

**RAE Administrative Payment Report**  
Submitted 7/31/19

RAE Name: Health Colorado Region # 4 Period Covered 07/01/2019 – 06/30/2020 SFY 2020

**Instructions:** Please fill out the following table with all payment arrangements made with providers in your network.

#	Type of Arrangement	Description	% of Practices	Practice characteristics <sup>1</sup>	Number of practices	Comments
1	PMPM - Accountable	Premium payment (\$6 PMPM Claims Based or Member Selection, \$4 no claims history) + KPI Incentive	31%	Accountable PCPs conduct all care coordination functions for attributed members in addition to meeting all of the contractual obligations of Contributing and/or Collaborative PCPs. This includes:  1. Perform the spectrum of care coordination activities ranging from routine, one-time activities to long-term interventions  2. Create and submit a timely and comprehensive Care Coordination Activity report for attributed members  3. Serve COUP members 4. Complete and submit COUP Report for applicable members	38	Number and Percentage of practices is based on Practice Locations (Billing IDs)
2	PMPM - Collaborative	Enhanced payment (\$5 PMPM Claims Based or Member Selection, \$4 no claims history)	13%	PCPs that engage in some care coordination activities in addition to meeting all of the contract requirements for Contributing PCPs. This includes:  1. Accept and use Care Compact for	16	Number and Percentage of practices is based on Practice Locations (Billing IDs)

<sup>1</sup> Characteristics that a practice must possess in order to qualify for or be offered this type of payment arrangement. Might include items such as having an open panel; employs health care workers; on site care coordinators; performs advanced screening; etc.

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				<p>referrals to other network providers</p> <ol style="list-style-type: none"> <li>2. Participate in referral process using Care Compact or similar uniformly accepted method and practice</li> <li>3. Engage with delegated Care Coordination Entity to manage the care of attributed members, including COUP members, through monthly care coordination meetings</li> <li>4. Share care coordination data with Beacon in a prescribed format and timeline to demonstrate their care coordination activity and interventions delivered in support of RAE’s performance objectives and KPI measures; and</li> <li>5. Actively participate in Care Coordination Committee and contribute to care coordination workflow and processes.</li> <li>6. Provide basic data related to medical home specialty referrals and care coordination activities internal to their practice.</li> </ol>		
3	PMPM - Contributing	Basic payment (\$3 PMPM)	56%	<p>PCP that meet basic PCMP criteria. This includes:</p> <ol style="list-style-type: none"> <li>1. Be enrolled as a provider in the Colorado Medicaid program</li> <li>2. Be either</li> </ol>	68	Number and Percentage of practices is based on Practice Locations (Billing IDs)

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				<p>(a) Certified by the Department as a provider in the Medicaid and CHP+ Medical Homes for Children program</p> <p>(b) Individual physician, or advanced practice nurse with a focus on primary care, general practice, internal medicine, family medicine, pediatrics, geriatrics, or obstetrics and gynecology, or geriatrics, or</p> <p>(c) A Federally Qualified Health Center (FQHC) or Rural Health Clinic (RHC);</p> <p>3. Be licensed as a MD, DO or NP provider by the Colorado Medical Board or the Colorado Board of Nursing to practice in the State of Colorado</p> <p>4. Act as the dedicated source of primary care for members and be capable of delivering the majority of the Member’s comprehensive primary, preventive, and sick medical care;</p> <p>5. Demonstrate commitment to the following principles of the Medical Home model (i.e. member centered, coordinated and integrated, culturally competent/linguistic sensitive services).</p> <p>6. Provide basic data related to medical home specialty referrals and care coordination activities internal to their practice.</p>		
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