

## Alternative Payment Models: Help is on the Way

Mary Reeves, MD

FMX

## ACTIVITY DISCLAIMER

The material presented here is being made available by the American Academy of Family Physicians for educational purposes only. This material is not intended to represent the only, nor necessarily best, methods or procedures appropriate for the medical situations discussed. Rather, it is intended to present an approach, view, statement, or opinion of the faculty, which may be helpful to others who face similar situations.

The AAFP disclaims any and all liability for injury or other damages resulting to any individual using this material and for all claims that might arise out of the use of the techniques demonstrated therein by such individuals, whether these claims shall be asserted by a physician or any other person. Every effort has been made to ensure the accuracy of the data presented here. Physicians may care to check specific details such as drug doses and contraindications, etc., in standard sources prior to clinical application. This material might contain recommendations/guidelines developed by other organizations. Please note that although these guidelines might be included, this does not necessarily imply the endorsement by the AAFP.

FMX

## DISCLOSURE

It is the policy of the AAFP that all individuals in a position to control content disclose any relationships with commercial interests upon nomination/invitation of participation. Disclosure documents are reviewed for potential conflict of interest (COI), and if identified, conflicts are resolved prior to confirmation of participation. Only those participants who had no conflict of interest or who agreed to an identified resolution process prior to their participation were involved in this CME activity.

All individuals in a position to control content for this activity have indicated they have no relevant financial relationships to disclose.

The content of my material/presentation in this CME activity will not include discussion of unapproved or investigational uses of products or devices.

FMX

## Mary Reeves, MD

Retired Physician; National Faculty, Transforming Clinical Practice Initiative; Comprehensive Primary Care Initiative advisor, First Street Family Health (FSFH), Salida, Colorado.

Dr. Reeves is a graduate of the University of Colorado School of Medicine. She completed her residency at St. Mary's Medical Center in Grand Junction, Colorado. Dr. Reeves spent 22 years in clinical practice at First Street Family Health (FSFH), a four-doctor owned clinic in Salida, Colorado, practicing full-spectrum family medicine. In 2011, the clinic began a practice transformation through the Comprehensive Primary Care Initiative (CPCI), and Dr. Reeves became a practice leader for the Transforming Clinical Practice Initiative (TCPI). She worked on the development of the TCPI Change Package and with the Person and Family Advisory Council on the development of Patient and Family Engagement metrics for TCPI. Dr. Reeves retired from clinical practice in July 2015, but continues to work with FSFH in their transformation efforts. She also serves on Colorado's Multi-Stakeholder Collaborative, which consists of a group of CPCI stakeholders representing payers, providers, patients, employers, and the Centers for Medicare & Medicaid Services.

FMX

## Learning Objectives

Learn about the TCPI and How You Can Benefit from Technical Assistance

1. Utilize the Transforming Clinical Practices Initiative (TCPI) tools such as the driver diagram and change package to meet the program objectives for preparing practices for alternative payment models.
2. Identify the benefits and value of participating in TCPI as a means to position the practice for success in a value-based payment environment.
3. Summarize the relationship between the Practice Transformation Networks (PTNs) and Support and Alignment Networks (SANS).
4. Utilize the resources available to select a PTN that meets the needs of his or her practice.

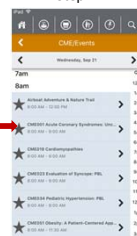
FMX

## Audience Engagement System

Step 1



Step 2



Step 3



FMX



## Who Cannot Participate?

- Medicare Shared Savings Program
- Pioneer ACO Program
- Next Generation ACO Model
- Multi-Payer Advanced Primary Care Practice
- Comprehensive Primary Care Initiative (CPCi)
- Comprehensive Primary Care + (CPC+)

FMX

## Then and Now

How can I best help this patient?

What's my MIPS score?  
How's my quality rating?  
What's she going to say on the patient survey?  
How many boxes have I checked so far?



FMX

## It All Started With HHS & CMS



- The Triple/Quadruple Aims
- CMS goals for payment for value
- MACRA law -> now the Quality Payment Program

FMX

## Better Care, Smarter Spending, Healthier People

Incentives	Care Delivery	Information
<ul style="list-style-type: none"> <li>• Promote value-based payment systems</li> <li>• Test new alternative payment models</li> <li>• Increase linkage of Medicaid, Medicare FFS, and other payment to value</li> <li>• Bring proven payment models to scale</li> </ul>	<ul style="list-style-type: none"> <li>• Encourage the integration and coordination of services</li> <li>• Improvement population health</li> <li>• Promote patient engagement through shared decision making</li> </ul>	<ul style="list-style-type: none"> <li>• Create transparency on cost and quality information</li> <li>• Bring electronic health information to the point of care for meaningful use</li> </ul>

FMX

## And what about JOY?

### REFLECTION

From Triple to Quadruple Aim: Care of the Patient Requires Care of the Provider

Thomas Bodenheimer, MD<sup>1</sup>  
Christine Sinsky, MD<sup>2</sup>

<sup>1</sup>Center for Excellence in Primary Care, Department of Family and Community Medicine, University of California San Francisco, San Francisco, California

<sup>2</sup>Medical Associates Clinic and Health Plan, Dubuque, Iowa

<sup>3</sup>American Medical Association, Chicago, Illinois

### ABSTRACT

The Triple Aim—enhancing patient experience, improving population health, and reducing costs—is widely accepted as a compass to optimize health system performance. Yet physicians and other members of the health care workforce report widespread burnout and dissatisfaction. Burnout is associated with lower patient satisfaction, reduced health outcomes, and it may increase costs. Burnout thus impairs the Triple Aim. This article recommends that the Triple Aim be expanded to a Quadruple Aim, adding the goal of improving the work life of health care providers, including clinicians and staff.

*Ann Fam Med* 2014;12(5):575-576. doi: 10.1370/afm.1713

Bodenheimer, Thomas, Sinsky MD, Christine. *From Triple to Quadruple Aim: Care of the Patient Requires Care of the Provider*. ANNALS OF FAMILY MEDICINE • WWW.ANNFAMMED.ORG • VOL. 12, NO. 6 • NOVEMBER/DECEMBER 2014

FMX

### Medicare Fee-for-Service

**GOAL 1:** 30%

Medicare payments are tied to quality or value through alternative payment models where the provider is accountable for quality and total cost of care by the end of 2016, and 50% by the end of 2018

**GOAL 2:** 85%

Medicare fee-for-service payments are tied to quality or value by the end of 2016, and 90% by the end of 2018

### NEXT STEPS:

Testing of new models and expansion of existing models will be critical to reaching incentive goals

Creation of a Health Care Payment Learning and Action Network to align incentives between public and private sector players

**STAKEHOLDERS:**  
Consumers | Businesses  
Payers | Providers  
State Partners



FMX

## MACRA Overview

- Passed House 3/26/2015- Senate 4/14/2015
- Signed into Law **4/16/2015**
- Repeals 1997 Sustainable Growth Rate Physician Fee Schedule (PFS) Update
- Changes Medicare PFS Payment
  - Merit-Based Incentive Payment System (MIPS) – quality, cost/resource use, clinical improvement activities, and meaningful use
  - Incentives for participation in Alternate Payment Model (APM)

FMX

## MIPS: First Step to a Fresh Start



Quality

Resource Use

Advancing Care Information (ACI)

Clinical Practice Improvement Activities (CPIA)

FMX

## What is an Alternative Payment Model (APM)?

Incentivizes quality and value

As defined by MACRA, APMs include:

- ✓ **CMS Innovation Center model** (under section 1115A, other than a Health Care Innovation Award)
- ✓ **MSSP** (Medicare Shared Savings Program)
- ✓ **Demonstration** under the Health Care Quality Demonstration Program
- ✓ **Demonstration** required by federal law

FMX

## Polling Question #3

On a scale of 1 to 5, how confident are you that you are prepared for value-based payment?

- 1
- 2
- 3
- 4
- 5

FMX

## TCPI Nationwide Aims

1. Support more than 140,000 physicians in their practice transformation work
2. Build the evidence based on practice transformation so that effective solutions can be scaled
3. Improve health outcomes for millions of Medicare, Medicaid and CHIP beneficiaries and other patients
4. Reduce unnecessary hospitalizations for 5 million patients
5. Sustain efficient care delivery by reducing unnecessary testing and procedures
6. Generate \$1 to \$4 billion in savings to the federal government and commercial payers
7. Transition 75% of practices completing the program to participate in Alternative Payment Models

FMX

## MACRA makes TCPi a Good Idea!

- The QPP is a major change in compensation with significant “carrots and sticks” What you don’t know, and don’t prepare for, can hurt you. **PREPARE NOW!**
- Use federal funds to get ahead of the curve on this major change
- Improve the experience of care for patients, providers and care teams
- Demonstrate healthcare value: high quality with lower cost per patient

FMX

## TCPI is Directly Aligned with Quality Payment Program

- Practice Transformation Networks (PTNs), Support and Alignment Networks (SANs), and Quality Improvement Organizations are connected directly to CMS and the latest info on QPP implementation
- TCPI will partially “count” towards the CPIA, proposed rule
- Clinicians who graduate from TCPI and choose to enter into Advanced APMs will benefit from the bonuses of QPP
- **RELAX** The CMS TCPI Team, PTNs, SANs and QIOs all are working to ensure that TCPI is a powerful support to TCPI clinicians in meeting the requirements of QPP

FMX

## TCPI Goals

- Partner with clinicians to create clinician pathways that achieve clinical health improvement and effectiveness with patients.
- Support transformation of business operations and the **return of joy to the practice of medicine.**

FMX

Sustainability =

Payment Reform +

FFS    **CPCi**    FFS + VBP    **CPC+**    MACRA

Transforming Clinical Practice initiative

Joy

Doing what you love as part of a highly functioning care team, in collaboration with patients and community resulting in a positive impact

FMX

## A Short Story of Transformation



FMX

## Why Transform My Practice

- Better care for patients – care management at transitions and of complex patients, PFE
- Joy in practice – team based care, PFE, the way **you** want to practice
- Getting paid for the way **you** practice – providing value, not running a treadmill
- Getting ready for VBP and MACRA



FMX

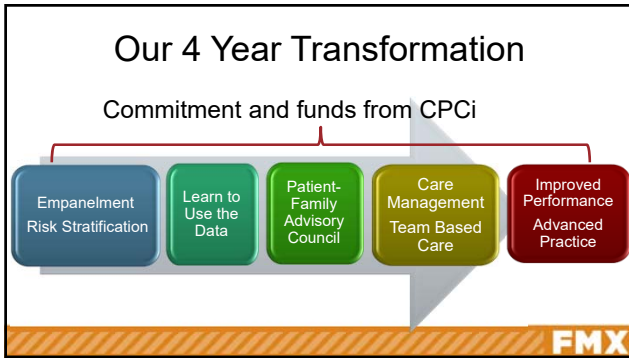
## Our 4 Year Journey

“Working hard for something we don’t care about is called **Stress**. Working hard for something we love is called **Passion**.”



- Simon Sinek

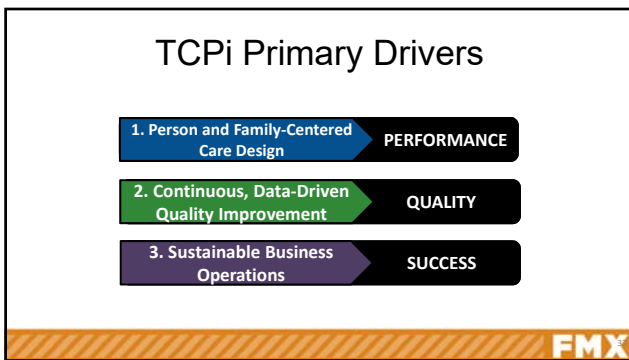
FMX



### Objective #2

Utilize the Transforming Clinical Practices Initiative (TCPI) tools such as the driver diagram and change package to meet the program objectives for preparing practices for alternative payment models.

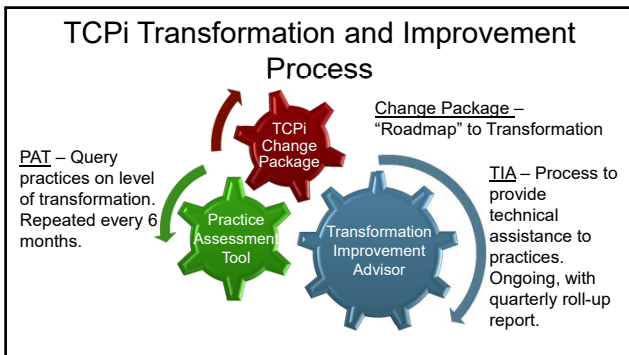
FMX



### Driver Diagram

Primary Drivers	Secondary Drivers	
Patient & Family-Centered Care Design	1.1. Patient & family engagement 1.2. Team-based relationships 1.3. Population management 1.4. Practice as a community partner	1.5. Coordinated care delivery 1.6. Organized, evidence based care 1.7. Enhanced Access
Continuous Data-Driven Quality Improvement	2.1. Engaged & committed leadership 2.2. Quality improvement strategy supporting a culture of quality & safety	2.3. Transparent measurement & monitoring 2.4. Optimal use of HIT
Sustainable Business Operations	3.1. Strategic use of practice revenue 3.2. Staff vitality & joy in work	3.3. Capability to analyze & document value 3.4. Efficiency of operation

FMX



### Transition to Value-Based Payment

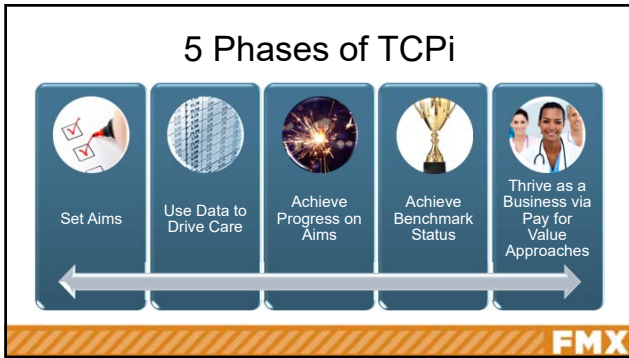
Transformed Practice

- ✧ Achieve High Performance
- ✧ Reduce Utilization
- ✧ Scale Efforts
- ✧ Savings

*is Preparation for VBP Models*

FMX





### Change Concepts

“General notions or approaches that have been found useful in developing specific ideas for change that lead to improvement”

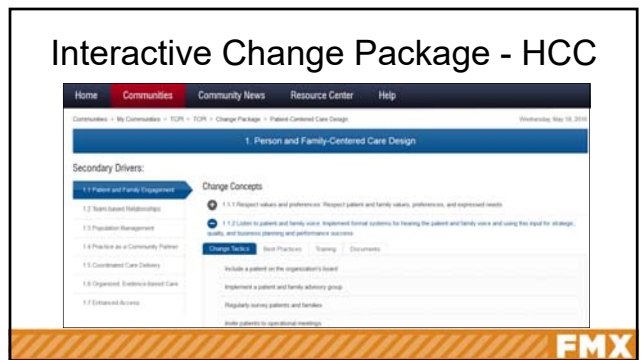
Change Concept 1.1.3 - Collaborate with patients and families: Actively engage patients and families to collaborate in goal setting, decision making, health-related behaviors and self- management

**FMX**

### Change Tactics Have “Worked” in Someone’s Practice

- Actionable
- Specific
- Customizable
- Proven effective

**FMX**



### Polling Question #4

What is your strategy for preparing for value-based payment?

- a. I’m in an ACO
- b. Participating in CPC+ or other APM
- c. Not sure where to start
- d. I’m winging it
- e. Considering TCPI

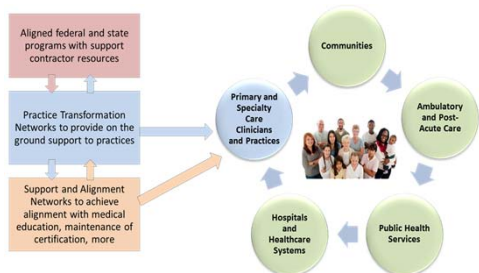
**FMX**

### Objective #3

Summarize the relationship between the Practice Transformation Networks (PTNs) and Support and Alignment Networks (SANs).

**FMX**

## Practice Transformation in Action



## The Role of the SANs

- Achieve program AIMS
- Align with Aims & Activities:
  - Continuing Medical Education
  - Maintenance of Certification
  - Registries
  - Journals, Newsletters, Messaging to Members
  - Professional Standards & Requirements
  - Annual Meetings
  - Awards Programs
- Recruit and Retain Participants
- Support Practices with Person & Family Engagement

FMX

## Support and Alignment Networks (SANs)

- American College of Emergency Physicians
- American College of Physicians, Inc.
- American College of Radiology
- American Medical Association
- American Psychiatric Association
- HCD International, Inc.
- National Nursing Centers Consortium
- Network for Regional Healthcare Improvement
- Patient Centered Primary Care Foundation
- **The American Board of Family Medicine, Inc.**

FMX

## PRIME SAN

- Recruit family physicians;
- **Develop a member interest group (MIG); (Meeting Thursday @ 2:00)**
- Provide maintenance of certification;
- **Offer a TCPI-focused CME sessions at FMX;**
- ABFM's Practice Performance Coaching Guide;
- Disseminate learning through journals, webpage, etc.;
- Develop Maintenance of Certification (MOC) modules; and
- Offer the PRIME Registry ([www.theabfm.org](http://www.theabfm.org)) to the first 6,000 ABFM board-certified family physicians

FMX

## Practice Transformation Networks (PTNs)

- |  |  |   |
|--|--|---|
| <ul style="list-style-type: none"> <li>• Arizona Health-e Connection</li> <li>• Baptist Health System, Inc.</li> <li>• Children's Hospital of Orange County</li> <li>• Colorado Department of Health Care Policy &amp; Financing,</li> <li>• Community Care of North Carolina, Inc.</li> <li>• Community Health Center Association of Connecticut, Inc.</li> <li>• Consortium for Southeastern Hypertension Control</li> </ul> | <ul style="list-style-type: none"> <li>• Health Partners Delmarva, LLC</li> <li>• Iowa Healthcare Collaborative</li> <li>• Local Initiative Health Authority of Los Angeles County</li> <li>• Maine Quality Counts</li> <li>• Mayo Clinic</li> <li>• National Council for Behavioral Health</li> </ul> | <ul style="list-style-type: none"> <li>• New Jersey Innovation Institute</li> <li>• New Jersey Medical &amp; Health Associates dba CarePoint Health</li> <li>• New York eHealth Collaborative</li> <li>• New York University School of Medicine</li> <li>• Pacific Business Group on Health</li> <li>• PeaceHealth Ketchikan Medical Center</li> <li>• Rhode Island Quality Institute</li> <li>• The Trustees of Indiana University</li> <li>• VHA/UHC Alliance Newco, Inc.</li> <li>• University of Massachusetts Medical School</li> <li>• University of Washington</li> <li>• Vanderbilt University Medical Center</li> <li>• VHQC</li> <li>• VHS Valley Health Systems, LLC</li> <li>• Washington State Department of Health</li> </ul> |
|--|--|---|

FMX

## The Role of the PTNs

- Achieve program AIMS
- Recruit clinicians/practices and build strategic partnerships
- Lead practices in continuous improvement and culture change
- Facilitate improved clinical practice management
- Utilize quality measures and data for improvement

FMX



## PTN Offerings


- Communities of learning through in-person collaborative
- On-site practice transformation coaches
- Informatics expertise to expand data collection and analysis
- Online educational content
- Leadership and professional development

FMX

## Objective #4

- Utilize the resources available to select a PTN that meets the needs of his or her practice.

FMX



• [aafp.org/tcpi](http://aafp.org/tcpi) – an interactive map to help you find your PTN

• Email [tcpi@aafp.org](mailto:tcpi@aafp.org)

• HCC - Sign up at [healthcarecommunities.org](http://healthcarecommunities.org)

FMX

## Questions

FMX

## Contact Information

- email: [marysalida@gmail.com](mailto:marysalida@gmail.com)
- twitter: @MarySalida
- cell: (719) 221-1552
- active member of the AAFP TCPI MIG

FMX

## Associated Sessions

- “Medicare’s Shift to Value-based Delivery and Payment Models”  
– (Thursday @ 8:00am & Friday @ 1:30pm)
- “Up, Down, Sideways, and Across-Sustainable Leadership in an Ever Changing Environment”  
– (Thursday @ 8:00am)
- “CMS Knows Who Your Patients Are, but Are They Correct?”  
– (Thursday @ 9:15am)

FMX

Interested in More CME on this topic?  
**[aafp.org/fmx-practice-management](http://aafp.org/fmx-practice-management)**

**FMX**