



All Payer Policy & Medicare Advantage Qualifying Payment Arrangement Incentive

Richard Jensen

*Division of Alternative Payment Model Infrastructure, Center for
Medicare and Medicaid Innovation, CMS*

Sharon Andres

*Division of Delivery System Demonstrations, Center for Medicare and
Medicaid Innovation, CMS*





Presentation Objectives

- Review of the Quality Payment Program
- All-Payer Combination Option and Other Payer Advanced APMs
- Medicare Advantage Qualifying Arrangement Incentive Demonstration (MAQI)



Context of QPP and MAQI: Medicare Payment Prior to MACRA

- **Fee-for-service (FFS)** payment system, where clinicians are paid based on **volume** of services, not **value**.
- **The Sustainable Growth Rate (SGR)**
 - Established in 1997 to **control the cost of Medicare payments** to physicians



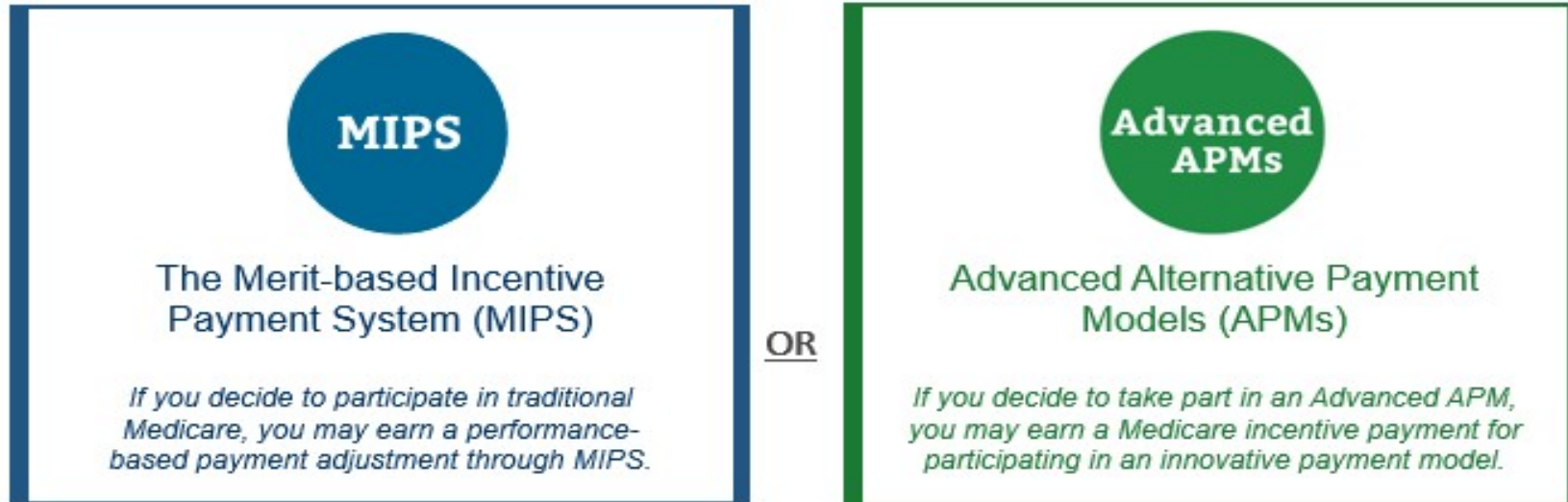


The Quality Payment Program

The Quality Payment Program:

- Reforms Medicare Part B payments for more than 600,000 clinicians
- Improves care across the entire health care delivery system

Clinicians have two tracks to choose from:





What is an Alternative Payment Model (APM)?

Alternative Payment Models (APMs) are new approaches to paying for medical care through Medicare that incentivize quality and value. The CMS Innovation Center develops new payment and service delivery models. Additionally, Congress has defined—both through the Affordable Care Act and other legislation—a number of demonstrations that CMS conducts.

As defined by
MACRA,
APMs
include:

- ✓ CMS Innovation Center model (under section 1115A, other than a Health Care Innovation Award)
- ✓ MSSP (Medicare Shared Savings Program)
- ✓ Demonstration under the Health Care Quality Demonstration Program
- ✓ Demonstration required by federal law



Advanced APMs Must Meet Certain Criteria

To be an Advanced APM, the following three requirements must be met.

The APM:

1

Requires participants to use **certified EHR technology**;

2

Provides payment for covered professional services based on **quality measures** comparable to those used in the MIPS quality performance category; and

3

Either: (1) is a **Medical Home Model expanded** under CMS Innovation Center authority OR (2) requires **participants to bear a more than nominal amount of financial risk.**



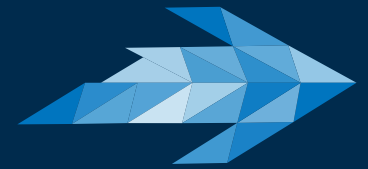
What are the Benefits of Participating in an Advanced APM as a Qualifying APM Participant (QP)?

QPs:

Are excluded from MIPS

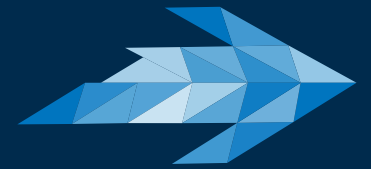
Receive a 5% lump sum bonus

Receive a higher Physician Fee Schedule update
starting in 2026



Qualifying APM Participant (QP): QP Status Thresholds

Requirements for Incentive Payments for Significant Participation in Advanced APMs (QP Status Thresholds) (Clinicians must meet payment or patient requirements)						
Performance Year	2017	2018	2019	2020	2021	2022 and later
Percentage of Payments through an Advanced APM	25%	25%	50%	50%	75%	75%
Percentage of Patients through an Advanced APM	20%	20%	35%	35%	50%	50%



All-Payer Combination Option

Overview

The MACRA statute created two pathways to allow eligible clinicians to become QPs.



Medicare Option

- Available for all performance years.
- Eligible clinicians achieve QP status exclusively based on participation in Advanced APMs with Medicare.



All-Payer Combination Option

- Available starting in Performance Year 2019.
- Eligible clinicians achieve QP status based on a combination of participation in:
 - Advanced APMs with Medicare; and
 - Other Payer Advanced APMs offered by other payers.



What is an Other Payer Advanced APM?

Other Payer Advanced APMs are non-Medicare payment arrangements that meet criteria that are similar to Advanced APMs under Medicare. Beginning in 2019, participation in Other Payer Advanced APMs may be combined with Medicare Advanced APM participation to achieve QP or Partial QP status.

Payer types that may have payment arrangements that qualify **as Other Payer Advanced APMs** include:

- | |
|--|
| ✓ Title XIX (Medicaid) |
| ✓ Medicare Health Plans (including Medicare Advantage) |
| ✓ Payment arrangements aligned with CMS Multi-Payer Models |
| ✓ Other commercial and private payers |



All-Payer Combination Option

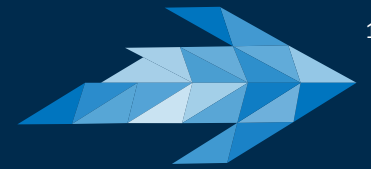
Other Payer Advanced APM Criteria

The criteria for determining whether a payment arrangement qualifies as an Other Payer Advanced APM are similar, but not identical, to the comparable criteria used for Advanced APMs under Medicare:

1 Requires at least 50 percent of eligible clinicians to **use certified EHR technology** to document and communicate clinical care information.

2 Base payments on **quality measures that are comparable to those used in the MIPS** quality performance category.

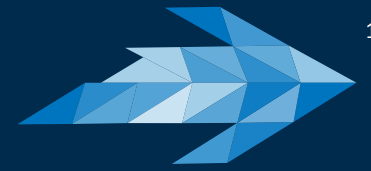
3 Either: (1) is a Medicaid Medical Home Model that meets criteria that are comparable to a **Medical Home Model expanded** under CMS Innovation Center authority, OR (2) requires **participants to bear more than nominal amount of financial risk if actual aggregate expenditures exceed expected aggregate expenditures.**



Qualifying APM Participant (QP)

All Payer and Other APM Thresholds

All-Payer Combination Option (Could Exceed Thresholds with Medicare Only, But Must Meet the Medicare Minimum and Then Can Add Other Payer Participation)										
Payment Year	2017	2018	2019		2020		2021		2022 and later	
QP Payment Amount Threshold	N/A	N/A	50%	25%	50%	25%	75%	25%	75%	25%
QP Patient Count Threshold	N/A	N/A	35%	20%	35%	20%	50%	20%	50%	20%
			Total	Medicare	Total	Medicare	Total	Medicare	Total	Medicare



All-Payer Combination Option

Determinations of Other Payer Advanced APMs

There are two pathways through which a payment arrangement can be determined to be an Other Payer Advanced APM.

Payer Initiated Process

- Voluntary.
- Deadline is **before** the QP Performance Period.
- Specific deadlines and mechanisms for submitting payment arrangements vary by payer type in order to align with pre-existing processes and meet statutory requirements.

Eligible Clinician Initiated Process

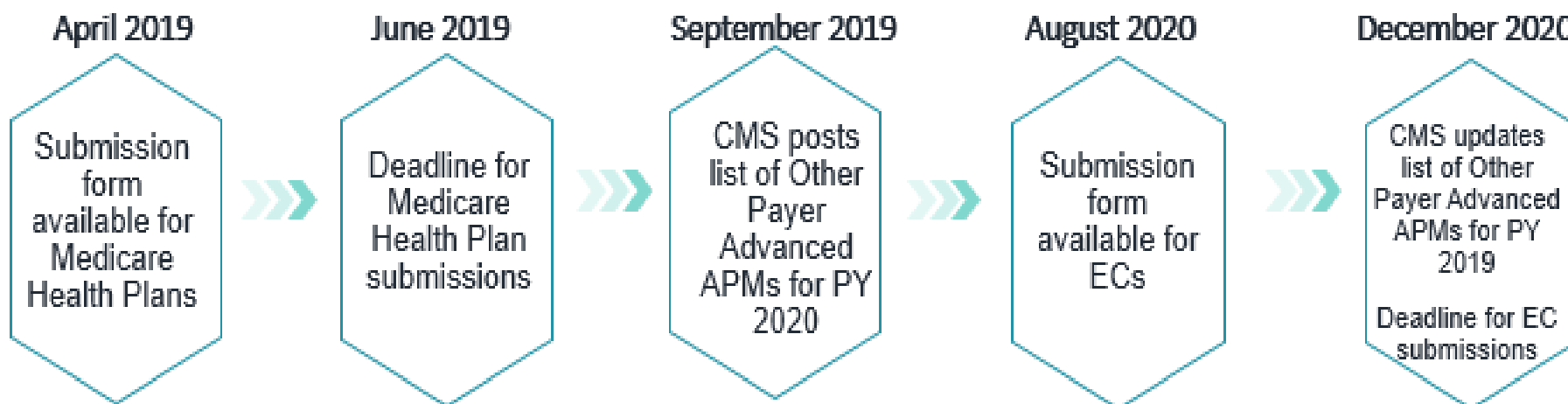
- Deadline is after the QP Performance Period, except for eligible clinicians participating in Medicaid payment arrangements.
- Overall process is similar for eligible clinicians across all payer types, except for the submission deadlines.



All-Payer Combination Option

Timeline for Determinations of Other Payer Advanced APMs

Medicare Health Plans





The Medicare Advantage Qualifying Arrangement Incentive (MAQI) Demonstration:

- Announced in the 2019 Physician Fee Schedule rule
- Emphasizes clinician participation in Advanced APM-like payment arrangements with Medicare Advantage Organizations (MAOs)
- Proposed as a 5-year project; first performance year started in 2018



MAQI in the Context of QPP

Adjustments to Fee For Service Payments

QP:
5% Incentive

Partial QP:
Choice of
Whether to
Participate in
MIPS

MIPS:
Positive,
Negative, or
Neutral FFS
Payment
Adjustment

MAQI:
MIPS Exemption
= No Payment
Adjustment
No 5% Incentive



Clinicians that are interested ...

Apply to the Demonstration

- Demo Portal will open 8-1-2019 and will close on 10-2-2019.
- Submit Qualifying Payment Arrangements and Threshold Information.

CMS will review information

- Qualifying Payment Arrangement
- Threshold Information submitted
- Determine if you qualify for the MIPS Exclusion.

CMS will notify Clinicians of Exclusions from MIPS reporting.

- December 2019/January 2020 (estimated)



Role for MAOs

- Let your clinicians know about this opportunity.
- Check the list of CMS payment arrangements with Medicare Health Plans that CMS has determined to be Other Payer Advanced APMs for Calendar Year 2019 QP Performance Period.
- Medicare Advantage plans may submit payment arrangements, using the HPMS QPP module, to determine if they meet the criteria of Other Payer Advanced APM.
- Plans may also assist eligible clinicians in providing Qualifying Payment Arrangement (QPA) by working directly with your clinician groups who plan to apply to MAQI.



Proposed Enhancements for 2019

- TIN Level Participation
- Enhancements to the Application Process
- Improved Educational Material



Questions?

- For more information about the Quality Payment Program and Other Payer Advance APMs, visit:

<https://qpp.cms.gov/about/resource-library>

- For more information on the MAQI Demonstration, visit:

<https://innovation.cms.gov/initiatives/maqi/>