

OVERVIEW

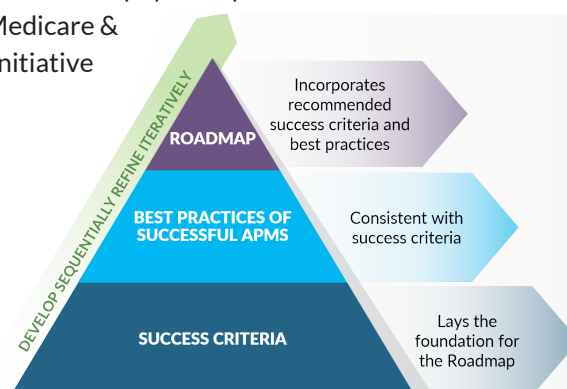
The [Health Care Payment Learning and Action Network \(the “HCP-LAN”\)](#) has launched an initiative to develop a [Roadmap for Driving High Performance in Alternative Payment Models \(APMs\)](#). The aim of this project is to identify APMs that meet goals related to cost and quality, and to disseminate information about high-performing APMs to accelerate the healthcare payment system’s transition to rewarding value over volume. This work involves defining success criteria for APMs; identifying and spreading best practices and contextual factors influencing success; and uncovering common challenges experienced by payers and providers, as well as strategies to overcome them.

WHAT IS THE APM ROADMAP?

The APM Roadmap will serve as a practical guide that payers can use to work with providers, patients, consumers, purchasers, and others to implement high-performing population-based and specialty APMs. The guide will be based on APMs recommended and implemented by ten regional and national payers represented on the APM Roadmap Implementation Group (RIG), including the Centers for Medicare & Medicaid Services. The payers participating in the APM Roadmap initiative represent approximately 158 million covered lives.

The guide will:

- Describe the characteristics of the successful APMs profiled
- Highlight best practices identified by payers and providers
- Provide strategies and tactics for overcoming common challenges



WHY IS THE APM ROADMAP IMPORTANT?

Implementing APMs that achieve the goals of improving care and outcomes and reducing costs poses many challenges. By focusing on APMs that payers view as having been successful at this challenge, the APM Roadmap will provide a unique and important resource for stakeholders on what those in the field feel constitutes success, as well as the characteristics of successful APMs.

HOW IS THE APM ROADMAP BEING DEVELOPED?



The APM Roadmap initiative is overseen by a multi-stakeholder Work Group that includes payer, provider, purchaser and patient representatives who developed criteria for identifying successful APMs. In addition to the Work Group, the HCP-LAN convened the RIG, whose members reached agreement on the types of payer data that most directly meet the Work Group’s criteria. Payers on the RIG are serving as a pilot group by submitting performance data on APMs they considered successful. The HCP-LAN is conducting interviews with these payers, as well as providers participating in the APMs, to elicit best practices for APM implementation. The APM Roadmap will include this information, along with findings captured from a targeted literature review and discussions with a variety of healthcare stakeholders (e.g., patients, consumers, providers, purchasers, payers).

AREAS TO BE EXPLORED IN THE ROADMAP

ESSENTIAL FACTORS IN MODEL DESIGN AND DEVELOPMENT

- Level of flexibility in the risk framework and the duration of payments to providers to enhance population health infrastructure
- The role of strong, committed health plan and provider leaders and strategies for building trust among stakeholders

CORE ELEMENTS OF PROVIDER AND PATIENT ENGAGEMENT

- The importance of engaging clinicians as partners in value-based transformation, including their involvement in the design and implementation of APMs
- Best practices for patient centeredness, and engaging patients and families in the design, implementation, and evaluation of new payment and care models

IMPLEMENTATION STRATEGIES

- The ways that payers and providers adopt new technologies and share data, as well as how to overcome challenges such as technical limitations, lack of interoperability, and workforce constraints
- Care coordination strategies, including those focused on high-need or high-cost patients

MULTI-PAYER INITIATIVES AND PURCHASER EFFORTS

- Strategies and considerations for multi-payer collaborations, including observations about consensus-building, anti-trust concerns, technology gaps, and local market and policy environments
- How purchasers are working directly with providers to build high-value networks through Centers of Excellence (COE), using benefit design to incentivize their utilization

MOVING FORWARD

The HCP-LAN welcomes your feedback. Visit the [Roadmap for Driving High Performance in Alternative Payment Models \(APMs\)](#) website for updates prior to the release of the APM Roadmap in early 2019.

PURPOSE

The HCP-LAN's purpose is to facilitate the shift from the fee-for-service (FFS) payment model to models that pay providers for **quality care, improved health, and lower costs**.



QUALITY CARE



IMPROVED HEALTH

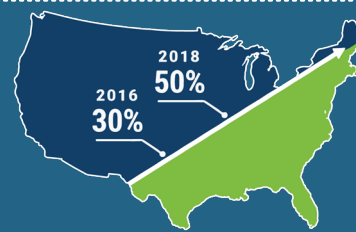


LOWER COSTS

OUR GOAL

Adoption of Alternative Payment Models

2016 **30%** → 2018 **50%**



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