



# Patient Centered Medical Home Initiative Application Process

September 8, 2016

# Agenda for Today's Webinar

- Brief PCMH Initiative Overview (Refresher for Most Participants)
- Preview of PCMH Initiative Supporting and Reference Documents
- Walkthrough of the PCMH Initiative Application Process
- Q&A

# Reminder: PCMH Initiative Strategy Overview

Strategy Component	Motivation
Achieving Statewide Scale	Spread PCMH support infrastructure and payment reform across Michigan
Inclusive Accreditation Approach	Provide flexibility to leverage a variety of PCMH accreditation programs as a foundation
Broad Attributed Population	Reflect the diversity of practice patient populations through attribution methodology
Participation Requirements	Ensure needed capabilities for practice success and advance those capabilities over time
Advanced Care Management	Extend care management, coordination and community linkages capabilities
Multi-Payer Participation	Grow alternative payment model scale within practices to drive transformation
Performance-Driven Payment	Create clear rewards for implementing impactful processes and achieving outcomes
Consistent Metrics	Leverage metrics utilized by other programs where possible to simplify measurement
Sustainable Financing	Position Michigan's PCMH infrastructure for lasting innovation and financial stability
PCMH Support and Learning	Provide a collaborative learning context for expert/peer connection and support

# Reminder: PCMH Initiative Focus Areas

- Development of personalized, patient-centered care plans
- Team-based delivery of comprehensive, highly accessible healthcare and care management services
- Coordination and support for effective transitions of care
- Provision of referral decision support, scheduling and follow-up
- Collaboration and intentional interfacing with other providers to promote an integrated treatment approach
- Engagement of supportive services through community-clinical linkages
- Leadership in patient education, self-care and caregiver engagement
- Utilization of registry functionality and technology-enabled quality improvement strategies to support population health

# Potentially Eligible Providers

- PCMHs located within SIM's 5 regional test locations **and** existing MiPCT practices across Michigan (including those outside SIM test locations) are potentially eligible to participate in the Initiative
- SIM regional test locations, for PCMH, include the following counties:

Jackson	Muskegon	Genesee	Washtenaw
Livingston	Emmet	Charlevoix	Antrim
Kalkaska	Missaukee	Wexford	Grand Traverse
Leelanau	Benzie	Manistee	

# Potentially Eligible Providers

- The following provider types are potentially eligible to participate in the Initiative:
  - Family Physicians / General Practitioners
  - Pediatricians
  - Geriatricians
  - Internal Medicine Physicians
  - Obstetricians
  - Gynecologists
  - Advanced Practice Registered Nurses
  - Physician Assistants
  - Federally Qualified Health Centers
  - Rural Health Clinics
  - Child and Adolescent Health Centers
  - Local Public Health Departments
  - Indian Health Services Providers
  - Community Mental Health Service Providers

## Note on CPC+ Eligible Providers

- BPCI, Million Hearts, Accountable Health Communities and SIM can coexist with CPC+
- A subset of MSSP ACO Track 1, 2 or 3 participants will accepted in CPC+ (1,500 of 5,000 total practices)
- ACO Investment Model and Next Gen ACO participants may not participate
- Concierge practices, Rural Health Clinics, and Federally Qualified Health Centers are excluded from CPC+
- Current TCPI/PTN participants must exit TCPI to participate in CPC+
- Practices must have a minimum of 150 attributed Medicare beneficiaries to participate in CPC+

# Supporting Documents

- Participation Agreement Excerpt
- Payment Model
- Practice Transformation Objective Menu
- Medicaid Population Inclusion/Exclusion
- Application Guide

# Payment Model: Medicare / CPC+

- MDHHS anticipates many (if not most) participating practices in 2017 will simultaneously participate in CPC+, receiving Medicare payment through the CPC+ payment model:
  - Risk-adjusted care management fee
  - Performance-based incentive payment (prospectively paid / retrospectively reconciled)
  - Comprehensive Primary Care Payment (Track 2 Only)
- Practices participating in the PCMH Initiative that are not simultaneously participating in CPC+ have numerous Medicare fee schedule opportunities for Medicare revenue, including:
  - Chronic Care Management (99490)
    - Complex care management (*99487/99489 Proposed for 2017*)
  - Transitional Care Management (99495/99496)
  - Non-face-to-face Prolonged Evaluation and Management Services (*Proposed for 2017*)
  - Behavioral Health Collaborative Care Model (*Proposed for 2017*)

# Payment Model: Commercial Payers

- MDHHS anticipates current MiPCT commercial payer partnerships will continue for the PCMH Initiative in 2017
  - Practices which simultaneously participate in CPC+ will receive commercial payment through the CPC+ program
  - Practices which do not (or cannot) participate in CPC+ will receive commercial payment as defined through payer agreement(s) entered into by the Initiative

# PMCH Initiative Application

- The PCMH Initiative application is open from Thursday September 8<sup>th</sup>, 2016 until 5:00 pm EST, September 30<sup>th</sup>, 2016
- Application process for the Initiative is being facilitated through the Michigan Health Information Network (MiHIN) Health Provider Directory (HPD)
- Physician Organizations (POs) may apply on behalf of practices, providing that the PO has practice consent. Alternatively, practices may apply on their own (but are then responsible for reporting and other requirements).
- Payment is tied to the mode of application, ie if a PO applies on behalf of several practices, the payment (both Care Management and Practice Transformation PMPMs) from the Medicaid Health Plans will go directly to the PO

# PMCH Initiative Application: Applying via the PO or Alone

- There are separate links for applications from practices, and for applications from POs on behalf of their practices.
  - If you believe that you should have received the links to the application, but did not, please contact the SIM Team at [SIM@mail.mihealth.org](mailto:SIM@mail.mihealth.org)

# PMCH Initiative Application: Landing Page



## PCMH Initiative Application

The Michigan Department of Health and Human Services' (MDHHS) State Innovation Model (SIM) is pleased to invite those that expressed interest in the Patient Centered Medical Home Initiative through the Intent to Participate process to complete the PCMH Initiative application. The application is open until 5:00 PM EST, September 30th, 2016. Once the application is opened, progress is automatically saved, your browser may be closed and the application accessed multiple times until submission. The application must be completed and submitted within 10 days of starting it, therefore please prepare for the following to aid in the completion of the application:

### Verify the following Information:

- The Provider Organization demographic information (legal name, street address, etc.)
- All associated practice units demographic information (legal name, street address, etc.)
- All associated eligible provider(s) demographic information (name, NPI, FTE at participating practice, etc.)

### Provide the following Information:

- Practice Unit Participation in Federal/State/Local Programs
- Current Payer Contract Details (for all contracts - at PO and/or practice level)
- Network Affiliations (hospital/health systems, etc.)
- Regular Referral Agencies/Organizations
- Practice Infrastructure and Capabilities (for each PU applying):
  - EHR/Registry/Electronic Decision Support Details
  - Care Management Documentation/Structure
  - Access (24 hour access, hours of operation, etc.)
  - Meaningful Use Attestation
- Selection of a SIM PCMH Initiative Practice Transformation Objective

**Note: it is recommended that you complete this application on a PC.**

If you have questions about the application, please contact: [SIM@mail.mihealth.org](mailto:SIM@mail.mihealth.org)

[Start Application](#)

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# PMCH Initiative Application: Login Page



Enter your Email Address

Continue

# PMCH Initiative Application: Point of Contact

All applicant organizations will need to identify a point of contact in the event that the SIM team has questions or important information to share with applicants

The screenshot shows the 'Point of Contact' section of the PMCH Initiative Application. On the left is a navigation menu with 'Point of Contact' selected. The main content area contains a form with several required fields: First Name, Last Name, Phone, E-mail, Street Address, City, State (pre-filled with 'MI'), and Zip Code. A 'Next' button is located at the bottom right of the form area. A legend indicates that an asterisk (\*) denotes required fields. The footer includes the copyright notice 'Copyright © 2016 Michigan Health Information Network' and a 'Back to top' link.

**MICHIGAN DHHS** PCMH Initiative Application  
Michigan Department of Health & Human Services

**Point of Contact**

Please provide the following information for the individual completing the application, which should be contacted throughout the application process, or regarding participation in the SIM PCMH Initiative

\* First Name:

\* Last Name:

\* Phone:

\* E-mail:

\* Street Address:

\* City:

\* State:

\* Zip Code:

[Next](#)

\* = Required Fields

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# PMCH Initiative Application Links: PO Information Page

**MDHHS** Michigan Department of Health & Human Services

## PCMH Initiative Application

**Point of Contact**

**Demographic Information**

Practice Units

Eligible Licensed Providers

Network Affiliations

Contracts

Infrastructure, Capabilities and Requirements

Application Submission

### Physician Organization Information

Enter a Practice Unit name. If there is information available it will be retrieved and populated.

Physician Organization:

\* E-mail:

\* Phone:

\* Street Address:

\* City:

\* County:

\* State:

\* Zip Code:

\* = Required Fields

The application platform will pull forward known information

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\* This page is specific to the PO application

# PMCH Initiative Application Links: Associated Practices



## PCMH Initiative Application

- Point of Contact
- Demographic Information
- Practice Units**
- Eligible Licensed Providers
- Network Affiliations
- Contracts
- Infrastructure, Capabilities and Requirements
- Application Submission

### Physician Organization Practice Units

Select **Eligible** Practice Units from the list below:

<input type="checkbox"/>	Practice Unit Name
<input type="checkbox"/>	Mercy Health Physician Partners - Lakes Family Medicine
<input type="checkbox"/>	Mercy Health Physician Partners - Lakeshore Family Care
<input type="checkbox"/>	Mercy Health Physician Partners - Adult Medicine Specialists
<input type="checkbox"/>	Mercy Health Physician Partners - Harbour Pointe
<input type="checkbox"/>	Mercy Health Physician Partners - Hart Family Medical
<input type="checkbox"/>	Mercy Health Physician Partners - Norris Creek
<input type="checkbox"/>	Mercy Health Physician Partners - Northshore Family Practice
<input type="checkbox"/>	Mercy Health Physician Partners - Norton Family Practice
<input type="checkbox"/>	Mercy Health Physician Partners - West View Family Medicine
<input type="checkbox"/>	Mercy Health Physician Partners - Lakeshore Medical
<input type="checkbox"/>	Family & Internal Medicine North Muskegon
<input type="checkbox"/>	Mercy Health Physician Partners - Harborwood Family and Lakes
<input type="checkbox"/>	Mercy Health Physician Partners - Westshore Family Medicine
<input type="checkbox"/>	Mercy Health Physician Partners - Westshore Internal Medicine

Select a Practice from the drop down below and then click "Add New Practice" button to add a Practice.

4 SERV FAMILY MEDICINE

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\* This page is specific to the PO application

# PMCH Initiative Application Links: Associated Providers



## PCMH Initiative Application

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### Associated Providers

Use the drop down menu below to view providers associated with each selected practice. To indicate an eligible provider participating in the SIM PCMH Initiative, select the box next to that provider's name. Note, a provider can only be attributed to one participating practice for the purposes of the SIM PCMH Initiative, therefore the provider should only be selected under that practice name, and not under all selected practices. Use the "Add Provider" button to create a record if a provider does not appear in the list for the associated practice.

Mercy Health Physician Partners - Lakes Family Medicine

Mercy Health Physician Partners - Lakes Family Medicine

<input checked="" type="checkbox"/>	Provider NPI	Provider Name	Provider Type	Multiple Practices	Hours/Week at the practice
<input checked="" type="checkbox"/>	1255339479	DEBORAH POSTHUMUS	--Select --		<input type="text"/>
<input checked="" type="checkbox"/>	1710957790	ANTOINETTE HILDWEIL	--Select --		<input type="text"/>
<input checked="" type="checkbox"/>	1851361802	MICHELLE KLANKE	--Select --		<input type="text"/>

Add Provider

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# PMCH Initiative Application Links: Network Affiliations


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### Network Affiliations

Select a practice to view/edit related information: Mercy Health Physician Partners - Lakes Family Medicine

Select all the Federal/State Program/Initiative Participation(s)

Medicare Shared Savings Program - Track 1, Track 2, Track 3

Federally Qualified Health Center (FQHC) Advanced Primary Care Practice Demonstration (Now Concluded)

Next Generation

CMS Practice Transformation Network

MI Care Team (Health Homes)

MI Health Link (Dual Eligible Integrated Care Demonstration)

Michigan Primary Care Transformation (MIPCT)

Million Hearts

Comprehensive Primary Care Plus (CPC+) - Intend to Apply

Pioneer ACO

Others

#### Hospital/Health System Affiliations

Affiliation Name	
<input style="width: 90%;" type="text"/>	

#### Regular Referral Agencies/Organizations

Within the last six months, which types of providers and organizations has the practice unit referred patients to most often?

Clinical Referral	Community Referral
<input type="checkbox"/> Cardiology	<input checked="" type="checkbox"/> Local Public Health Department
<input type="checkbox"/> Pain Management	<input type="checkbox"/> Community Mental Health
<input type="checkbox"/> Gastroenterology	<input type="checkbox"/> Community Action Agency
<input type="checkbox"/> Orthopedics	<input type="checkbox"/> Michigan Works!
<input type="checkbox"/> Psychiatry/Psychology/Other Behavioral Health and Substance Use	<input type="checkbox"/> Food Bank/Food Pantry/Meal on Wheels
<input type="checkbox"/> Obstetrics/Gynecology	<input type="checkbox"/> Vocational/Workforce Training Program
<input type="checkbox"/> Physical Medicine & Rehabilitation (PMR)	<input type="checkbox"/> United Way
<input type="checkbox"/> --Other Clinical Referral--	<input type="checkbox"/> YMCA/YWCA
	<input type="checkbox"/> Housing Assistance Program
	<input type="checkbox"/> Refugee Services
	<input type="checkbox"/> Shelter
	<input type="text" value="Other.."/>

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# PMCH Initiative Application: Payer Contracts



## PCMH Initiative Application

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- Contracts**

Infrastructure, Capabilities and Requirements

Application Submission

### Contracts Information

Instructions:

- Each distinct payer (inclusive of Medicaid, Medicare and Commercial payers) should be listed on a separate row.
- All payer contracts should be included even if the payer is not current participating in the Initiative (this data will help with future new payer engagement work)
- Selecting a single Practice Unit (or set of Practice Units) and selecting "no" that it is not a joint contract by the PO on behalf of the practices, indicates individual payer contracts with the practice units selected.

Payer Name	Is this a joint contract entered into by the PO on behalf of all applying practices?	If no, which practice units are contracted with this payer?
<input type="text"/>	<input checked="" type="radio"/> Yes <input type="radio"/> No	Select options ▾

Add Contract

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# PMCH Initiative Application: Practice Infrastructure



## PCMH Initiative Application

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**Infrastructure, Capabilities and Requirements**

Application Submission

### Practice Infrastructure, Capabilities and Requirements

Select a practice to view/edit related information:

#### PCMH Designation/Recognition

1. PCMH designation/accreditation/recognition/certification program (select all that apply):
  - a. Blue Cross Blue Shield of Michigan/Physician Group Incentive Program (BCBSM/PGIP)  Yes  No
  - b. National Committee for Quality Assurance (NCQA) Patient Centered Medical Home  Yes  No
  - c. Accreditation Association for Ambulatory Health Care (AAAHC) Medical Home  Yes  No
  - d. The Joint Commission (TJC) Primary Care Home  Yes  No
  - e. Utilization Review Accreditation Commission (URAC) Patient Centered Medical Home  Yes  No
  - f. Commission on Accreditation of Rehabilitation Facilities (CARF) Health Home  Yes  No

2. Date recognition received and date recognition ends (for each applicable program):

Program	Effective Date	Recognition End Date
BCBSM/PGIP	<input type="text" value="mm/dd/yyyy"/>	<input type="text" value="mm/dd/yyyy"/>
NCQA	<input type="text" value="mm/dd/yyyy"/>	<input type="text" value="mm/dd/yyyy"/>
AAAHC	<input type="text" value="mm/dd/yyyy"/>	<input type="text" value="mm/dd/yyyy"/>
TJC	<input type="text" value="mm/dd/yyyy"/>	<input type="text" value="mm/dd/yyyy"/>
URAC	<input type="text" value="mm/dd/yyyy"/>	<input type="text" value="mm/dd/yyyy"/>
CARF	<input type="text" value="mm/dd/yyyy"/>	<input type="text" value="mm/dd/yyyy"/>

# PMCH Initiative Application: Practice Infrastructure Cont.

## Electronic Health Record System

What electronic health record system does the practice unit utilize?

## Registry System

What Registry system does the practice unit utilize?

## Care Management Documentation Tool

What type of electronic system does the practice unit utilize to document care management and coordination interactions/services?

Which members of the patient care team have access to care management documentation?

(pick all that apply)

- Nursing (RN, LPN)
- Social Work (MSW, BSW)
- Nutrition (RDN, RD)
- Medical Assistant
- Behavioral Health (Psychologist, Counselor, Therapist)
- Peer Support Specialist
- Pharmacy (R.Ph/Pharm.D)
- Care Coordination (CHW, CMA, RSST)
- Office Staff/Other

# PMCH Initiative Application: Practice Infrastructure Cont.

If “yes” → How many FTEs, and selection of staff types



## Care Management and Coordination Staff

1. Does the practice unit currently have embedded care management/coordination staff members?  Yes  No

## 24 Hour Clinician Access

What mechanism is used in the practice unit to ensure patients have 24/7 access to a clinical decision-maker? (i.e. on call rotation, answering service linked to clinician(s) etc.)

## Non-Traditional Business Hours (Evening/Weekend)

How many hours per week does the practice unit provide care outside normal business hours (8:30am-5pm)?

## Meaningful Use Participation

- Have any providers in the practice unit completed any stage of the Medicaid or Medicare EHR Incentive Program (Meaningful Use)?  
 Yes  No

If “yes” → How many which MU program, how many providers at the selected practice



## Practice Transformation Objective Selection

Please select the Practice Transformation Objective that will be tied to your practice transformation payment for the purposes of this initiative. For more information, please see the Application Guide.

- Telehealth Adoption
- Improvement Plans from Patient Feedback
- Medication Management
- Population Health Management
- Self-Management Monitoring and Support
- Care Team Review of Patient Reported Outcome
- Integrated Peer Support
- Group Visit Implementation
- Patient Portal Access
- Cost of Care Analysis
- Integrated Clinical Decision Making

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# PMCH Initiative Application: Submission



## PCMH Initiative Application

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## Application Submission

Thank you for completing the SIM PCMH Initiative application. By selecting submit, your application will be saved and be included for consideration in the Initiative. If you would like to come back to your application, you may close your browser and all information will be saved, however, you must return and submit the application by 5:00pm EST on September 30th, 2016.

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[Submit](#)

# PMCH Initiative Application: Re-entry



## Existing applications for your email address

Add following instructions to top of page: To re-enter a saved application, please select the "Id" number. If you need to open a new application for a different set of practices, please select the "Start New Application" button.

Id	Status	Create Date	Update Date
350	incomplete	2016-09-06 13:18:29.793	2016-09-06 14:00:46.38

Start New Application

# PMCH Initiative Application: Confirmation



## PCMH Initiative Application

Your application for the SIM PCMH Initiative has been received. For additional information on the State Innovation Model, please visit [our website](#).

# What's Next?

## **SIM PCMH Initiative Application Live Office Hours:**

- **SIM PCMH Initiative Application Live Office Hour (1):** DATE: TUESDAY 9/13/2016 | TIME: 8:00 – 9:00AM
- **SIM PCMH Initiative Application Live Office Hour (2):** DATE: THURSDAY 9/22/2016 | TIME: 12:00 – 1:00PM

**SIM PCMH Application Closing Date: 5:00PM Friday September 30, 2016**

**SIM PCMH Initiative Selected Participants Announced: October 14, 2016**

## **Selected Participant Onboarding:**

- Self Assessment
- Participation Agreement
- MiHIN Legal Agreements
- MDC Data Use Agreement