



Beneficiary Engagement and Incentives (BEI) Models



Direct Decision Support (DDS) Model

January 2017



Navigating the Webinar Platform

The screenshot shows an Adobe Connect window titled "BEI Shared Decision Making and Direct Decision Support Models - Adobe Connect". The main content area displays a presentation slide with the title "Beneficiary Engagement and Incentives (BEI) Models" and the text "Direct Decision Support Models January 2017".

Three callout boxes with red arrows point to specific features in the interface:

- Q & A:** A callout box says "Submit questions to the Model Team here" pointing to the "Q & A" panel on the right.
- Links:** A callout box says "Launch links to websites and feedback survey here" pointing to the "Links" panel on the right, which lists "Direct Decision Support Website", "DDS Letter of Intent Website", and "Webinar Feedback Survey".
- Materials:** A callout box says "Download copy of webinar presentation here" pointing to the "Materials" panel on the right, which shows a file named "DDS Webinar Presentation Jan10.pdf" with a size of "1 MB".

| Materials | |
|------------------------------------|------|
| Name | Size |
| DDS Webinar Presentation Jan10.pdf | 1 MB |

Questions during the Presentation

Please submit questions for the model team in the Q&A box throughout the presentation. The team will respond at the end of this presentation or post responses to the FAQs on the DDS website.



Questions can also be submitted by email to DDSmodel@cms.hhs.gov.

Online Polling Question

We want to understand who is in the audience. What group do you represent?

- Decision Support Service Organization
- Provider
- Payer/Insurer
- Hospital
- Government Agency
- Association
- Consulting
- Patient Advocacy Organization
- Other

Introductions

Our speaker today is...

Sam Ortiz

DDS Model Lead

Agenda

- **Direct Decision Support Model (DDS Model)**
 - Introduction
 - DDS Model Design
 - Overview
 - Shared Decision Making Process
 - DDS Model Evaluation
 - Decision Support Organization (DSO) Responsibilities
- **Application Process**
 - Timeline / Key Dates
 - Letter of Intent (LOI) Submission
- **Next Steps**



Direct Decision Support Model Introduction

Value of Shared Decision Making

- Shared decision making can ensure that treatment decisions better align with beneficiaries' preferences and values
- Patients who are empowered to make decisions about their health that better reflect their personal preferences often experience more favorable health outcomes such as:
 - Decreased anxiety
 - Quicker recovery
 - Increased compliance with treatment regimens
 - Lower demand for health care resources
- The DDS Model aims to inform and engage the Medicare beneficiary

Beneficiary Engagement Models

CMS is testing two models:

Direct Decision Support (DDS)

The DDS Model aims to engage beneficiaries about their overall health and specific clinical conditions, outside the clinical care setting, to enable beneficiaries to become more informed, empowered, and engaged health care consumers and have a positive impact on their health care decision making, utilization patterns, and cost of care.

Shared Decision Making (SDM)

The SDM Model aims to integrate shared decision making into routine clinical practice of ACOs, resulting in informed and engaged beneficiaries who collaborate with their practitioners to make medical decisions that align with their values and preferences.

This presentation will focus on the **Direct Decision Support (DSS)** model.

Why Direct Decision Support?

- Literature indicates the difficulty practitioners have in integrating shared decision making into routine workflows
- The DDS Model offers a way for Decision Support Organizations (DSOs) to provide beneficiaries health management information and decision support services
- The DDS Model specifically:
 - Provides beneficiaries with evidence-based, patient-friendly material that educates them about their condition
 - Empowers beneficiaries to have a conversation with their practitioners about what care is best for them

What Is a DSO?

- May be a commercial firm that already successfully provides similar health information and decision support services to populations
- Cannot be a Medical Group or an Accountable Care Organization
- Has documented experience in providing evidence-based, beneficiary-focused clinical information, and has a record of accomplishments working with Medicare and disabled populations
- Is not a Medicare provider or supplier, and does not furnish health care services



DDS Model Design

Overview

The DDS Model promotes:

- Informed and engaged Medicare beneficiaries who identify their own personal values and priorities on a broad range of acute and chronic conditions
- Establishment of an evidence base for engaging all Medicare beneficiaries about their overall health and specific clinical conditions
- Potential improvements in patient engagement and experience with care, as well as reduced Medicare spending

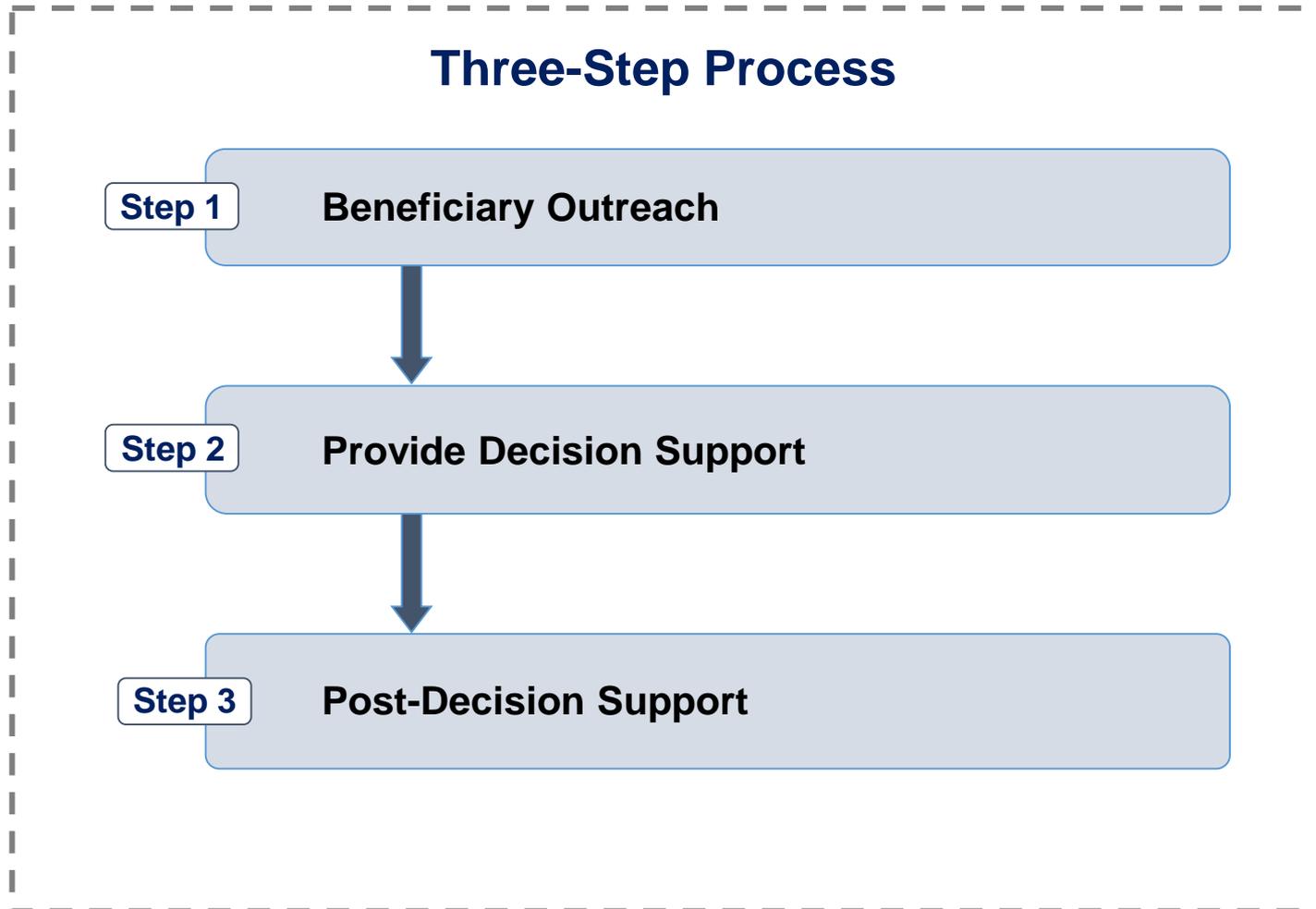
DDS Model Detail

- Inform beneficiaries of the service through outreach
- Target at least six specified preference-sensitive conditions
- Provide decision support using appropriate educational material and patient decision aids (PDAs) that encourage beneficiaries to take an active role in their own care and also improve the dialogue with their practitioner
 - Remain external to the care decision process (DSOs do not diagnose, recommend, or prescribe treatment in any way)
 - Distribute beneficiary incentives
- Disseminate beneficiary questionnaire
- Report required data to CMS

Beneficiary Engagement

- Focus is beneficiary outreach leading to engagement with the DSO, decision support tools, and process
- Minimum 3.5 percent target engagement rate in year one and 7 percent in year two of the DDS Model's operation
- DSOs may use in-kind incentives and/or gift cards to encourage beneficiary engagement:
 - Cash or cash equivalents cannot be offered
 - Approved forms of incentives are allowed: Up to \$25 value per engagement with a maximum of \$50 value per beneficiary per year

DDS Process



Three-Step Process

Step 1

Beneficiary Outreach

Goals

- Establish contact with beneficiaries in assigned population
- Market decision support services
- Announce incentive to engage beneficiaries
- Notify beneficiaries of ability to opt-out and explain the opt-out process

Methods

- Postal mailings and telephone calls, or other CMS approved materials of outreach

Three-Step Process (continued)

Step 2

Provide Decision Support

Goals

- Provide condition-specific support for approved conditions/surgeries
- Assess and/or collect beneficiary preferences, values, and health conditions to provide meaningful decision support

Methods

- Condition-specific decision support, evidence-based decision support, that is web based, paper, a mobile application, or telephonic
- Trained staff and/or certified tools to assess preferences, etc.

Three-Step Process (continued)

Step 3

Post-Decision Support

Goals

- Assess quality of support and decision-making process
- Distribute beneficiary incentive to beneficiary

Methods

- CMS provided Beneficiary questionnaire (paper, web-based, etc.)
- Financial processing of beneficiary incentives/store gift cards

Target Population

- DDS Model will reach no less than 100,000 Medicare Fee For Service (FFS) beneficiaries assigned to the DSO as the intervention group
 - Beneficiaries will be randomly assigned to an intervention or comparison group
- Eligible participants will be Medicare FFS beneficiaries with Part A and Part B, not enrolled in Medicare Advantage or Programs of All-Inclusive Care of the Elderly (PACE)
- Participants will be allowed to opt-out
- DSO can propose a geographically based population (e.g., state and/or region)

Targeted Acute and Chronic Conditions

DSOs will:

- Target engagement for six preference-sensitive conditions
 - See Resource slide at end of slide deck for list
 - Preference Sensitive Condition: A medical condition for which the clinical evidence may not clearly support one treatment option and the appropriate course of treatment depends on the values or preferences of the beneficiary regarding the benefits, harms and scientific evidence for each treatment option (O'Connor et al. 2004)
- Propose additional acute and chronic conditions or procedures for outreach to their awarded population, which will affect a significant majority of the Medicare FFS population
- CMS will approve DSO's proposed conditions/procedures

Population-Based Payment and Incentive

- DSOs will receive a fixed population-based payment per member rate
- DSOs will receive 75% of the per beneficiary per month (PBPM) approved rate
- DSOs are eligible to receive a semi-annual performance bonus of 25% of the PBPM negotiated rate based on:
 - Beneficiary engagement rates (12.5%)
 - Beneficiary feedback about the quality of direct decision support process (12.5%)

Award Period

- DDS Model will have an initial 2-year award.
- DDS Model can be extended with up to three annual renewals (total of 5 years)
- DSOs will have 6 months pre-implementation phase to:
 - Plan
 - Hire staff
 - Set up payment methods
 - Address other developmental tasks

DDS Model Evaluation

- Independent evaluation to be conducted for DDS Model
- Evaluation to explore:
 - Impacts on quality of DDS interaction, cost and utilization
 - Aspects of the DDS Model and contextual factors that contribute to impacts
- Potential data sources:
 - Secondary data (e.g., CMS claims, DSO data submissions)
 - Primary data (e.g., Beneficiary questionnaire, site visits, interviews, focus groups)
- Results to be conveyed in annual reports
- DSOs will be expected to cooperate with evaluators (e.g., participate in interviews, submit survey responses)

DSO Responsibilities

- Propose a set of conditions and procedures including the required six PSCs
- Identify evidence-based decision support tools, including PDAs that have been vetted or previously deployed
 - PDAs are educational tools that help beneficiaries to communicate their values, beliefs, and preferences to decide with the health care practitioner what treatments are best for them based on their treatment options, scientific evidence, circumstances, beliefs, and preferences. (42 U.S.C. § 299b–36)
- Establish an approach for ongoing communication between the DSO and Medicare beneficiary
 - Methods of outreach may include direct mail to Medicare FFS beneficiaries, inviting participation through a website, or phone line

DSO Responsibilities (continued)

- Establish process to honor “opt-out” beneficiary decisions
- Provide decision support services
- Establish approaches to achieve a target engagement rate (defined as percentage of beneficiaries completing the decision support process and completing a questionnaire)
- Develop process to field a beneficiary questionnaire with CMS questions
- Develop an approach to report and transmit data to CMS for purposes of evaluation, DSO payments and monitoring



DDS Model Application Process: LOI

Timeline

| Key Dates | |
|---|------------|
| Letter of Intent Available | 12/08/2016 |
| Request for Applications Opens | 01/28/2017 |
| Letter of Intent Due 5:00 PM EST | 03/05/2017 |
| Applications Due 11:59 PM EST | 03/05/2017 |
| Awards Announced | 06/30/2017 |
| Pre-Implementation Start Up Period Begins | 07/01/2017 |
| DDS Model Go Live | 01/01/2018 |



Letter of Intent Requirement

- Applicant must submit a Letter of Intent (LOI)
- The LOI will not bind an interested DSO to move forward under the DDS Model
- The application page is only accessible to applications after submitting a LOI
- LOI submission requirements:
 - DSO Name and Contact Information
 - Response to Questions

<https://app1.innovation.cms.gov/beidds/beiddsloi>

DSO Name and Address

Provide DSO organization details

- Organization Name
- DBA
- Address
- City, State, Zip
- Web address

CMS.gov
Centers for Medicare & Medicaid Services

Beneficiary Engagement and Incentives Direct Decision Support (DDS) Letter of Intent (LOI)

Instructions [Questions / Help](#)

Decision Support Organizations interested in participating in the Direct Decision Support (DDS) Model must submit a Letter of Intent (LOI). LOIs will be used only for planning purposes, and the content of the LOI will not be binding. Completed LOIs are due by 5:00 PM Eastern Standard Time on 03/05/2017. CMS will not consider applications submitted after 5:00 PM Eastern Standard Time on 03/05/2017.

⚠ Do not use your browser's back page function or navigate away from this page while completing your LOI. Doing so will cause you to lose information that you have entered into your LOI. If you navigate away from this page, all information that you entered will be lost.

Decision Support Organization (DSO) Information

* Indicates a required field

* Organization Name

Doing Business As

* Street Address

Street Address 2

* City * State * Zip - (+ 4)

Website

DSO Contact Information

Provide information for two contacts within your organization

Primary Contact:

- Name
- Position
- Contact information

Secondary Contact:

- Name
- Position
- Contact information

The form is divided into two main sections: "Applicant Primary Contact" and "Applicant Secondary Contact". Each section contains the following fields:

- Applicant Primary Contact:**
 - * First Name (required)
 - * Last Name (required)
 - Title/Position
 - * Email Address (required)
 - * Business Phone Number (required)
 - Business Phone Extension
 - Alternative Phone Number
 - * Street Address (required)
 - Street Address 2
 - * City (required)
 - * State (required, dropdown menu)
 - * Zip (required)
 - (+ 4)
- Applicant Secondary Contact:**
 - * First Name (required)
 - * Last Name (required)
 - Title/Position
 - * Email Address (required)
 - * Business Phone Number (required)
 - Business Phone Extension
 - Alternative Phone Number
 - * Street Address (required)
 - Street Address 2
 - * City (required)
 - * State (required, dropdown menu)
 - * Zip (required)
 - (+ 4)

A small asterisk icon indicates a required field.

Applicant Information: LOI Question 1

Describe experience providing decision support to patients within your organization

Applicant Information

* Indicates a required field

* 1. Briefly describe the applicant's experience with providing direct decision support to patients with similar characteristics as the traditional Medicare Fee-for-Service (FFS) population:

Applicant Information: LOI Question 2 & 3

Provide proposed geographic area and confirmation that your organization can support the required number of FFS beneficiaries.

2. What is the geographic area in which the applicant proposes to operate? 

* 3. Can your organization provide decision support services to at least 100,000 Medicare FFS beneficiaries?

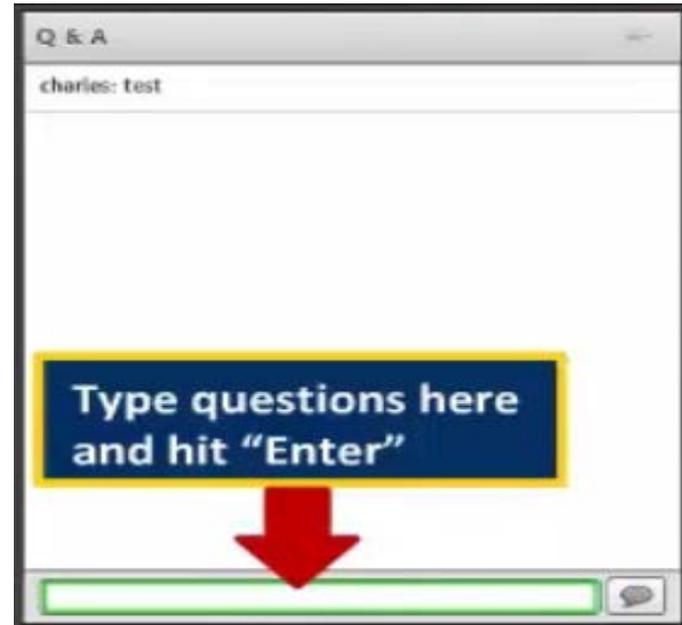
Submit

Q & A

Do you have questions?

At this time the model team will respond to some of the questions received.

Any questions not addressed in this presentation will be included in the FAQs on the DDS website.



Next Steps: Application

- Submit LOI by March 05, 2017 5:00 PM EST;
<https://app1.innovation.cms.gov/beidds/beiddsloi>



And join us for the
**CMS DDS Model
Application Review
Webinar**

Thursday, February 9, 2017
2:00PM EST

Feedback Survey

Thank you for attending today's webinar. Your feedback on this program helps CMMI to deliver the highest quality learning events.

Please take a moment to complete our brief, 5-question survey.

https://www.surveymonkey.com/r/BEI_DDS

A link to the survey is available in links box on this screen and will also be included in a follow-on email.

For More Information

- FAQs are posted on CMS DDS website:
<https://innovation.cms.gov/initiatives/Beneficiary-Engagement-DDS/index.html>
- Questions can be submitted to the CMS mailbox:
DDSmodel@cms.hhs.gov
- See DDS Model Website:
<https://innovation.cms.gov/initiatives/Beneficiary-Engagement-DDS/index.html>
- For Technical Issues contact: CMMIForceSupport@cms.hhs.gov
or call the helpdesk at 1-888-734-6433, option 5

Resource Slide

- International Patient Decision Aid Standards (IPDAS) Collaboration. (2015) <http://ipdas.ohri.ca/>
- Six Preference-Sensitive Conditions (PSC)
 - Stable ischemic heart disease
 - Hip osteoarthritis
 - Knee osteoarthritis
 - Back pain (herniated disk and spinal stenosis)
 - Early stage prostate cancer, and
 - Benign prostate hyperplasia (bph)