Virtual Rounds: Accelerate to Value

COVID-19 support and accelerated pathway to Blue Premier℠ for independent primary care practices

June 29, 2020
WELCOME & THANK YOU
AGENDA

• Who we are
• Program basics
• Upfront payment to stabilize practice revenue
• Terms of participation:
  • Deliver high-quality care and care coordination during the crisis
  • Move to value-based care through Blue Premier
• Introduction to Blue Premier\textsuperscript{SM}
• Application process and timeline
• Q&A
  • Please hold your questions until we open the Q&A.

Please note:

There is a slight delay in the webinar feed. Please keep this in mind as we proceed.

Close your window and rejoin the webinar if you’re having technical issues. This typically fixes any audio/visual problems with the platform.
WHO WE ARE

- Rahul Rajkumar, MD, SVP, Chief Medical Officer
- Dr. Leslie McKinney, MD, Sr. Medical Director
- Scott Heiser, MPH, Sr. Manager, Health Care and Medical Expense Strategy
- Molly O'Toole, RN, MSN, CPC, Sr. Manager, Advanced Primary Care
- Amy Winstead, Manager, Provider Contracting and Director, Provider Network Healthy Blue
- Azalea Kim, MD, MBA, MPA, Chief of Staff to the Chief Medical Officer
- Theresa Chu, Team Lead, Health Care Communications
ACCELERATE TO VALUE: PROGRAM BASICS
Independent primary care practices play a critical role in providing care to Blue Cross NC members and all North Carolinians.

1. Provide financial stability to independent primary care practices
2. Ensure patient access to high-quality, well-coordinated care
3. Provide a bridge to participate in Blue Cross NC’s value-based care program called Blue Premier
4. Help independent primary care practices stay independent
ACCELERATE TO VALUE: PROGRAM OVERVIEW

There are four key parts to the program:

1. **Stabilize practice revenue**
   - Upfront payment to practices to what an average practice would have earned for core primary care service
   - “Catch up” payments to make course corrections along the way to maintain 2019 levels

2. **High-quality care + care coordination during crisis**
   - For our Blue Cross NC members, pledge to:
     - Ensure access
     - Promote telehealth
     - Provide care delivery and care coordination activities responsive to COVID-19 pandemic

3. **Rapid transition to value-based care through Blue Premier (Required)**
   - Join a Blue Premier accountable care organization (ACO) by December 31, 2020
   - Options to join a Blue Premier ACO through Aledade or an existing Blue Premier clinically integrated network (CIN)

4. **Pathway to PCP capitation (Not Required)**
   - Opportunity in 2022 to adopt a PCP capitation model
ACCELERATE TO VALUE: UPFRONT PAYMENT TO STABILIZE PRACTICE REVENUE
ACCELERATE TO VALUE: WHO IS ELIGIBLE?

- Independently owned and operated primary care practices:
  - Includes internal medicine, family medicine, pediatrics, geriatrics, OB-GYN and multispecialty practices.
  - Practices owned by hospitals and health systems are not eligible.

- In-network and otherwise in good standing with Blue Cross NC

- Able to receive funds via electronic funds transfer into the bank account on record with Blue Cross NC

- Attest to quality, value and intent to stay independent

Our aim is maximize the number of primary care practices who are eligible and can benefit from this program.
The design of the program is to subsidize the revenue shortfall practices are enduring for 2020 and 2021 compared with pre-COVID 2019 level.

In 2020:

1. We compare 2020 allowed revenue for core primary care services to 2019 allowed revenue to determine shortfall across all eligible independent primary care practices.

2. Total shortfall amount across all practices is converted to a “per attributed Blue Cross NC patient per month” (PAMPMP) amount.

3. We estimate this amount to be $8 per attributed member per month (PAMPMP) for the 6-month period ending December 2020. This $48 amount is multiplied by each practice’s attributed patients. This is the first payment amount.

4. For 2020, at the end of the year we calculate a “catch-up payment” if the shortfall for the pool was more than the estimated. If we overestimated the shortfall, you still keep the payments (i.e. no “claw back”).
The design of the program is to subsidize the revenue shortfall practices are enduring for 2020 and 2021 compared with pre-COVID 2019 level.

In 2021:

5. We use recent 2020 experience to forecast the shortfall relative to 2019 revenue for primary care services across all eligible independent primary care practices in 2021.

6. This forecasted shortfall amount across all practices is converted to a prospective “per attributed Blue Cross NC patient per month” (PAMPM) amount.

7. This forecasted PAMPM is multiplied by each practice’s attributed patients. Payments will be made within 60 days of the end of each quarter of 2021.

We can make course corrections and adjust payments to keep total revenue for practices in the program at 2019 levels. Through financial stability, practices will be able to deliver high-value, well-coordinated care during the COVID-19 crisis pandemic.
Example: There are **800 Blue Cross NC members** who are attributed to this practice as of July 1, 2020.

- **Application due July 31, 2020**
  - Contracting June – August 2020

- **2020 year-end payment**
  - Covering period Jan-Dec 2020
  - **Additional payment** if underestimated
  - 2020 shortfall

- **Q1 2021 payment**
  - Covering period Jan-Mar 2021

- **Q2 2021 payment**
  - Covering period Jan-Jun 2021

- **Q3 2021 payment**
  - Covering period Jul-Sept 2021

- **Q4 2021 payment**
  - Covering period Oct-Dec 2021

- **Join Blue Premier ACO**

- **2020**
  - Fall 2020
  - (within 45 days following contract signature)
  - $48 x 800 patients
  - **$38,400 payment**

- **2021**

- **2022**
  - **PCP Capitation Option**
WHAT COUNTS AS CORE PRIMARY CARE SERVICES?

• Blue Cross NC assessed all revenue billed by eligible practices in 2019

• Separated all spending into commoditized goods (e.g. injectable drugs) v. non-commoditized services (e.g. all evaluation and management visits).

• Only the non-commoditized services are considered core primary care services.
HOW DO MEMBERS BECOME ATTRIBUTED TO YOUR PRACTICE?

Membership in these lines of business are eligible for attribution:

✓ Fully insured
✓ Self-funded (employer groups)
✓ Inter-Plan Program members (also referred to as IPP Host)
✓ Federal Employee Program

State Health Plan is not participating in this program at this time.

Blue Medicare Advantage is not included.

We will use the same methods as our value-based program, Blue Premier, to attribute members to your practice.

We use the history of claims to identify members who:
• Were seen at your practice for wellness, primary care, and E&M services, or
• Have selected you as a primary care provider
ACCELERATE TO VALUE: HIGH-QUALITY CARE AND CARE COORDINATION DURING THE CRISIS
We trust that you provide excellent care to our members during the COVID-19 crisis.

We will ask that you attest, or pledge, to continue to execute these efforts:

1. Provide care delivery and care coordination activities
2. Commit to join the pathway to value-based care
3. Maintain independent status for the duration of this program

Our aim is to minimize the administrative burden on practices while requiring actions that support access and high-quality care for our members.
 TERMS OF PARTICIPATION:  
CARE DELIVERY ATTESTATIONS

To be enrolled in the program, we will ask practices to **pledge** to and execute the following actions:

- **Access:**
  - Will maintain and expand access to care delivery for Blue Cross NC members, including expanded hours, weekend access, and asynchronous communications (i.e., secure messaging)
  - Will keep provider panels open for Blue Cross NC members

- **Telehealth Adoption:** Have already deployed or will plan to deploy telehealth services

- **EHR Adoption:** Have already deployed or will plan to deploy electronic health record technology in their practice operations by December 31, 2020.
TERMS OF PARTICIPATION: CARE DELIVERY ATTESTATIONS

In order to justify this payment, we have identified activities your practices are likely doing already that are important to our members during the COVID-19 pandemic. We ask you to pledge to:

**Provide care delivery activities responsive to COVID-19.**

*Examples you may already do include:*

- Referrals for COVID-19 testing, coordination to access public health resources (including testing, contact tracing, and supportive services in the event of a need to quarantine)
- Behavioral health screenings
- Delivery of preventive services
- Proactive monitoring and delivery of care for members with chronic disease

**Provide care coordination activities.**

*Examples you may already do include:*

- Member identification (e.g., complex patients or patients with chronic
- Care plan preparation
- Referral, test, and follow-up care coordination and tracking
- Self-management support
- Patient/member follow-up care
- Care transition support and management
- Care coordination with other health care providers
- Medication reconciliation and adherence assessments
- Transitions of care support and management
We are required to have an audit program that will focus on ensuring access for our members.

1. **Data reviewed**
   to determine adoption rates of telehealth and delivery of preventative care, behavioral health care, and support of transitions of care among practices.

2. **Data shared**
   to inform you of your existing quality improvement activities.

3. **Corrective action**
   if the audit identifies critical deficiencies. Practices will be asked to remediate with a corrective action plan.
To be enrolled in the program, practices must attest to transition to value-based care by joining a Blue Premier ACO by December 31, 2020 for the 2021 Blue Premier Performance Year. This is a binding commitment:

This can be done through one of two mechanisms:

1. Joining Blue Premier Aledade ACO, or;
2. Joining an existing Blue Premier ACO through their clinically integrated network (CIN)
   • The three eligible Blue Premier CINs are: UNC Health Alliance (UNCHA), Triad Health Network (THN), WakeMed Key Community Care (WKCC)

If the independent practice is already in Blue Premier, this commitment is satisfied. The practice must submit an application for Accelerate to Value.

If the practice has not executed a Blue Premier value-based agreement by December 31, 2020, they will be removed from the Accelerate to Value program and will not receive payments in 2021.
All Accelerate to Value participants will pledge to consider the opportunity to join a primary care capitation model to begin in performance year 2022. This is a non-binding commitment.

The Blue Cross NC team will work closely with Accelerate to Value practices, Aledade, and the Blue Premier CINs to share details of the PCP capitation model when it is available for review in 2021 or sooner.

More details on Blue Premier and PCP capitation in the next section.
Accelerate to Value practices must remain independent through December 31, 2022. This is a **binding** commitment.

If a practice is no longer independently owned or operated before December 31, 2022 (i.e., sell themselves to a hospital or hospital system), the practice will be removed from the Accelerate to Value program and required to **return the amount of the program funding** to Blue Cross NC.
ACCELERATE TO VALUE: MOVE TO VALUE-BASED CARE THROUGH BLUE PREMIER
We want to provide primary care physicians across North Carolina the tools they need to be best-in-class and succeed in a remodeled health care system built on the foundation of value-based, patient-centered care.
True shared risk and savings

- One of the nation’s most comprehensive shared savings models with two-sided risk
- Gives independent practices opportunity earn substantial rewards for improving quality and reducing total cost of care
- Makes primary care a priority
VALUE BASED CARE: BENDING THE COST CURVE

**FEE-FOR-SERVICE PAYMENT**

**INTRODUCTION OF VALUE-BASED PAYMENT**

Without Value-based Payment

With Value-based Payment

**Bending the Cost Curve**
- Aligned reimbursement
- Empower providers with data
- Invest in practice transformation
- Shared decision making between patients and their physicians

*Illustrative*
### Accountable Care Organizations

- ACOs are groups of providers who assume responsibility for the quality and cost efficiency of the health care for a designated patient population.

- The goal of coordinated care is to ensure that patients, especially the chronically ill, receive the right care at the right time, while avoiding unnecessary duplication of services and preventing medical errors.

### Aligned Goals

- Provides physicians flexibility and incentives to deliver higher-value care

- Better care coordination and support

- Innovative population health management

- Focus on maintaining patient health and improving patient experience
ACCELERATE TO VALUE: PATHWAY TO PCP CAPITATION (NOT REQUIRED)
• Blue Cross NC will offer a model for primary care provider (PCP) capitation starting in 2022 to practices in the Accelerate to Value program.

• PCP capitation is a fixed payment for a set of core primary care services paid on behalf of all Blue Cross NC members attributed to providers for these services.

• We are not asking practices to make a binding commitment to accept PCP capitation at this time. However, we believe this will be an attractive payment model that will offer enhanced, sustainable funding for primary care services.

• PCP capitation will let practices determine the best way to deliver primary care to all of the patients they serve, allowing for new flexibility in how and when that care is delivered.
NEXT STEPS
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• Visit BlueCrossNC.com/Accelerate-Value-Program to apply (only takes 10 min!)

• Application and refreshed FAQs are available on the website

• Application deadline July 31, 2020 at 5 p.m. ET

• Additional Virtual Rounds to learn about the program and ask questions:
  • Friday, July 10, 2020 from noon - 1 p.m. ET
  • Friday, July 24, 2020 from noon - 1 p.m. ET

We strongly encourage your attendance at the Virtual Rounds sessions. We will recap the week’s questions and provide updates. By signing up, you will join our Accelerate to Value listserv.

You can also send inquiries to AcceleratePCP@bcbsnc.com.

Our Blue Premier partners – Aledade and the CINs – may be hosting information sessions in the coming months. We will share them with interested practices via our listserv. You can contact Aledade directly at ncoutreach@aledade.com.
YOUR RESOURCES

- **Bookmark:** [BlueCrossNC.com/Accelerate-Value-Program](http://BlueCrossNC.com/Accelerate-Value-Program)
  - Overview of program
  - Application
  - Slides from Virtual Rounds
  - FAQs
  - Link to register for future Virtual Rounds (July 10 and July 24 at noon)
  - Contact information: [AcceleratePCP@bcbsnc.com](mailto:AcceleratePCP@bcbsnc.com)

Q&A is now open

Read published questions before submitting your own.

Click on the ❤️ to vote for questions you want answered instead of duplicating the question.
THANK YOU