BPCI Advanced Care Redesign Plan (CRP) User Guide

September 2023

The purpose of this User Guide is as follows:

- **Provide an overview of the CRP**
- **Provide direction for the completion of the CRP**

CMS
CENTERS FOR MEDICARE & MEDICAID SERVICES
CENTER FOR MEDICARE & MEDICAID INNOVATION

Bundled Payments
for Care Improvement
Advanced | *BPCI Advanced*

How to Use this User Guide

Section Overview: This shows the section title and provides a description.

Section Topics: Each topic has a description, a topic navigation button, and its own Topic Resource Page.

Topic Navigation Buttons: Click on this button to access the resources specific to each section topic. The grey shading of the button will indicate which topic resource you are referencing.

Section Overview Reference: This title helps you keep track of what section you are currently navigating.
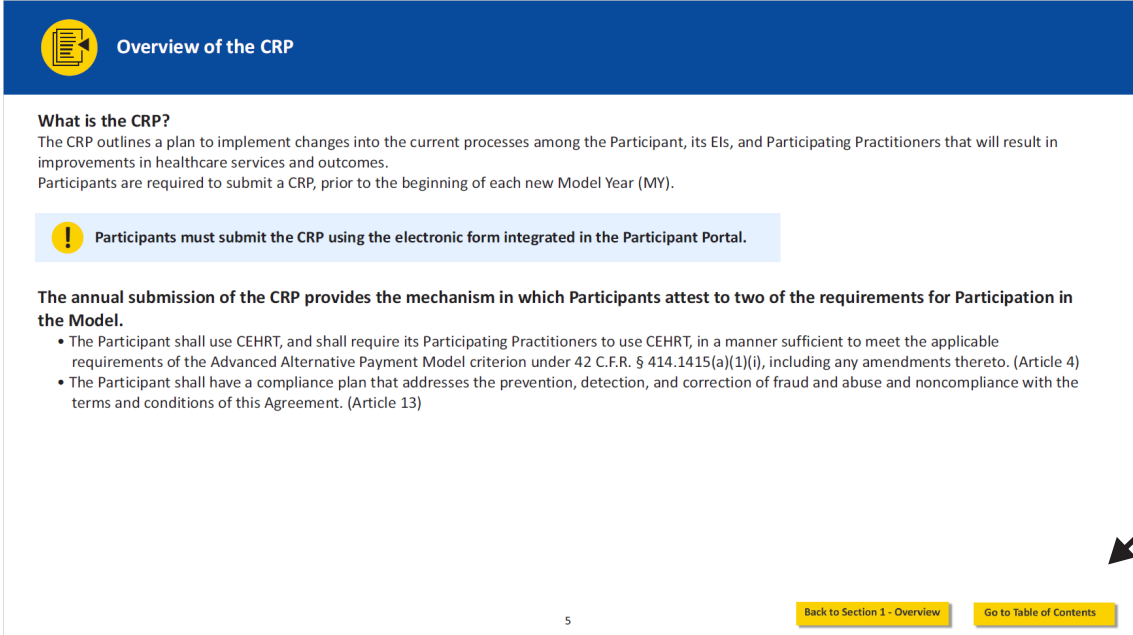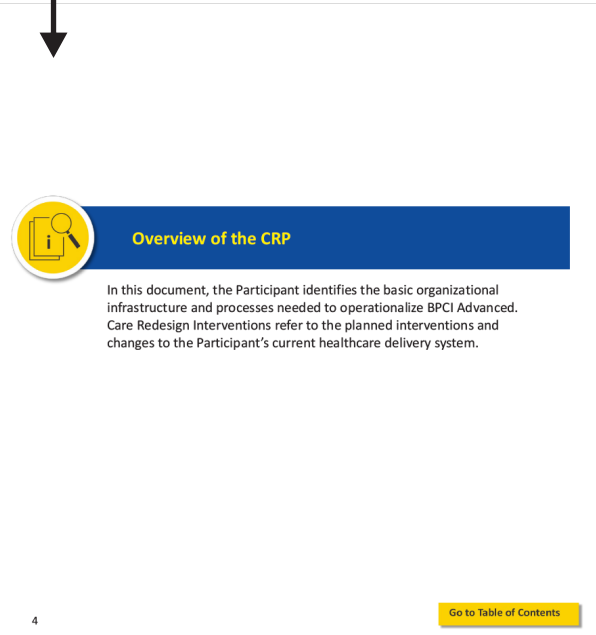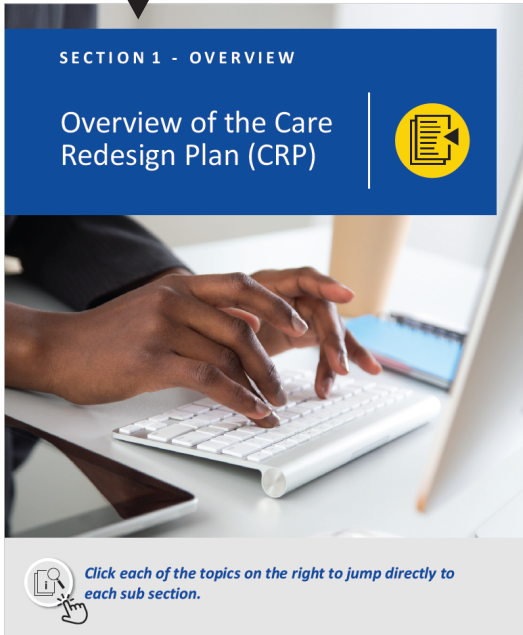
Guide Navigation Buttons: Click here to navigate back to the Section Overview Page or back to the Table of Contents.

SECTION 1 - OVERVIEW

Overview of the Care Redesign Plan (CRP)

Overview of the CRP

In this document, the Participant identifies the basic organizational infrastructure and processes needed to operationalize BPCI Advanced. Care Redesign Interventions refer to the planned interventions and changes to the Participant's current healthcare delivery system.

Click each of the topics on the right to jump directly to each sub section.

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Overview of the CRP

What is the CRP?
The CRP outlines a plan to implement changes into the current processes among the Participant, its EIs, and Participating Practitioners that will result in improvements in healthcare services and outcomes.
Participants are required to submit a CRP, prior to the beginning of each new Model Year (MY).

(!) Participants must submit the CRP using the electronic form integrated in the Participant Portal.

The annual submission of the CRP provides the mechanism in which Participants attest to two of the requirements for Participation in the Model.
- The Participant shall use CEHRT, and shall require its Participating Practitioners to use CEHRT, in a manner sufficient to meet the applicable requirements of the Advanced Alternative Payment Model criterion under 42 C.F.R. § 414.1415(a)(1)(i), including any amendments thereto. (Article 4)
- The Participant shall have a compliance plan that addresses the prevention, detection, and correction of fraud and abuse and noncompliance with the terms and conditions of this Agreement. (Article 13)

Back to Section 1 - Overview | Go to Table of Contents

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Section Overview Page: This page introduces the section and highlights the key topics. The User Guide includes three section overview pages listed in the table of contents.

Topic Resource Page: This page will provide you with applicable resources for the section topic. The resources are located in the table. Each resource includes a description and a direct link to the resource.

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Table of Contents

NAVIGATING THE TABLE OF CONTENTS:
Click on the icons to access each Section Overview page.

Section 1: Overview of the Care Redesign Plan (CRP)
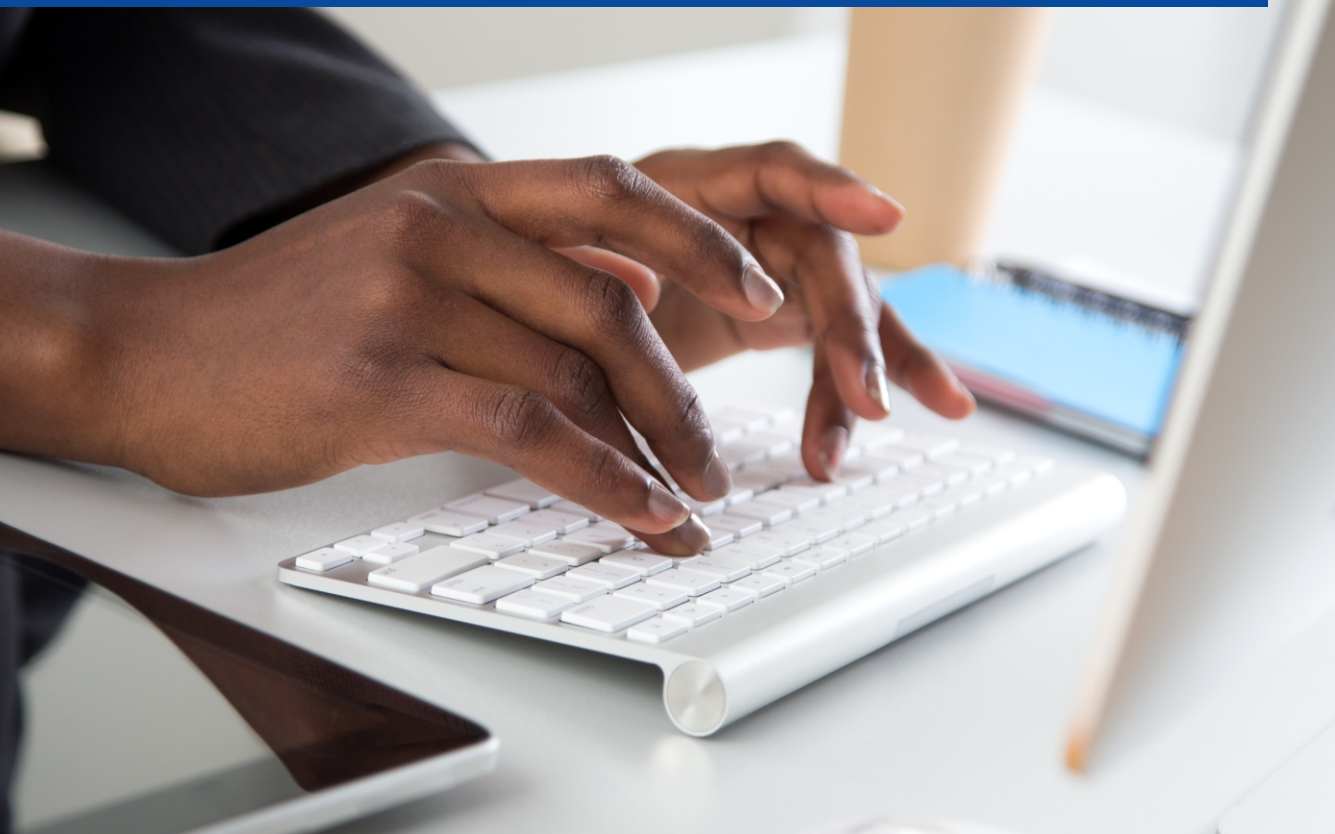
Section 2: Completing the Care Redesign Plan (CRP)
   i.   Accessing the CRP
   ii. Completing the CRPGroup Tab

Section 3: Additional Participant Resources

Overview of the Care Redesign Plan (CRP)

Overview of the CRP

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Click each of the topics on the right to jump directly to each sub section.

Overview of the CRP

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What is the purpose of the CRP?

- The CRP helps Participants establish a plan to successfully implement the Model.
- Fosters goal and change-oriented dialogue among Participants, their EIs and Participating Practitioners

> **!** **For Convener Participants, only one CRP is to be submitted and must reflect the Plan for all EIs and selected Clinical Episode Service Line Groups.**

A robust Care Redesign Plan…

- Establishes executive accountability and identifies the project management team
- Defines the information systems used to track and report on quality measures supporting Care Redesign
- Describes approaches to share clinical and other information with providers and suppliers during the Clinical Episode period and across Clinical Episodes
- Describe the process for providing Beneficiary Notifications in accordance with the Participation Agreement
- Determines whether a formal model of quality improvement (e.g., Plan-Do-Study-Act, Lean, Six Sigma) is used for implementation
- Describes any new reporting processes as required under the Participation Agreement, including quality measures

The CRP consists of 5 sections:

i.   **General Information** – Requests basic information about the Participant.

ii. **Attestation Requirements for Participation** – Enables the Participant to attest to meeting the various requirements for participation in the Model, as defined in the Participation Agreement.

iii. **Model Plan** – Identifies the basic organizational infrastructure and processes needed to operationalize BPCI Advanced within the Participant's organization and among its Episode Initiators and Participating Practitioners.

iv. **Care Redesign Interventions: Primary Drivers for Success** – Identifies the planned interventions and changes to the Participant's current healthcare delivery system, the intervention's priority and corresponding timeframe for implementation.

v.   **Certification** - Enter the name of an authorized signatory that attests that he or she is qualified to make the assertions contained herein as an agent of the Applicant and/or Participant. It does NOT have to be the person populating the information into the CRP form in the Participant Portal.

Instructions are listed at the beginning of the CRP and additional detail is provided at the beginning of each section.

Care Redesign Interventions are grouped by BPCI Advanced Primary Drivers for Success:

i.   Section A: Clinical Practice Redesign
ii. Section B: Patient Engagement
iii. Section C: Healthcare Provider Engagement
iv. Section D: Data Analysis and Feedback
v.   Section E: Other Interventions not Previously Listed (Optional)

Care Redesign Plan information is requested through a combination of narrative blocks and drop-down selections.

* C. Describe how your organization is developing approaches to sharing clinical and other key information with providers and suppliers across each Clinical Episode.

Remaining characters: 3000 (total allowed characters: 3000)

Select
In Place
Not a Priority
In Development – High Priority (in the next 6 months)
In Development – High Priority (in the next 12 months)
In Development – Medium Priority (in the next 6 months)
In Development – Medium Priority (in the next 12 months)
In Development – Low Priority (in the next 6 months)

Completing the Care Redesign Plan (CRP)

Accessing the CRP

In this section, the access to the CRP template is reviewed. The CRP is an electronic form integrated in the BPCI Advanced Participant Portal.

Completing the CRP

In this section, the completion of the CRP integrated document and the submission of the information is reviewed.

Click each of the topics on the right to jump directly to each sub section.

Accessing the CRP

A Participant can access the CRP template by logging into the Participant Portal. From the menu at the left side of the screen, select the Deliverables button.

Accessing the CRP

Accessing the CRP

Once in the Deliverables section, locate the tile labeled Care Redesign Plan (CRP). Select Manage CRP.

Introduction and Instructions

Review the Introduction and Instructions sections. Click on the Create CRP button at the bottom of the screen.

Navigation menu:
- Home
- Profile
- **Deliverables**
- Announcements
- Legal Documents
- Monitoring & Compliance
- Document Library
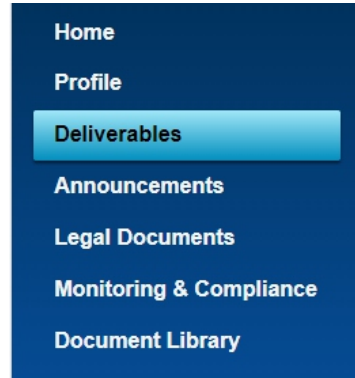
INTRODUCTION

Pursuant to Article 4 of the BPCI Advanced Participation Agreement, the Participant must furnish care according to a Care Redesign Plan (CRP), accepted by CMS in accordance with Article 4 of the Participation Agreement, as a condition of participation in the Bundled Payments for Care Improvement Advanced (BPCI Advanced) Model. For this purpose, the Participant must submit a annual Care Redesign Plan (CRP), using this template, to describe with particularity the Participant's specific planned interventions and changes to the Participant's current healthcare delivery system, subject to CMS review and acceptance.

The Care Redesign Plan (CRP) consists of four sections:

I. **General Information** – Requests basic information about the Participant.

II. **Attestation Requirements for Participation** – Enables the Participant to attest to meeting the various requirements for participation in the Model, as defined in the Participation Agreement.

III. **Model Plan** - Identifies the basic organizational infrastructure and processes needed to operationalize BPCI Advanced within the Participant's organization and among its Episode Initiators and Participating Practitioners.

IV. **Care Redesign Interventions: Primary Drivers for Success** – Identifies the planned interventions and changes to the Participant's current healthcare delivery system, the intervention's priority and corresponding timeframe for implementation.

INSTRUCTIONS

1. Please complete all four sections of the CRP template. Mandatory fields within each section will be indicated with an asterisk (*).

2. Convener Participants must complete sections III and IV taking into consideration their overall Model implementation plan and drivers of success across all of their Episode Initiators (EIs) and Participating Practitioners.

3. The CRP will be due once a year before the start of the next Model Year. Please refer to recent model communications for specific deliverable due dates.

4. Questions about this document or the process for completion should be directed to the BPCI Advanced Team at BPCIAdvanced@cms.hhs.gov.

Create CRP

Completing the CRP

The Portal will display this screen, which lists the five sections that must be populated. We recommend completing the sections in the order listed, but it is not a requirement.

Section I: Select the General Information section header

This section contains prepopulated information obtained from the application. If the field is gray, it is not editable. Please review the listed information. If there are any discrepancies, please contact the Model Help Desk at bpciadvanced@cms.hhs.gov and provide details of the revisions that are needed. When complete, collapse the General Information Header by selecting the General Information section header again.

Section II: Select the Attestation Requirement for Participation section header

Participant must certify compliance or non-compliance with the listed requirements of the BPCI Advanced Participation Agreement, as of the start of the Model Year – January 1, 2024.

Section III. Select the Model Plan section header

The Model Plan identifies the basic organizational infrastructure and processes needed to operationalize BPCI Advanced. Participant responses can be general but need to include key elements that distinguish their plan.

Home

Profile

Deliverables

Announcements

Legal Documents

Monitoring & Compliance

Document Library

Back to CRP Home   View Comments

+ General Information

+ Attestation Requirement for Participation

– Model Plan

III. Model Plan

The Model Plan identifies the basic organizational infrastructure and processes needed to operationalize BPCI Advanced within the Participant's organization and among its Episode Initiators and Participating Practitioners. The purpose of this plan is to capture the Participant's overall strategic planning to implement BPCI Advanced. Participant responses can be general but need to include key elements that distinguish their plan. Responses to all questions in Section III are required.

* A. Describe how your organization has established executive accountability, specifically identify the key project management team to operationalize BPCI Advanced.

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* B. Define the information systems your organization is using to track the parameters required for the reporting of quality measures and supporting Care Redesign.

Remaining characters: 3000 (total allowed characters: 3000)

Section III: Model Plan

Talk to your team, your EIs, and your Participating Practitioners when considering how to operationalize the changes needed to implement the Model in your organization (if a Non-Convener Participant) or across multiple Eis (if a Convener Participant) and fill in the text fields (A – D).

* A. Describe how your organization has established executive accountability, specifically identify the key project management team to operationalize BPCI Advanced.

> **Please type your answers in the text box provided.**

Remaining characters: 3000 (total allowed characters: 3000)

* B. Define the information systems your organization is using to track the parameters required for the reporting of quality measures and supporting Care Redesign.

> **Please type your answers in the text box provided.**

Remaining characters: 3000 (total allowed characters: 3000)

Section III: Model Plan

* C. Describe how your organization is developing approaches to sharing clinical and other key information with providers and suppliers across each Clinical Episode.

> **Please type your answers in the text box provided.**

Remaining characters: 3000 (total allowed characters: 3000)

* D. Describe your organization's process for providing beneficiary notifications in accordance with the Participation Agreement.

> **Please type your answers in the text box provided.**

Remaining characters: 3000 (total allowed characters: 3000)

* E. Is your organization employing a formal model of quality improvement in your practice (e.g., Plan-Do-Study-Act, Lean, Six Sigma)? (Yes/No)

--None--   **Drop-down menu options**

* F. Is your organization implementing a new process for reporting to CMS as required under the terms of the Participation Agreement, including quality measures? (Yes/No)

--None--   **Drop-down menu options**

Section IV: Select the Care Redesign Interventions: Primary Drivers for Success

Care Redesign Interventions are grouped by BPCI Advanced Primary Drivers for Success:

Section A: Clinical Practice Redesign

Section B: Patient Engagement

Section C: Healthcare Provider Engagement

Section D: Data Analysis and Feedback

Section E: Other Interventions not
　　　　　Previously Listed (Optional)

+ General Information

+ Attestation Requirement for Participation

+ Model Plan

− Care Redesign Interventions: Primary Drivers For Success

IV. Care Redesign Interventions: Primary Drivers For Success

Care Redesign Interventions refer to the planned interventions and changes to the Participant's current healthcare delivery system. Participants are responsible for planning and implementing Care Redesign interventions, including ensuring participation and coordination of the Participant's Episode Initiators, Participating Practitioners, NPRA Sharing Partners, and NPRA Sharing Group Practice Practitioners, as applicable.

The interventions listed below are categorized by their Primary Drivers for Success:

- Clinical Practice Redesign
- Patient Engagement
- Provider/Supplier Engagement
- Data Analysis and Feedback

The Drivers aim to create healthcare savings while maintaining or improving healthcare quality. Responses to each question will indicate the intervention's priority within the Participant's organization and, if applicable, corresponding timeframe. The Participant may prioritize a given intervention as High, Medium, or Low. The timing field specifies the timeframe that the intervention will be utilized for each care intervention; either within six or 12 months. For interventions that are not listed below, additional free text boxes are located at the end of this section to accommodate Participant specific interventions. Documenting intervention priorities allows for CMS to better understand those interventions currently in place, anticipated changes and prospective development, and those interventions that are not a priority and thus unlikely to be implemented.

A. Clinical Practice Redesign

* 1. Diagnosis-triggered or Clinical Episode-specific care pathways or protocols

* 2. Care processes common to multiple diagnoses or episodes

Section IV: Care Redesign Interventions: Primary Drivers for Success (Continued)

Section A: Clinical Practice Redesign (Requested Information Types)
1. Diagnosis-triggered or Clinical Episode-specific care pathways or protocols
2. Care processes common to multiple diagnoses or episodes
3. Use of computer-based clinical decision support system to generate case-specific advice
4. Interdisciplinary care
5. Telehealth
6. Enhanced availability of care
7. Management of comorbid conditions
8. Addressing socio-economic barriers to care
9. Indicate what efforts to advance health equity are in place at your organization
10. Describe the supports your organization utilizes for patients through either community partnerships or in-house services.
11. As a Participant in the BPCI Advanced Model, which barriers do you encounter when trying to address health disparities among Medicare Beneficiaries.
12. Provide detailed information on proposed and current clinical practice redesign interventions

> ❗ **The information requested for the Care Redesign Plan is in the format of either a drop-down option or the provision of information in a narrative.**

Care Redesign Interventions: Primary Drivers for Success section (Continued)

Section B: Patient Engagement
1. Patient/Caregiver coaching
2. Shared decision making
3. Patient risk screening and risk mitigation
4. Discharge Destination Planning

Section C: Healthcare Provider Engagement
1. Patient-level coordination between acute care and PAC settings
2. Patient-level coordination with primary care providers
3. Patient-level coordination with specialty care providers
4. Care Manager, Patient Navigator, or Case Manager
5. Clinical follow-up
6. Medication reconciliation during care transactions
7. Optimization of discharge or transaction summaries, using structured communications
8. Clinical staff leadership development
9. Clinical and administrative staff engagement
10. Detailed information on proposed and current healthcare provider engagement initiatives

Care Redesign Interventions: Primary Drivers for Success section (Continued)

Section D: Data Analysis and Feedback
1. Use of CEHRT
2. Data driven analytic or feedback approach
3. Holding regular team meetings to review data and plan improvement cycles to redesign care processes and workflow
4. Incorporating review of data with clinical and administrative leadership as a routine component of our management process
5. Sharing team/provider identified data across other teams/providers within your organization
6. What topics would you like BPCI Advanced to cover in learning events or products to support your care redesign efforts?
7. Provide detailed information on proposed and current data analysis and feedback initiatives

Section E: Other Interventions not Previously Listed (Optional)

Section V: Select the Certification section

Enter the name of an authorized signatory that attests that he or she is qualified to make the assertions contained herein as an agent of the Applicant and/or Participant. It does NOT have to be the person populating the information into the CRP form in the Participant Portal.

+ General Information

+ Attestation Requirement for Participation

+ Model Plan

+ Care Redesign Interventions: Primary Drivers For Success

— Certification

V. Certification

I certify that all information and statements provided in this document are true, complete, and accurate to the best of my knowledge, information, and belief. The authorized signatory attests that he or she is qualified to make the assertions contained herein as an agent of the Applicant and/or Participant.

* Applicant/Participant Authorized Senior Executive

Date

08/17/2023

[Save] [Submit] [Cancel] [Back to CRP Home] [View Comments]

Save your data by selecting the "Save" button. It is advisable to save your data periodically as you are entering your information. Use this option if your data is not complete and you wish to revise the entered data later, or your data is complete, and you will be submitting that information later.

Submit your data by selecting the "Submit" button. Use this option if you have completed the entry of your data and you will not be making any more revisions.

Additional Resources for Participants

Model Deliverables

QPP User Guide MY7

❖ QPP template MY7

CRP User Guide MY7

❖ CRP template MY7

FAL User Guide MY7

❖ FAL template MY7

PP User Guide MY7

DRA Form User Guide MY7

❖ DRA template MY7

Model Deliverable
Certification Form template

Model Overview Fact Sheet-
Model Year 6 (PDF)

Need Help?
If you need technical assistance for the
Participant Portal, contact the Salesforce
Help Desk at:
CMMIForceSupport@cms.hhs.gov
or call 1-888-734-6433, option 5.

If you have questions about the Model
or Deliverables, contact the Model Help
Desk at:
BPCIAdvanced@cms.hhs.gov

More resources available in the BPCI Advanced webpages

Main Page | Applicant Resources | Participant Resources | Quality Measures

Additional Resources

Overview of portals that BPCI Advanced Participants must navigate.

Portals	Portal Use

BPCI Advanced Participant Portal
 	
https://app.innovation.cms.gov/bpciadv
 	
❖ Participant Portal User Guide - 2023
❖ BPCI Advanced Participant Portal User Manual (Salesforce)
	• Online platform used by BPCI Advanced Participants to:
	    o Access organizational data
	    o Add/Delete Participant POCs
	    o Download templates and submit deliverables
	    o Access Participation Agreement, Amendments and DRA
	    o Verify Clinical Episode selection
	    o Document Library: Model communications and reference materials

CMS Enterprise/Data Portal
 	
https://portal.cms.gov/
 	
❖ Data Portal User Guide
	• Online platform used by CMS to deliver:
	    o Preliminary and updated Target Prices
	    o Baseline claims data
	    o Monthly claims data
	    o Reconciliation Reports
	    o Quality Measure data
	
	• ***The Data Portal is hosted within the CMS Enterprise Portal and IC-Innovation Center Application.***