



# Designing the Future of Sustainable Value-Based Payment Models

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# The Opportunity

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Emergence from Covid-19 Pandemic and Renewed Focus on Value Based Payment Models by Payers, Health Plans, Providers

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CMMI 2021 Strategy Refresh with emphasis on multi-payer alignment

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AMA CMS Report 2, A-22, “Prospective Payment Model Best Practices”

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Imperative of Market Upheavals, Inflation, Expiring Policies but Pockets of Success that Can be Showcased/Spread

# AMA-AHIP-NAACOS Collaboration

- Formal joint effort to identify Best Practices across each organization via SME work groups to inform providers, commercial payers, CMS, and policymakers
- Stated Goal: “Advance Adoption of APMs in manner that eases provider participation by creating an appropriate foundation for alignment”

# AMA-AHIP-NAACOS Collaboration

- Series of design sessions(4-6) via web meeting with members of the respective organizations as well as other identified subject matter experts.
- Work products
  1. Set of multi-stakeholder consensus-based guiding principles for the future advancement of APMs
  2. Playbook with voluntary best practices for an identified “Core Component” of APMs (for example, data sharing, attribution) with the goals of easing provider burden and purchaser and consumer benefit through reducing complexity and increasing sustainability of APM models.
  3. Catalogue of policy barriers to adoption, scaling, and alignment of APMs that are uncovered during the work.
- Audience is the public, with a focus on CMS and private payers, providers, policymakers and industry.

# Core Components and Cross Cutting Issues

## Core

1. Data Sharing
2. Payment Models (attribution, claims, benchmarking, risk adoption)
3. Embedded Specialty Models
4. Quality
5. Patient Engagement
6. Care Delivery

## Cross Cutting

1. Sustainability (Oper/ Financial )
2. Equity and SDOH
3. Whole Person Care
4. Practice Size and Rural Strategies
5. Technology

# The Role of IPPS, PPS, Council on Medical Service

- Serve as Subject Matter Experts
- Assist with Identification of Guiding Principles
- Assist with Identification of Best Practices

# Phase One: Data Sharing

Recommendations on:

1. Common Dashboard Elements
2. Content and Exchange Standards for Population Health Files
3. Best Practices for Providers and Payers to share data in “a manner that is least burdensome for providers”

# Phase Two: Payment Models

Recommendations on:

1. Best practices on patient alignment/attribution to providers (patient-driven alignment, product-driven attribution, claims-based attribution, geographic-level attribution)
2. Benchmark calculations and methodology, process for updating over time
3. Preparation for greater assumption of risk, if appropriate, over time, including based on entity type (e.g. independent practice, safety net, rural provider)
4. Risk mitigation techniques, such as risk adjustment and other tools



# *Today's Workshop*



# Breakouts: Key Questions

What does Initiative Success Look Like from standpoint of IPPS members?

What are Key Principles Around Aligned Data Sharing and Payment Models?

Homework: Begin to Identify Best Practices in Your Organizations and Share with Carrie Waller