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ADVANCING INTEGRATED HEALTHCARE

# CTC-RI Common Contract Payment for Value: Expectations Practice Infrastructure Investments

## Care Transformation Collaborative of R.I.

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APRIL 2019 EXPANSION ORIENTATION  
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CTC-RI CHIEF CLINICAL STRATEGIST

APRIL 11, 2019

# CTC-RI PCMH Kids Mission and Vision

## Vision:

Rhode Islanders enjoy excellent health and quality of life, and children and youth will grow up healthy to reach their optimal potential. All children and youth in RI will be cared for in high quality, family and patient centered, medical homes.

## Mission:

To lead the transformation of primary care in Rhode Island in the context of an integrated health care system.

To engage providers, payers, patients, parents, purchasers, and policy makers to develop high quality, family and patient-centered medical homes for adults, children and youth, and provide health care in an affordable, integrated healthcare system that promotes active participation, wellness, and delivers high quality comprehensive health care dedicated to data-driven system improvement. PCMH's for children will be cost effective and sustainably resourced.



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# The Key to building PCMH is measured progress toward the Quadruple Aim

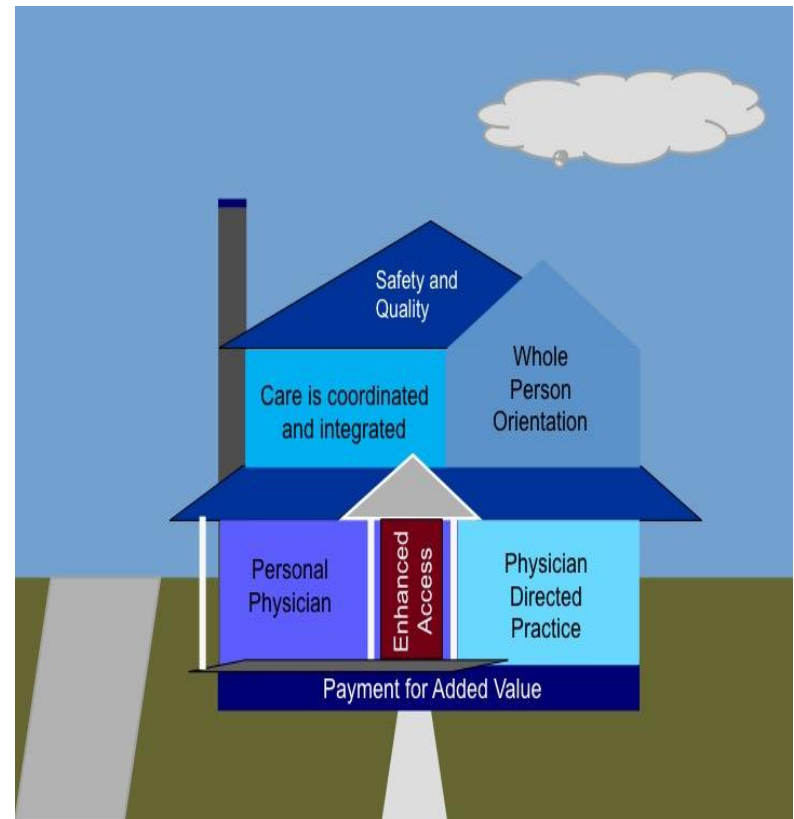


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# CTC-RI/PCMH Kids helps health plans and practices build sustainable Patient-Centered Medical Homes

## VALUE BASED CARE

- Data-driven practice transformation
- NCQA PCMH Recognition
- Nurse Case Manager/ Care Coordinator on the team
- Common Contract
- All-payers involved
- PMPM paid on attributable lives
- PMPM based on performance



# Infrastructure Payment for Value

**Pediatric Practice Performance Incentive Table**

| Measurement Period | Measurement Period     | Care Management Base Payment Rate |
|--------------------|------------------------|-----------------------------------|
| MP 1               | 7/1/19 through 6/30/20 | \$ 3.50                           |
| MP 2               | 7/1/20 through 6/30/21 | \$ 3.00                           |
| MP 3               | 7/1/21 through 6/30/22 | \$ 3.00                           |

| Measurement Period | Performance Measure                            | Performance Incentive Bonus PMPM |
|--------------------|--|----------------------------------|
| <b>MP2</b>         | Reducing ED visits/ meeting quality benchmarks | <b>\$0.50</b>                    |
| <b>MP3</b>         | Reducing ED visits/ meeting quality benchmarks | <b>\$0.50</b>                    |



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# Practice (and SOC) Investment

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## REQUIRED

### Hire NCM/CC

- ✓ Work with high risk patients and referred patients who require care coordination
  - **Practice reporting**
  - **NCQA recognition**
  - **Practice Transformation**
- ✓ Monthly Team Meetings
- ✓ Daily Patient Huddles
- ✓ Team Support for Care Coordination
- ✓ CAHP Survey

## INVESTMENT

\$2.50 PMPM required

\$0.50 NCQA and Reporting

\$0.50 Practice Transformation



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# CTC Common Service Delivery Requirements

|  | Start Up (MP 1)<br>7/1/19-6/30/20   | Measurement Period 2 (MP 2)<br>7/1/20-6/30/21                                | Measurement Period 3 (MP 3)<br>7/1/21-6/30/22                                 | Notes  |
|--|---|--|---|--|
| Meets with Practice Facilitator  | July 2019-June 2020<br>1-2 x per month                                    | July 2020-June 2021<br>1x a month  | July 2021-June 2022<br>Quarterly  | N/A  |
| *Attends 50% of learning network meetings.   | July 2019-June 2020   | July 2020-June 2021  | July 2021-June 2022   | N/A  |
| Submit clinical quality data as defined in CTC Performance Standards   | 1 <sup>st</sup> report due<br>January 15, 2020, April 15,                 | Quarterly<br>July 15, 2020, Oct 15,<br>Jan 15, Apr 15                        | Quarterly<br>July 15, 2021, Oct 15,<br>Jan 15, Apr 15                         | Submit to:<br><a href="#">CTC Portal</a>   |
| Submit reports on high risk patients, as defined by CTC  | N/A   | Quarterly<br>July 15, Oct, Jan and Apr                                       | Quarterly<br>July 15, Oct, Jan and Apr  | Submit to:<br><a href="#">CTC Portal</a>   |
| Submits CTC Quarterly Provider Panel Report indicating open/closed panel status and 3 <sup>rd</sup> next available appointment   | Quarterly<br>August, Nov, Feb and May (Due back to CTC 15 <sup>th</sup> ) | Quarterly<br>August, Nov, Feb and May<br>(Due back to CTC 15 <sup>th</sup> ) | Quarterly<br>August, Nov, Feb and May<br>(Due back to CTC15th)                | Will receive an email from CTC 1 <sup>st</sup> week of month with form that outlines fields to be updated<br>Submit to: <a href="#">CTC Portal</a> |
| Registers for Q Pass 12 months prior to NCQA submission date<br>Achieves NCQA PCMH recognition<br>For NCQA renewal, re-registers for Q Pass three months prior to due date and uploads responses/documents 1 month prior to expiration | N/A   | N/A  | September 30, 2021  | Submit to: <a href="mailto:CTC-ri@ctc-ri.org">CTC-ri@ctc-ri.org</a>  |
| Submit to CTC screenshot demonstrating patient access to a secure web portal, for patients to request appointment requests, referrals, and prescription refills and test results   | N/A   | September 31, 2020   | N/A   | Submit to: <a href="mailto:CTC-ri@ctc-ri.org">CTC-ri@ctc-ri.org</a>  |
| Submits budget and staffing plan and use of funds to support care delivery model to CTC  | September 30, 2019  | N/A  | N/A   | Submit to: <a href="mailto:CTC-ri@ctc-ri.org">CTC-ri@ctc-ri.org</a>  |
| Submit patient panel for CAHPS survey to approved data vendor  | Fall 2019   | Fall 2020  | Fall 2021   | Submit to DataStat portal  |
| Submits to OHIC quality measure information  | October 15, 2019  | October 15, 2020 (includes new measures for baseline)                        | October 15, 2021 (includes new measures for meeting threshold or improvement) | Submit to: <a href="#">OHIC Website</a>  |
| Submits to OHIC cost management strategy QI project (per OHIC definition)  | October 15, 2019  | October 15, 2020   | October 15, 2021  | Submit to: <a href="#">OHIC Website</a>  |
| Hire 1.0 Nurse Care Manager (NCM) or Care Coordinator for every 3,000 attributed patients (\$2.50 pmpm)  | October 31, 2019  | Maintain staffing  | Maintain staffing   | Submit to: <a href="mailto:CTC-ri@ctc-ri.org">CTC-ri@ctc-ri.org</a>  |
| Develop high risk registry and process for care plan for patients identified for care management   | December 31, 2019   | Maintain system  | Maintain system   | Submit to: <a href="mailto:CTC-ri@ctc-ri.org">CTC-ri@ctc-ri.org</a>  |
| Submits Transition of Care Policy and Procedure  | December 31, 2019   | N/A  | N/A   | Submit to: <a href="mailto:CTC-ri@ctc-ri.org">CTC-ri@ctc-ri.org</a>  |
| Submits 1 additional compact with high volume specialist based on needs of patient population as defined by CTC  | N/A   | N/A  | December 31, 2021   | Submit to: <a href="mailto:CTC-ri@ctc-ri.org">CTC-ri@ctc-ri.org</a>  |
| Submits a quality improvement activity demonstrating improvement to improve a performance measure (quality, customer experience, utilization)  | N/A   | January 31, 2021   | January 31, 2022  | Submit to: <a href="mailto:CTC-ri@ctc-ri.org">CTC-ri@ctc-ri.org</a>  |
| NCM/CC completes standardized learning program as defined by CTC-RI.   | Program Starts<br>January 2020  | N/A  | N/A   | Submit to: <a href="mailto:CTC-ri@ctc-ri.org">CTC-ri@ctc-ri.org</a>  |
| Submit before and after-hours protocol as defined by CTC   | March 31, 2020  | N/A  | N/A   | Submit to: <a href="mailto:CTC-ri@ctc-ri.org">CTC-ri@ctc-ri.org</a>  |
| Enrolls in Pedi PRN and submits 1 compact for behavioral health  | March 31, 2020  | N/A  | N/A   | Submit to: <a href="mailto:CTC-ri@ctc-ri.org">CTC-ri@ctc-ri.org</a>  |
| Submit NCQA PCMH work plan to CTC  | March 31, 2020 and registers for Q Pass                                   | N/A  | N/A   | Submit to: <a href="mailto:CTC-ri@ctc-ri.org">CTC-ri@ctc-ri.org</a>  |
| Submits NCQA PCMH recognition application.   | March 31, 2020  | N/A  | N/A   | Submit to: <a href="mailto:CTC-ri@ctc-ri.org">CTC-ri@ctc-ri.org</a>  |
| Submits a quality improvement activity plan for improving clinical quality, customer experience or utilization   | May 2020  | May 2021   | May 2022  | Submit to: <a href="mailto:CTC-ri@ctc-ri.org">CTC-ri@ctc-ri.org</a>  |

# Transformation: Learning in Action

| Program /Committee                       | When  | Expectation            |
|--|---|------------------------|
| <b>Breakfast of Champions</b>            | Dec/March/June/Sept<br>2 <sup>nd</sup> Friday, 7:30-9am | 3 out of 4             |
| <b>PCMH Kids Stakeholder</b>             | July/Oct/Jan/April<br>1 <sup>st</sup> Thurs, 7:30-8:30  | 2 out of 4             |
| <b>Practice Reporting/Transformation</b> | Monthly<br>3 <sup>rd</sup> Wed, 8:00-9:30               | Required               |
| <b>Nurse Care Manager/CC</b>             | Monthly<br>3 <sup>rd</sup> Tues, 8:00-9:30              | Required               |
| <b>Annual Conference</b>                 | Oct 24, 2019  | At least 1 team member |
| <b>Practice Facilitation On site</b>     | Yr 1: 1-2 Monthly<br>Yr 2: Monthly<br>Yr 3: Quarterly   | Team participation     |



# Anticipated Outcomes

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- ✓ Improved quality of care
- ✓ Improved patient experience
- ✓ Reduced cost as measured by reduced ER/IP utilization
- ✓ Improved clinician and staff satisfaction
- ✓ Practice readiness for shared savings



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# Next Steps

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- **Contract:** Each health plan will execute an addendum to the System of Care contract based on language in the common contract.
- **Attribution:** Each health plan will calculate attribution based on the health plan's outlined methodology (expect 70% of patient panel).
- **Practice Facilitator:** Will meet with practice to conduct a practice readiness assessment for meeting Service Delivery Requirements/NCQA recognition/renewal requirements.



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# Discussion

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