



# Updates on CPC+

June 30, 2016

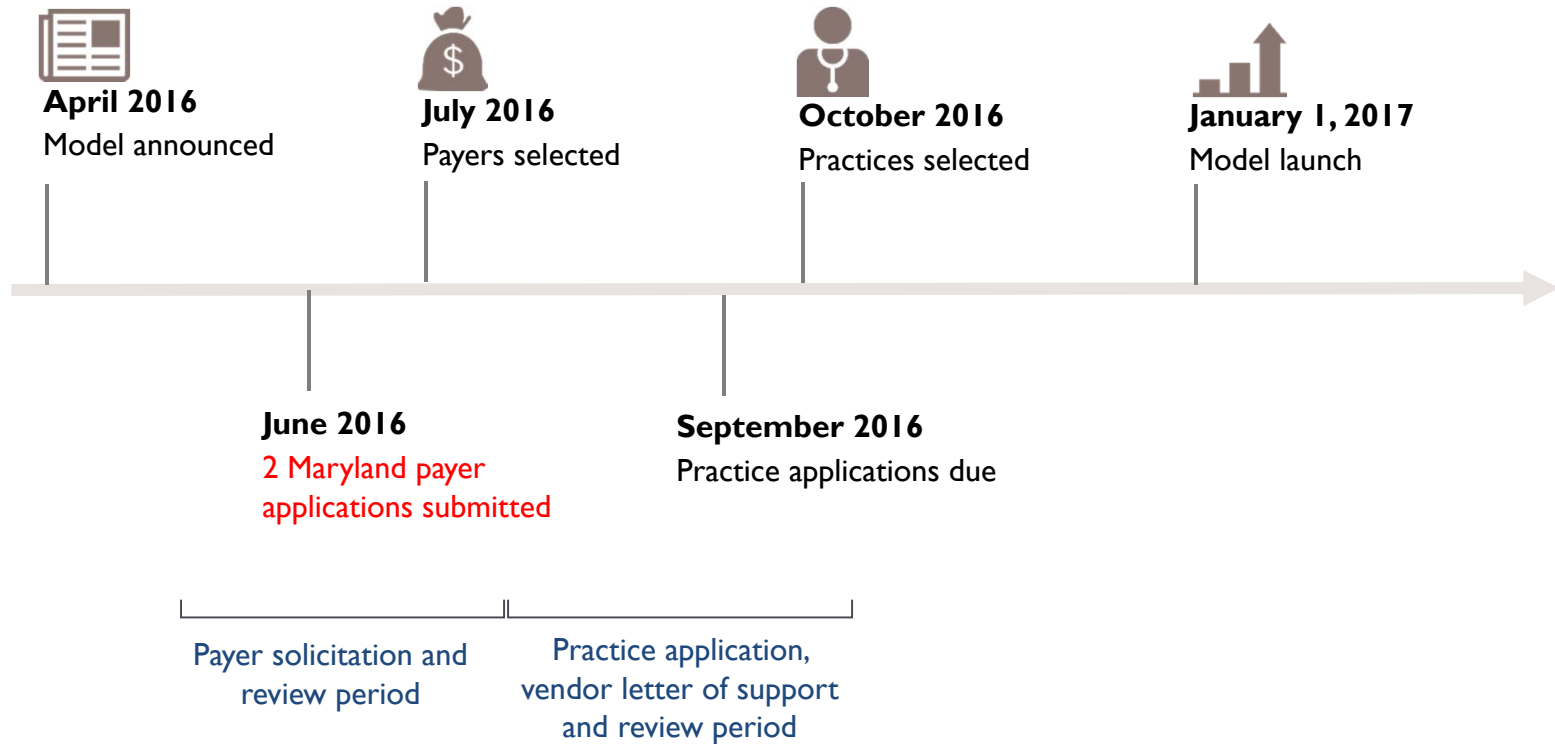
# Maryland's Primary Care Strategy

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- ▶ DHMH Office of Population of Health Improvement is focusing on the development of primary care strategies and models for the State
- ▶ Strategy includes:
  - ▶ Care redesign, coordinated care management
  - ▶ Payment reform and alignment- volume to value
  - ▶ Quality focus with standard measures
- ▶ Models include:
  - ▶ Medical Home Models
    - ▶ CPC+; CPC+-like; PCMH
  - ▶ Care Redesign Payment Initiatives
    - ▶ CCM; Complex & Chronic Care Improvement Program

# CPC+ Timeline

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- ▶ ACO practices are also permitted to apply

# The Current CPC+ Opportunity

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- ▶ Two Maryland payers (CareFirst and Amerigroup) have submitted CPC+ applications to CMMI
  - ▶ If they are awarded a demonstration project, there will be an immediate opportunity to leverage CPC+ across multiple payers to support transformation of primary care
  - ▶ Maryland may also pursue a broader implementation approach
- ▶ If they are not awarded, there may be an opportunity to pursue a Maryland-specific, CPC+ like program
  - ▶ This will probably take longer to implement than the national CPC+ model, but CMMI has expressed support for this idea

# Leveraging the CPC+ Opportunity: Discussion Questions for the Next Meeting

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- ▶ If Maryland payers are awarded, how should we leverage CPC+?
  - ▶ What are the staging and the short-term/long-term possibilities?
- ▶ What should we do if we don't get the award?
  - ▶ Pursue a Maryland-specific model?
  - ▶ Use the CPC+ as framework for a general primary care model?
- ▶ What would need to happen to support leveraging this opportunity?

# Primary Care is the Foundation for Person-Centered, Value-Based Care

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- ▶ Facing similar challenges in 1766, Dr. John Gregory defined a fiduciary responsibility for health care providers
- ▶ -Remuneration and prestige were only happy side effects of the relationship. - 1766

