

- CPC+ started as a CMS innovation program that worked on transitioning fee-for-service payments to value-based payments in collaboration with commercial payers. Montana was 1 of only 14 regions selected across the country to participate with Medicare in this test demonstration. Blue Cross Blue Shield of Montana, PacificSource, and Allegiance Life and Health also partnered with Medicaid and Medicare in this model. The CMS innovation program operated between 01/01/2018 and 12/31/2021. Even though the CMS model ended 12/31/2021, the department chose to continue this program authorized through a 1932(a) Medicaid state plan amendment.
- CPC+ goals are smarter healthcare spending, more effective healthcare delivery, and healthier patients.
- The program includes Track 1 and Track 2 practices; Track 2 practices have additional care delivery requirements including enhanced technology and integrated behavioral health.
- Practices in both tracks deliver care centered on key Comprehensive Primary Care Functions: (1) Access and Continuity; (2) Care Management; (3) Comprehensiveness and Coordination; (4) Patient and Caregiver Engagement; and (5) Planned Care and Population Health.
- Providers are reimbursed risk-stratified, per-member-per-month (PMPM) care management fees. Members are assigned a health risk score based on their score of potential risk across the entire population and are divided into tiers.

Track 1	PMPM Fee	Track 2	PMPM Fee
Tier 1	\$3.33	Tier 1	\$6.33
Tier 2	\$9.33	Tier 2	\$12.33
Tier 3	\$15.33	Tier 3	\$18.33
Tier 4	\$21.33	Tier 4	\$24.33
		Tier 5	\$34.33

• CPC+ providers report quality measures annually to the Department. Medicaid merges claims data with the providers' clinical data for each measure to determine performance rates for each measure. The quality measures include preventive services and utilization elements. Providers are eligible for annual quality incentive payments for meeting quality measure benchmarks.

## CONTACT

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## RESOURCES

https://dphhs.mt.gov/MontanaHealthcarePrograms/cpcplus