Michigan Multipayer Comprehensive Primary Care Plus (CPC+) Vision and Strategy

AS THE CPC+ STAKEHOLDER COMMUNITY IN MICHIGAN, WE ADOPT THE FOLLOWING AS OUR VISION AND STRATEGY TO SUPPORT CPC+ SUCCESS

Overall Multipayer CPC+ Michigan Vision: To use the CMS CPC+ demonstration program as a nationally visible opportunity to: 1) Align commercial and governmental payer policies and approaches; 2) Support CPC+ participating practices, providers and physician organizations with tools, techniques and processes to transform the primary care delivery model; and 3) Achieve a common long-term multipayer approach to an ongoing and sustained advanced primary care in Michigan.

Strategic Pillars Supporting the Michigan CPC+ Multipayer Vision: To achieve this vision, informed by the CPC+ Michigan stakeholder community, we will work together on strategic pillars selected to:

- *Be of interest to CPC+ practices, payers, POs and stakeholders at large;*
- *Be finite and defined with incremental milestones so as to make them measurable*
- *Contribute to high performance on CPC+ metrics and return on investment to payers; and*
- *Support the sustainability of aligned multipayer primary care delivery and payment policy.*

Four "vital few" pillars support fulfill these criteria and were seen as the most important in advancing CPC+ success and contributing to a strong population health-based system of care delivery as follows: *1) Leadership, Payer Recruitment and Policy Advocacy. 2) Multipayer Metric Alignment, 3) Actionable Multipayer Dashboards, and 4) Development and Spread of Effective Care Interventions*

CPC+ Michigan Multipayer Pillar	Milestones		
	By 12/31/19	**By 6/30/20**	**By 12/31/21**

1 PAYER RECRUITMENT AND LEADERSHIP
 	
Engaged, aligned CPC+ community leadership championship that actively recruits new payer partners and supports practices in outcome success
	1. Conduct outreach to identify POs that are actively supporting CPC+ practices and "null set" of practices without CPC+ PO support
	2. Develop a briefing piece for new payers that describes rationale for CPC+ participation (e.g., Medicare policy adoption in 2022; achievement of common clinical and financial model; provider relations; organizational strategy alignment for value-based models etc.)
	3. Document alternative option paths for CPC+ payer growth (e.g. post-SIM MHP participation; new payer recruitment opportunities; national payer assessments; etc.)
	4. Identify lead contacts for target growth payer opportunities
		1. Query active PO Leads for their ideas and interest in CPC+ initiatives and strategy
		2. Recruit and achieve Medicaid Health Plan partnerships for post-SIM incorporation into CPC+
		3. Identify and pursue key payer and product line recruitment targets to expand Multipayer CPC+ participation base
		4. Partner with leading CPC+ practices and providers in communicating their interest in payer expansion for population coverage
			1. Achieve payer post-demonstration support
			   a. Retain Medicare as a participating payer post-demonstration (through adoption into ongoing Medicare policy or via demonstration extension, etc.)
			   b. Retain existing payers and increase the number of participating payers to sustain multipayer support post-demonstration continuation
			2. Obtain ongoing partnership commitment for multipayer support administrative infrastructure funding (based on % of members)

2 MULTIPAYER METRIC ALIGNMENT Payer metric alignment (beginning with clinical targets) to support clinically and operationally meaningful measurement with streamlined data collection and reporting.	1. Identify differences and similarities among payer metrics 2. Using clinical target alignment as an initial focus, identify the clinical targets that are most in need of alignment 3. Achieve agreement on a base set of clinical target areas (re: specifications, time frame for collection and reporting, etc.)	1. Support and facilitate joint payer review of additional metrics for continued alignment opportunities 2. Achieve a strategy for ongoing alignment	1. Achieve ongoing forum for joint payer action on payer alignment opportunities (including agreement on new measure area development)
3 DASHBOARDS Multipayer dashboards that are actionable by practices and POs and that informs project-level performance and is guided by active oversight for performance improvement monitoring	1. Advocate for and request Medicare and participating plan commercial data 2. Incorporate multipayer data in dashboard and refine design for actionability 3. Agreement on risk and standard cost model incorporation decisions 4. Obtain all POs as authorized users, along with interested practices and payers 5. Oversee MDC launch of training webinars	1. Incorporate clinical/EMR data in dashboard measures 2. Incorporate SDoH data in dashboards 3. Standard costs (if supported) and risk model fully integrated in to dashboard 4. Integrate reporting insights element to identify performance improved and where there are opportunities	1. CPC+ Multipayer Michigan Dashboard reflecting at least four years of multipayer performance that is well-reviewed as useful by CPC+ practices 2. Ongoing commitment from CMS for Medicare claims and from commercial payers for their populations 3. Significant alignment of common multipayer metrics and standard process for multipayer discussion of new metrics

3 DASHBOARDS (Cont.) Multipayer dashboards that are actionable by practices and POs and that informs project-level performance and is guided by active oversight for performance improvement monitoring			4. Institutionalize ongoing incorporation of tools and resources developed that contributed to Michigan practice community achievement of success on cost/value, patients experience, quality and use indicators
4 CARE INTERVENTIONS Leverage key performance improvement opportunities to develop and spread rapid cycle learning diffusion and quantifiable performance improvement	1. Create a framework in which to categorize care interventions 2. Determine a method to assess each, including a review of the body of peer-reviewed literature.	1. Categorize and catalog care interventions and assess their efficacy and effectiveness 2. Recommend and support implementation of at least two care interventions	1. Demonstrate positive outcome performance (e.g., favorable quality and utilization performance, etc.) from implementation of recommended care interventions