

Accountable Care Collaborative Alternative Payment Model (APM) 2021 for Primary Care

Program Improvement Advisory Committee
Wednesday, October 21, 2020

Facilitated by the Colorado Health Institute

Potential Updates for 2021 Program Year

In scope

- eCQM, claims, and structural measure set
- Measure goals and point values

Not in scope

- Program eligibility
- Attribution methods
- Program benefits

Stakeholder Engagement

- 2 public listening sessions
- 4 ad hoc workgroup meetings
- Limited provider feedback through a brief survey (family and internal medicine)
- Review with the Provider and Community Experience (P&CE) Subcommittee

Review of Recommendations

Measure Set Recommendations

- 8 claims measures to be added
- 4 claims measures being retired/replaced
- 1 claims measure to be removed

- No changes to eCQM or structural measure list

Measure Set Recommendations

Type	Measure Description	Population	Change	Reason
Claims	Well Visits in the first 30 months of life	Peds	Add	Replacing retired measure
Claims	Child and Adolescent Well Visits	Peds	Add	Replacing retired measure
Claims	Asthma Medication Ratio	All	Add	Replacing retired measure
Claims	Antidepressant Medication Management	Adults	Add	Addressing gaps / Aligns with CMS core measure
Claims	Cervical Cancer Screening	Women	Add	Addressing gaps / Aligns with CMS core measure
Claims	Follow-Up After ED for Chronic Conditions	Adults	Add	Addressing gaps / Aligns with RAE program
Claims / CIIS	Flu Shots, All Ages	All	Add	Added in 2020 due to COVID-19
Claims	Depression Screening and 30-Day Follow-Up After Positive Screen, Age 1+	All	Add	Added in 2020 due to COVID-19 / Aligns with BHIP
Claims	Appropriate Testing for Pharyngitis	Adults/Peds	Remove	Very little room for improvement / Potential to replace with eCQM

New Measures: Workgroup Feedback

- **Claims: Well Child Visits (2 measures)**
 - Recommendation to revisit measure goals
- **Claims: Asthma Medication Ratio**
 - Concern that medication ratio may not align with patient safety/care considerations when multiple inhalers are needed in multiple locations
 - Recommendation to revisit measure goal
 - Recommendation to investigate alternative measures

New Measures: Workgroup Feedback

- **Claims: Cervical Cancer Screening**
 - Measure should be modified to match updated screening recommendations from the American Cancer Society
 - Recommendation to add related eCQM to measure set
- **Claims: Follow-up after ED for Chronic Conditions**
 - Recommendation to review measure description
- **Claims: Flu shots, All Ages**
 - Recommendation to add related eCQM to measure set

New Measures: Workgroup Feedback

- **Claims: Depression Screening and Follow-Up W/in 30 Days of a Positive Depression Screen**
 - Concern that measure description currently lists age 1+
 - Recommendation to modify to an appropriate age where validated screening tools exist, such as age 12+

Measure Removal: Workgroup Feedback

- **Claims: Appropriate Testing for Pharyngitis**
 - Recommendation to add related eCQM to measure set

PY2021 Workgroup Recommendations

Mandatory Selection of Depression Screening Measure: *Not Recommended*

- The Department proposed that practices choose one of two depression screening measures as mandatory:
 - Claims - screening and f/u after positive screen - worth combined 60 points
 - eCQM - screening and follow-up plan - worth 30 points
- Workgroup recommends that claims/eCQM measures should not be mandatory, unless added as an 11th measure, or a structural measure is included as an option

PY2021 Workgroup Recommendations

Structural measure cap: *not recommended*

- Workgroup members recommend that the Department should maintain current COVID-19 program modifications and not reimplement the cap on total points earned from structural measures (180 points) for PY2021

Baseline data year

- Workgroup members recommended using PY2020 as a baseline for PY2021 performance, or if feasible, blending PY2019 and PY2020 as a baseline for some measures

Considerations for PY2022

- eCQM - CMS 50: Closing the Referral Loop: Receipt of Specialist Report
- eCQM - CMS 124: Cervical Cancer Screening
- eCQM - CMS 146: Appropriate Testing for Children with Pharyngitis
- eCQM - CMS 147: Preventive Care and Screening: Influenza Immunization
- Alternatives to Accepting New Patients structural measure (recommendations include provider attesting to accepting new patients through attestation or new measure for percent of patient panel that are Medicaid)
- Access to care (adults and children)

Considerations for PY2022 (continued)

- Asthma control
- Adult/older adult well visit measure
- Continuity of care measure
- Developmental screening measure
- Patient-Centered Primary Care Measure (PCPCM)
- PCP Oral Health Screens & Fluoride Varnish
- Substance use screening for adolescents (SBIRT) and tobacco cessation/nicotine use
- Total cost of care

Considerations for Addressing Racial Disparities

- Explore data that measures what the “baseline” disparity is around access and utilization
- Provide practices with data on specific disparities
- Develop structural measure surrounding race/ethnicity data collection
- Develop structural measure surrounding social determinant of health screening
- Consider use of a measure for comprehensive care plans that include non-medical needs
- Require practices to define how they will contribute to advancing equity/reducing disparity for each measure selected
- Explore measure goals to see how APM measures can be used to advance or hinder health equity in primary care, considering population and impact of meeting an APM measure could disincentivize efforts to reach most at-need communities

Thank you!

Questions or comments:
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