

Will Medicare Join State Multi-Payer Medical Home Initiatives?



A conversation with states regarding
Medicare's proposed Advanced Primary
Care demonstration

December 1, 2009

Mary Takach, MPH, RN, Policy Specialist, NASHP

Goals of today's webcast

1. Describe several multi-payer medical home initiatives
2. Compare these initiatives vs. criteria proposed in Medicare's Advanced Primary Care (APC) demonstration
3. Encourage states to provide feedback to CMS to inform the RFP development:
mapcpdemo@cms.hhs.gov
4. Give early developers of multi-payer medical home initiatives info on lessons learned from leader states



- For more info on medical homes:
www.nashp.org
www.pcpcc.net
- Webcast is sponsored by
The Commonwealth
Fund

State multi-payer medical home initiatives

Vary in design...



...but have common themes.



The absence of Medicare at a multi-payer table...

- Limits ability to spread costs for practice transformation
- Limits payer participation
- Limits provider interest



JAMES H. DOUGLAS
Governor



State of Vermont
OFFICE OF THE GOVERNOR

April 23, 2009

The Honorable Kathleen Sibelius
U.S. Department of Health and Human Services
200 Independence Avenue, S.W.
Washington, DC 20201

Dear Secretary Designate Sibelius:

I am writing to request your assistance and support for medical reform efforts taking place within my state and across the New England region. Each of the states' programs encompasses a fundamental restructuring of the delivery system with a focus on health maintenance, prevention, control of chronic disease, and integration of public health with care delivery. These efforts cannot be expanded without the participation of the federal government. You will be hearing from other New England governors on this



STATE OF MAINE
OFFICE OF THE GOVERNOR
1 STATE HOUSE STATION
AUGUSTA, MAINE
04333-0001

JOHN ELIAS BALDACCI
GOVERNOR

May 26, 2009

The Honorable Kathleen Sibelius, Secretary
U.S. Dept. of Health and Human Services
200 Independence Ave., SW
Washington, DC 20201


Dear Secretary Sibelius:

Congratulations on your recent appointment and confirmation. Maine has been actively engaged in health reform and we eagerly anticipate working with you as you advance national health reform.

I am writing today to request your help with medical reform efforts underway in Maine and across the New England region. Each of our states is engaged in a fundamental restructuring of the delivery system, focusing on health maintenance, prevention, control of chronic disease, and



State of Rhode Island and Providence Plantations
State House
Providence, Rhode Island 02903-1196
401-222-2080

Donald L. Carcieri
Governor

5 May 2009

Kathleen Sibelius
Secretary
United States Department of Health
and Human Services
200 Independence Avenue, S.W.
Washington, DC 20201

Dear Secretary Sibelius:

I am writing to request your assistance and support for medical reform efforts taking place within my state and across the New England region. Each of the States' programs encom



OFFICE OF THE GOVERNOR
COMMONWEALTH OF MASSACHUSETTS
STATE HOUSE • BOSTON, MA 02133
(617) 725-4000

DEVAL L. PATRICK
GOVERNOR

TIMOTHY P. MURRAY
LIEUTENANT GOVERNOR

June 15, 2009

Kathleen Sibelius, Secretary
The U.S. Department of Health and Human Services
200 Independence Avenue, S.W.
Washington, D.C. 20201

Dear Secretary Sibelius:

I am writing to request your assistance and support for health care reform efforts taking place within my state and across the New England region. Each of the New England States have joined together to share



JOHN H. LYNCH
Governor

State of New Hampshire
OFFICE OF THE GOVERNOR
107 North Main Street, State House - Rm 208
Concord, New Hampshire 03301
Telephone (603) 271-2121
www.nh.gov/governor
governorlynch@nh.gov

May 11, 2009

Kathleen Sibelius
Secretary of Health and Human Services
The U.S. Department of Health and Human Services
200 Independence Avenue, S.W.
Washington, D.C. 20201

Dear Secretary Sibelius:

New Hampshire and the other New England states are collaborating on efforts to fundamentally restructure our health care delivery systems to focus on health maintenance, prevention, control of chronic disease and integrating public health with care delivery. These efforts are essential to improve the health of our citizens and to control the growth of costs in the future. Our efforts also dovetail with President Obama's stated health goals.

To expand upon these efforts, we need the participation of our federal partners and other New England Governors in seeking your assistance in this matter. We have the following requests:

1) For Medicare to fully participate as a payer in Region 1 multi-insurer program

Newsroom
News Releases
Speeches & Op-eds
Testimony
Reports
Freedom of Information Act (FOIA)
Photo/Image Gallery
E-mail Updates/RSS Feeds
Contacts

News Release

FOR IMMEDIATE RELEASE
Wednesday, September 16, 2009

Contact: HHS Press Office
(202) 690-6343

Secretary Sebelius Announces Medicare to Join State-Based Healthcare Delivery System Reform Initiatives

Health and Human Services Secretary Kathleen Sebelius, along with Vermont Governor Jim Douglas and Director of the White House Office of Health Reform Nancy-Ann DeParle today announced an initiative that will allow Medicare to join Medicaid, and private insurers in state-based efforts to improve the way health care is delivered. Innovative models of delivering primary care around the country are examples of the types of programs that will be part of the President's health reform plan. These are models that improve care for patients, give primary care providers better information about their patients and achieve greater value for the health dollars spent.

The new demonstration will build on a model being tested in Vermont. Under the Vermont model, private insurers work in cooperation with Medicaid to set uniform standards for "Advanced Primary Care (APC) models" also known as medical homes. These models provide incentives for doctors to spend more time with their patients and offer better coordinated higher-quality medical care.

"These demonstrations will strengthen our health care system and allow public and private providers to better work together," said Sebelius. "When Medicare, Medicaid and private insurance companies coordinate their efforts, we can improve the quality of care for Medicare beneficiaries. As we have seen in Vermont, improved efficiencies in the system mean doctors can spend more time with their patients, provide high quality care and better coordinate that care with other medical professionals.

"The Medicare pilot program announced today will help states like Vermont achieve our vision of high quality, affordable health care for all our residents," said Douglas. "This is something we had been pushing for in Vermont for quite some time and I'm thrilled that Secretary Sebelius and her team have made it happen."

In Advanced Primary Care models, physicians are given supplemental payments for achieving nationally-recognized

What we know about Medicare's APC plans...

- Medicare will join established state-led multi-payer initiatives
- Beneficiaries will be “affiliated” with participating practices
- The state will ...
 - establish administrative structure for multi-payer initiative
 - support practice/quality improvement efforts
 - administer Medicare payments to providers / support organization(s)
- CMS will ...
 - continue to pay for otherwise covered services
 - participate as payer for Medicare beneficiaries
 - contribute to multi-payer data systems
 - independently monitor / evaluate impact on Medicare program

What we know...

- Basic eligibility requirements
 - Applicant is a state conducting a multi-payer reform initiative
 - State program already underway
 - The central focus on “advanced primary care practice”
 - Use of community resources to support “APC” practices
 - Integration with state wellness/disease prevention efforts

What we know...

- Requirements for selection/award
 - Substantial participation by Medicaid and private payers
 - Substantial support by primary care physicians
 - Rigorous qualification of “advanced primary care practices”
 - Mechanism to integrate community-based resources
 - Prospective assurance of budget neutrality
 - Administrative structure/capacity