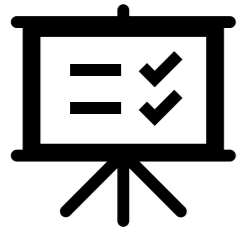


Accountable Care Collaborative Alternative Payment Model (APM) 2021 for Primary Care

P&CE Subcommittee
Thursday, October 8, 2020

Facilitated by the Colorado Health Institute

Today's Agenda



APM Overview



Considerations for APM PY2021



Next Steps in Stakeholder Engagement

APM Goals

1. Provide long-term, sustainable investments into primary care;
2. Reward performance and introduce accountability for outcomes and access to care while granting flexibility of choice to PCMPs, and;
3. Align with other payment reforms across the delivery system.

APM 101: Overview

- The APM is a point-based system.
- Each Primary Care Medical Provider (PCMP) is responsible for **selecting 10 quality measures** to focus on every year.
- PCMPs earn points by **reporting** on the selected measures and **demonstrating** high performance or improvement.
- The number of points earned by each PCMP determines the impact on payment for that practice.

APM 101: Measure Set









- **Structural Measures** - focus on a practice's capacity, systems, and processes to provide high-quality care.
- **Claims Measures** - calculated from a practice's processed Medicaid claims and indicate what a provider does to maintain or improve health, either for healthy people or for those diagnosed with a health care condition.
- **Electronic Clinical Quality Measures (eCQMs)** - calculated directly from a practice's electronic medical record (EMR) and reflect the impact of the health care service or intervention on the health status of patients.

APM 101: Measure Alignment

APM measures are aligned with other state and federal program measures

Focus Area	APM	HTP	ACC KPI	ACC BHIP	QPP
Maternity	✓	✓	✓		✓
Chronic Care Management	✓	✓			✓
Dental Care	✓		✓		
Substance Use	✓	✓		✓	
Mental Health	✓	✓	✓	✓	✓
Wellness	✓	✓	✓		
Hospital Utilization	✓	✓	✓	✓	✓
Specialty Care	✓	✓	✓		✓

APM 101: Quality Score

MEASURE TYPE	MEASURE DESCRIPTION	POSSIBLE POINTS	PROGRESS TOWARD GOAL	RESULT
eCQM	Diabetes Poor A1C Control	50	 100%	50
eCQM	Controlling High Blood Pressure	50	 100%	50
eCQM	Screening for Clinical Depression and Follow-Up Plan	30	 50%	15
Claims	Adolescent Immunizations	50	 30%	15
Claims	Chlamydia Screening	10	 100%	10
Claims	Colorectal Cancer Screening	30	 66%	20
Claims	Adult BMI	20	0%	0
Structural	Patient Satisfaction	50	 100%	50
Structural	Quality Improvement	10	 100%	10
Structural	Accepting New Patients	50	0%	0

0%
PAYMENT
REDUCTION

TOTAL POINTS POSSIBLE **350** TOTAL POINTS EARNED **220**

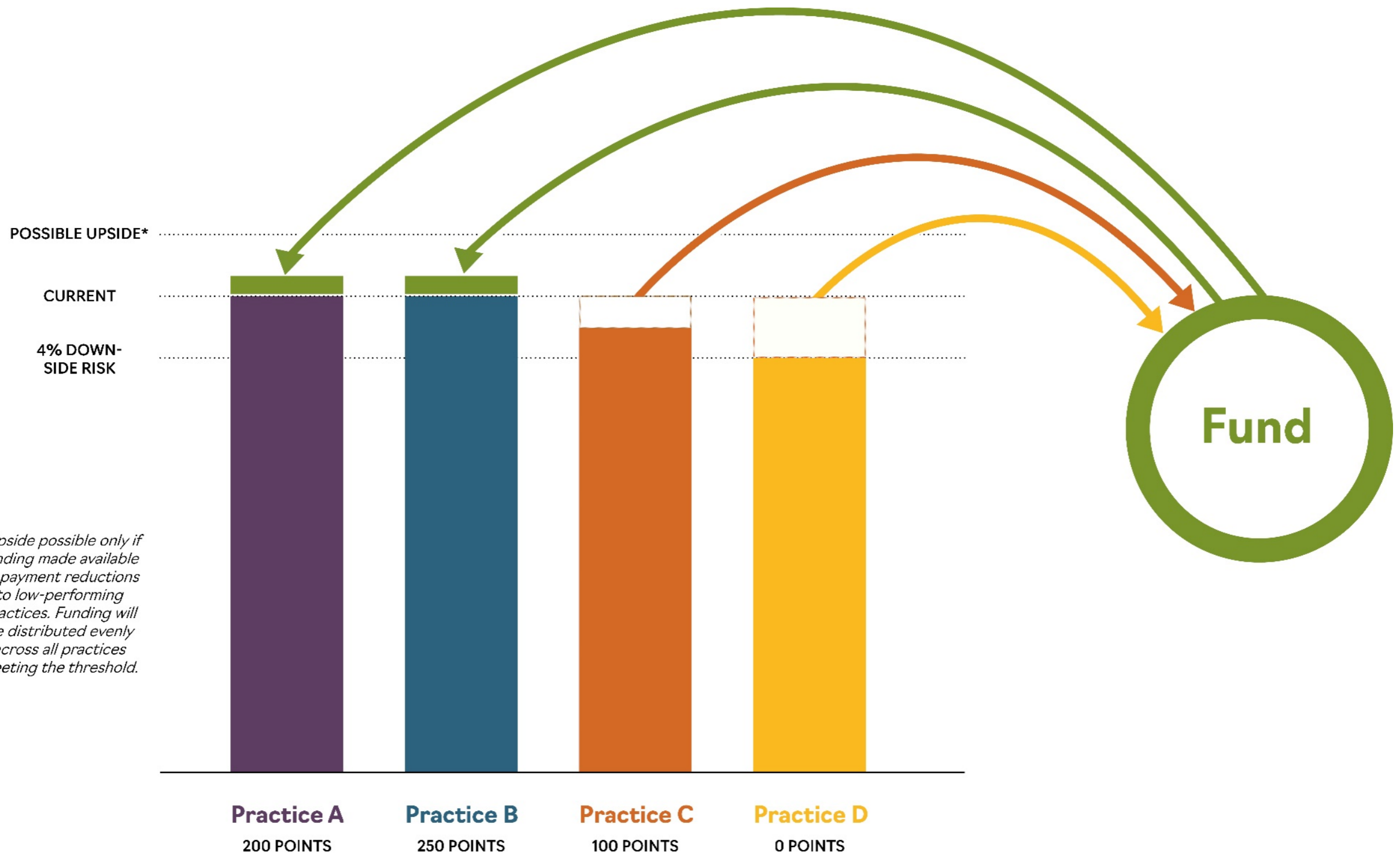
APM 101: Payment Model

PCMPs that achieve an APM Quality Score of at least 200 points will receive the maximum available payment rates.

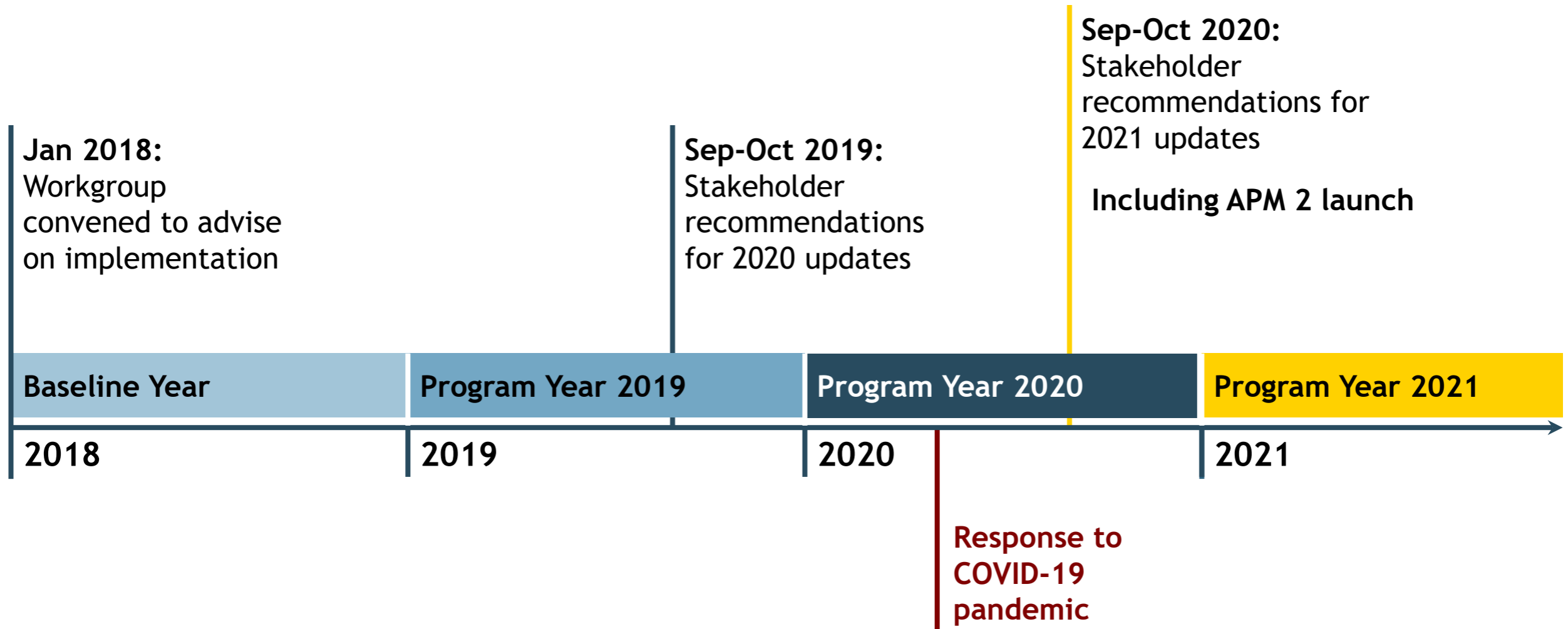
Practices that achieve an APM Quality Score of less than 200 points will receive lower payments.

APM Quality Score Range	Payment Reduction %
0 to 50	3% - 4%
51 to 100	2% - < 3%
101 to 150	1% - < 2%
151 to 200	0% - < 1%

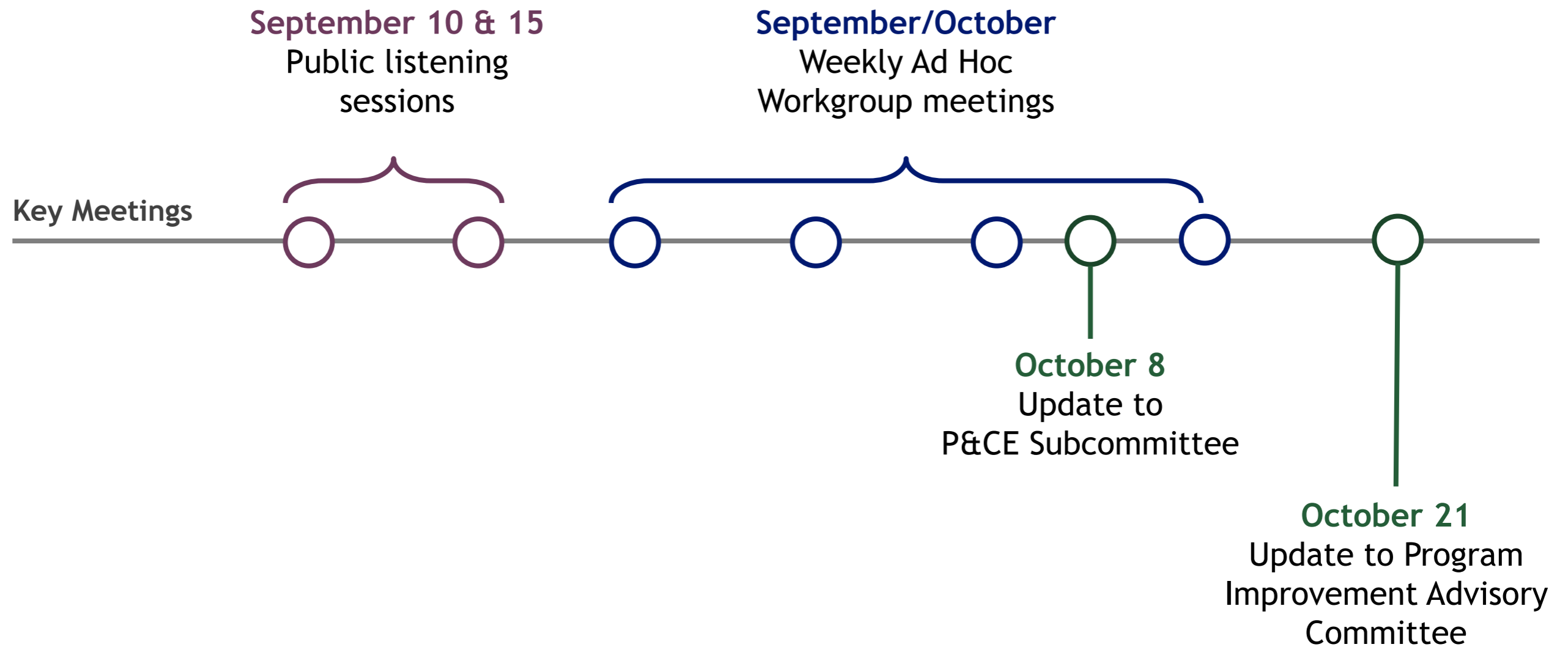
APM 101: Payment Model



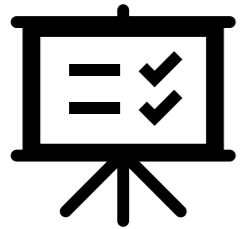
Annual Updates to the Program



Stakeholder Engagement Timeline



Today's Agenda



APM Overview



Considerations for APM PY2021



Next Steps

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

Measure Set Updates: Preliminary 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/ Replace	Very little room for improvement / Potential to replace with eCQM

Measure Set Updates: Additional Considerations

- Maintain 2020 program modification to not cap points that practices can earn from structural measures
- Adjust practice baseline statistics and/or 2021 goals to account for the impact of COVID-19
- Address racial disparities in access by considering additional measures and reviewing measure goals for equity concerns
- Research and develop measures during calendar year 2021 to consider for the 2022 program year

Public Listening Sessions: Considerations for Addressing Racial Disparities

- Developing structural measure surrounding race/ethnicity data collection
- Developing structural measure surrounding social determinant of health screening
- Requiring practices to define how they will contribute to advancing equity/reducing disparity for each measure selected - other payment programs are considering this method
- Addressing access as a RAE KPI
- 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

Additional considerations?

Measure Set Update: Asthma

Type	Measure Description	Population	Rationale
Claims	Asthma Medication Ratio	All	Replaces retired HEDIS measure, “Medication management for people with asthma”

- The Department is looking to align this measure with existing quality programs
- Stakeholders expressed concern that the medication ratio does not align with patient safety and care considerations, when multiple inhalers are needed for different locations

Are there additional concerns with including this measure or alternative suggestions?

Measure Set Update: Depression

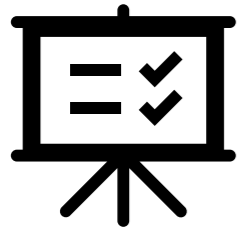
Type	Measure Description	Population	Rationale
Claims	Depression Screening	All	Added in 2020 due to COVID-19 concerns and aligns with Behavioral Health Incentive Program
Claims	Follow-up within 30 Days of a Positive Depression Screen	All	Added in 2020 due to COVID-19 concerns and aligns with Behavioral Health Incentive Program

Stakeholders expressed:

- Concern with use of claims data for measuring depression screening
 - Suggestion to include eCQM as an option
- Concern that validated depression screening measures do not exist for ages 1-8
 - Suggestion to update the population to an appropriate age where a validated screening tool exists, such as 12+

Are there additional concerns with including these measures?

Today's Agenda



APM Overview



Considerations for APM PY2021



Next Steps for Stakeholder Engagement

Next Steps

- Final APM Ad Hoc Workgroup meeting will take place next Tuesday, October 13
 - Meetings are open to the public; for more information: <https://www.colorado.gov/pacific/hcpf/primary-care-payment-reform-3>
- CHI will be finalizing Workgroup recommendations for the Department in the next few weeks

Thank you!

Accepting written feedback at
focusgroups@coloradohealthinstitute.org
through Monday, October 12