

Michigan Commercial Multipayer



Michigan Multistakeholder CPC+ Briefing June 2020

This briefing is authored by the Michigan Multipayer CPC+ Team (*and not by CMS or a CMS contractor*) and is made possible through support from our commercial payer partners, BCBSM and Priority Health as well as CMS to support CPC+ success in our state. To be added to the distribution list, email MichiganMultipayerCPCPlus@med.umich.edu with “Add Me to the MI CPC+ Newsletter Distribution” in the subject line. For additional multipayer information please visit <https://cpcplumichigan.org/>. To share your ideas and experiences, contact the CPC+ Michigan Convener, Diane Marriott (dbechel@umich.edu or 734 998 0390). Thank you!

[Silver Lining Innovation Survey - Share Your Practice's Innovation and Win One of Five \\$150 Honorarium by July 20, 2020!](#)

Michigan CPC+ practices have done amazing and innovative things to serve patients and improve care value and outcomes. Your practice innovations and successful PDSAs might have refined behavioral health integration with a consulting psychiatric expert to treat anxiety and depression; or tested virtual annual wellness visits via remote monitoring; or assigned dedicated staff as health coaches for chronic care patients and improved the percent of patients in control for blood pressure or hemoglobin a1C. These are just a few examples, but one thing is clear - when you innovate, you track your data to see if the innovation accomplishes its aim. Whether on telehealth or face-to-face care or another practice innovation, we'd love to learn from you!

We are extremely impressed and are offering the best five entries \$150 awards you may use as you wish in your organization to reward your team and its innovators! **[Enter today by submitting your innovation here](#)**. The survey includes any ideas you have for how Payers can decrease barriers to implementation of your innovation. We love our Payer partners and our practices and POs for always looking out for their commitment to working together for success in population health!

[The Secrets to Excellent Telehealth Servicing: A Fabulous Half-Hour Webinar from the Experts at Alliance Health](#)

Transitioning from entirely in-person servicing to entirely telehealth in the space of a few weeks seems foreboding. Doing so robustly and with a reasoned strategy seems even higher a reach. But the experts at Alliance Health did it and they generously shared their lessons learned, how-to's and detailed strategy with you in this 30 minute webinar [here](#). Whether you are early in your journey to virtual servicing, or quite advanced, you will find good ideas here. It is one of the best pieces we have seen. Hats off to Alliance Health and their commitment to patients and their commitment to sharing best practices with the CPC+ community!

[Michigan CPC+ Practices Get a “Shout-Out” from CMS Leadership!](#)

CMS and our CPC+ Commercial Payer partners (BCBSM and Priority Health) did a lot to incorporate flexibility in telehealth requirements at the start of the pandemic, and Michigan CPC+ practices rose to the challenge. Spectrum, Michigan Medicine, Cadillac Family Practice, OSP, St. Mary's PHO, IHP, HVPA, and Alliance Health shared their statistics on rapid

adoption of telehealth, and CMS noticed! Their CPC+ achievements were featured in a CMS Leadership Health Affairs Blog at <https://www.healthaffairs.org/doi/10.1377/hblog20200602.80889/full/>.

[Do You Use Z Codes to Capture SDoH Characteristics? Tell Us More!](#)

Z Codes are a subset of ICD-10-CM codes that capture information about issues that patients face regarding affordability, access, and other factors that influence one's health risks and outcomes. All CPC+ practices are expected to screen patients and take action to close gaps. If you are using Z Codes in your claims submission please let us know (at dbechel@umich.edu). We would love to better understand whether you have experimented with Z codes, and what you think about them. Their great benefit is that they have a standardized approach.

A recent (January 2020) CMS Data Highlight found that the five most used Z codes were those for homelessness, problems related to living alone, disappearance and death of a family member, other specified problems related to psychosocial circumstances and problems in relationships with spouses or partners. There is much to do if we are to increase the robustness and use of Z Codes, but in an effort to reduce administrative burden within practices around SDoH reporting, they offer a compelling consideration for the future.

[Michigan CPC+ Payers Continue Telehealth Flexibility and Other Support for Practices](#)

BCBSM and Priority continue to ease telehealth requirements and provide programs to offer support to providers and primary care practices as we continue through the course of the pandemic.

- BCBSM has expanded telehealth to all 12 PDCM Codes, including G9001 and G9002, and increased fees for G9001, G9002 and G9008 until August 31, 2020.
- Priority Health has also extended telehealth billing for routine practice codes performed by credentialed providers through June 30, 2020. To make it more straightforward for practices, they will use the same process as CMS to bill for telehealth services (just bill with the place of service you'd normally use for in-person visits and add the 95 modifier to identify the visit as telehealth. For Medicaid members, continue to use the GT modifier.) Priority's full COVID-19 update is available at [Priority Health COVID 19 Billing Update](#).
- CMS/CMMI has also made special provisions to some CPC+ requirements and deadlines in consideration of all that they are dealing with to service patients in a team-based way during the pandemic. Full details are at [CMS CPC+ Program Updates 2020](#).

[How Will the Pandemic Effect Benchmarks and Value-Based Contracts?](#)

The COVID-19 experience presented a number of special challenges to the usual course of patient servicing and utilization. Across the nation, emergency department visit and hospitalization volume decreased overall. Patients underwent COVID-19 testing and treatments for this novel virus. Though servicing switched at most practices to remote platforms, the intensity of service billing and therefore revenue, decreased for many primary care providers.

Many wondered if value-based contracting provisions would be adjusted in light of the pandemic experience. Our CPC+ Commercial Payer Partners, BCBSM and Priority Health are interested in knowing CPC+ community thoughts and ideas about how to equitably reimburse providers, practices and POs given the COVID-19 pandemic. To inform this effort, the June CPC+ Michigan Multistakeholder Steering Committee session included a round robin so that each member (PO, practice, provider) on the Steering Committee could provide their organization's thoughts and input about approaches for payment adjustment. The Steering Committee discussion highlights on this topic included the following top notes:

- It will be important to inform the decision about an approach to adjusting payment with an analysis of the data over time; One approach suggested was paying out at the same magnitude as the previous year;
- Another suggestion was to exempt the pandemic period from calculations;

- Yet another was to adjust quality benchmarks as even with rapid telehealth adoption some preventive services such as mammograms could not be provided given social distance and stay-at-home precautions. If this were considered, however, it would have to be accomplished in a way that protected for the greater goal of advancing population health.

The Commercial Payers will take the input back to their organizations and update the group on the decision-making processes at their organizations. If you or your organization has input for either of our Commercial Payer partners, please write dbechel@umich.edu and Diane will relay your input to our Payer Leaders.

[Telehealth Resources: The Best of the Best](#)

To supplement the resources, we have provided in the past about the evolving telehealth landscape, the Multipayer Initiatives Team continues to scan the latest offerings to winnow down the set that offers the greatest value to our CPC+ Community. Here is the latest set!

- If you are interested in learning more about CMS' New Waivers and Billing Changes for Telemedicine (Interim Rule 5531) you may find the following helpful:
 - [Webinar recording](#) by Michigan State Medical Society
 - Documents referenced in the webinar
 - [Updates from Medicare on Coding and Billing for Telemedicine](#)
 - [CMS, HHS Final Rule Comment Period: Medicare and Medicaid Programs, Basic Health Program, and Exchanges; Additional Policy and Regulatory Revisions in Response to the COVID-19 Public Health Emergency and Delay of Certain Reporting Requirements for the Skilled Nursing Facility Quality Reporting Program](#)
 - [CMS, HHS Final Rule Comment Period: Medicare and Medicaid Programs; Policy and Regulatory Revisions in Response to the COVID-19 Public Health Emergency](#)
 - [Index of CMS 5531 IFC](#)
 - [Topic in CMS-1744-IFC](#)
- If you are interested in Medicaid Telemedicine policy and billing information
 - Telemedicine codes fee schedule:
 - [COVID-19 response fee schedule](#)
 - [Telemedicine services fee schedule](#) (NOTE: To access this, you will need to agree to the disclaimer then scroll down to "Telemedicine Services" and select the schedule you want to view and click Go)
 - [Medicaid provider manual](#) (Telemedicine policy is contained in the Practitioner Chapter, section 17). This section contains participation coverage and reimbursement policies related to Medicaid, Healthy Michigan Plan, Children's Special Health Care Services, and other healthcare delivery programs administered by the MDHHS.
 - [Medicaid Approved Policy Bulletins 2020](#): General telemedicine policies are 20-09, 20-13, 20-21 and 20-22. If the policy says "COVID-19 Response" in the title it's a temporary policy only in effect during the pandemic. MSA 20-09 is permanent policy.

[Join the CPC+ Dashboard or Metric Alignment Subcommittee and Make Your Voice Heard!](#)

We have openings on the Metric Alignment and Dashboard subcommittees. Serving on a subcommittee provides you with access to other thought leaders in the CPC+ Michigan community and an opportunity to influence change and meaningfully contribute to progress. Submitting your nomination is quick and easy, and the monthly commitment

asked of subcommittee members is one to two hours for meetings or conference calls. Here are the charters and nomination links for each subcommittee:

- 1) Metric Alignment – This subcommittee seeks those who are interested in streamlining metrics across payers so that they capture what is most key to effective care delivery in an efficient and effective way. This may especially appeal to physicians and health care providers, but those involved in data collection and reporting are also sought as members. The charter is available at [Metric Alignment Subcommittee Charter.pdf](#), and **nominations can be submitted to:** [Metric Alignment Subcommittee Nomination Form](#).
- 2) Dashboards and Performance Oversight – If you enjoy translating data to information that drives action, this subcommittee may be of special interest. The group will inform the continuing refinement of multipayer CPC+ dashboards and reports, as well as keep an eye on Michigan’s performance on key CPC+ evaluation metrics and identify opportunities for improvement. The charter is available at [Dashboards Performance Oversight Subcom Charter.pdf](#), and **nominations can be submitted to:** [Dashboard and Performance Oversight Subcommittee Nomination Form](#)

[Michigan Data Collaborative \(MDC\)](#)

The Michigan Data Collaborative (MDC) is excited to share that the CPC+ Dashboard Release 1 was launched on Monday, May 4, 2020, with CMS Medicare and BCBSM data! We are busy preparing Release 2 expected in July.

If you would like access and have not yet completed the Data Use Agreement(DUA) or the User Account Request to allow access to the CPC+ Dashboards for your organization, please contact the Michigan Data Collaborative at MDC-Accounts@med.umich.edu, and we will work with you to request access.

The CPC+ Dashboard training webinars have been well-attended. The next session is scheduled for Friday, July 10, 11-12 PM. View and register for upcoming sessions here: [CPC+ Dashboard Training Plan](#). Highlights of what you will find in the first dashboard include:

- An overview of your population with demographic information like age, gender, community (rural or urban), payer, and chronic condition prevalence.
- The capability to analyze measure results including comparisons to the CPC+ Michigan performance average.
- An insights page to easily identify areas for improvement, as well as bright spots in your organization’s CPC+ performance.
- Drill downs to the provider and patient level.
- Comparisons across Managing Organizations and Practices to support collaboration for improvement.
- The Release 1 Announcement, Release Notes, User Guide, and CPC+ Measures Technical Guide can all be found on the CPC+ Support page of the [MDC Website](#).
- The MDC plans to make continued enhancements throughout future releases, including incorporating Priority Health claims data.
- The MDC CPC+ Dashboard Training pre-recorded webinar can be viewed [here](#).

[Michigan Institute for Care Management and Transformation Educational Offerings](#)

MICMT is actively working with state-wide trainers to compile a list of trainings on our website, however it is currently recommended to check specific MICMT approved PO and Trainer Organization websites as our list is continuing to be updated.

The list of MICMT approved state-wide trainers is available at <https://micmt-cares.org/training>

Current list of trainings can be found in the News and Events section of MICMT's website: <https://micmt-cares.org/events>.

The MICMT Statewide Trainer applications for Individual Trainer and Trainer Organization are available on the MICMT website. As a first step, Physician Organizations and Individuals interested in becoming a MICMT approved trainer are encouraged to review the MICMT Trainer Qualifications: click [here](#)

The Collaborative Care Model webinar series begins 6.10.20. The webinar series is open to PO Leaders and interested primary care team members. For additional information and Collaborative Care Model webinar registration: click [here](#)
Please do not hesitate to reach out with any questions or concerns: micmt-requests@med.umich.edu

[Contact Us! How Can We Help? Supporting CPC+ POs and Practices in Michigan](#)

The joint commercial CPC+ payers in Michigan are working together to support multipayer alignment with the University of Michigan. We advocate with CMS to emphasize the important role that POs play in supporting CPC+ and work with them as partners in the Michigan CPC+ community, work with all participating payers in Michigan to create consistency in payer policy and approach wherever possible, and work to remove roadblocks that practices and POs face in CPC+ implementation and operations. We are interested in learning about your successes, challenges and questions. **Please contact the CPC+ Michigan Regional Convener, Diane Marriott (dbechel@umich.edu or 734 998 0390) at any time to share your ideas and experiences.**