

# The CMS Innovation Center's Person-Centered Listening Session

*Improving Care Experience, Outcomes, and Equity in Rural Communities*

**November 20, 2024**

Center for Medicare and Medicaid Innovation



# Housekeeping and Logistics



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**This session is being recorded.** All participants will be muted besides those providing verbal comments.



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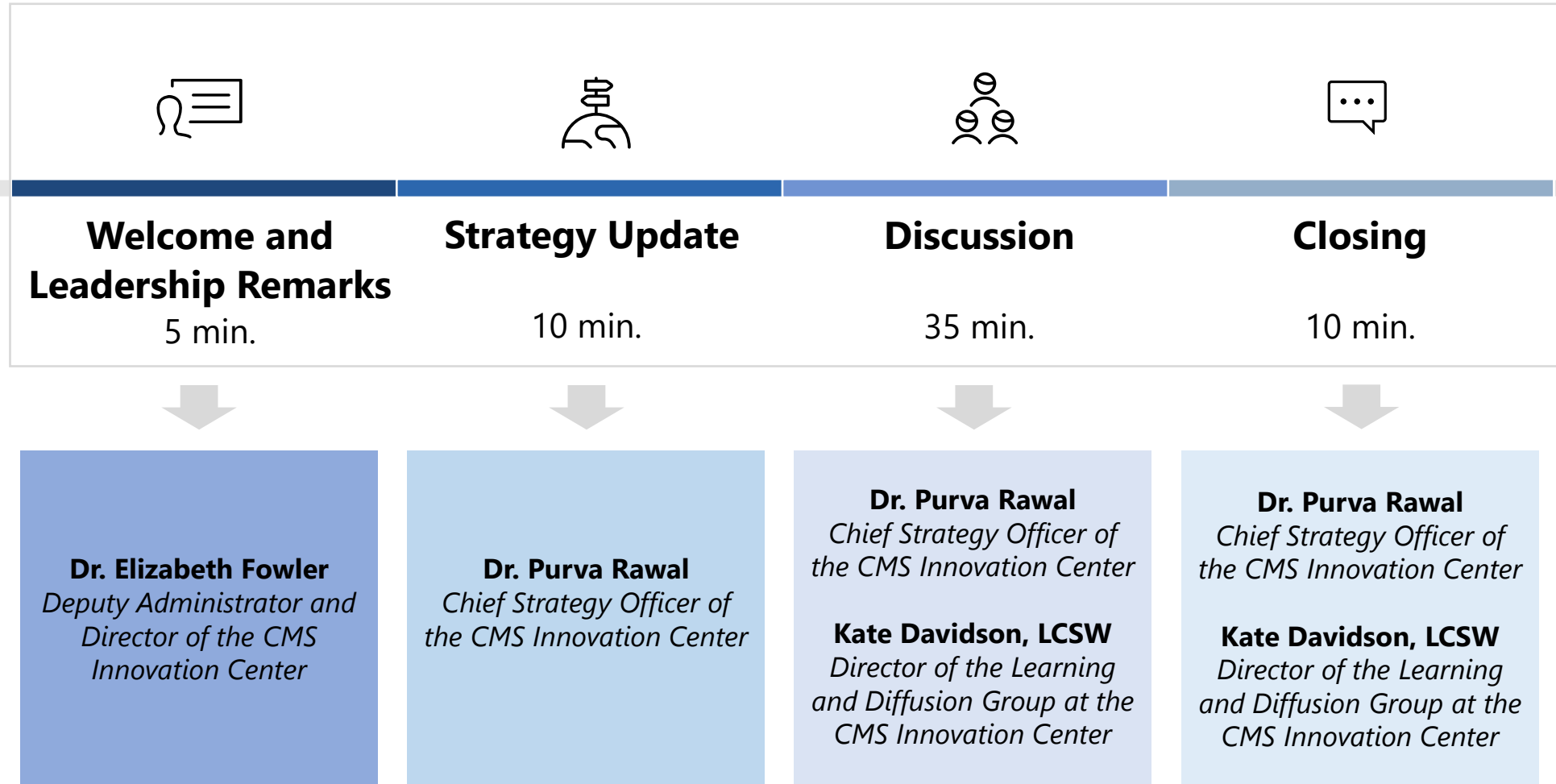
**Closed captioning** is available on the bottom of your screen.



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**Please submit comments via the Q&A** on the bottom of your screen. Your comment may be read aloud, unless you indicate to not share.

# Agenda



# Welcome and Leadership Remarks

Strategy Update

Discussion

Closing

# Vision: What's to Come Over the Next 10 Years



# Partner to Achieve System Transformation



- **Aim:** Align priorities and policies across CMS and aggressively engage payers, purchasers, states, and beneficiaries to improve quality, achieve equitable outcomes, and reduce health care costs
- **Impact on Beneficiaries:** Closer engagement with beneficiaries, caregivers, and patient groups across the lifecycle of models will help ensure that models are meeting people's needs
- **Measuring Progress:**
  - 100% of models that engaged patients/beneficiaries, caregivers, and patient groups through the model lifecycle
  - 100% of new models, where applicable, that make multi-payer alignment available

# CMS Rural Health Framework

CMS engaged with individuals, organizations, and government entities across the nation to help shape the CMS Framework for Advancing Health Care in Rural, Tribal, and Geographically Isolated Communities below.

## PRIORITY 1

Apply a Community-Informed **Geographic Lens** to CMS Programs and Policies

## PRIORITY 2

Increase Collection and Use of **Standardized Data** to Improve Health Care for Rural, Tribal, and Geographically Isolated Communities

## PRIORITY 3

Strengthen and **Support Health Care Professionals** in Rural, Tribal, and Geographically Isolated Communities

## PRIORITY 4

Optimize Medical and Communication **Technology** for Rural, Tribal, and Geographically Isolated Communities

## PRIORITY 5

**Expand Access** to Comprehensive Health Care Coverage, Benefits, and Services and Supports for Individuals in Rural, Tribal, and Geographically Isolated Communities

## PRIORITY 6

**Drive Innovation and Value-Based Care** in Rural, Tribal, and Geographically Isolated Communities

Welcome and Leadership Remarks

## **Strategy Update**

Discussion

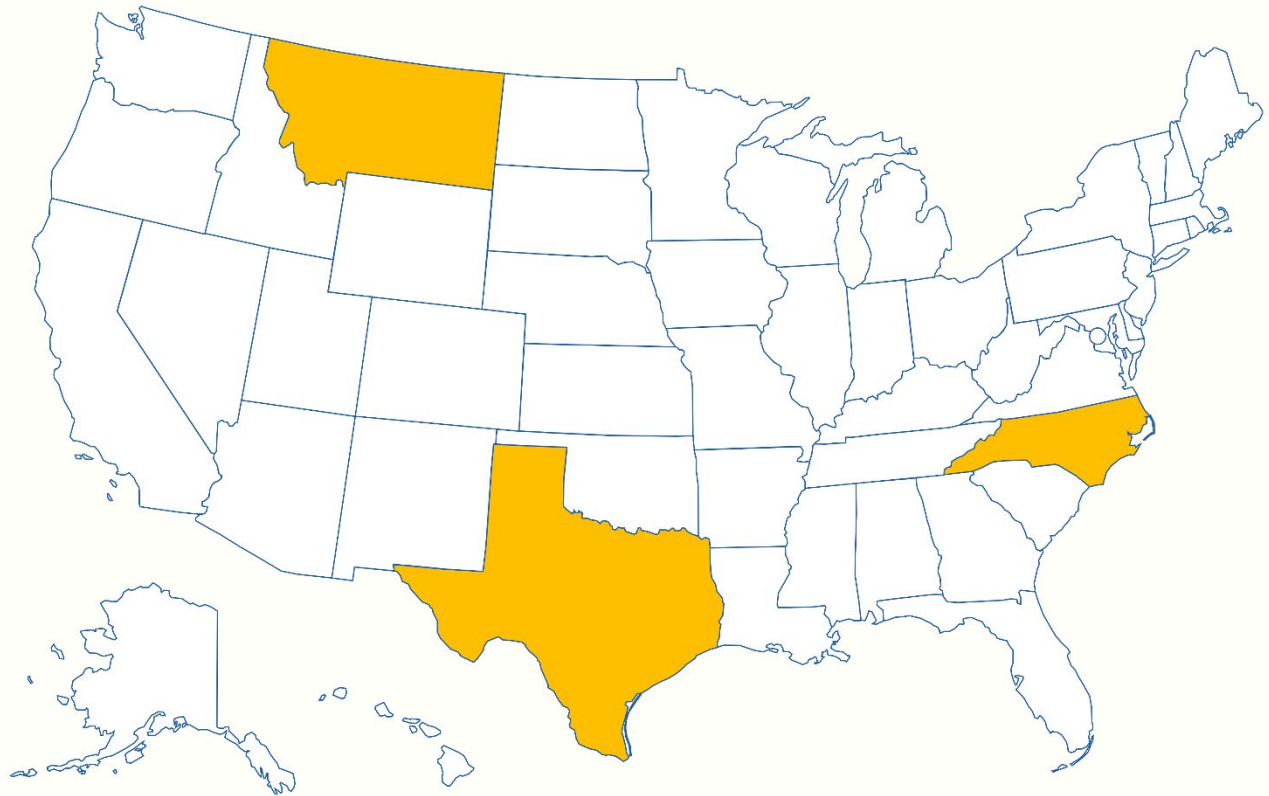
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# About the Innovation Center Rural Health Hackathon

In August 2024, the CMS Innovation Center hosted the Rural Health Hackathon, a series of three solution-oriented events designed to generate actionable ideas to address rural health challenges

- Events were held in Bozeman, Montana, Wilson, North Carolina, and Dallas, Texas, with a virtual submission option
- Brought together:
  - **Patients and advocates**
  - Rural health **community-based providers**
  - Community organizations
  - Industry and tech entrepreneurs
  - Philanthropies
  - Policy experts
- Attendees voted on winning ideas



# Summary of Themes from the Rural Health Hackathon

The following key themes emerged across the three areas of focus for Hackathon participants:



## Care Delivery Model

To better coordinate care and track outcomes, teams suggested to:

- Tailor programs for communities
- Establish a central care manager to capture patient's needs
- Incentivize screenings and referrals
- Collect feedback from rural and frontier providers for model features



## Access to Care

To improve access to care, teams suggested to:

- Create mobile sites of care
- Expand telemedicine
- Enhance care navigation support using community members
- Increase the distribution and reach of health facilities for specialty care access



## Workforce

To sustain the health care workforce, teams suggested to:

- Provide support to train community members for clinical and non-clinical roles
- Boost scope of practice flexibilities to deliver more timely care
- Train existing healthcare workforce to bridge knowledge gaps

*Read the Innovation Center's November 12 Report...*

**Re-imagining Rural Health:  
Themes, Concepts, and Next Steps from the CMS Innovation Center "Hackathon" Series**

# Our Path Forward

The Innovation Center is using the results from the Rural Health Hackathon to drive rural health transformation.



## IMPROVING COORDINATED CARE

Iterate on Accountable Care Organization (ACO) models to enable more rural providers to participate through the Innovation Center and coordinate better care for patients and families



## INCREASING ACCESS TO TEAM-BASED CARE

Leverage payment flexibilities and waivers to pay for services across a broader care team and expand the provision of care within the home and community.



## ADVANCING HEALTH EQUITY

Develop pathways in our models and demonstrations to better enable rural hospitals, Rural Health Clinics, Federally Qualified Health Centers, Tribal, and safety net providers to participate in value-based care.

# Spotlight on Innovation Center Models

The **Making Care Primary (MCP)** model provides a pathway for primary care providers to participate in value-based care.

Additional payment, data, and learning support **opportunities for rural providers** to participate and bring accountable care to more patients are under consideration.

The **Kidney Care Choices (KCC)** and **ACO Realizing Equity, Access, and Community Health (REACH)** models **expand workforce in rural communities** using generally supervised “auxiliary staff” in Post Discharge Home Health and Care Management Visits.

The **Transforming Maternal Health (TMaH)** model requires state Medicaid agencies to cover the full range of doula services to promote **team-based care in rural communities**. States may use a variety of methods to pay for such services.

The **ACO Primary Care Flex (ACO PC Flex)** model includes an enhanced prospective primary care payment to incentivize person-centered, team-based care. Aims to address structural differences in **payment systems for Federally Qualified Health Centers and Rural Health Clinics**.

The **Transforming Episode Accountability Model (TEAM)** seeks to improve the coordination of items and services paid through Medicare fee-for-service. It features **payment incentives targeted to rural providers**, such as offering no downside risk for up to 3 years for rural safety net hospitals

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# Our Guest Speakers

**Alyssa Meller**

National Rural Health Resource  
Center

**Patti Banks**

Ely-Bloomenson Community  
Hospital

**Brea Burke**

Healing Hands Health Center

**Dawn Alley**

IMPACT Care

What is the most significant challenge for patients to access healthcare in rural areas?  
 (Respond in one word or connect\_your\_responses\_with\_an\_underscore\_like\_this).



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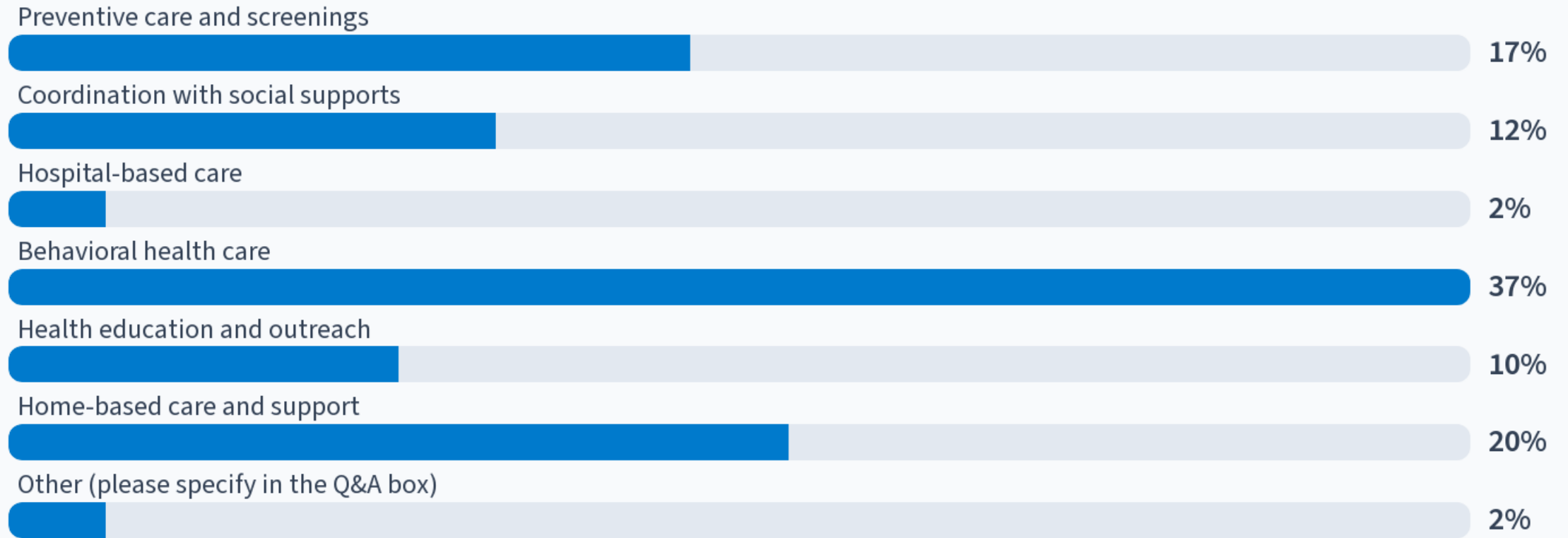
Healing Hands Health Center

**Dawn Alley**

IMPACT Care

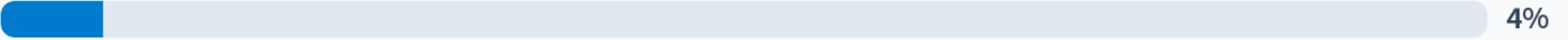


## Which community health services do you find the most difficult to effectively provide for rural communities?



## What is the most significant need for CHWs to better support rural communities?

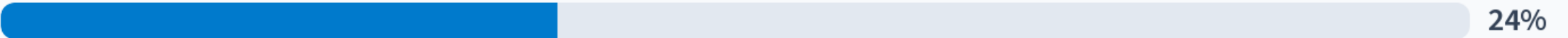
(A) More trainings, certification and/or education



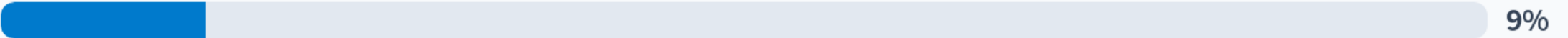
(B) Increased funding, coverage, reimbursement, and resources



(C) Better integration with healthcare providers



(D) Enhanced communication tools and technology



(E) Other (please specify in the Q&A box)



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# Question and Answer Session








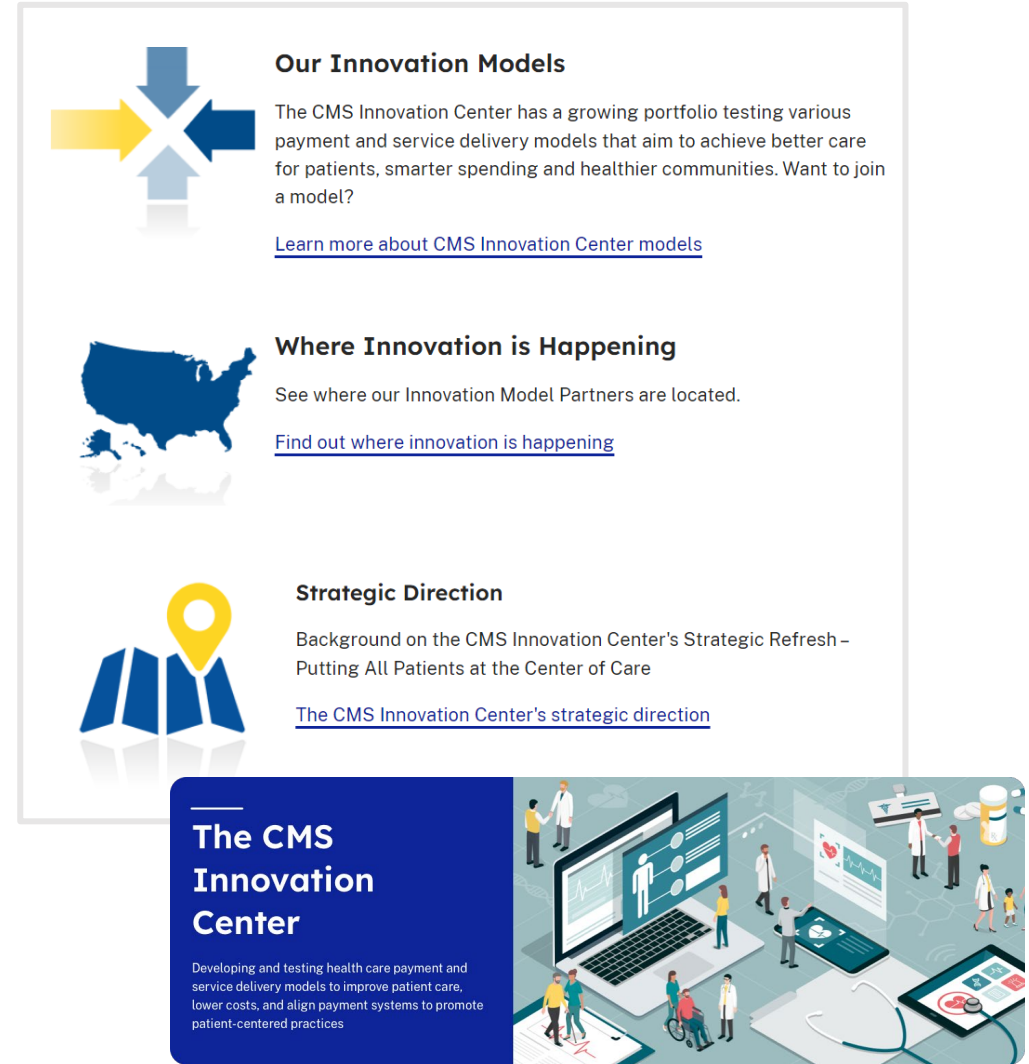
## Open Q&A

Please **submit questions via the Q&A pod** on your screen.

# Where Can You Go For More Information?

## Resources for the CMS Innovation Center

-  **CMS Email Listserv**  
[Sign up to receive regular email updates](#) about the CMS Innovation Center, including opportunities to engage with, provide input on and potentially participate in model tests.
-  **CMS Innovation Center Website and Strategic Direction Webpage**  
Visit the [CMS Innovation Center](#) and [Strategic Direction](#) webpage.
-  **Model Participation**  
Visit the [CMS Innovation Center Models](#) webpage (and [Medicare Shared Savings Program](#) site) to see current participant geographic and contact information\*. You can also see which models are currently [enrolling](#).
-  **Social Media**  
[Follow us](#) @CMSinnovates on X (Formerly known as Twitter).
-  **CMS Rural Hackathon**  
Visit the [CMS Innovation Center Rural Hackathon](#) webpage to view the [CMS Innovation Center Report](#).



**Our Innovation Models**

The CMS Innovation Center has a growing portfolio testing various payment and service delivery models that aim to achieve better care for patients, smarter spending and healthier communities. Want to join a model?

[Learn more about CMS Innovation Center models](#)

**Where Innovation is Happening**

See where our Innovation Model Partners are located.

[Find out where innovation is happening](#)

**Strategic Direction**

Background on the CMS Innovation Center's Strategic Refresh – Putting All Patients at the Center of Care

[The CMS Innovation Center's strategic direction](#)

**The CMS Innovation Center**

Developing and testing health care payment and service delivery models to improve patient care, lower costs, and align payment systems to promote patient-centered practices

# Thank You for Attending this Listening Session



**We appreciate your time and interest!**

Please take the survey following this listening session so we can learn how to make our events better.