



Governor's Office of
Health Transformation

Ohio Comprehensive Primary Care (CPC) Practice Webinar #4

Attribution and Risk Tiers
June 13, 2017

www.HealthTransformation.Ohio.gov



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Health Transformation

1. Welcome and overview

2. Detailed discussion of attribution and outstanding questions
3. Discussion of risk tiering under Ohio CPC
4. Next steps and questions

Overview and update on the Ohio CPC Program

- Since our last CPC Provider Webinar, we completed **enrollment of 19 new practices** into the Ohio CPC model, representing just under 200k patients
- **Your CPC Practice Report files are available now for Q1** on the MITS portal, which reflect attribution as of September 1, 2016 and the reporting period September, 2015 to October, 2016
- **Your CPC practice's patient attribution files are available now for Q2** on the MITS portal, which reflect attribution as of December 1, 2016
- Slides from **past webinars are available on the Ohio Department of Medicaid website under the 'CPC Provider Webinar' section:**
<http://www.medicaid.ohio.gov/Providers/Paymentinnovation/CPC.aspx#1657177-cpc-provider-webinars>
- As a reminder, **please share communications about Ohio CPC with others in your organization** who may not be receiving these updates

Reminder: Practice Webinar dates and topics for 2017

Webinar topic	Date
✓ 1 Attribution and payment	April 6, 2017
✓ 2 Best practices in meeting activity requirements	April 25, 2017
✓ 3 Ohio CPC Practice Reports	May 9, 2017
✓ 4 Risk tiers and deep dive into attribution	June 13, 2017
5 Best practices in improving quality measure performance	July 11, 2017
6 CPC Referral Reports	August 8, 2017
7 Behavioral health integration	September 12, 2017
8 Model design changes and supporting new enrollment for 2018	October 10, 2017
9 Shared savings	November 14, 2017
10 Feedback on payment and reporting in 2017	December 12, 2017

If there are other topics we should address in future webinars, please let us know

Note: dates and topics are subject to change



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Overview of the Ohio CPC practice journey



Determining the patients for which an Ohio CPC practice is responsible



Quarterly per-member-per-month (PMPM) payments



Summary of performance at the Ohio CPC Practice level and detailed member level

Key Dates:

Available now: Q2 attribution and payment files on MITS

Late July / August: Q3 PMPM payments

Available now: Q1 CPC Practice Reports on MITS

The practice journey through the Ohio CPC program is intended to transform care delivery and support primary care practices in effectively managing patients' health needs



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Overview of today's discussion on attribution



Determining the patients for which an Ohio CPC practice is responsible

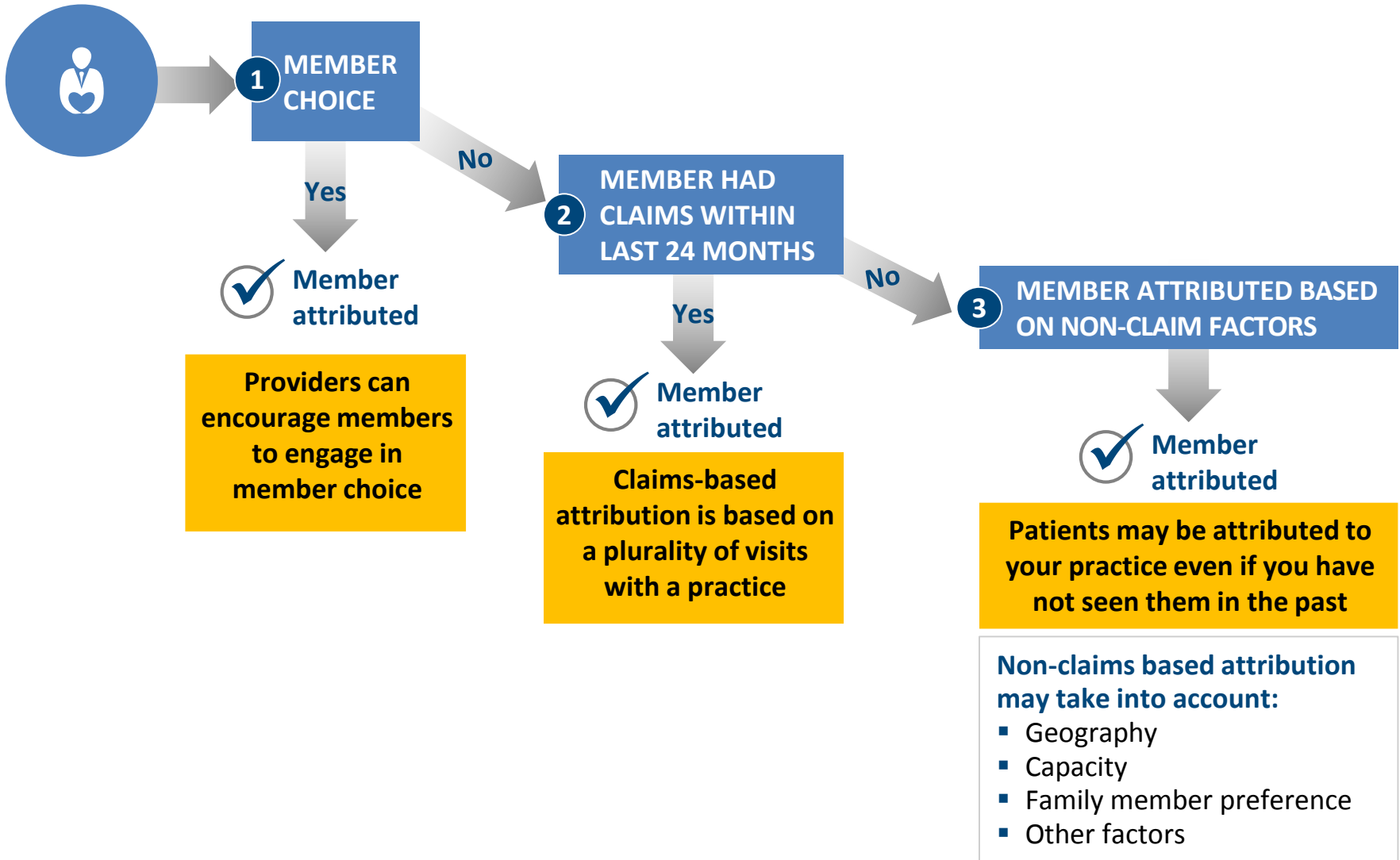
Key Dates:

Available now: Q2 attribution and payment files on MITS

Late July - Q3 attribution and payment files shared on MITS

- How does patient attribution work?
- What is the typical attribution process that a patient would go through?
- How do I find what patients are attributed to our practice?
- When is attribution conducted for each quarter?
- What should we do if patients are incorrectly attributed to our practice?

Attribution for the Ohio CPC program is based on three factors



Reminder: Patient attribution is determined prior to each quarter

	<u>Payment and reporting period</u>	<u>Attribution date</u>	<u>Timeframe reports are shared with CPCs</u>
Winter (Q1)	January to March	September 1 of the prior year	April
Spring (Q2)	April to June	December 1 of the prior year	July
Summer (Q3)	July to September	March 1	October
Fall (Q4)	October to December	June 1	January of the following year

Reminder: Attribution and payment file

Member Medicaid ID	Member First Name	Member Last Name	Payer	Risk Tier	Claims in Last 24		Provider Billing		Rendering Provider	
					Months	Flag	Medicaid ID	Provider Billing NPI	Medicaid ID	Rendering Provider Name
0168604	Jeanne	Ito	Payer 1	3	No	2550499	2725494085	7220823	Rigg, Brook	
1748633	Ethelyn	Oscar	Payer 2	7	No	2550499	2725494085	7220823	Rigg, Brook	
0186647	Marilu	Duggins	Payer 3	9	No	2550499	2725494085	7220823	Rigg, Brook	
1902326	Vi	Jelks	Payer 4	3	Yes	2550499	2725494085	7220823	Rigg, Brook	
2849894	Macie	Felter	Payer 5	6	No	1456784	2295464328	5634525	Gines, Edison	
0843986	Hettie	Keenum	FFS	2	Yes	1456784	2295464328	5634525	Gines, Edison	
0552690	Patrina	Richardson	Payer 2	4	No	1456784	2295464328	5634525	Gines, Edison	
0870496	Terry	Carbo	Payer 3	2	Yes	0449732	1199422873	4859433	Lauzon, Jude	
1871369	Cyndi	Mcgahee	Payer 2	1	No	0449732	1199422873	4859433	Lauzon, Jude	
0077342	Ji	Board	Payer 1	8	No	0449732	1199422873	4859433	Lauzon, Jude	
0347656	Ava	Hoda	Payer 5	6	No	1104738	1136329535	3448530	Hartzog, Linette	
1739401	Quinton	Lampman	Payer 3	5	Yes	1104738	1136329535	3448530	Hartzog, Linette	
1908518	Whitney	Duffey	FFS	6	No	1104738	1136329535	3448530	Hartzog, Linette	
0123253	Pamelia	Brabham	Payer 4	7	No	0841433	1136329535	5363525	Gorney, Nona	
1585612	Devorah	Maguire	Payer 4	3	Yes	0841433	1136329535	5363525	Gorney, Nona	
0340346	Fabian	Goudy	Payer 1	6	Yes	0731807	1048791175	6894332	Dunkley, Thea	
2795311	Oliva	Cirillo	Payer 2	6	Yes	0731807	1048791175	6894332	Dunkley, Thea	
1948595	Ted	Strasburg	Payer 3	2	Yes	0731807	1048791175	6894332	Dunkley, Thea	
2404259	Mafalda	Welsch	Payer 2	2	No	1667100	1048791175	6894332	Dunkley, Thea	
0418964	Cindi	Bazan	Payer 5	5	No	1667100	1048791175	6894332	Dunkley, Thea	
0250411	Arleen	Heffley	FFS	1	Yes	1667100	1048791175	5117396	Faber, Tiffani	
0232948	Nova	Wilken	Payer 3	9	No	1667100	1048791175	5117396	Faber, Tiffani	
0678212	Edris	Lafrance	Payer 2	6	No	1098097	1492729943	1815872	Barrick, Pura	
1302405	Juanita	Giblin	Payer 3	2	Yes	1098098	1492729943	1815872	Barrick, Pura	
1856713	Leonila	Pendarvis	Payer 2	2	No	1098099	1492729943	5938729	Shur, Elvie	
0561348	Ola	Willcutt	Payer 1	8	Yes	1098100	1492729943	5938729	Shur, Elvie	
2282745	Lida	Cannon	Payer 5	7	Yes	1033191	7954293402	0174664	Lavin, Randal	

Note: Patient names and data have been changed

Reminder: Attribution and payment file overview

Purpose

- Identify members attributed to your CPC practice
- Determine the quarterly per-member-per-month (PMPM) payment for each attributed member

Example contents

- Member-level demographic information
- Member's attributed practice and PCP
- Quarterly PMPM amounts for each member
- Risk tier for purposes of determining the PMPM amount
- Clinical data flags

Timing

- Shared at the beginning of each quarter via MITS

Reminder: Attribution and payment file data elements

Member demographics

- Member Medicaid ID
- Member First Name
- Member Last Name
- Member Date of Birth
- Member Gender
- Member Phone Number
- Member Address 1
- Member Address 2
- Member City
- Member County
- Member State
- Member Zip Code

Payment and claims

- Quarterly PMPM Amount
- Payer
- Risk Tier
- Claims in Last 24 Months Flag

Attributed providers

- Provider Billing Medicaid ID
- Provider Billing NPI
- Rendering Provider Medicaid ID
- Rendering Provider Name
- Rendering Provider NPI

Condition flags¹

- Asthma Flag
- Diabetes Flag
- CHF Flag
- Depression Flag
- Stroke Flag
- SPMI Flag

¹ Condition flags are based on claims during the past 12 months

Reminder: What you should do if you believe your attribution is incorrect

- **Review your patient attribution file** (available on MITS)
- **Encourage patients to update their selected primary care provider (PCP)**
- **If you believe patients were attributed to your practice in error**, contact the managed care plan responsible for the member(s)
- **For fee-for-service members**, contact the Medicaid Provider Hotline at 1 (800) 686-1516



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What is risk tiering and how is it used in Ohio CPC?

What is risk tiering?

Risk tiering estimates the clinical and financial risk of members using historical, clinical, and demographic information, and categorizes patients into tiers representing similar clinical needs



How are risk tiers used in Ohio CPC?

Risk tiers are used as part of the Ohio CPC program to:

- Stratify patients based on risk
- Adjust PMPM payments

The risk tiering process consists of four steps

1 Categorize Diagnoses

- **Group procedures and diagnoses from historical claims data** into diagnostic and procedural categories based on the 3M CRG tool's logic and algorithm

2 Identify Chronic Illnesses

- **Determine the severity of illness level** (e.g., minor, moderate, dominant) for primary chronic diseases, based on a categorization of EDCs and MDCs through the 3M CRG tool

3 Assign the Clinical Risk Group (CRG)

- **Assign to 1 of 331 base CRGs based on combination of chronic disease, disease categories, and episode procedures**
 - CRGs are aggregated first into 44 risk groups, and then again into 1 of 9 risk groups

4 Consolidate into Risk Tiers

- **Group CRGs into 1 of 3 risk tiers used to calculate PMPM**
 - Where 1 = lowest risk and 3 = highest risk

Example: How a patient would be grouped into a risk tier

Patient grouping steps

Step 1: Categorize diagnoses

- Major diagnoses category: 2 of 37
- Episode procedure category: 98 of 562

Step 2: Identify chronic illnesses

- Severity level 4 of 6

Step 3: Assign the clinical risk group

- CRG 1 of 331
- Health status 4 of 9
 - Minor chronic diseases in multiple organ systems

Step 4: Consolidate to aggregate risk group

- Risk tier 2 of 3
 - \$8 PMPM

Patient grouping example

- Patient has **migraines and benign prostatic hyperplasia (BPH)**
- Patient is assigned to group with **systematically calculated risk values**
 - This patient is considered moderately unhealthy
- Health categories lead patient to Ohio CPC Tier 2



How Ohio CPC separates aggregate risk groups and allocates respective PMPM payments

	3M CRG health statuses	Example of 3M CRG	2017 CPC PMPM
Ohio CPC PMPM Tier 1	▪ Healthy	▪ Healthy (no chronic health problems)	\$1
	▪ History of significant acute disease	▪ Chest pains	
	▪ Single minor chronic disease	▪ Migraine	
Ohio CPC PMPM Tier 2	▪ Minor chronic diseases in multiple organ systems	▪ Migraine and benign prostatic hyperplasia (BPH)	\$8
	▪ Significant chronic disease	▪ Diabetes mellitus	
	▪ Significant chronic diseases in multiple organ systems	▪ Diabetes mellitus and CHF	
Ohio CPC PMPM Tier 3	▪ Dominant chronic disease in 3 or more organ systems	▪ Diabetes mellitus, CHF, and COPD	\$22
	▪ Dominant/metastatic malignancy	▪ Metastatic colon malignancy	
	▪ Catastrophic	▪ History of major organ transplant	

The PMPM payment for a given Ohio CPC practice is calculated by multiplying the **PMPM for each risk tier** by the **number of members attributed to your practice in each risk tier**

- Your practice will receive payments **prospectively and quarterly**
- Risk tiers are **updated quarterly**, based on 24 months of claims history with 6 months of claims run-out

Detailed requirement definitions are available on the Ohio Medicaid website:
<http://medicaid.ohio.gov/Providers/PaymentInnovation/CPC.aspx#1600562-cpc-payments>

Where to go if you have questions about risk tiering

Questions about how risk scoring and tiering are used in Ohio CPC

- If you have additional questions about how risk tiering is used in the Ohio CPC program that are not covered as part of this webinar, please contact the Medicaid Provider Hotline: 1 (800) 686-1516

Questions about how a patient was categorized

- If you believe there is an error or have a question about how a patient was categorized into a specific risk tier, please contact the Medicaid Provider Hotline: 1 (800) 686-1516

Questions about the CRG tool

- Please consult the 3M website and FAQs section, found here:
 - [3M™ Clinical Risk Grouping Software](#)
 - [3M™ Clinical Risk Groups: Frequently Asked Questions](#)



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Important reminders regarding the Ohio CPC program

- The **next Ohio CPC Practice Webinar is scheduled for Tuesday, July 11th**, and will cover best practices in improving quality measure performance
- Your **Q3 CPC Practice Reports** will be available in mid to late July, and **Q3 payment** will be issued in late July and early August
- Slides from **past webinars are now available on the Ohio Department of Medicaid website under the ‘CPC Provider Webinar’ section:**
<http://www.medicaid.ohio.gov/Providers/Paymentinnovation/CPC.aspx#1657177-cpc-provider-webinars>
- If you have further **questions about the Ohio CPC program following this webinar**, including questions about your CPC reports, **contact the Medicaid Provider Hotline** at 1 (800) 686-1516

FAQs asked during the last CPC Practice Webinar

Q: Who do we talk to in order to locate the exact date and location of payment?

A: Payments are issued by the managed care plans for any patients who receive Medicaid coverage through the health plan. As a result, if you have questions about payment please reach out to your primary point of contact at the Managed Care Plan.

Q: Where do we find the data dictionary?

A: The data dictionary for both your attribution files and your quarterly CPC Practice Report CSV files were sent via email. Please reach out to the Provider Hotline if you need an additional copy.

Q: Does the BMI ICD-10 code have to be on all claims to be counted? Is there any resource that will help us update our codes so that all ICD-10s can be accounted for properly?

A: The ICD-10 codes for both the pediatric health measure, Weight Assessment and Counseling for Children/Adolescents: BMI Percentile, and the Adult BMI Assessment measure do not need to be billed on all claims to be counted. These codes should be billed during the measurement year (or the year prior to the measurement year for the Adult BMI Assessment measure) to be counted.

Q: Where is the demographic information coming from? Is it from the state applications or from claims?

Demographic information such as age are determined through the Ohio Department of Medicaid's member eligibility information.

Additional Questions?