



# Payer Partner Collaboration Roadmap

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Alignment and coordination of payer support is critical to building a foundation of success for CPC+. Similar to the transformation path and key care delivery requirements CMS has identified for practice success within the model, the overall Roadmap for Payer Partner regional collaboration and the individual milestones are integral components of the payment transformation on which CPC+ is based. While the pathways payers may use to achieve the milestones will vary across regions and multi-payer collaborations, they represent important outcomes of collaborative, multi-payer processes necessary for the transformation of primary care envisioned by CMS. One of these important outcomes is reducing the burden of duplicative reporting and other administrative requirements on participating practices in order to allow them the freedom to focus on care transformation.

The milestones below are integrally linked to each other and to the success of multi-payer collaboration. **Certain key pathways within individual milestones that reference the CPC+ Payer Partner MOU (shown in bold) represent core CPC+ program needs.** In addition to working towards the milestones outlined in this Roadmap, payers will be simultaneously conducting start-up activities within their own organizations (such as contracting with CPC+ practices, or navigating purchaser relationships) and pursuing enterprise-specific changes to support CPC+ participation (such as adjusting payment schedules and systems or budgeting for CPC+). This Roadmap does not include or address these simultaneous activities. Payers should use this Roadmap to inform the development of regionally-specific multi-payer processes and to guide the pursuit of successful regional multi-payer primary care transformation in CPC+.

*\*This is a DRAFT document for discussion and feedback from CPC+ payer partners. We have organized this Roadmap into 10 key collaboration milestones. Please provide your feedback on this DRAFT Roadmap during the Payer Summit on September 9<sup>th</sup>. Payer feedback will be carefully considered and incorporated. The final Roadmap will be released in late September for the regional CPC+ payer partner collaborations to use.*

# CPC+ Payer Partner Collaboration Roadmap

## 10 Aligned Milestones





## Milestone 1: Shared Vision of Regional Success *(Maps to Milbank Milestone 1)*

Pathway:	Q4 2016	2017	2018+
Goals:	<p>Identify a shared vision of success for regional primary care transformation.</p> <ul style="list-style-type: none"><li>• Create a vision/mission statement that reflects where the region plans to be at the end of the first year of CPC+, each subsequent year, and at the end of the 5 years. Vision statements are intended to represent the consensus of the CPC+ payers in the region.</li><li>• Vision statements may address how the cost and quality of care will be improved within the region by the work the CPC+ payers will do to align payment, other practice support and expectations, and reduce administrative burden on CPC+ practices.</li></ul>	<p>Refine and/or expand the region's shared vision of success as appropriate following program launch</p>	<p>Refine and/or expand the region's shared vision of success annually</p>
Notes:			



## Milestone 2: Regional Action Plan *(Maps to Milbank Milestone 2)*

Pathway:	Q4 2016	2017	2018+
Goals:	<p>Develop a regional action plan that identifies how the region's CPC+ payers will work together to achieve their vision.</p> <ul style="list-style-type: none"><li>• A regional action plan that identifies the logistics and ground rules of how the payers will work together, including when they will meet, how they will establish priorities, and make decisions that are important to the success of the region's collaboration.</li><li>• Each region should identify resources to support the needs of the multi-payer collaborative process, such as hiring a convener/facilitator to operate its regional payer collaborative, or identifying a location for regular meetings.</li></ul>	<p>Implement the action plan including establishing a meeting schedule for Y1</p> <ul style="list-style-type: none"><li>• If applicable, contract with and onboard neutral convener/facilitator.</li></ul>	<p>Refine action plan, update to sustain multi-payer collaboration for Y2 and beyond</p>
Notes:			



## Milestone 3: CPC+ Payer Learning Agenda

Pathway:	Q4 2016	2017	2018+
<b>Goals:</b>	<p>Establish an approach for continuous learning about the CPC+ model, its outcomes, and practice barriers and successes. Use this to identify priority topics for payer action.</p> <ul style="list-style-type: none"><li>• Consider the opportunity to participate in the LAN PAC* and identify region barriers and strengths to be shared with other regions.</li><li>• Consider opportunities for payers to be involved in regional and/or national practice learning activities, or to spearhead practice learning opportunities where there is an identified need.</li><li>• Participate in payer webinars and conversations with CMS about CPC+ aims and outcomes.</li><li>• Communicate regional learning needs with CMS to strengthen the impact of the CPC+ learning system and curriculum.</li></ul>	Participate in regional and national learning sessions	Ongoing
<b>Notes:</b>			

\*The LAN PAC is the Health Care Payment Learning and Action Network (LAN) Primary Care Payer Action Collaborative (PAC).



## Milestone 4: Alternative Payment Model for Primary Care

Pathway:	Q4 2016	2017	2018+
Goals:	<p>Consider opportunities for the region to streamline non-visit-based financial support for participating practices. (MOU Sec IV.1)</p> <p>Offer practices a <b>Performance-based Incentive Payment (PBIP)</b> in the first year of the model and align with <b>Milestone 6 on Quality Measurement</b>. (MOU Sec IV.2)</p> <ul style="list-style-type: none"><li>• Consider incentives that are measured at the practice level, directly related to CPC+ practice work, and reduce unnecessary cost and utilization</li><li>• Consider how to maximize practice success in the work required to earn the PBIP</li></ul>	<p>Consider opportunities for the region to streamline and align on the hybrid FFS payments to Track 2 practices (MOU Sec IV.3)</p>	<p>Begin paying a Track 2 hybrid FFS payment to Track 2 practices January 1 2018 (MOU Sec IV.3)</p>
Notes:			

Note: Key pathways that reference the CPC+ Payer Partner MOU (shown in bold) represent core CPC+ program needs.



## Milestone 5: Care Delivery

Pathway:	Q4 2016	2017	2018+
Goals:	<p><b>Consider how the payers in your region will support participating practices across the 5 comprehensive primary care functions: 1) Access and Continuity, 2) Care Management, 3) Comprehensiveness and Coordination, 4) Patient and Caregiver Engagement, and 5) Planned Care and Population Health (MOU Sec I)</b></p> <p><b>Review and minimize any additional care delivery transformation requirements in the region that could diminish practice focus on these functions. (MOU Section VII)</b></p>	Ongoing	Assess practice support for the 5 functions and opportunities for improvement.
Notes:			

Note: Key pathways that reference the CPC+ Payer Partner MOU (shown in bold) represent core CPC+ program needs.



## Milestone 6: Data Support to Practices (Maps to Milbank Milestone 4)

Pathway:	Q4 2016	2017	2018+
<b>Goals:</b>	<p><b>Consider how to identify and prioritize ways to align on the delivery of cost, utilization, and quality data for practices, including data analytics. (MOU Sec V)</b></p> <ul style="list-style-type: none"> <li>• Possible areas for alignment and improvement of data delivery include: formatting, frequency, data collection and distribution, unified reporting to practices, incorporation of clinician feedback.</li> <li>• Possible areas for alignment and improvement of data analytics include: obtaining practice feedback on usability, and practice education and assistance on incorporating data feedback into practice-level quality improvement activities</li> </ul>	<p>Determine data aggregation plan for the region, including governance structure and procurement details.</p> <ul style="list-style-type: none"> <li>• Implement enhanced data feedback to practices on measures related to cost, utilization, quality, payment, and attribution.</li> </ul> <p><b>Begin sharing unified or aligned data with practices; OR share planned (to begin in a subsequent year) multi-payer approach for data sharing with CMS by July 1, 2017 (MOU Sec V.1)</b></p>	Ongoing
<b>Notes:</b>			

Note: Key pathways that reference the CPC+ Payer Partner MOU (shown in bold) represent core CPC+ program needs.





## Milestone 7: Quality Measure Alignment *(Maps to Milbank Milestone 3)*

Pathway:	Q4 2016	2017	2018+
Goals:	<p><b>Consider how to align with the CMS CPC+ quality measure set and other common, prioritized regional measures as appropriate, including eCQMs, CAHPS survey measures and the planned Patient Reported Outcome Measure (PROM). (MOU Sec VI.1)</b></p> <ul style="list-style-type: none"><li>• Consider identifying external resources to receive the CMS CPC+ performance data from registries, in order to promote targeted improvement across these measures for all payers.</li><li>• Consider opportunities to maximize practice success in their quality improvement activities</li></ul>	Implement and track progress on alignment of quality measures	Implement and track progress on opportunities to align quality measures and reduce practice burden in your region <ul style="list-style-type: none"><li>• Review any changes to CMS CPC+ quality measure sets for 2018</li></ul>
Notes:			

Note: Key pathways that reference the CPC+ Payer Partner MOU (shown in bold) represent core CPC+ program needs.



## Milestone 8: Attribution Methodology & Administrative Alignment

Pathway:	Q4 2016	2017	2018+
<b>Goals:</b>	<p>Identify opportunities to align attribution methodologies and administration to improve accuracy and timeliness, and to reduce burden on participating practices.</p> <p>Incorporate timelines for implementation of an aligned attribution methodology within the Regional Action Plan</p>	<p>Implement and track progress on opportunities to align attribution methodology and administration</p>	<p>Refine attribution methodologies and administration if necessary</p>
<b>Notes:</b>			



## Milestone 9: Multi-Stakeholder Engagement *(Maps to Milbank Milestone 5)*

Pathway:	Q4 2016	2017	2018+
<b>Goals:</b>	Identify other stakeholders (non-CPC+ payers, providers, associations, foundations etc.) who are important for the success of the multi-payer collaboration within the region and develop a process for communication and engagement as the region deems appropriate.	Ongoing	Include other stakeholders in periodic meetings as part of the region's multi-stakeholder collaboration efforts.
<b>Notes:</b>			



## Milestone 10: Evaluation of Success

Pathway:	Q4 2016	2017	2018+
<b>Goals:</b>	<p>CMS' impact evaluation is broad, but focuses on cost for Medicare FFS (and Medicaid, if data are available) only. Consider opportunities to evaluate the impact on utilization and total cost of care for each payers' own population as well as the region as a whole.</p> <ul style="list-style-type: none"><li>Refer to helpful resources from the Milbank Memorial Fund, including the March 2016 report: "Assessing the Effects of Primary Care Transformation: Emerging Themes and Practical Strategies to Strengthen the Evidence."</li></ul>	Ongoing	Evaluate the success of the model
<b>Notes:</b>			

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