

# Alternative Payment Model 1 for Primary Care (APM 1)

## APM 1 Community Forum #1

Wednesday, October 4, 2023

7:30-9:00 am

Facilitated by the Colorado Health Institute

# Agenda

- 7:30 - 7:50** Welcome; History and Overview of APM 1
- 7:50 - 8:10** Program Performance and Accomplishments
- 8:10 - 8:30** APM 1 Legacy
- 8:30 - 8:50** Open Discussion
- 8:50 - 9:00** Closing

# Ways to Participate

Please share your comments and questions verbally or in the chat.

- Prior to sharing, please **share your name and organization, and disclose any financial interests** if appropriate.
- If you would like to comment verbally: Please use the raise hand function in Zoom. Guests will be invited one at a time to share.

# Written Feedback



Following the meeting, additional feedback can be submitted to the Colorado Health Institute at:

[FocusGroups@coloradohealthinstitute.org](mailto:FocusGroups@coloradohealthinstitute.org)

no later than Tuesday, October 10.

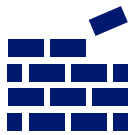
# Agenda



**Overview of APM 1**



**Program Performance and Accomplishments**



**APM 1 Legacy**



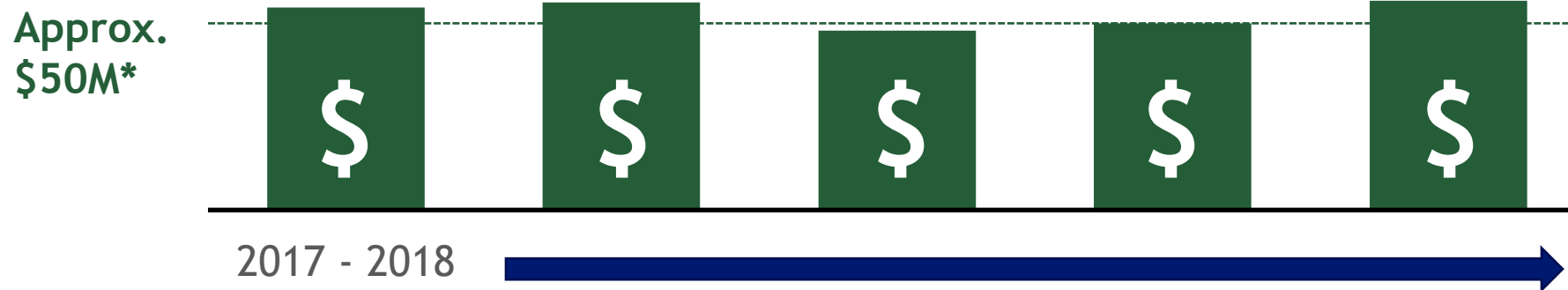
**Open Discussion and Closing**

# Investment in Primary Care

**The investment:** Approximately \$50 million per year

**The condition:** Must be paid through a value-based payment structure

**APM 1 is how HCPF allocates that investment.**



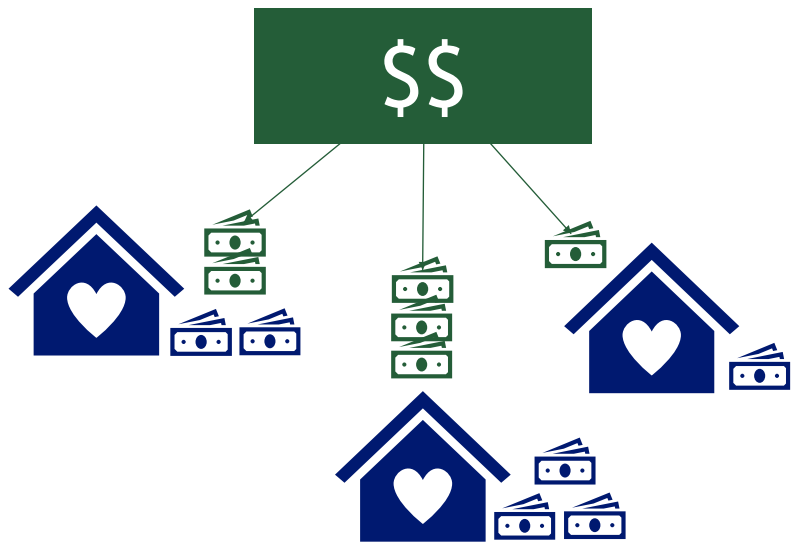
\*The per year investment is subject to caseloads and Joint Budget Committee appropriated reimbursement rates.

# Performance-Based Investments in Primary Care

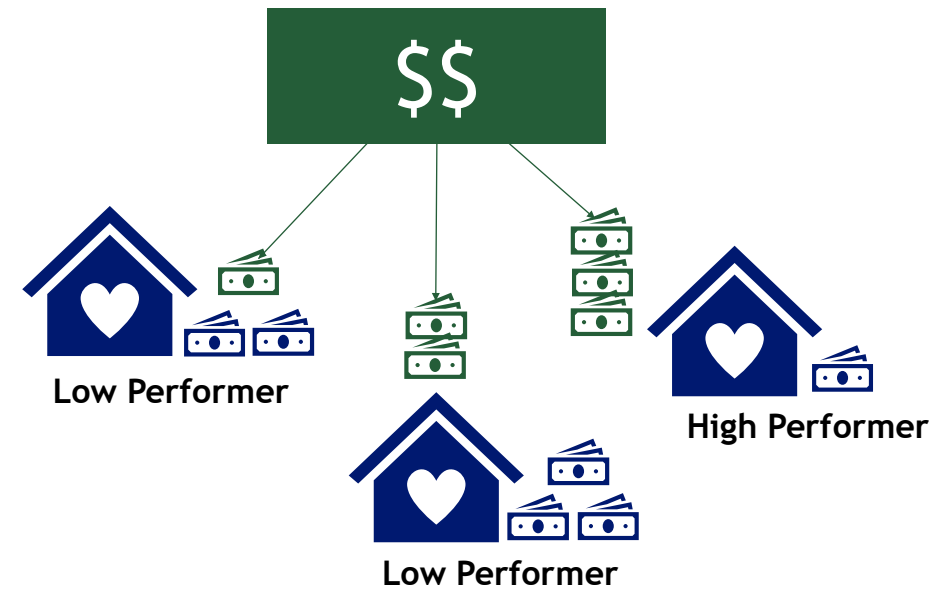
Historically, distributed **evenly to all providers** as enhanced rates



Moving toward distribution based on **provider performance**



**Result:** Investment based on **volume**



**Result:** Investment based on **value**

 Baseline Primary Care Medical Provider (PCMP) Rate Reimbursement

 Enhanced PCMP Rate Reimbursement

# Alternative Payment Model 1 Goals



Provide long-term, sustainable **investments into primary care**



**Reward performance and introduce accountability** for outcomes and access to care while granting flexibility to primary care medical providers (PCMPs)



**Align with other payment reforms** across the delivery system.



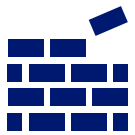
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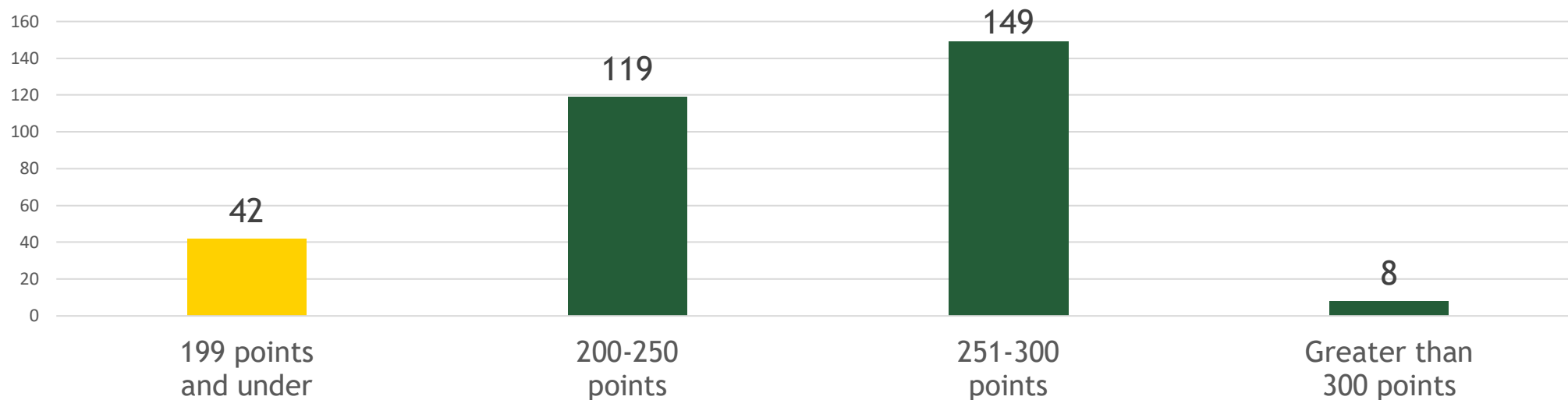


**Open Discussion and Closing**

# Building the Basis for Quality Reporting

Primary care medical providers have built processes for quality reporting and moving toward **outcomes-based** measures

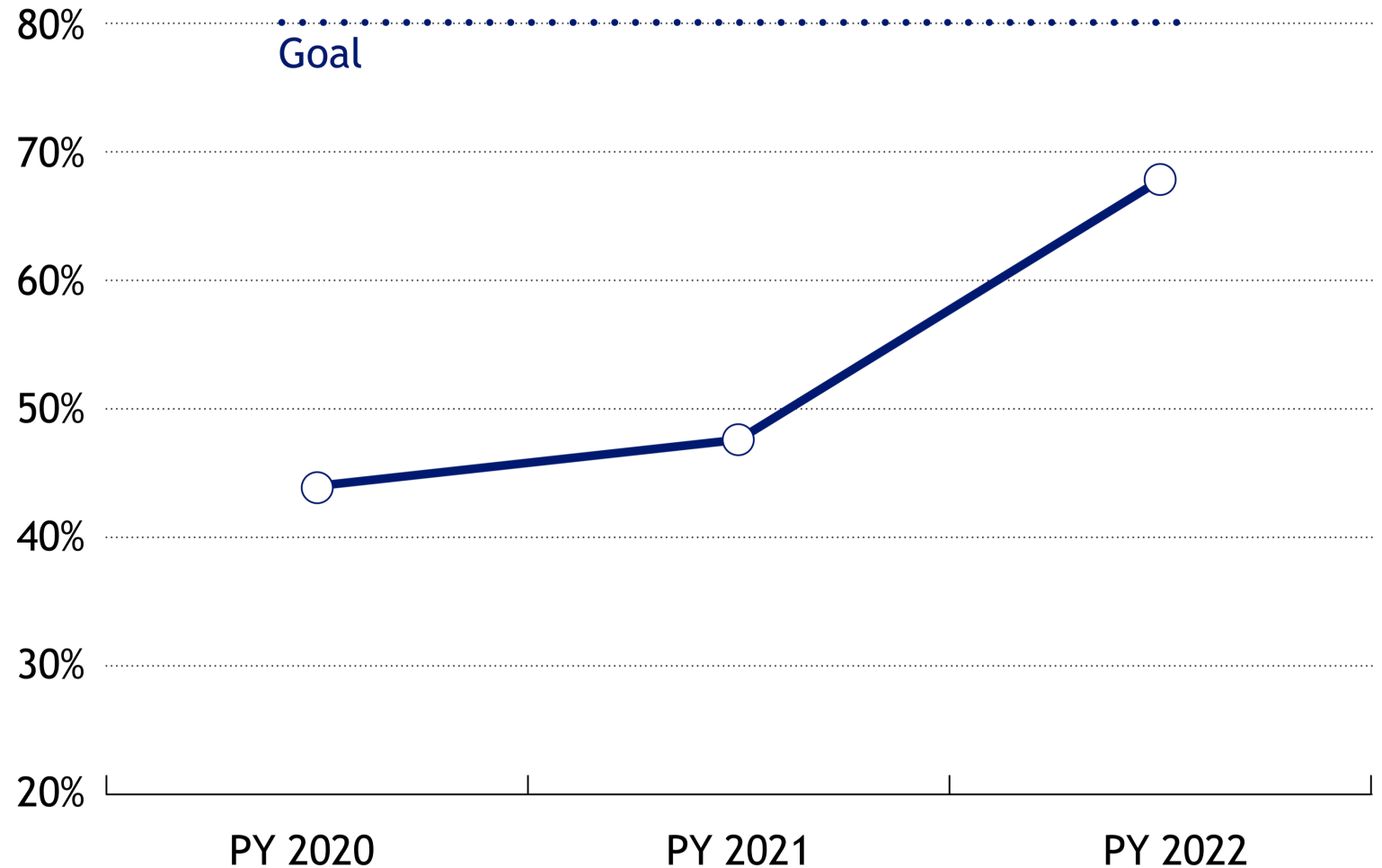
# Program Year 2022 Performance



- About 87% of PCMPs met the point threshold
- 71 PCMPs were automatically awarded 100 points for being a recognized patient-centered medical home

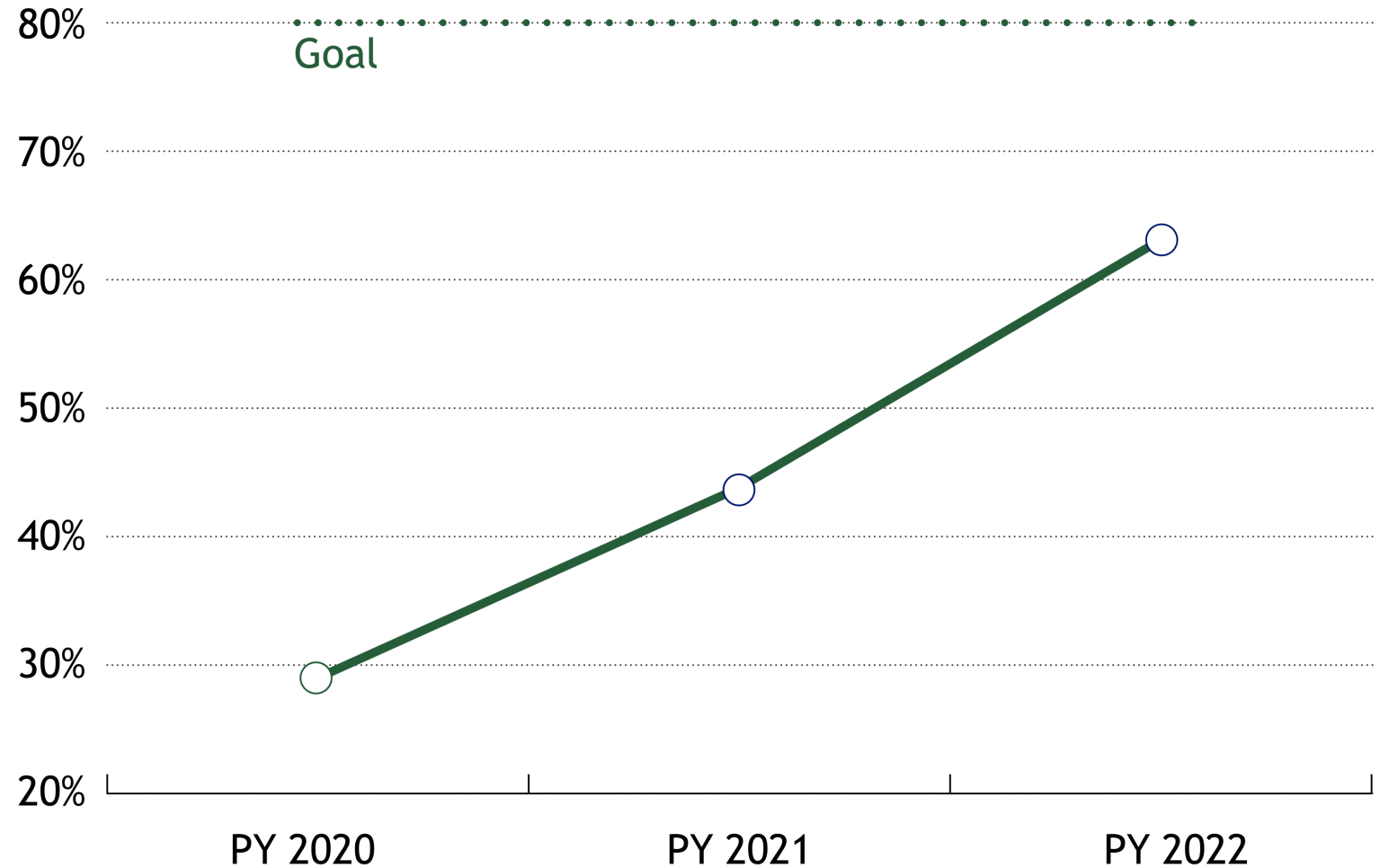
# Average PCMP Performance on Mandatory Measures - Pediatric

Well-Child  
Visits in the  
First 15 Months  
- Administrative



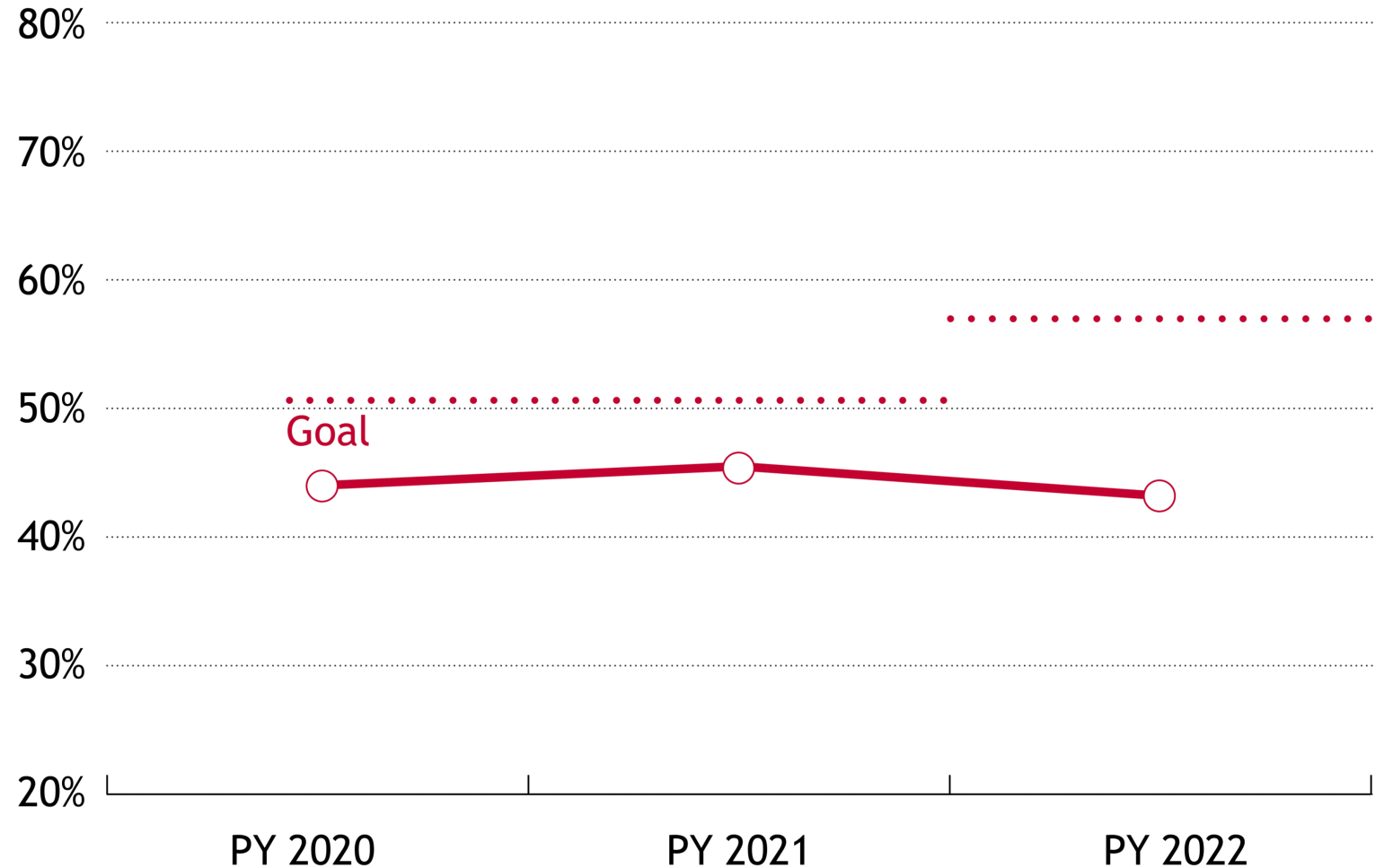
# Average PCMP Performance on Mandatory Measures - Pediatric

Well-Child  
Visits for Ages  
15-30 Months -  
Administrative



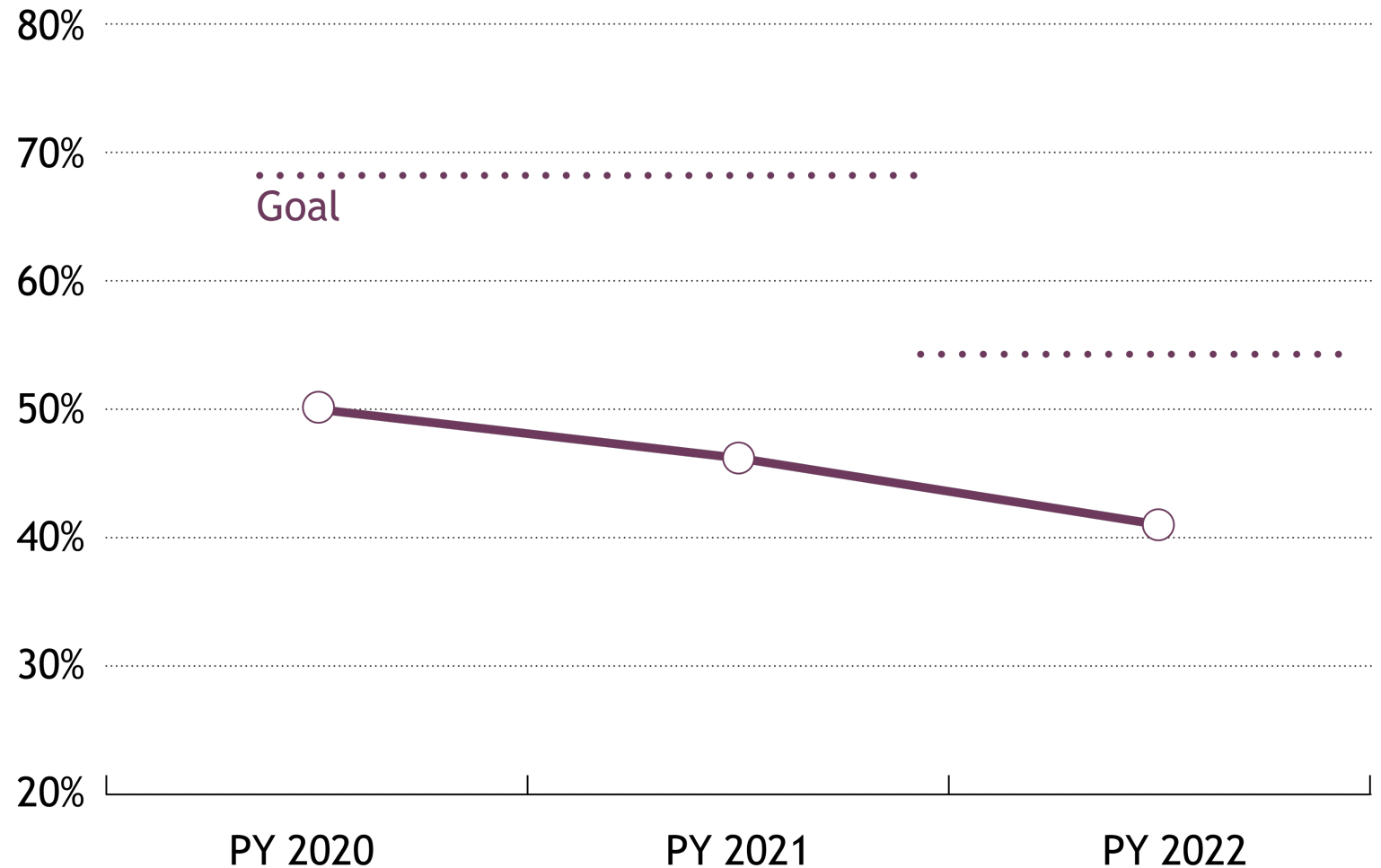
# Average PCMP Performance on Mandatory Measures - Pediatric

Childhood Immunization Status (Combo 10) - eCQM



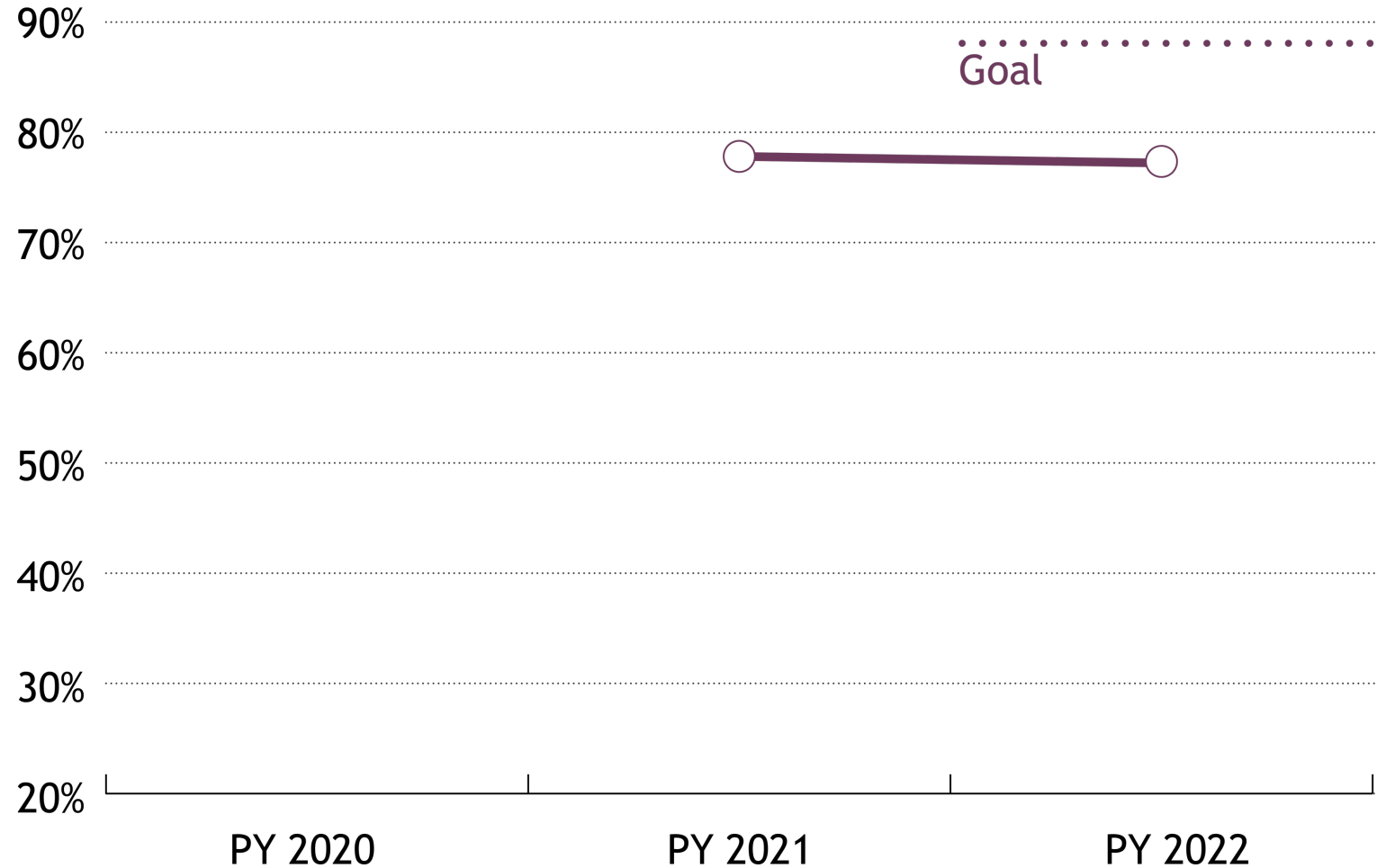
# Average PCMP Performance on Mandatory Measures - Pediatric

Childhood  
Immunization  
Status (Combo  
10) -  
Administrative



# Average PCMP Performance on Mandatory Measures - Adult

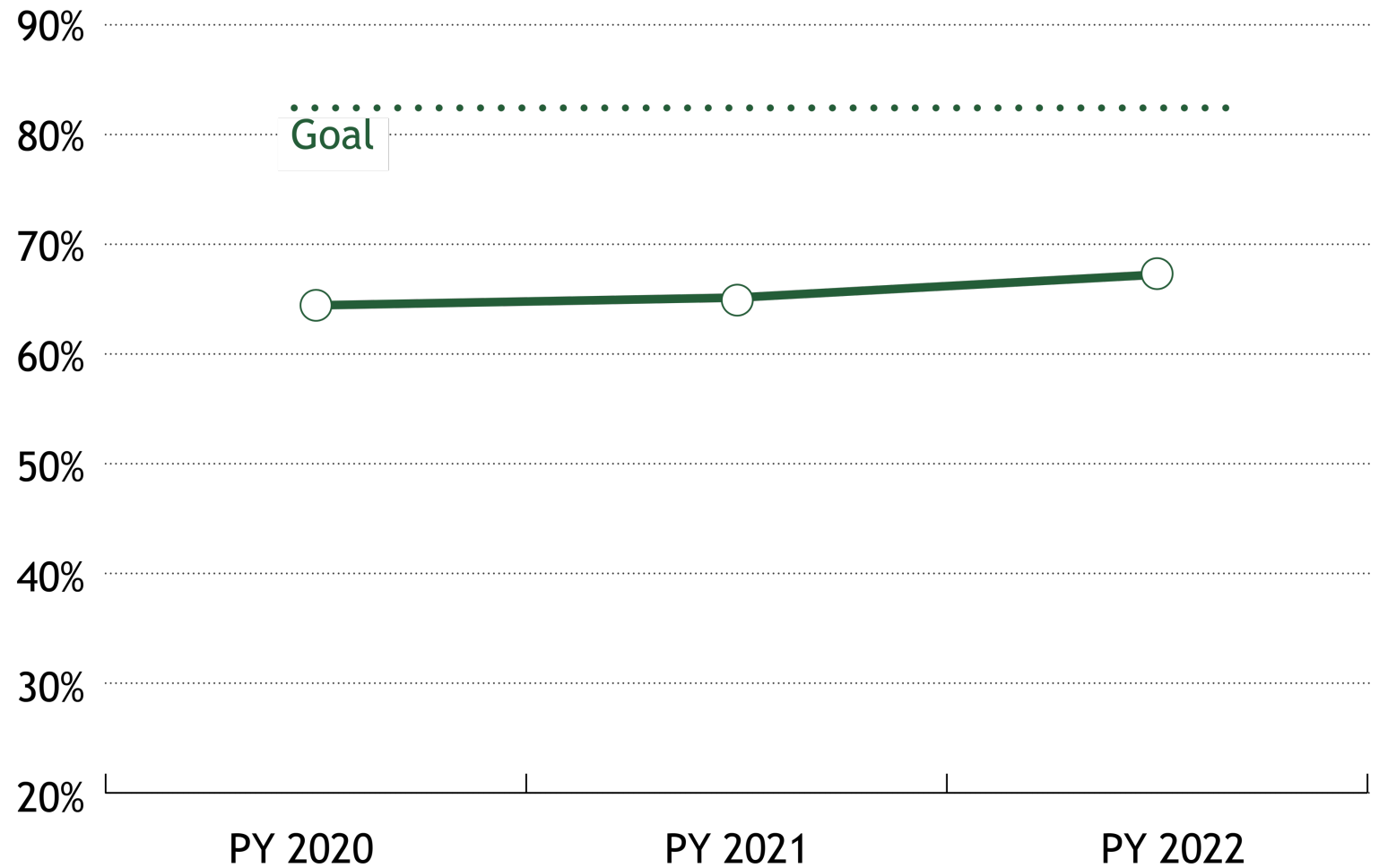
Diabetes Care:  
Hemoglobin  
Testing  
- Administrative





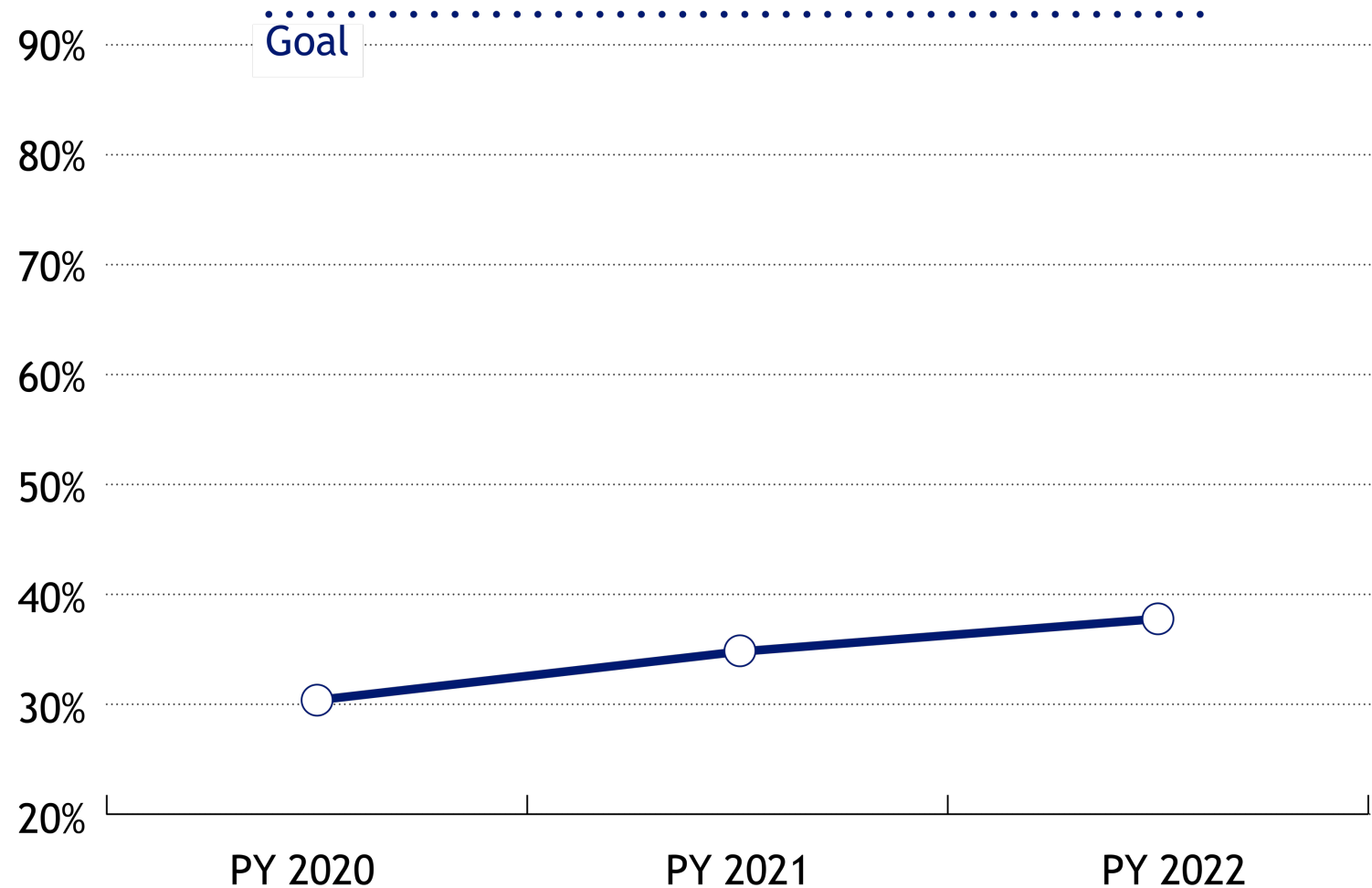
# Average PCMP Performance on Mandatory Measures - Adult

Controlling High Blood Pressure  
- eCQM



# Average PCMP Performance on Mandatory Measures - Adult

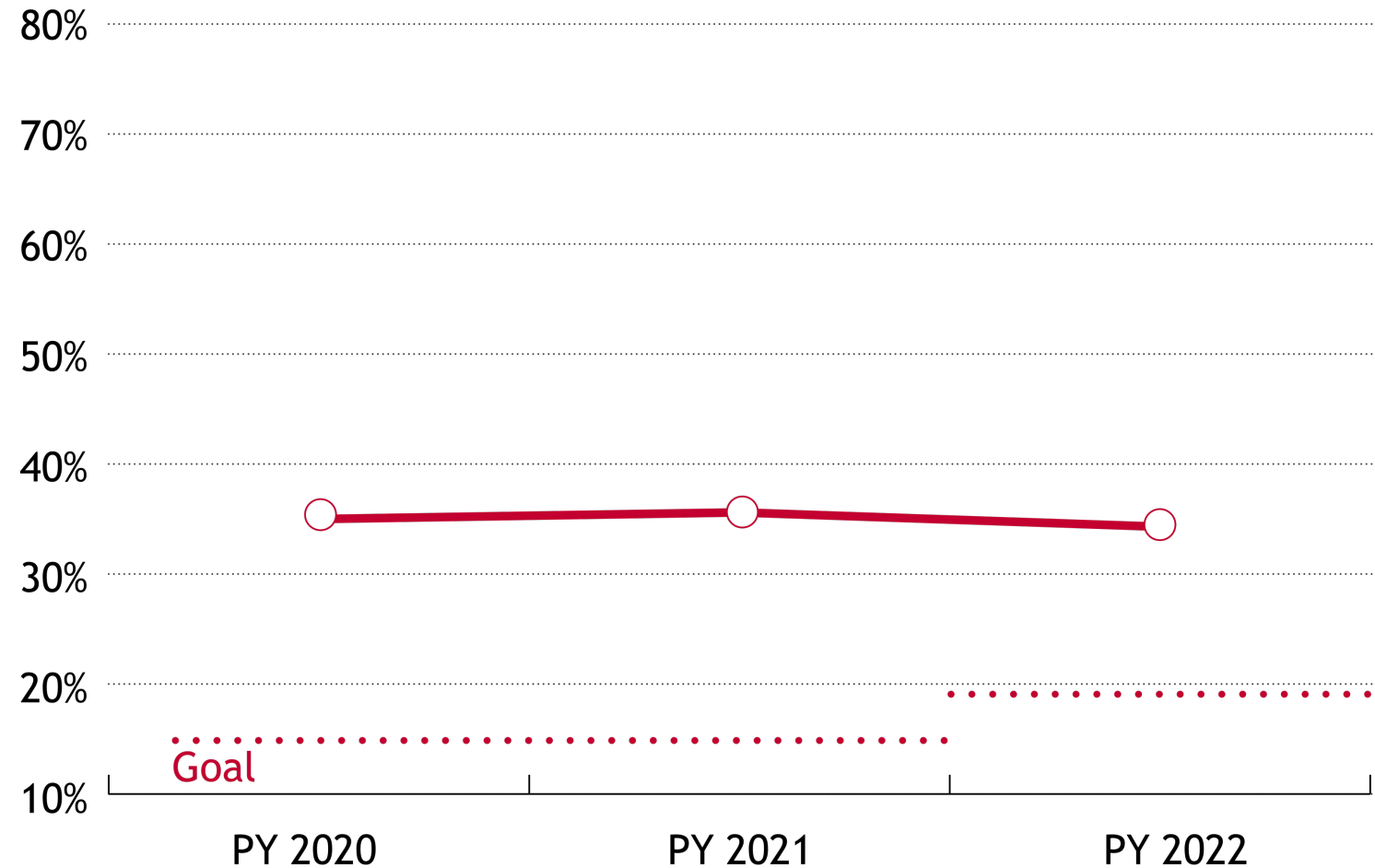
Screening for Depression  
- eCQM



# Average PCMP Performance on Mandatory Measures - Adult

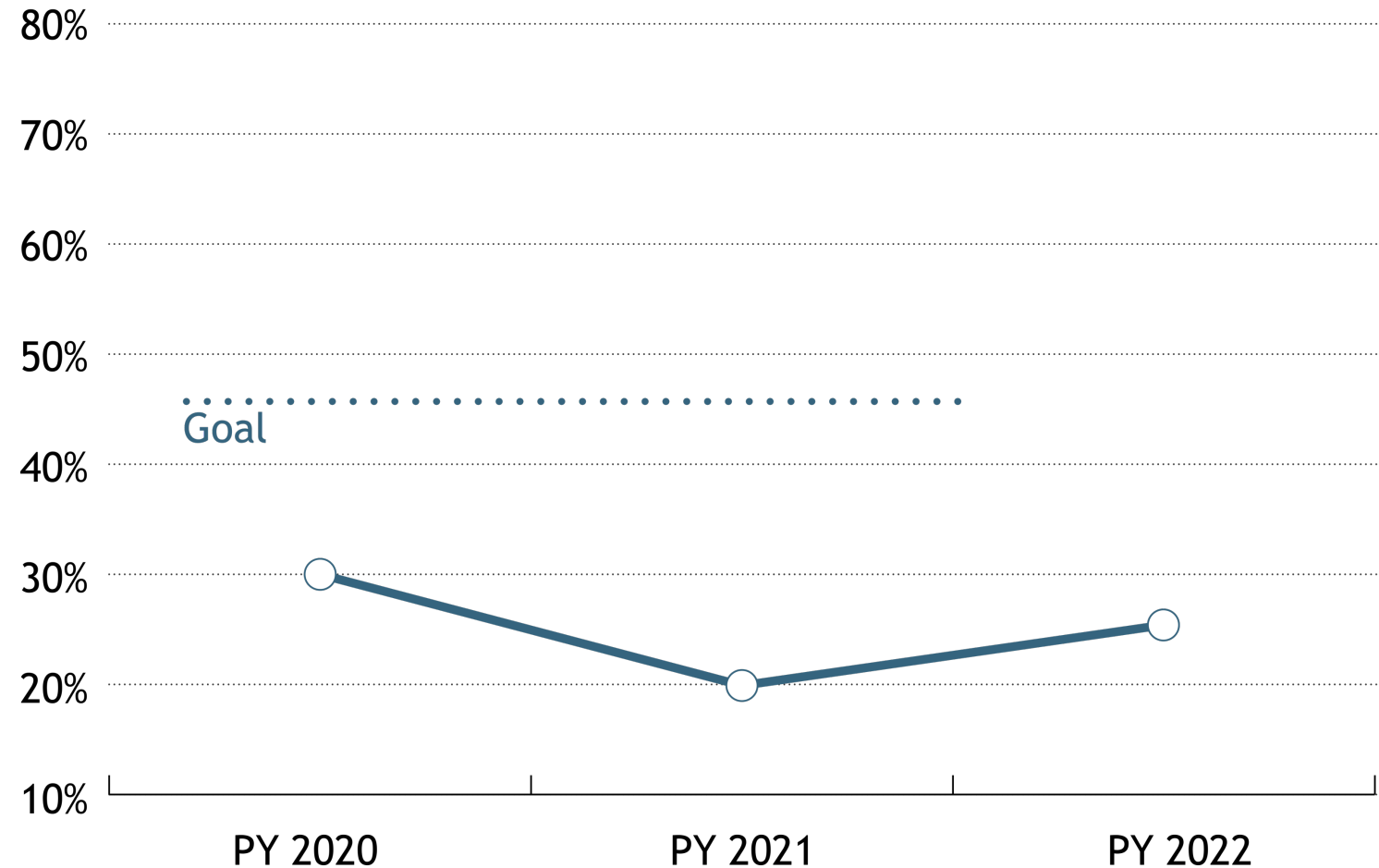
Diabetes:  
Hemoglobin A1c  
Poor Control  
- eCQM

Note: Lower numbers are better in this measure.



# Average PCMP Performance on Mandatory Measures - Adult

Screening for Depression  
- Administrative



# Agenda



**Overview of APM 1**



**Program Performance and Accomplishments**



**APM 1 Legacy**



**Open Discussion and Closing**

# The Future of APM 1

APM 1 is ending, but the **quality model** will serve as the **foundation** for future programs



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# A Glide Path to Future Programs



There will be **no changes** to APM 1 quality model for the upcoming program year.



PCMPs should use this year of APM 1 to continue building a foundation for quality reporting.

# Measure Alignment: National Stewards

APM 1 includes measures in shared focus areas with national programs and non-Medicaid programs:

Medicaid Core Set Focus Area	APM 1	Universal Foundations	CMS Core Measures	DOI <i>(projected)</i>
Primary Care Access and Preventive Care	✓	✓	✓	✓
Care of Acute and Chronic Conditions	✓	✓	✓	✓
Behavioral Health Care	✓	✓	✓	✓
Experience of Care	✓		✓	✓



# Measure Alignment: Medicaid Programs

HCPF programs include measures in shared focus areas:

Medicaid Core Set Focus Area	APM 1	HEP	ACC KPI	ACC BHIP	ACC PP
Primary Care Access and Preventive Care	✓	✓	✓		
Care of Acute and Chronic Conditions	✓	✓			✓
Behavioral Health Care	✓	✓	✓	✓	
Experience of Care	✓				

# Quality Reporting Wins and Challenges

## Wins

- Building the basis for quality reporting

## Challenges

- Reliable reporting for practices with small sample sizes

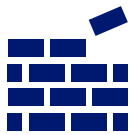
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# Discussion



1. What has worked well with the APM 1 quality measure model that HCPF should consider in future programming?
2. What should change in the quality model in future programs?
3. What else did we learn from APM 1?

# Up Next

## Community Forum #2:

Wednesday, October 11 at 7:30 - 9:00 am

- Topic: Deep dive into quality reporting
- [Registration](#)

## Community Forum #3:

Thursday, October 19 at 7:30 - 9:00 am

- Topic: Deep dive into health equity
- [Registration](#)

# Contact Info

Please submit any written feedback on this meeting no later than Tuesday, October 10 to:

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Quality Health Improvement Specialist  
[Zoe.Pincus@state.co.us](mailto:Zoe.Pincus@state.co.us)

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Program Manager  
[FocusGroups@coloradohealthinstitute.org](mailto:FocusGroups@coloradohealthinstitute.org)

# Thank you!