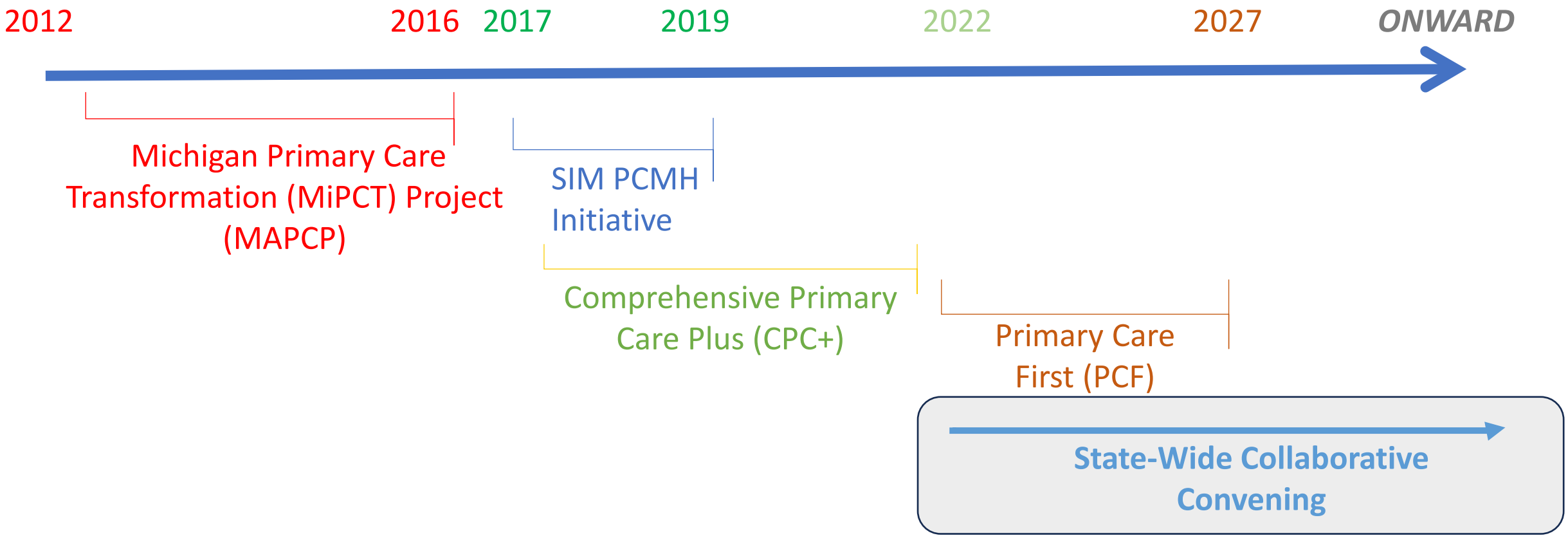
Michigan Multipayer Initiatives: A Brief History of Time



Michigan's MAPCP Medicare Return on Investment for PCMH and Non-PCMH Comparison Groups (RTI)

			Vs. PCMH			Vs. non-PCMH		
State	Eligible beneficiary quarters	Total MAPCP Demonstration fees	Gross Savings	Net Savings	Return on fees	Gross Savings	Net Savings	Return on fees
Michigan	2,265,099	$64,938.363	$294,714,755*	$229,776,392*	4.54	$140,492,980	$75,554,617	2.16

** Statistically significant at the 10 percent level. Only gross and net savings were tested for statistical significance. Statistical testing was done only at the state level. Statistical significance cannot be determined for the total of gross or net savings across all states.*

Source: *Evaluation of the Multi-Payer Advanced Primary Care Practice (MAPCP) Demonstration-Final Report, June 2017, Centers for Medicare & Medicaid Services, Table 3-19, "Estimates of gross savings, MAPCP fees paid, and net savings vs. PCMH and non-PCMH comparison practices" p. 239*

Medicare Primary Care Payment Reform Cannot Wait

Actions for CMS and Congress

- Build on existing efforts to increase resources (payments) for primary care; Real progress requires creating separate fee schedules (cognitive and procedural) and restoring the RUC to an advisory role.
- Institute a partial PMPM to fund team-based care *(as per NASEM Recommendations 1.1-1.4).*
- Set risk for primary care proportional to its sphere of influence.

Important Lessons for Future Models

Actions for CMMI

- If you want multipayer participation, involve payers (and not just the big three) and other stakeholders (i.e., patients; conveners) in model design.
- Make models easy to understand; Communicate expectations in advance.
- Focus on practice teams, not individual practitioners and encourage primary care and specialty care teams to work together; Continue focus on select high-value specialties to craft win/win approaches.
- Demonstrations need frequent performance feedback comparisons to a control group so that participants see where they are doing well and where they are falling short.

Encouraging Longitudinal Patient-Provider Relationships

MICHIGAN MULTIPAYER INITIATIVES

- Establish interoperability standards; without these, it is difficult to track longitudinal care and relationships. *(For Our Federal Partners)*
- Make it easy for patients to voluntary align and reward them when they do (waive primary care cost-sharing). *(For All Payers)*
- Streamline team-based care management codes and requirements; providers are afraid to bill them now. *(For Our Federal Partners to Lead and All Payers to Follow)*
- Continue to leverage MSSP ACO strategies. *(For Our Federal Partners)*