The Rhode Island Patient Centered Medical Home All-Payer Initiative: Evolving Payment Model

Deidre S. Gifford MD, MPH
Medical Director, RI Executive Office of Health and Human Services
Debra Hurwitz, MBA, BSN, RN
Project Co-Director, CSI Rhode Island

NASHP Webcast: Evolving Medical Home Payment Models to Better Support Triple Aim Goals
May 24, 2012
Program Overview

- Began in 2006 with grant from CHCS to form multi-stakeholder collaboration; convened by Office of Health Insurance Commissioner

- Pilot began in Oct. 2008, with 5 sites; expanded to 13 sites in April 2010; joined Multi-payer Advanced Primary Care Practice (MAPCP) July 2011

- Collaboration with Beacon Community program Jan. 2011 – support for data/evaluation and practice training

- All-payer participation, including self-funded
Payment Strategy

- Contract is uniform across all payers
- Contract has evolved since program began to reflect increased sophistication of PCMHs and payers
- Early contract (Years 1-2) allowed for infrastructure development and practice transformation
- “Second phase” contract (Years 3-4) focuses on advanced PCMH features and achievement of quality and utilization benchmarks
- See this “phased” approach as important strategy for expansion of PCMH statewide
Phase 1 Contract: Plans

- Plan responsibilities:
  - Attribution of patients to practices
  - Existing FFS structure remains in place
  - Pay $3 PMPM for all members
    - No case mix adjustment
  - Provide salary and benefits for Care Managers in practice in addition to PMPM
  - Provide data and feedback on utilization
  - Support project infrastructure
Phase 1 Contract: PCMHs

- Practice responsibilities:
  - Achieve Level 1 NCQA recognition by 9 months into pilot
  - Level 2 NCQA by 18 months
  - Report clinical quality measures from EMR/registry in 3 conditions beginning Q2 of pilot
  - Participate in training collaborative
  - Hire and utilize nurse care manager

- No quality benchmark requirements
- No utilization targets
Phase 2 Contract: Increased PCMH requirements

- Maintain Level 3 NCQA Recognition
- Evening and week-end hours (approved by plans)
- Compacts with specialists
- Adopt and implement hospital discharge best practices
- Meet targets on clinical quality measures
- Measure and achieve high patient satisfaction
- Hospitalization and emergency department (ED) use tied to level of payment
Phase 2: Payment and Targets

- Contract Year 1: $5.50 PMPM
- Contract Year 2: scaled rate based on performance in Contract Year 1
  - $5.00 PMPM if 0-1 Target is met
  - $5.50 PMPM if Target 1 is met along with one other Target (Target 2 or Target 3)
  - $6.00 PMPM if 3 Targets are met
Target Definitions

• Target 1: Utilization Metric
• Target 2: Quality and member satisfaction metric
• Target 3: Process Improvement metric
Utilization Target

- CSI Providers will achieve a five percent (5%) relative reduction in hospital admissions per thousand as compared to similar, non-PCMH providers.

- CSI Providers will achieve ten percent (10%) relative reduction in ED visits per thousand as compared to similar, non-PCMH provider.

- ((or) 1% above target on one and 75% of other target)
Quality Target

- Provider will achieve the target level on three out of the six CSI clinical quality measures

- Provider will conduct member satisfaction survey (PCMH CAHPS)
  - Achieve greater than 80% average “satisfied” or “very satisfied”
Quality Measures

- Diabetes
  - HgB A1c Control
  - BP Control
  - LDL level
- Smokers given cessation intervention
- Depression Screen
Process Target

- Provider’s After Hours Protocol
- Participation in hospital – outpatient transitions best practices
- Compacts with at least 4 different high volume specialists, including at least one hospitalist
- NCM activity reporting
Health Plan Reporting

- Members with multiple ED visits in prior quarter
- Members with multiple hospitalizations in prior quarter
- Notification of hospitalized members
Status

- Year 1 of Phase 2 Contract just completed
- Beacon funds supporting all-payer utilization measurement
- State building all-payer claims data base to support future utilization measurement
- PCMH-CAHPS just completed
- New quality measures (BMI, BP) added
Contact

Deidre Gifford
dgifford@ohhs.ri.gov
401-462-2488