

# MACRAeconomic\$: Money and Medicare

Barry Allison

Center for Primary Care

*August, GA*



# Objectives

1

Show that strong patient outreach and management are crucial to positive outcomes

2

Gain insights for choosing the right MACRA path from existing data and CMS guidance

3

Demonstrate how Enli's Central Worklist Platform is part of a MACRA strategy for success

# Center for Primary Care



- Located - GA & SC
- Founded 1994
- 39 Providers
- In-house Lab and Imaging
- ~24k Active Medicare Patients
- Significant Medicare Population with 2+ Chronic Conditions
- Medicare Population Growth Projected 17k in 10 Years

## How MACRA's initial impact breaks down

The first performance year begins Jan. 1 for payments in 2019

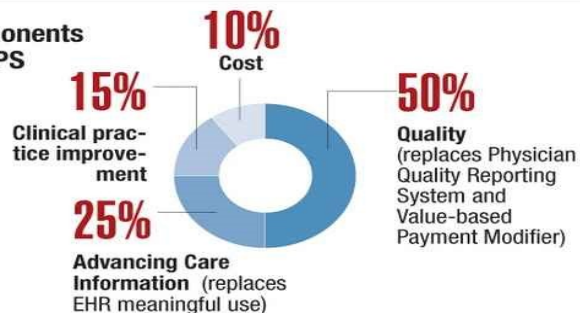
**761,342**

**Number of clinicians eligible for the Merit-based Incentive Payment System (MIPS)**

**30,658-90,000**

**Number that could be exempt from MIPS and get a bonus for participating in an advanced Alternative Payment Model (APM)**

### Components of MIPS

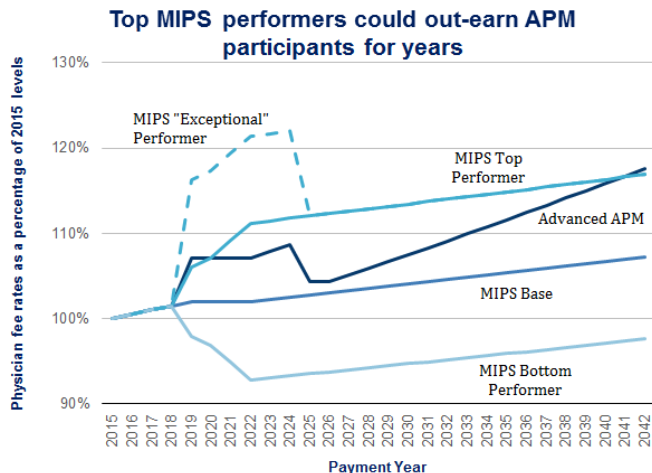


**Maximum bonus or penalty under MIPS in 2019:** **+4%** / **-4%**

**Medicare bonus in 2019 for participating in an advanced APM:** **5%**

Source: CMS

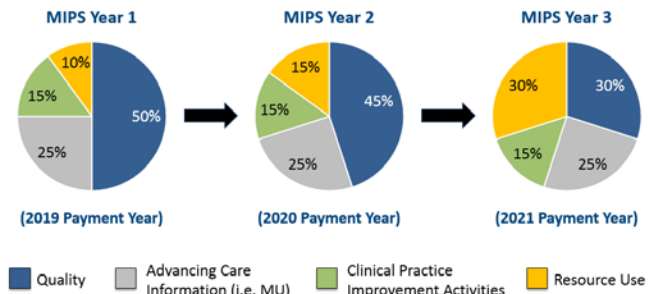
# MIPS in a Nutshell



Source: Data compiled based on fee update and performance-based bonuses and penalties under the two incentive programs outlined in the Medicare Access and CHIP Reauthorization Act of 2015.

Note: Advanced APM line excludes contract performance and MIPS excludes the use of a conversion factor that can magnify a MIPS bonus or penalty by as much as three times to ensure budget neutrality.

**BROOKINGS**  
**USC Schaeffer**  
Leonard D. Schaeffer Center  
 for Health Policy & Economics



# Recent MACRA/MIPS developments

- CMS offering 4 “paces” to implementing MIPS
  - Test the QPP
    - Report “some” quality and cost data
    - No penalty or bonus
  - 2017 partial year reporting
    - Start later than Jan 1
    - No penalty, small bonus potential
  - 2017 full-year participation
  - Join an advanced APM
- Overall, max bonus potential in MIPS will be diluted in early years

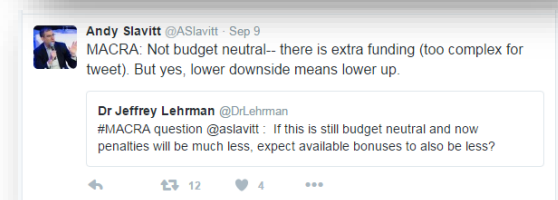


Andy Slavitt Retweeted  
**POLITICO Pulse** @POLITICOPulse · Sep 12  
ICYMI: Medicare's @ASlavitt tells doctors to #PickYourPace on MACRA. How it would work: [bit.ly/PULSE\\_Sep9](http://bit.ly/PULSE_Sep9)

**Medicare to doctors: Pick your pace on MACRA**  
*Four options now for doctors to report MIPS data*

- 1) Report **full data** for entire year and be eligible to receive a bonus
- 2) Report full data for **part** of the year, and may get smaller bonus
- 3) Report **some** data for part of the year; no bonus but no penalty
- 4) Participate in advanced alternative payment model; **avoid MIPS**

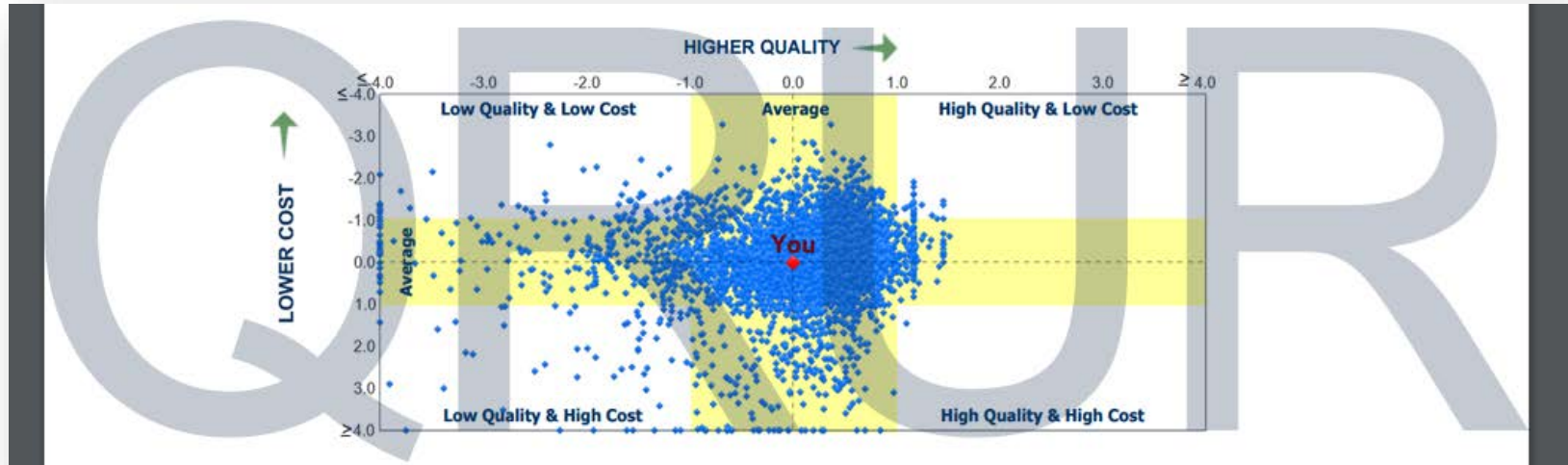
For more: [bit.ly/PULSE\\_Sep9](http://bit.ly/PULSE_Sep9) — **POLITICO Pulse**



**Andy Slavitt** @ASlavitt · Sep 9  
MACRA: Not budget neutral-- there is extra funding (too complex for tweet). But yes, lower downside means lower up.



**Dr Jeffrey Lehman** @DrLehrman  
#MACRA question @aslavitt : If this is still budget neutral and now penalties will be much less, expect available bonuses to also be less?

# QRUR - A Foreshadowing of MACRA - Value-Based Modifier And CCM



# Chronic Care Management

DEPARTMENT OF HEALTH AND HUMAN SERVICES  
Centers for Medicare & Medicaid Services



**Chronic Care Management Services**


The Centers for Medicare & Medicaid Services (CMS) recognizes care management as one of the critical components of primary care that contributes to better health and care for individuals, as well as reduced spending.

**Please note:** The information in this publication applies only to the Medicare Fee-For-Service Program (also known as Original Medicare).

Beginning January 1, 2015, Medicare pays separately under the Medicare Physician Fee Schedule (PFS) under American Medical Association Current Procedural Terminology (CPT) code 99490, for **non-face-to-face** care coordination services furnished to Medicare beneficiaries with multiple chronic conditions. CPT 99490 is defined as follows:

**99490**

Chronic care management services, at least 20 minutes of clinical staff time directed by a physician or other qualified health care professional, per calendar month, with the following required elements:



- ▶ Multiple (two or more) chronic conditions expected to last at least 12 months, or until the death of the patient,
- ▶ Chronic conditions place the patient at significant risk of death, acute exacerbation/decompensation, or functional decline,
- ▶ Comprehensive care plan established, implemented, revised, or monitored.

The Centers for Medicare & Medicaid Services (CMS) recognizes care management as one of the critical components of primary care that contributes to better health and care for individuals, as well as reduced spending.

Aydin, need better exploded text

<https://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNProducts/Downloads/ChronicCareManagement.pdf>



CPC Medicare Population: 24,800 or 16% of Active Patient Population

Percentage Qualifying for Medicare CCM Services: 19,159 or 77%

Percentage Identified Per Medicare QRUR Value Based Modifier Data as High Risk: 1,700 or 7%

10 Year Projection CPC Medicare Eligible Population - Established Patient Base: 1,700 per year or 17,000 Over 10 Years (9,700 CCM Qualified)

CCM Program Monitoring and Projections Medicare QRUR Condition Group	Care Plan Indicator – CCM Consented Population		
	On File	No Care Plan	Grand Total
No VBM Condition	1,579	1,754	3,333
VBM Tracking Condition	2,360	1,915	4,275
<b>Grand Total</b>	<b>3,939</b>	<b>3,669</b>	<b>7,608</b>

Chronic Care Management Program - No VBM Indicator		Chronic Care Management Program - VBM Indicator Present	
CCM Care Plan Patients	1,579	CCM Care Plan Patients	2,360
Hours Per CCM Per Day	6	Hours Per CCM Per Day	6
CCM Patients Reviewed/Contacted Per Hour	4	CCM Patients Reviewed/Contacted Per Hour	4
CCM Patients Reviewed/Contacted Per Day	24	CCM Patients Reviewed/Contacted Per Day	24
CCM Patients Reviewed/Contacted Per Month	240	CCM Patients Reviewed/Contacted Per Month	240
Gross CCM Revenue Per CCM Per Month	\$9,600.00	Gross CCM Revenue Per CCM Per Month	\$9,600.00
CCM Staff to Manage CCM Workload	6.6	CCM Staff to Manage CCM Workload	9.8
<b>Total Monthly Revenue</b>	<b>\$63,160.00</b>	<b>Total Monthly Revenue</b>	<b>\$94,400.00</b>
<b>Total CCM Specialist Expense (\$4K Per Month)</b>	<b>\$26,316.67</b>	<b>Total CCM Specialist Expense (\$4K Per Month)</b>	<b>\$39,333.33</b>
CCM Net Monthly	\$36,843.33	CCM Net Monthly	\$55,066.67
CCM Net Annually	\$442,120.00	CCM Net Annually	\$660,800.00
<b>CCM All Categories Net Annually</b>		<b>\$1,102,920.00</b>	

**Using CCM best practices drove more accurate RAF scoring raising the average from 0.9 to 1.5**

# Potential Value - Immediate and Long Term

Program Year	2016
Program State	(All)
Time Group	Time Recorded - Not Billable

Time Category	Values		
	Patient Count	Total Time to Billable	Average Time to Billable
Accumulation: 1 - 4 Minutes	5,635	99,025	17.57
Accumulation: 5 - 9 Minutes	3,774	50,769	13.45
Accumulation: 10 - 14 Minutes	1,743	14,672	8.42
Accumulation: 15 - 19 Minutes	736	2,494	3.39
<b>Grand Total</b>	<b>11,888</b>	<b>166,960</b>	<b>14.04</b>

Program Month	Number of Patients with Missed Billing Opportunities	Time to Billable Work Days Required (6 Hour Work Day)	FTE Requirement (20 Day Work Month)	FTE Expense (\$4K Per CCM Staff)	Projected Revenue Opportunity	Projected Outcome (+ / -)
January	1,502	55	2.8	\$11,022.78	\$58,578.00	\$47,555.22
February	1,581	59	3.0	\$11,822.22	\$61,659.00	\$49,836.78
March	1,540	60	3.0	\$12,069.44	\$60,060.00	\$47,990.56
April	1,621	66	3.3	\$13,161.11	\$63,219.00	\$50,057.89
May	1,686	68	3.4	\$13,590.56	\$65,754.00	\$52,163.44
June	1,611	65	3.2	\$12,990.00	\$62,829.00	\$49,839.00
July	1,683	66	3.3	\$13,225.56	\$65,637.00	\$52,411.44
August						
September						
October						
November						
December						
<b>Totals</b>	<b>11,224</b>	<b>62.2</b>	<b>3.1</b>	<b>\$87,881.67</b>	<b>\$437,736.00</b>	<b>\$349,854.33</b>

# Future Projections - Medicare 2017 Physician Fee Schedule Updates and CCM Reimbursement



<b>Time Category</b>	<b>Billable Time Categories</b>	<b>Time Over 20M</b>	<b>CCM Projected Allowable</b>
60 - 89 --- CCM 99487	316	15,758	\$27,600.00
90 - 119 --- CCM 99487 + 99489 (1)	64	5,194	\$8,280.00
120 - 149 --- CCM 99487 + 99489 (2)	13	1,457	\$2,208.00
150 - 179 --- CCM 99487 + 99489 (3)	5	710	\$1,150.00
210 - 239 --- CCM 99487 + 99489 (5)	2	408	\$644.00
<b>Grand Total</b>	<b>379</b>	<b>22,354</b>	<b>\$39,882.00</b>

# Enli Central Worklist



Program: Chronic Care Management Patient search: Name or DOB (mm/dd/yyyy) My Patients Only:  Workflow frequency: Calendar Month Month: 9 Year: 2016 Max. total time: = Number More

Bulk Action Add Patient

Refresh Last updated 9/14/2016 3:42:47 PM

**Workflow Checklist** m = minutes

Patient	Data Source	DOB (age)	Coordinator	Workflow State	CCM Call	Perform Assessment	Review/Update Care Plan	Review Care Gaps	Review Preventive Services	Perform Medication Reconciliation	Review Visit Agenda	Coordinate Care	Other Action	Total Time	OK to Bill
<a href="#">Tremain, Fred</a>	CPS12KK (GE)	12/1/1973 (42)	☆ Care Coordinator	Due for Call	<input checked="" type="checkbox"/> 45 m	<input type="checkbox"/> 0 m	<input type="checkbox"/> 0 m	<input type="checkbox"/> 0 m	<input type="checkbox"/> 0 m	<input type="checkbox"/> 0 m	<input type="checkbox"/> 0 m	<input type="checkbox"/> 0 m		45 m	<input checked="" type="checkbox"/>
<a href="#">Inishi, Robert</a>	CPS12KK (GE)	6/22/1945 (71)	☆ Shawn Koehring	Awaiting Response from Patient	<input checked="" type="checkbox"/> 29 m	<input type="checkbox"/> 0 m	<input type="checkbox"/> 0 m	<input type="checkbox"/> 0 m	<input checked="" type="checkbox"/> 7 m	<input type="checkbox"/> 0 m	<input type="checkbox"/> 0 m	<input type="checkbox"/> 0 m		36 m	<input checked="" type="checkbox"/>
<a href="#">Caldwell, Walter</a>	CPS12KK (GE)	6/21/1952 (64)	☆ Shawn Koehring	Awaiting Response from Patient	<input checked="" type="checkbox"/> 24 m	<input type="checkbox"/> 0 m	<input type="checkbox"/> 0 m	<input type="checkbox"/> 0 m	<input type="checkbox"/> 0 m	<input type="checkbox"/> 0 m	<input type="checkbox"/> 0 m	<input type="checkbox"/> 0 m		24 m	Billed
<a href="#">Henderson, Ralph</a>	CPS12KK (GE)	2/11/1966 (50)	☆ Shawn Koehring	Due for Call	<input checked="" type="checkbox"/> 23 m	<input type="checkbox"/> 0 m	<input type="checkbox"/> 0 m	<input type="checkbox"/> 0 m	<input type="checkbox"/> 0 m	<input type="checkbox"/> 0 m	<input type="checkbox"/> 0 m	<input type="checkbox"/> 0 m		23 m	<input checked="" type="checkbox"/>
<a href="#">Bassett, Don</a>	CPS12KK (GE)	10/2/1955 (60)	☆ Steve Kupsky		<input checked="" type="checkbox"/> 20 m	<input type="checkbox"/> 0 m	<input type="checkbox"/> 0 m	<input type="checkbox"/> 0 m	<input type="checkbox"/> 0 m	<input type="checkbox"/> 0 m	<input type="checkbox"/> 0 m	<input type="checkbox"/> 0 m		20 m	<input checked="" type="checkbox"/>
<a href="#">Chamberlain, Lisa</a>	CPS12KK (GE)	6/21/1967 (49)	☆ Allison Stover	Awaiting Response from Patient	<input checked="" type="checkbox"/> 20 m	<input type="checkbox"/> 0 m	<input type="checkbox"/> 0 m	<input type="checkbox"/> 0 m	<input type="checkbox"/> 0 m	<input type="checkbox"/> 0 m	<input type="checkbox"/> 0 m	<input type="checkbox"/> 0 m		20 m	<input checked="" type="checkbox"/>
<a href="#">Pennington, Carissa</a>	CPS12KK (GE)	10/6/1952 (63)	☆ Shawn Koehring	Awaiting Response from Patient	<input checked="" type="checkbox"/> 20 m	<input type="checkbox"/> 0 m	<input type="checkbox"/> 0 m	<input type="checkbox"/> 0 m	<input type="checkbox"/> 0 m	<input type="checkbox"/> 0 m	<input type="checkbox"/> 0 m	<input type="checkbox"/> 0 m		20 m	<input checked="" type="checkbox"/>
<a href="#">Peterson, Benjamin</a>	CPS12KK (GE)	7/3/2010 (6)	☆ Team	Due for Call	<input checked="" type="checkbox"/> 14 m	<input type="checkbox"/> 0 m	<input type="checkbox"/> 0 m	<input type="checkbox"/> 0 m	<input type="checkbox"/> 0 m	<input type="checkbox"/> 0 m	<input type="checkbox"/> 0 m	<input type="checkbox"/> 0 m		14 m	<input type="checkbox"/>
<a href="#">Vario, Bill</a>	CPS12KK (GE)	1/11/1961 (55)	☆ Team	Due for Call	<input checked="" type="checkbox"/> 12 m	<input type="checkbox"/> 0 m	<input type="checkbox"/> 0 m	<input type="checkbox"/> 0 m	<input type="checkbox"/> 0 m	<input type="checkbox"/> 0 m	<input type="checkbox"/> 0 m	<input type="checkbox"/> 0 m		12 m	<input type="checkbox"/>

# Central Worklist Benefits

- Document monthly outreach time
- Automatic task resetting each month
- Record notes in Central Worklist
- Carbon copy notes to the chart
- Send charges directly to Centricity PM
- Import patient activities with time from Centricity
- Use CCM encounter form to record activities and time

# Thank you.

Barry Allison, CIO  
Center for Primary Care

