ Track 1

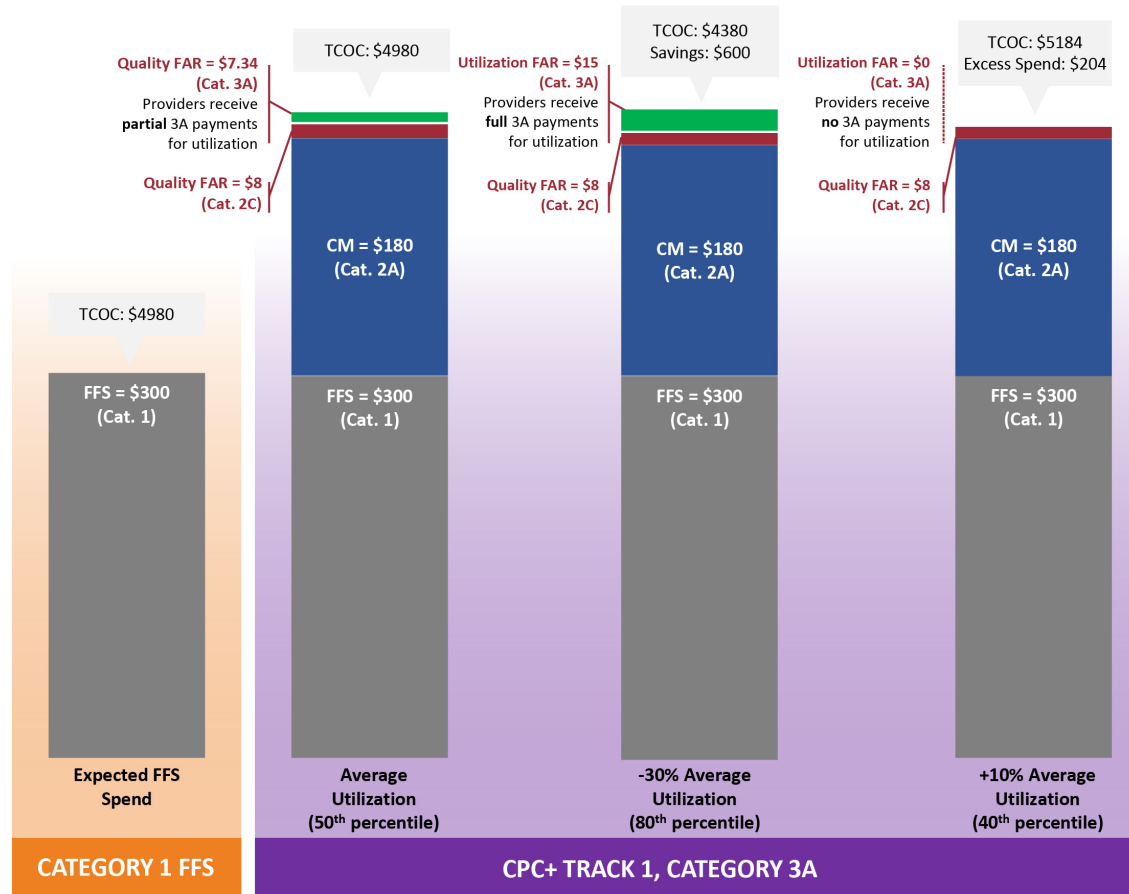


Figure 5 depicts payments in CPC+ Track 1. These numbers illustrate average annualized, per-beneficiary Medicare payments for primary care services. In Track 1, Category 2A care management (CM) payments are intended to support care management activities. By contrast, Category 2C fee-at-risk (FAR) payments are prepaid and tied to quality/ experience, as well as utilization performance. These FAR payments may need to be paid back.

This example assumes that providers receive FAR payments corresponding to average quality/experience performance at different levels of utilization performance. CPC+ Track 1 is a Category 3A APM because providers must clear quality gates before becoming eligible to keep FAR payments, and because performance on utilization measures directly results in savings that are shared with providers.