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@rippleffect.com.

April 18, 2018
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)

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

- 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

Dates:
- 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

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

PAC Session 1: Introduction to Designing and Implementing Alternatives to FFS in CPC+ Track 2

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.

Live Poll Results | Highlights | Slides

PAC Session 2: Design Work Flow

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.

August 29, 2017

September 14, 2017
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
Polling Question #1a: Which CPC+ Region are you from?

<table>
<thead>
<tr>
<th>Option</th>
<th>Region/Location</th>
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<tbody>
<tr>
<td>a)</td>
<td>Arkansas</td>
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<td>b)</td>
<td>Buffalo (2018 Start)</td>
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<td>c)</td>
<td>Colorado</td>
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<td>d)</td>
<td>Hawaii</td>
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<td>e)</td>
<td>Kansas City</td>
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<tr>
<td>f)</td>
<td>Louisiana (2018 Start)</td>
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<td>g)</td>
<td>Michigan</td>
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<tr>
<td>h)</td>
<td>Montana</td>
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<tr>
<td>i)</td>
<td>Nebraska (2018 Start)</td>
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<tr>
<td>j)</td>
<td>New Jersey</td>
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</tbody>
</table>
Polling Question #1b:

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

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

- No: 34%
- Yes: 30%
- Don't know: 34%
- N/A or other: 1%
Polling Question #2:

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

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

Count of Claim Processing Systems By Payer
(18 organization-level respondents)
Panelist Introductions
Today’s Panelists

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
Alternative to FFS Payment

• 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
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
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:

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:

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
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:

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!