

Payer Participation in OCM



*Oncology Care Model
(OCM)*

March 23, 2015

OCM Overview

Physician Practices

OCM participants are Medicare enrolled physician practices that furnish chemotherapy

Emphasizes Practice Transformation

Physician practices are required to engage in practice transformation to improve the quality of care they deliver

Episode-Based

Payment model targets chemotherapy and related care during a 6-month period following the initiation of chemotherapy treatment

Multi-Payer Model

Medicare FFS and other payers work in tandem to support practice transformation across the patient population

Opportunity for Payers

Participating in OCM allows payers to:

- Measure and increase the quality of care provided by contracted physician group practices
- Reduce overall expenditures on cancer care by incorporating value-based payment
- Engage with quality and cost data to inform ongoing delivery system and payment reform
- Help transform cancer care across the population

OCM Payer Participants

All OCM practices will participate with Medicare FFS

- About 50% of patients in oncology practices are Medicare beneficiaries

CMS invites other payers who contract with OCM practices to participate

- Payers may include all commercial payers (including MA plans), state Medicaid agencies, and/or other governmental payers (TRICARE, FEHBP, state employee health plans, etc.)
- Payers will sign MOUs with CMS and agreements with practices

Payer participation will drive OCM's geographical scope

- CMS will publish lists of payers and practices who submit letters of intent to participate in OCM so that payers and practices can engage with one another and coordinate their participation in the model

Payer Alignment



CMS seeks to offer:

- (1) Flexibility to OCM payers
- (2) Consistency to OCM practices

OCM Practice Requirements

- (1) Provide 24/7 access to a clinician with patient's medical records
- (2) Use ONC-certified EHR
- (3) Use data for quality improvement
- (4) Provide core functions of patient navigation
- (5) Document IOM care plan
- (6) Use therapies consistent with clinical guidelines

Payments

(1) Payments for enhanced services

- Other payers may determine their own payment amounts, schedules, and methodologies
- Examples: advance payments, PBPM

(2) Payments for performance

- Payers may define and incentivize high performance as they choose
- Examples: retrospective lump sum, increased monthly payment

Quality Measures and Data Reporting

Core Quality Measures

- CMS will work with OCM payers to develop a set of core quality measures which all payers will collect
 - *Examples:* emergency department visits, hospital admissions, use of hospice
- Payers may collect additional quality measures

Data Reporting

- CMS encourages payers to align with data collection formats and schedules where possible to minimize reporting burden for practices

Additional Model Components

Cancer Types

- CMS encourages but does not require payers to include cancer types that cover a majority of their covered lives

Beneficiary Eligibility and Attribution

- Payers may determine their own patient eligibility criteria and attribution methodologies

Model Start Date

- Payers must apply in this initial application period, and are encouraged but not required to start their performance periods within 90 days of OCM-FFS

Medicare Advantage Plans

- May participate in OCM
- May offer enhanced care management payments to practices
- Are responsible for funding any additional model payments to practices

Medicaid

- Medicaid FFS and managed care plans are eligible to participate in OCM
- State Medicaid agencies and/or commercial insurers with Medicaid managed care plans may apply to participate
- OCM participation may require Medicaid State Plan Amendments

Application Process

Payers and practices apply separately

- CMS encourages payers and practices to coordinate their OCM participation, starting in the application period

Step One: Letter of Intent (LOI)

- Payer LOIs due by 5:00 pm EDT on **April 9, 2015**
(payers agreeing to public posting will be listed on OCM website on 4/16)
- Practice LOIs due by 5:00 pm EDT on **May 7, 2015**
(practices agreeing to public posting will be listed on OCM website on 5/14)

Step Two: Application

- ALL applications due by 5:00 pm EDT on **June 18, 2015**
- Applications must be completed online using an authenticated web link and password
- Practices must submit letters of support from other payers (if applicable)

Contact Information

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<http://innovation.cms.gov/initiatives/Oncology-Care/>

Slides and a transcript of this presentation will be available on the OCM web page within one week.