

CMS Innovation Center – Behavioral Health Transformation

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The CMS Innovation Center Statute

“The purpose of the [Center] is to test innovative payment and service delivery models to reduce program expenditures...while preserving or enhancing the quality of care furnished to individuals under such titles”



Three scenarios for success under Statute:

- 1. Quality improves; cost neutral**
- 2. Quality neutral; cost reduced**
- 3. Quality improves; cost reduced (best case)**

If a model meets one of these three criteria and other statutory prerequisites, the statute allows the Secretary to expand the duration and scope of a model through rulemaking

Vision: What's to Come Over the Next 10 Years



Making Care Primary (MCP) Model

The Making Care Primary (MCP) Model is a 10.5 year multi-payer model with **three participation tracks** that seeks to improve care for patients by:

- expanding and enhancing **care management** and **care coordination**
- providing tools that **support partnerships** between primary care clinicians and health care specialists
- **leveraging community-based connections** to address patients' health needs as well as their health-related social needs



MCP builds on lessons learned in the **Comprehensive Primary Care (CPC)**, **CPC+**, and **Primary Care First (PCF)** models, as well as the **Maryland Primary Care Program (MDPCP)**

Innovation in Behavioral Health (IBH) Model

The IBH Model aims to test a value-based payment (VBP) approach, aligned across Medicaid and Medicare, that enables behavioral health (BH) practices to integrate BH care with physical health (PH) care and health-related social needs (HRSNs).

OBJECTIVES



Improve care quality and health outcomes for people with moderate to severe BH conditions, including mental health (MH) conditions and/or substance use disorders (SUDs).



Support BH practices to provide integrated, person-centered care in a BH setting, working with other providers as part of an **interprofessional care management team** to address beneficiaries' BH and PH needs as well as HRSNs.

INTENDED OUTCOMES



Enhanced quality and delivery of **whole person care**



Increased **access to BH, PH, and HRSN services**



Improved health and equity **outcomes**



Fewer **avoidable emergency department** and inpatient visits



Strengthened **health information technology (IT) systems capacity**

Understanding the Health Care Landscape

The nation's health care system is complex and in order to drive change, the CMS Innovation Center must consider a number of factors such as **care coordination, health equity** and the role of **accountable care organizations**.

To learn more about these topics and other fundamental aspects of health care, visit the CMS Innovation Center's [Key Concepts](#) webpage.

To learn more about **the future of value-based care**, visit the CMS Innovation Center's [Strategic Direction](#) webpage.

Where can innovators go for more information?

[Sign up to receive regular email updates](#) about the CMS Innovation Center, including opportunities to engage with, provide input on and potentially participate in model tests.

Visit the [CMS Innovation Center](#) website and [CMS Innovation Center Models](#) webpage to see current participant information* and which models are currently [enrolling](#).

To learn more about ACOs, visit the [Medicare Shared Savings Program](#) site.

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