

Maryland All-Payer Model Amendment Webinar Series – Webinar 2

Care Partner Approval Process
October 25, 2016

Webinar Objectives

- ▶ Review:
 - Complex and Chronic Care Improvement Program and Hospital Care Improvement Program
 - Care Redesign Amendment Benefit – Incentives
- ▶ Care partner approval process including:
 - Incentive Payments
 - Outline of process flow
 - Hospital responsibilities
 - Proposed timelines
- ▶ Reminder– upcoming webinars

First Two Care Redesign Programs

Hospital Care Improvement Program (HCIP)

Who?

- Hospitals and providers practicing at hospitals

What?

- Improve inpatient medical and surgical services delivery
- Facilitate effective transitions of care
- Enhance effective delivery of care during acute care events even beyond hospital walls
- Manage inpatient resources efficiently
- Reduce avoidable utilization with a byproduct of reduced cost per acute care event

Tools/Resources

- Comprehensive Medicare data for hospitals
- Financial incentives for providers based on quality and cost performance

Complex and Chronic Care Improvement Program (CCIP)

Who?

- Hospitals and community providers
- High and Rising Risk Patients

What?

- Strengthen ongoing primary care supports for complex and chronic patient
- Reduce avoidable hospital utilization
- Enhance care management through tools such as effective risk stratification, health risk assessments, and patient-driven care plans

Tools/Resources

- Comprehensive Medicare data for hospitals and providers
- Provider access to hospital-funded care management resources and technology
- Provider support for Chronic Care Management infrastructure
- Financial incentives to non-hospital providers

Care Redesign Amendment

- ▶ As stated in Webinar 1, one benefit of the Care Redesign Amendment for Maryland Hospitals will be the potential to align incentives with physician care partners
- ▶ Hospitals may enter into partnerships with their care partners in order to build an infrastructure for better care management
 - These arrangements will be discussed in the participation agreements

Incentive Payments

Any incentive payments that *may* be included in the care redesign programs:

- ▶ May only be issued to entities that: (1) have signed Participant Agreements or entered into a Care Partner Arrangement, and (2) are vetted through CMS.
- ▶ May not be conditioned directly on the volume or value of referrals.
- ▶ May not induce providers to limit or reduce Medically Necessary Services to beneficiaries.

Vetting of Care Partners

- The HCIP and CCIP programs allow hospitals and their care partners to create arrangements which allow for better care management.
- All CMMI models require that participants are appropriately vetted through
 - Law enforcement/ fraud and abuse screening
 - Provider Enrollment – PECOS

Hospital Responsibility

- ▶ Hospitals will provide to CMS a list of providers with whom they intend to enter into a care partner relationship quarterly
 - Anticipate this list to be due before the beginning of the applicable quarter
- ▶ Lists will be:
 - Submitted using approved template
 - By provider type
 - Screened during the applicable quarter
 - Matched with providers previously screened by DOJ

Care Partner Approval Process

- ▶ Hospitals to submit lists of providers with whom they have entered into a care partner relationship with for the quarter
 - Before the beginning of the quarter
- ▶ Care Partners lists sent to Center for Program Integrity (CPI) and screened via PECOS to determine eligibility to bill Medicare
 - Approximate time – 10–14 business days
- ▶ Approved providers are then sent to outside agencies for law enforcement & fraud and abuse
 - Can take up to 90 days

Care Partner Approval Process– Continued

- ▶ By quarter, anticipated lists provided to hospitals of
 - Approved Care Partners
 - Disapproved Care Partners
 - Providers not approved in PECOS
 - Providers not found in PECOS

Potential Process – Master List of Providers

- ▶ CMS is investigating the possibility of sending a list of all Maryland physicians to agencies for law enforcement
- ▶ If possible, list will be screened – fraud and law enforcement
- ▶ In this model, a master list will be created prior to the launch of the model – targeted for November 2016
- ▶ List will serve for calendar year 2017 and Care Partners will need to be approved annually through the Department of Justice in order to participate
 - This model would allow for a faster quarterly process of vetting via PECOS

Next Steps

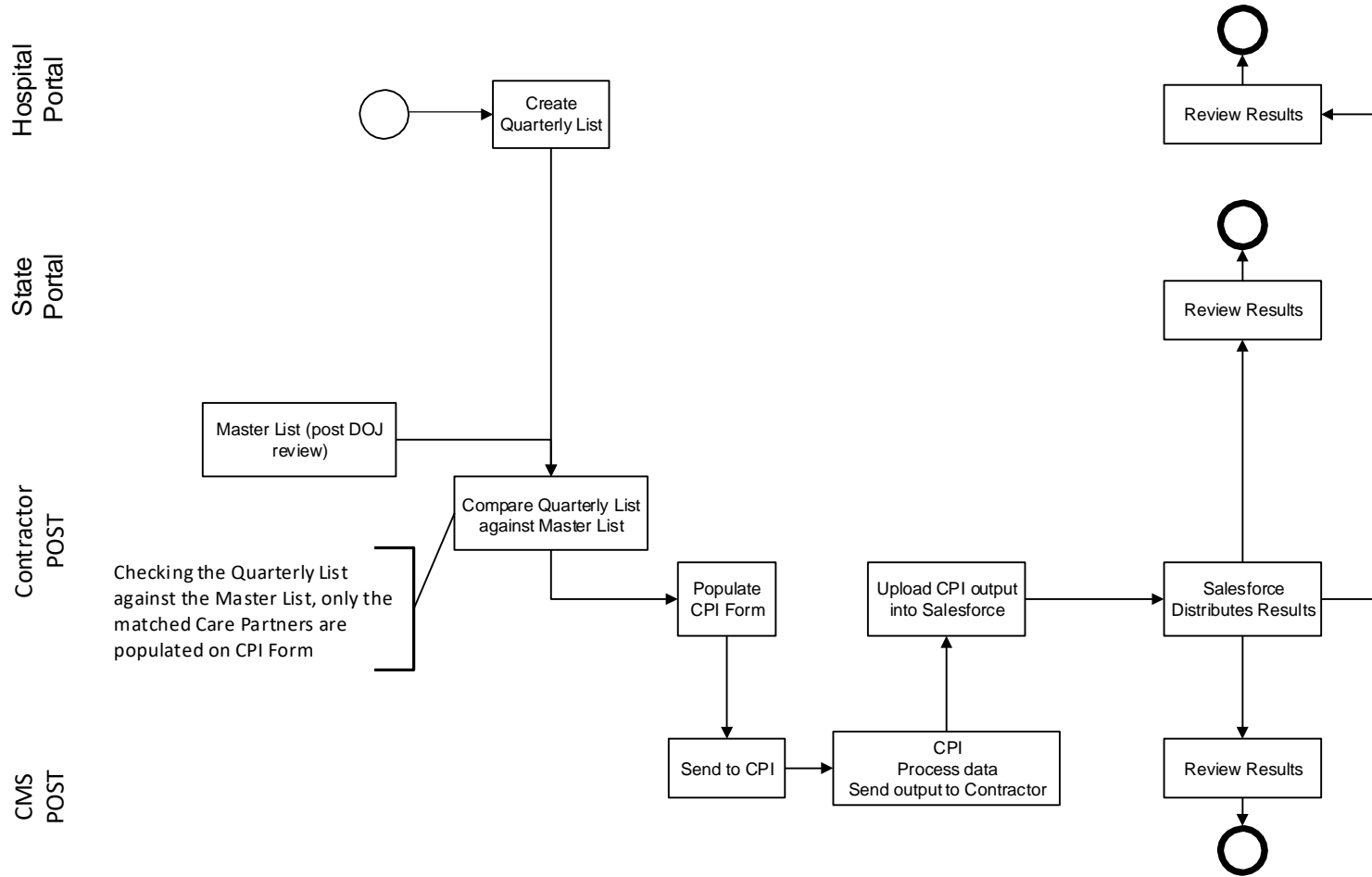
- ▶ Provider intake form will be delivered to hospitals with directions on how to fill out
- ▶ In either process, hospitals will submit the lists of potential Care Partners quarterly
 - This allows for corrections to be made quarterly as long as the physician has been approved via law enforcement/fraud and abuse

Next Steps continued: Hospital Portal

- ▶ Portal in process of being created
- ▶ Anticipated release March 2017
- ▶ This site will allow for Hospitals to upload and view:
 - Care partner Lists
 - Implementation Protocols
 - Participation Agreements
 - Care Redesign Monitoring Documents
- ▶ CMS to offer training when we go live with the portal
 - We will follow up with hospitals that submit a LOI to develop the appropriate contact list
- ▶ Contingency plan– Utilize email to deliver documents

Maryland All Payers – Participant List

Phase 1



Tips!

- ▶ Build early relationships with care partners.
- ▶ Physician participation in the care redesign programs depends on successful vetting.
- ▶ Communication with care partners is important to pass through the vetting process.
- ▶ Remind care partners to log into PECOS!!

Upcoming Webinars

- ▶ **Webinar 3:** 9:00am EST, Wednesday, November 2
 - CCIP Program Template and Implementation Protocol
- ▶ **Webinar 4:** 9:00am EST, Friday, November 18
 - HCIP Program Template and Implementation Protocol
- ▶ **Webinar 5:** 9:00am EST, Wednesday, November 30
 - Comprehensive Medicare Data Process and Use
- ▶ **Webinar 6:** 9:00am EST, Wednesday, December 7
 - Care Redesign Program Monitoring
- ▶ **Webinar 7:** 9:00am EST, Friday, January 13
 - Care Partner Agreements

Questions

For information regarding the All-Payer Model please visit: <http://www.hscrc.maryland.gov/care-redesign.cfm>

Please send any questions regarding the Care Partner Approval Process to:

MarylandModel@cms.hhs.gov

All other questions regarding the All-Payer model should directed to:

hscrc.care-redesign@maryland.gov