

# Primary Care Payer Action Collaborative (PAC)

## Claims Processing for the Alternative to FFS Payment

### Practice Engagement



If you require technical assistance, please contact  
***Kristian Motta*** at [kmotta@rippleeffect.com](mailto:kmotta@rippleeffect.com).

April 18, 2018  
1:00 – 2:30 PM ET

# Welcome and Introductions

# Welcome

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**Edith Coakley Stowe**  
Senior Manager  
Manatt Health (DC)



**Susan Stuard**  
Independent Consultant (NY)



**Dori Glanz Reyneri**  
Senior Manager  
Manatt Health (DC)



**Kaylee O'Connor**  
Consultant  
Manatt Health (DC)

# Logistics

Two-step log in process:

1. Use the ReadyTalk link provided
2. Dial-in for audio using the number listed in the invite

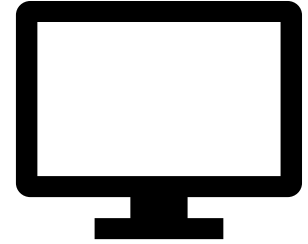
**U.S. Toll: 303-248-0285**

**Access Code: 2712000**

We encourage participants to ask questions by phone or in the chat box.

Please manage your own mute button on your phone and computer.

Lines will be left open.



# Curriculum, Topics and Calendar

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Risk Adjustment  
and Year-End  
Reconciliation



Constructing  
the Alternative-  
to-Fee for  
Service  
Payment



Designing  
Payment to  
Support  
Advanced  
Team-based  
Care at the  
Practice Site



Quality  
Measurement  
in Medicaid  
CPC+



Claims  
Processing For  
Alternative to  
FFS Payment

*February 7, 2018*

*February 28, 2018*

*March 12, 2018*

*April 11, 2018*

*Today!*

# Upcoming Events

*Mark Your Calendars*



PAC In-Person Meeting

Monday, May 7

1:00 – 4:00 pm ET

Baltimore Convention Center

Baltimore, Maryland

Register here: <https://hcp-lan.org/pac-spring-meeting-rsvp/>

This meeting will correspond with the Annual CPC+ Meeting on May 8 and the Milbank Memorial Fund Meeting on the morning of May 7.

# Today's Agenda

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Timeframe (EST)		Topic	Facilitators/Presenters
1	1:00-1:15 pm	Reminder of PAC, Interactive Polling, and Today's Objective	<i>Susan Stuard</i>
2	1:15-2:20 pm	<p>a) CMS, CareOregon, BCBS of Louisiana and Anthem provide brief overview of their organization's of alternative to FFS model or pilot</p> <p>b) Panelists discuss questions related to how claims processing workflows and system configurations were modified to enable the alternative to FFS payment</p> <p>c) Open Q&amp;A with PAC participants</p>	<p><u>Panelists:</u></p> <p><i>Chris Coutin, CMS</i></p> <p><i>Sarah McHugh, CMS</i></p> <p><i>Mary Kjemperud, CareOregon</i></p> <p><i>Amy Jo Barnwell, CareOregon</i></p> <p><i>Randall Halcomb, Anthem</i></p> <p><i>Tamara Mayo, BCBS of LA</i></p> <p><i>Michelle Stevens BCBS of LA</i></p>
3	2:20-2:30 pm	Interactive polling and wrap-up	<i>Susan Stuard</i>

# Reminder: LAN Action Collaboratives

A LAN Action Collaborative (AC) provides a **results-oriented forum** for sharing, integrating, and applying new knowledge and tailoring solutions.

This will support **committed** participants with a **shared aim** to take more effective **action** in their organizations to **increase adoption of APMs** and to make a **collective impact** on the U.S. health care system.

## ACTION COLLABORATIVE



## PAC

The Primary Care Payer Action Collaborative (PAC) serves as a “national table” for payers committed to improving the implementation of CPC+, a multi-payer primary care APM, to more effectively support practice-level transformation by:

- Identifying and committing to collective goals
- Sharing learning to accelerate action
- Tackling operational barriers to successful APM implementation

# PAC Portal

- For more information and resources please visit the [Primary Care Payer Action Collaborative \(PAC\) Portal](#).
- Slides, session highlights and polling results are posted from PAC fall webinars

## PAC Learning Labs on Alternatives to FFS Payment in CPC+ Track 2

### Learning Labs on Alternatives to FFS Payment in CPC+ Track 2

This section includes an overview of the PAC and materials from each virtual meeting beginning in August 2017, when the PAC tailored learning lab content and discussions to support payers as they operationalize alternatives to fee-for-service payment specifically in “CPC+ Track 2.”

#### PAC Overview

##### [Overview](#)

<b>PAC Session 1: Introduction to Designing and Implementing Alternatives to FFS in CPC+ Track 2</b> This kick-off webinar outlines PAC objectives and serves as a preview of four upcoming “learning labs” on key payment design and implementation topics. As part of this interactive session, members of the CMS CPC+ team outline key principles and features of the CPC+ model and address participant questions.	August 29, 2017
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[Live Poll Results](#) | [Highlights](#) | [Slides](#)

<b>PAC Session 2: Design Work Flow</b> This learning lab discusses initial design decisions in developing any alternative to FFS payment for primary care practices, ranging from which lines of business to include in the model, to handling patient attribution.	September 14, 2017
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# 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

# Today's Objective

# Objective

- High-level exploration of claims processing workflows and how systems are modified to enable alternative to fee-for-service
- Hear from: CMS, CareOregon, BCBS of Louisiana, and Anthem
- Use a panel discussion format to identify pitfalls and lesson learned as these four organizations planned for and/or implemented their alternative-to-FFS-payment

# Interactive Polling

# Polling Question #1a:

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Which CPC+ Region are you from?

- a) *Arkansas*
- b) *Buffalo (2018 Start)*
- c) *Colorado*
- d) *Hawaii*
- e) *Kansas City*
- f) *Louisiana (2018 Start)*
- g) *Michigan*
- h) *Montana*
- i) *Nebraska (2018 Start)*
- j) *New Jersey*



# Polling Question #1b:

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Which CPC+ Region are you from?

- a) *North Dakota (2018 Start)*
- 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*

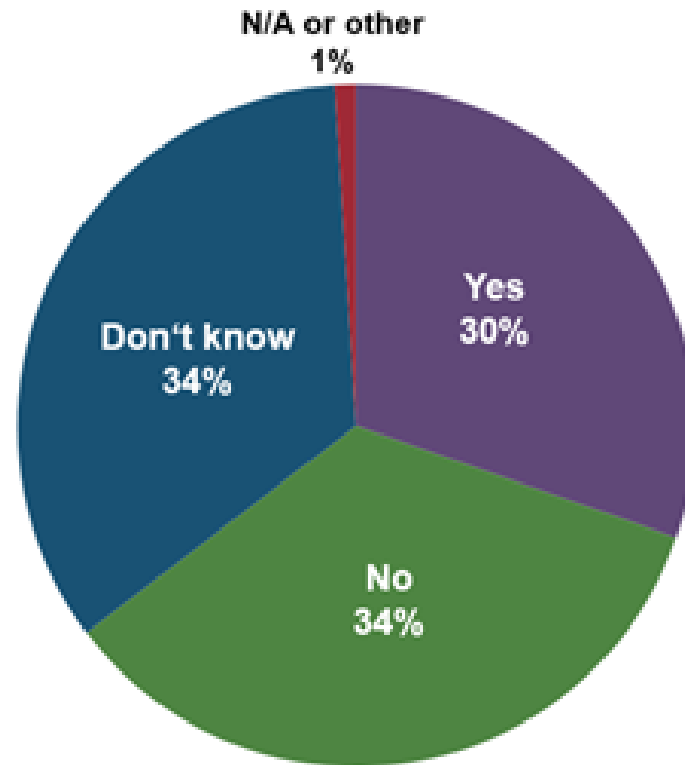


# Claims Processing System Readiness

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*During the PAC webinar on September 28, 2017, we asked:*

## 4. Is your claims processing system ready for prospective payment?



## Polling Question #2:

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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

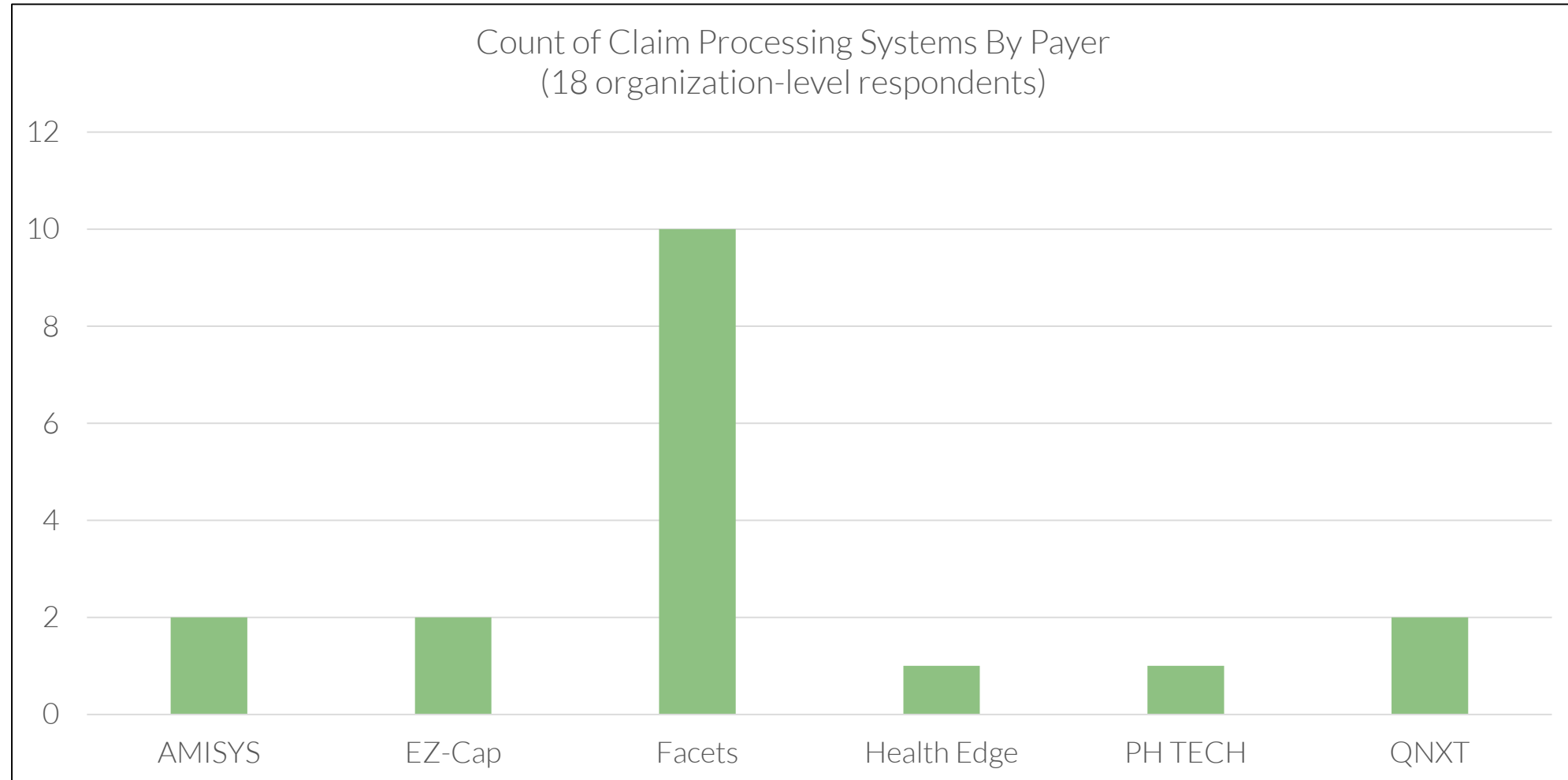
*Please tell us details via the chat*



# Inventory of Claims Processing Systems Among CPC+ Payers

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*During the same Fall PAC webinar, we asked for the name of your claims processing system:*



# Panelist Introductions

# Today's Panelists

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**Sarah McHugh**  
CPC+ Team Lead, Center  
for Medicare and Medicaid  
Innovation, CMS



**Chris Coutin**  
CPC+ Data Feedback/Payment  
Operations Lead, Center for  
Medicare and Medicaid  
Innovation, CMS



**Mary Kjemperud, MBA**  
Director, Network &  
Clinical Support,  
CareOregon



**Amy J. Barnwell**  
Supervisor, Provider  
Configuration & Encounter  
Data, CareOregon



**Randall Halcomb,**  
Payment Innovation  
Programs Director Anthem



**Tamara Mayo, CPA, MHCDS**  
VP, Provider Reimbursement &  
Payment Innovation,  
Blue Cross and Blue Shield of  
Louisiana



**Michelle Stevens**  
Director, Payment Innovations  
Blue Cross and Blue Shield of  
Louisiana



# CareOregon Alternative to FFS Payment

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- Track 2 Model:
  - Reduced FFS reimbursement on select code set – currently using CMS code list
  - Current FFS reduction set at 30%
  - Capitation on assigned members – rate set to compensate for FFS reduction
  - Leveraged existing Primary Care capitation model
- Lines of Business:
  - Medicaid and Medicare
  - Individual clinics must have a minimum of 150 CareOregon assigned members – or
  - Multi-Clinic systems have a minimum of 2000 CareOregon assigned members



# CareOregon Alternative to FFS Payment

- Launch:
  - Launched a modified Track 2 on January 1, 2018
  - July 1, 2018 is our planned launch date of full Track 2 program
  - We considered our existing Primary Care Capitation arrangements as our pilot.
  - Launch will include all CPC+ Track 2 practices that agree to participate
- Planning Phase:
  - We have been discussing model options for well over a year
  - Analysis and detailed calculations 3 to 6 months
  - Complications with attribution/assignment have forced delay
- Claims processing system: QNXT - Trizetto

# BCBSLA's CPC+ Program Design

- BCBSLA selected to participate in CPC+ Round 2 for 2018
- Planned launch date for Track 2 payment model - July 2018
- One year planning time to develop the model
- New CPC+ Model leverages current PCMH program
- Launch will be at scale with five Track 2 practices participating (101 CPC+ providers)
- All Lines of Business
  - Leverage existing methodology in current PCMH program for ASO business
  - No current membership thresholds

# BCBSLA's CPC+ Program Design

- **CPC+ Track 1 = Current Quality Blue PCMH**
- **CPC+ Track 2 = Three Payment Layers:**
  - **Base Care Management Fee (CMF)**
    - Paid at different rates based on five risk categories
    - Performance on quality and efficiency measures will be used to create an adjusted weighted average performance based CMF
  - **Fee for service payments (FFS)** for E&M services will be reduced by provider selected amount to fund a Fee For Service (FFS) partial capitation PMPM equivalent
  - **Partial Capitation PMP** - FFS reduction converted to a PMPM and paid on attributed membership
- **Claims Processing System: Facets, TriZetto**

# Anthem Alternative to FFS Payment

- FFS Alternative Model Design:
  - Modeled after CMMI Comprehensive Primary Care Payment design
  - Partial Capitation for Expected E&M Spend, Practice Elections of 40% or 60%
  - Partial FFS Reimbursement
- Implementation and Rollout:
  - Design, Planning and Technical Implementation took place over the previous 18 months.
    - Implemented on three claims systems (two versions of FACETS and our proprietary corporate system)
  - Launched 4/1/2018 as a limited pilot.
  - Voluntary participation for all Track 2 practices beginning January 2019.
  - Supporting Medicare Advantage and Commercial Lines of Business
  - Currently Limited to Fully Insured, with ASO clients being added to the program in 2019.

# Panel Discussion

# Panel Discussion Questions

## Planning: Timeline, Staffing and Recommendations:

- a) Who did your organization assign to the project team for planning and implementation of the alternative-to-FFS payment? Who from the claims processing area participated?
- b) What pitfalls has your organization encountered in planning for or implementing claims processing changes for this payment model? What would you have done differently?
- c) How is your organization handling or planning to handle billing to self-funded groups?

## Syncing Attribution to the Payment Model

- d) How is your organization handling attribution for this payment model? At the practitioner, site or TIN level? Have you encountered any issues related to attribution and claims processing/payment?
- e) If your health plan assigns to at the practitioner level, how do you handle payment to practitioners working at multiple physical sites or even multiple billing entities?
- f) Has your health plan encountered difficulty with members that move between practices or practice sites and the need to adjust the payment model?

## Testing and Validation:

- g) Were you able to test the claims processing workflow prior to go live? If so how did you test the process?
- h) How has your health plan validated accuracy of prospective payments? Has that approach changed over time?

# Interactive Polling

# Polling Question #3:

30

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 #4:

31

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*



# Polling Question #5:

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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 #6:

33

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.*



Thank You!