

Ohio Comprehensive Primary Care 2024 Quarterly Webinar

April 18, 2024



Housekeeping

Thank you for participating!

- This presentation will be posted for future access at <https://medicaid.ohio.gov/resources-for-providers/special-programs-and-initiatives/payment-innovation/comprehensive-primary-care/provider-webinars1>
- Please submit questions through the chat feature
- We **encourage** your participation - please ask questions or provide feedback if you have it!

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Agenda

- 1 CPC Shared Savings Payments
- 2 Ohio Minds Matter Youth Behavioral Health Resource
- 3 Provider Network Module (PNM) Walkthroughs
- 4 Upcoming Events and Updates
- 5 Questions

CPC Shared Savings Payments

CPC Shared Savings Payments

Overview

- Annual **retrospective** payments based on savings on the total cost of care (TCOC)
- CPC activity requirements and quality and efficiency metrics **must** be met
- CPC entity must have **60,000** member months to calculate TCOC
- Can receive either or both of the following **two payments**:
 - Total cost of care relative to peers
 - Total cost of care relative to self

CPC Shared Savings Payments

Defined

TCOC Relative to Peers

- Based on an entity achieving a **low** TCOC relative to other eligible CPC entities
- ODM is the **paying** entity

TCOC Relative to Self

- Based on an entity's **improvement** on TCOC for their attributed patients compared to their own baseline TCOC
- MCOs are the **paying** entities (except for fee for service members, in which ODM pays)

CPC Shared Savings Payments

Attribution Dates

- TCOC for baseline and performance years are set based on the **point-in-time** attribution dates that occurred during that calendar year
- The member panel used for TCOC is based on the 4 quarters of point-in-time attribution that occurred during the **performance period**, not the patient panels used to calculate the PMPMs distributed during the program year

Point-in-Time Attribution Dates for the 2024 Performance Year		
	Point-in-Time Attribution Dates for PMPM Payments	Point-in-Time Attribution Dates for Shared Savings Payments
Q1 2024	September 1, 2023	March 1, 2024
Q2 2024	December 1, 2023	June 1, 2024
Q3 2024	March 1, 2024	September 1, 2024
Q4 2024	June 1, 2024	December 1, 2024

CPC Shared Savings Payments

Inclusions and Exclusions

	Inclusions	Exclusions
Patients	<ul style="list-style-type: none"> All adult and pediatric members All behavioral health members Members with exclusively dental or vision third party liability (TPL) coverage 	<ul style="list-style-type: none"> Dual enrolled members Members only eligible for limited benefits (e.g., family planning) Members with TPL coverage Members enrolled in a prepaid inpatient health plan Members in other population health alternative payment models (i.e., CMC)
Services	<ul style="list-style-type: none"> All non-excluded medical and prescription expenditures Case management, durable medical equipment (DME), home health, and the 1st 90 days of long-term care (LTC) expenditures Quarterly CPC PMPMs 	<ul style="list-style-type: none"> Waiver service expenditures Expenditures on dental, vision, and transportation services All expenditures in the 1st year of life for members with a level 3 or 4 NICU stay Services provided past 1st 90 days in LTC Outliers within each risk band (top and bottom 1%)

CPC Shared Savings Payments

Relative to Peers Calculation

- Shared savings payments relative to **peers** is calculated based on total spend for the attributed population based on:
 - Adjudicated (medical, Rx) claims
 - Received quarterly PMPM payments
- Excludes spend at **patient** (out-of-pocket medical expenses, co-pays), and **service** level (labor, supplies, facility costs)
- Includes a **risk adjustment** factor to account for differences in risk profiles of patient panels across entities within the time frame (e.g., performance year)

CPC Shared Savings Payments

Relative to Peers Calculation

- Members in each entity are assigned a **risk score** from the CDPS+Rx risk grouper
- PMPM TCOC payments across a category in CDPS+Rx is **compared** to the average PMPM TCOC across all categories
- Risk score is **calculated** at the practice level to compare practice specific risk to average risk
- Risk adjusted TCOC is calculated as the **TCOC/risk score**

CPC Shared Savings Payments

Relative to Self Calculation

- Shared savings payments relative to **self** is calculated based on performance against the entity's own baseline from a previous year
- For 2024, each CPC entity's performance on TCOC is compared to the entity's **baseline performance** from 2022 to determine whether shared savings was achieved
- Baseline TCOC is calculated based on the **patients** attributed in calendar year (CY) 2022
- Performance year **TCOC** is calculated based on patients attributed in CY 2024

CPC Shared Savings Payments

Relative to Self Calculation

- Adjustments are done to **account** for:
 - Differences in risk mix (across years/practices)
 - Changes in the program across years (reimbursement fee schedule, drug prices)
- Total **spend** for attributed population is based on:
 - Adjudicated (medical, Rx) claims
 - Received quarterly PMPM payments
 - Excludes spend at patient (out-of-pocket medical expenses, co-pays), and service level (labor, supplies, facility costs)
- Other factors in the **calculation**:
 - Risk adjustments
 - Programmatic adjustments

Ohio Minds Matter Youth Behavioral Health Resource

Ohio Minds Matter

Youth Behavioral Health

- Launched in 2012 as a **statewide quality improvement (QI)** collaborative sponsored by the Ohio Department of Medicaid (ODM) in partnership with other health and human services agencies, healthcare leaders, colleges of medicine, stakeholders, and medical professionals
- Purpose was to **evaluate and improve** prescribing of atypical antipsychotics and other psychotropic medications to the youngest members of the Medicaid population

Ohio Minds Matter

Youth Behavioral Health

- Uses a **multi-strategy** approach that incorporates data-driven feedback and evidence-based recommendations

- **Improvements have been seen** in the following three targets:
 - Antipsychotics prescribed to children under age 6
 - Prescription of 2 or more concomitant antipsychotics for longer than 2 months
 - Prescription of 4 or more psychotropic medications

Ohio Minds Matter

Webpage

- Web-based educational resource for clinicians, families, and other child-serving organizations to provide information about **evidence-based treatment** and tools to encourage youth-centered shared decision-making
- Enhances the capacity of primary care providers to **recognize, assess, and treat** children's behavioral health
- Provides **linkages** to resources and services for youth and families

Ohio Minds Matter

Webpage

- Currently offers **learning** modules and free CME training
- These were **developed and updated** by psychiatry and primary care leaders throughout Ohio
- Make sure to **bookmark** the following link: <http://ohiomindsmatter.org/>



Provider Network Module (PNM) Walkthroughs

Updating Contact Information

Provider Network Module (PNM)

- Why is this important?

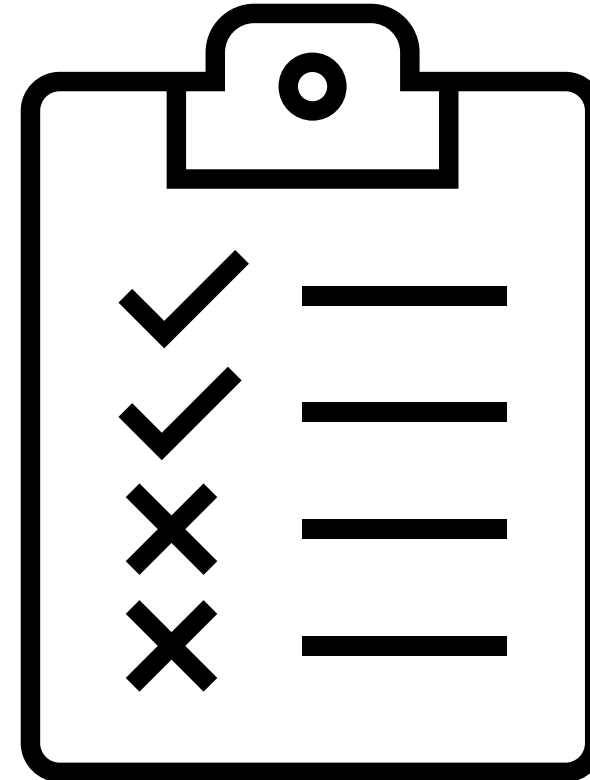
- Notices are sent and received by the **intended** staff member in a timely manner
- Correspondences can include important information about the program including **enrollment information** relative to your practice
- Avoid your provider file from being **terminated** due to outdated contact information
- **Disenrollment information** including warning letters can be delivered and acted on by the practice much faster
- IPRO activity monitoring notices and surveys can be sent for **follow up**

*Communication is **key** for successful program participation!*

Revalidation Requirements

Provider Network Module (PNM)

- Revalidation is **required** every 3 years for credentialed providers and every 5 years for non-credentialed providers
- The link to begin the revalidation process will appear in PNM **120 days** prior to the revalidation due date
- Inaction **may** result in provider file termination



Walkthroughs

Provider Network Module (PNM)

- Find more **details** in the following PNM walkthroughs:
 - Updating contact information
 - Revalidation requirements

- These are posted on the **'Enrollment'** CPC webpage at:
 - <https://medicaid.ohio.gov/resources-for-providers/special-programs-and-initiatives/payment-innovation/comprehensive-primary-care/enrollment1>

Upcoming Events and Updates

Upcoming Events and Updates

- Next newsletter is the summer edition which will be issued in **June**
- In-person CPC Learning Session will take place in **July** – more details to come!
- Next regular CPC quarterly webinar will take place on **September 19th** from 1:00pm – 2:30 pm.
- Register for the **quarterly** webinar series: <https://register.gotowebinar.com/register/5852509515904942935>

Be sure to **sign up** for these and more CPC communications at:
<https://medicaid.ohio.gov/home/govdelivery-subscribe>

Upcoming Events and Updates

- CPC **Q3 2023** performance reports were sent to MCOs on Monday, March 26th
 - Access to reports is available again, we apologize for the inconvenience while it was down
- CPC **Q4 2023** performance reports will be available after 2022 shared savings is complete
- CPC **Q2 2024** attribution payments are in process
 - More details will come out via the CPC listserv
- Currently working on **2022** shared savings for CPC
 - Look for updates through the CPC listserv

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QUESTIONS?

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Department of Medicaid