

Centers for Medicare & Medicaid Services (CMS)

Federally Qualified Health Center (FQHC) Advanced Primary Care Practice (APCP) Demonstration

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Center for Medicare and Medicaid Innovation

Centers for Medicare & Medicaid Services

CMS Mission

CMS is a major force and a reputable partner for the continual improvement of health and healthcare for all Americans

Innovation Center Mission

A trustworthy partner to identify, validate and diffuse new models of care and payment that improve health and healthcare and reduce the total cost of care

Objectives

- To evaluate the impact of the APCP model, commonly known as the Patient-Centered Medical Home (PCMH), on improving health, improving care, and reducing healthcare costs among Medicare beneficiaries served by FQHCs
- To assess the impact that additional support (*e.g., quarterly care management fees, Technical Assistance (TA)*) has on FQHCs transforming their practice and becoming formally recognized by the National Committee for Quality Assurance (NCQA) as a level 3 PCMH

Goals

- Achieve better health, better care, and lower costs for beneficiaries receiving care from FQHCs
- 90% of participating FQHCs achieve level 3 NCQA recognition by the end of the demonstration

The Patient-Centered Medical Home Model

- Medical Homes (MH) provide patients with coordinated healthcare delivery, promote the development of strong physician-patient relationships, encourage communication, and incorporate electronic tracking systems to monitor health outcomes
- Please visit the Demonstration recruitment website, www.FQHCMedicalHome.com, for more information about the MH model

Health Resources Services Administration (HRSA)

Role in Medicare FQHC/APCP Demonstration

- HRSA supports the Medicare FQHC/APCP MH demonstration
- Participating FQHCs will be supported in the application and survey process
- Ongoing conversations with colleagues at CMS to ensure maximum success for the FQHCs

National Association of Community Health Centers (NACHC)

- Dedicated to providing care to the most underserved populations
- Provide research based advocacy on behalf of FQHCs and their patients
- Provides training and TA to FQHCs and Primary Care Associations (PCAs)
- Develops alliances with private partners and key stakeholders to foster the delivery of primary healthcare services to communities in need

Expectations

- Change will occur
- Participants will achieve Level 3 PCMH Recognition
- Participants will remain in the demonstration for the duration
- Participants will cooperate with the evaluation contractor (may involve providing additional data)

Duration, Size, Scope

- 3-year demonstration
- 500 FQHCs from across the United States
- Up to 195,000 Medicare fee-for-service (FFS) beneficiaries (including dual eligible)

Eligibility— FQHCs

- Must be an individual physical location
- Must have provided medical services to at least 200 FFS Medicare beneficiaries in the most recent 12 months (look-back period) for which CMS has claims data
- Must be a physician or nurse practitioner-led practice
- Must be providing primary care services (as opposed to only providing specialty service, such as dental or vision care)
- Must provide medical care services to a general population and not exclusively to migrant workers or to the homeless

Eligibility—FQHCs (cont)

- Must be able to receive electronic funds transfer (EFT)
- Must be submitting claims to National Government Services (NGS) or Noridian Administrative Services (NAS)

Eligibility—Beneficiaries

- Enrolled in the Medicare Part A and Part B FFS program during the most current look back-period and must not be currently in hospice care or under treatment for end-stage renal disease
- Includes Medicare and Medicaid dually eligible beneficiaries
- Not Medicare Advantage Plan participants

Beneficiary Attribution

- Eligible Beneficiaries served at each participating FQHC are identified from Medicare administrative claims
- Participating FQHCs receive beneficiary rosters along with payment each quarter
- Beneficiary eligibility is verified every quarter prior to payment and rosters are updated
- Participating FQHCs cannot challenge attribution

Payment

- Quarterly prospective payment (\$18 per quarter)
- Care management fee above the all-inclusive payment
- Attribution is based on look-back of previous quarter's Evaluation and Management (E&M) claims.
- Care Management Fee paid automatically (without a claim) via EFT through Noridian or National Government Services (NGS.)
- No retroactive adjustments.
- Quarterly Payment Report will reflect all beneficiaries attributed to FQHCs, plus aggregate numbers of beneficiaries dropped from rosters in previous quarter.

Benefits of Becoming PCMH

- Emphasize quality outcomes and patient centric care
- Coordinated care management leading to better outcomes
- Improve patient and provider satisfaction
- Become a clinical/teaching leader in the FQHC community
- Be an effective and efficient care deliverer

Benefits of Participating in the Demonstration

- Financial support (monthly care management fee)
- Technical Assistance
- Contribute to the findings of the demonstration
- Help to pave the way for other FQHCs

Application and Qualification

- Applications will be accepted from
June 6, 2011 – August 12, 2011
 - Must be received by 11:59PM (ET) August 12, 2011
- One application per site

Application and Qualification

- To apply, each FQHC site must complete:
 1. Application Form
 2. NCQA Readiness Assessment Survey
- Must complete all parts to be considered

1. Application Form

- The Application Form serves the following purposes:
 - Confirms agreement with the Terms and Conditions
 - Collects information CMS needs to qualify/select FQHCs
 - Creates an account on NCQA's PCMH web-based system
 - Collects practice information for evaluation purposes
- The Application Form can be accessed at:
www.FQHCMedicalHome.com

2. *Readiness Assessment Survey*

- The Readiness Assessment Survey (Survey) is the second step of the application process
- The purpose of the Survey is to assess FQHC readiness to become a PCMH at baseline
- Survey completion does not require submission of documentation

2.(cont) Readiness Assessment Survey

- After Application Form submission (Step 1):
 - FQHCs will receive immediate e-mail confirmation that their Application has been received
 - FQHCs will receive a second e-mail within 2 business days providing access to the Survey
- The Survey follows the NCQA PCMH 2011 Standards and Guidelines, available through:
<http://www.ncqa.org/tabid/629/Default.aspx#pcmh>

Application Review and Notification

- Only eligible FQHCs that complete BOTH the Application Form and the Readiness Assessment Survey by August 12, 2011 will be considered
- CMS will select FQHCs to ensure representation by certain FQHC characteristics (e.g. geography)
- All applicants will be notified regarding the final disposition of their application by August 26, 2011

Application Assistance

- Assistance is available for technical issues encountered during the completion of the application
- Contact information for assistance will be provided on the Application Form and Survey

Technical Assistance Practice Transformation

- Coordinated transformation TA being developed
- Aim to provide direct state (PCA) and/or grantee support
- Central learning curriculum and peer-to-peer learning may be foci

Technical Assistance Standards & Recognition

- Includes (but not limited to)
 - Monthly web-based training sessions on PCMH standards and recognition process
 - Mock surveys (on a limited basis)
 - Individual consultation (on a limited basis)
 - Transformation Learning Systems

Monitoring Activities

- CMS will monitor the progress of participating FQHCs toward NCQA Level 3 PCMH recognition
- Monitoring Activities will include:
 1. Readiness Assessment Survey Updates
 2. Random Audits
 3. Feedback from CMS

1. *Readiness Assessment Survey Updates*

- FQHCs will be required to update their responses to the Survey *every 6 months* throughout the Demonstration
- FQHCs will be reminded to update its Survey as each 6 month deadline approaches
- CMS will use results to ensure progress toward recognition and to target technical assistance resources

2. *Random Audits*

- To ensure the accuracy of the Readiness Assessment Survey, 10% of FQHC participants will be randomly selected for audit every 6 months
 - Audits will not be conducted onsite
- NCQA will request additional documentation to substantiate the presence of core PCMH capabilities reported

3. Feedback from CMS

- CMS will periodically provide participating FQHCs with feedback reports containing:
 - Changes in Survey scores
 - Survey scores compared to other FQHC participants
 - Claims-based cost and utilization data on attributed Medicare beneficiaries (quarterly)

Evaluation Purpose

- To assess the effects of the advanced primary care model on access, quality and cost of care provided to Medicare and Medicaid beneficiaries served by FQHCs
- To study the process and challenges involved in transforming FQHCs into APCPs

FQHC Expectations re: Data Collection

- Selected FQHCs will be expected to participate in data collection activities for evaluation purposes
 - Complete NCQA's PCMH Readiness Assessment every 6 months
 - Complete other surveys (TBD)
 - Participate in site visits, focus groups, and interviews periodically (frequency TBD)

Contacts

- Demonstration Description and Application:
 - www.FQHCMedicalHome.com
- NCQA homepage for Demonstration:
 - www.ncqa.org/gri
- Questions and Assistance:
 - Demonstration Design Questions
 - FQHC_MH_Demo@cms.hhs.gov
 - Application Form or Survey Assistance
 - PCMH-GRIP@ncqa.org
 - Application Process Questions
 - FQHC.MedicalHome@thomsonreuters.com

Demonstration Updates

CMS Website:

<http://www.cms.gov/DemoProjectsEvalRpts/MD/itemdetail.asp?itemID=CMS1230557>

<http://innovations.cms.gov>