



Primary Care Investment Models Results (Privately Insured)

PRIMARY CARE WORKGROUP

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Principles Used To Build The Definition

Key Takeaways

- ❑ A modular or stackable definition
- ❑ Intrastate geographic reporting
- ❑ Aligning with other state and national definitions as a secondary goal not immediate priority
- ❑ An expanded list of defined primary care services and providers
- ❑ Include basic outpatient behavioral health services, such as those performed as part of an integrated behavioral health arrangement
- ❑ Include broader set of OB/GYN services such as prenatal care and deliveries when provided by a primary care provider
- ❑ Exclude pharmacy spending from denominator
- ❑ Include Medicare non-FFS for now and then measuring other payers when possible (not provided in current results)



Place of Service Definitions: Narrow (Limited Place of Service)

Place of Service	Narrow
Telehealth	X
Homeless Shelter	X
Indian Health Service Facility	X
Tribal Facility	X
Prison/Correctional Facility	X
Office	X
Home (including Group)	X
Assisted Living Facility	X
Temporary Lodging	X
Off Campus- Outpatient Hospital	X
On Campus- Outpatient Hospital	X
Military Treatment Facility	X
Custodial Care Facility	X
Hospice	X
Clinic (includes Public & Rural)	X
Federally Qualified Health Center	X
Community Mental Health Center	X
Military Treatment Facility	X
Custodial Care Facility	X
Hospice	X
Clinic (includes Public & Rural)	X
Federally Qualified Health Center	X
Community Mental Health Center	X
X means included Place of service	

Top 3 Place of Service	Frequency %
Office	82.1%
On Campus- Outpatient Hospital	6.0%
Urgent Care Facility	5.9%
Total	94.0%

All Other Place of Service	Frequency %
Telehealth	5.4%
Other	0.6%
Total	6.0%

Urgent Care Facility is not included in the Narrow places of service definition



Scenario 1: Core Set of Primary Care Services with Core Set of Primary Care Providers

- ❑ Primary Care Core CPTs plus Primary Care Core Taxonomies
- ❑ Detailed list of Primary Care services in Appendix

Primary Care Spending as a Percent of Total Medical			
Place of Service	2019	2020	2021
All	6.4%	5.9%	5.8%
Narrow (Limited Place of Service Codes)	6.1%	5.5%	5.3%



Scenario 2: Behavioral Health Module

- ❑ Behavioral Health CPTs plus (Behavioral Health serving provider if associated 'Billing Provider' is a qualified primary care practitioner as defined under Scenario 1 and core primary care providers)
- ❑ Payments reported in Scenario 2 can be added to Scenario 1 as desired
- ❑ Detailed list of Behavioral Health services in Appendix

Primary Care Spending as a Percent of Total Medical			
Place of Service	2019	2020	2021
All	0.1%	0.1%	0.1%
Narrow (Limited Place of Service Codes)	0.1%	0.1%	0.1%



Scenario 3: OB-GYN Module

- ❑ OB-GYN services (CPTs) with the Core Primary providers (Care Taxonomy Codes)
- ❑ Payments reported in Scenario 3 can be added to Scenario 1 as desired
- ❑ Detailed list of OB-GYN services in Appendix

Primary Care Spending as a Percent of Total Medical			
Place of Service	2019	2020	2021
All	0.03%	0.03%	0.02%
Narrow (Limited Place of Service Codes)	0.01%	0.01%	0.01%



Appendix



Core Set of Primary Care Services (CPTs)

Primary Care Core Services
Immunizations
Health Risk Assessment
Phone Calls (physician & Non-Physician)
Online Service By Hc Pro
Phys/QHP Education Materials for Pts In Group Setting
Visual Acuity Screen
Office/OutPt Visit (includes consultations)
Individual Physician Supervision Of Pt (W/OutPt) In Home, Domiciliary Or Rest Home Complex
Home Visit (New & Established)
Prolong Service W/O Contact
Standby Service
Team Conf W/ or W/O Pt By Healthcare Prof 30 Min W/ or W/O Physician
Home/Nursing Facility Visits
Supervision Hospice Patient/Month
Preventive Medical Services
Online Digital Evaluation And Management Service
Phys/Qhp Telephone Evaluations
Interprofessional Electronic Health Assessments
Remote Monitoring Physiologic Parameters

Primary Care Core Services
Self-Measured Blood Pressures
Assmt & Care Planning Pt W/Cognitive Impairment
Complex Care W/O Pt Vsit
Chronic Care Mgmt
Trans Care Mgmt
Advncd Care Plan
Admin of Vaccines (Influenza, Pneumococcal, Hepatitis B)
Phys Cert or Re-Cert Mcr-Covr Hom Hlth Svc per Cert or Re-Cert Prd
Home/Nursing Facility Visits W/Out Pt Medicare Approved
Hospice Facility Visits Medicare Approved
Welcome to Medicare visit
Ppps, Visits
Hospital Outpt Clinic Visit
FQHC Visits
Comprehensive Asses Care Plan Chronic Care Mgmt Services
Prolong Preventative Services
Back To School Visits
Clinic Service All-Inclusive
Prostate Cancer Screening; Digital Rectal Examination



Core Set of Primary Care Provider Specialties

Primary Care Providers
Physician (family medicine, general internal medicine, pediatrics, general practice, geriatric medicine)
Nurse practitioner (adult health, family, pediatrics, primary care)
Physician's assistant, medical
Certified clinical nurse specialist
Nurse, non-practitioner
Family Medicine (Adolescent, Adult, Geriatric)
Internal Medicine - Adolescent Medicine
Pediatrics - Adolescent Medicine
Nurse Practitioner - (Community Health, Gerontology, School, General)
Clinical Nurse Specialist - (Adult Health, Community Health/Public Health, Chronic Health, Family Health, Gerontology, Pediatrics, School)

Primary Care Providers
Family Medicine - Hospice Palliative
Internal Medicine, Hospice and Palliative Medicine
Pediatrics, Hospice and Palliative Medicine

Note: Restrict to only home health and hospice procedure codes

Primary Care Providers
Federally Qualified Health Center
Primary Care Clinic
Rural Health Center
Clinic/Center Primary Care
Rural Hospital
Critical Access Hospital

Note: Restrict on revenue codes for clinic and professional services



Behavioral Health Services

Behavioral Health Services
Add-on code specific for psychiatric service
Psych Diagnostic Evaluation
Psych Diag Eval W/Med Services
Psychotherapy
Crisis Psychotherapy
Psychoanalysis
Family Psychotherapy (W/ or W/O Pt 50 Min)
Psychotherapy session with group of Pts' families
Group psychotherapy session
Provider prescribes/reviews meds after psychotherapy services
Provider administers narcotic drug to induce hypnotic state that helps diagnosis/Tx
Provider performs TMS to improve depression symptoms
Provider performs a subsequent redetermination of the minimum intensity of electrical pulses for Pt undergoing TMS
Provider applies an electric current to the Pt's brain for the purpose of producing a seizure or series of seizures to alleviate symptoms of mental disorder
Provider performs psychophysiological therapy using biofeedback training
Hypnotherapy
Provider works with outside agencies/employers/other providers regarding Pts physical environment to manage psychiatric Pt's medical care
Provider reviews medical records of the Pt pertaining to psychiatric evaluation to establish diagnosis/Tx plan
Provider explains the results of psychiatric/medical exams or other procedures about the Pt's care to the Pt's family/caregivers
Provider prepares report on Pt's mental state for other providers of care
Other psychiatric services or procedures

Behavioral Health Services
Developmental Screen W/Score
Neuropsychological Testing and Assessment
Standard cognitive performance testing
Brief Emotional/Behav Assmt
Psychological testing evaluation services by physician or other QHP
Psychological and Neuropsychological Testing Evaluation Services
Neuropsychological testing evaluation services by physician or other QHP
Psychological and Neuropsychological Testing Evaluation Service (including administration)
Health Behavior Assessment Or Re-Assessment
Health Behavior Interventions (Individual, Group, Family)
Behavior Identification Assessment, Administered By QHP
Adaptive Behavior Treatment By Protocol, Administered By Technician Under The Direction Of A Physician Or Other Qualified Health Care Professional, Face-To-Face With One Pt, Each 15 Min
Group Adaptive Behavior Treatment By Protocol, Administered By Technician Under The Direction Of A Physician Or Other Qualified Health Care Professional, Face-To-Face With Two Or More Pts, Each 15 Min
Adaptive Behavior Treatment With Protocol Modification, Administered By Physician Or Other Qualified Health Care Professional, Which May Include Simultaneous Direction Of Technician, Face-To-Face With One Pt, Each 15 Min
Family Adaptive Behavior Treatment Guidance, Administered By Physician Or Other Qualified Health Care Professional (With Or Without The Pt Present), Face-To-Face With Guardian(S)/Caregiver(S), Each 15 Min
Multiple-Family Group Adaptive Behavior Treatment Guidance, Administered By Physician Or Other QHC Professional (W/O Pt Present), Face-To-Face With Multiple Sets Of Guardians/Caregivers, Each 15 Min
Group Adaptive Behavior Treatment With Protocol Modification, Administered By Physician Or Other Qualified Health Care Professional, Face-To-Face With Multiple Pts, Each 15 Min
Therapeutic Activities (BH providers only)
Self-care/Home management training (BH providers only)
Medical Nutrition



Behavioral Health Services Cont'd

Behavioral Health Services
Self-Mgmt Education & Training
Unlisted special service, procedure or report (BH provider only)
Behav Chng Smoking
Audit/Dast 15-30 Min
Alcohol/Substance Screen & Intervention >30 Min
Preventive Counseling Group
Care Mgmt Svc Bhvl Health Conditions 20 Min
Psyc Collab Care Mgmt
1St/Sbsq Psyc Collab Care
Tobacco Use Assessed
Smoking & 2Nd Hand Assessed
Current Tobacco Smoker Or 2Nd Hand Exposed
Tobacco Nonsmoker Not Exposed 2Nd Hand
Current Smokeless Tobacco User
Current Tobacco Non-User
Dschrg Med/Current Med OutPt Record
Pt Screened For Depression
Pt Screened For Unhlthy Alcohol Use
Suicide Risk Assessed
Neg Scrn Depression Symptoms By Dep Tool
No Sig Dep Symp By Dep Tool
Mild-Mod Dep Symp By Deptool

Behavioral Health Services
Clin Sig Dep Sym By Dep Tool
Tobacco Use Cessation Intervention (Counseling, Pharmacologic)
Pt Tobacco Screen And Cessation Intervention
Pt Screened For Injection Drug Use (Hiv) and High Risk Sexual Behavior (Hiv)
Pt Counseled Psychosocial/Pharmacologic (Opioid Addiction, Alcohol Dependence)
Annual Alcohol Screen 15 Min
Brief Alcohol Misuse Counsel
Depression Screen Annual 15 Min
Medicated Assisted Treatment
Coordinated care fee, risk adjusted low, maintenance, home monitoring, team conference, physician coordinated care)
Coordinated care fee, risk adjusted maintenance, levels 3, 4, 5 (BH provider only)
Other specified case management service (BH provider only)
Alcohol and/or drug assessment
Behavioral Health Screening To Admit To Treatment Program
Behavioral health counseling and therapy, 15 Min
Alcohol and/or drug services; crisis intervention (outPt)
Behavioral health outreach service (planned approach to reach a targeted population)
Mental Health Assess By Non-MD
Medication Training and Support
Alcohol and/or drug abuse services, NOS, brief interventions)
Alcohol/Drug Screening



Behavioral Health Provider Specialties

Behavioral Health Providers
Physician, general psychiatry
Physician, child and adolescent psychiatry
Nurse practitioner, psychiatric
Behavioral Health & Social Service Providers/Social Worker, Clinical
Allopathic & Osteopathic Physicians/ Psychiatry & Neurology, Geriatric Psychiatry, Hospice & Palliative Medicine
Ambulatory Health Care Facilities/Clinic/Center, Mental Health- CMHC
Counselor (Addiction-SUD, Mental Health, Pastoral, Professional (Counselor in FQHC), School)
Psychoanalyst
Psychologist (Addiction, Adult Development and Aging, Clinical, Cognitive and Behavioral, Counseling, Educational)



OB-GYN Services

OB-GYN Services
Remove Contraceptive Capsule
Implant Hormone Pellet(S)
Insert Drug Implant Device
Remove Drug Implant Device
Remove W/ Insert Drug Implant
I & D Of Vulva/Perineum
I & D Of Bartholin Gland Abscess
Destroy Vulva Lesions (Simple or Complex)
Biopsy Of Vulva/Perineum
Exam Of Vulva W/Scope
Obtaining pap smear
Destroy Vag Lesions Simple
Biopsy Of Vagina Mucosa (Simple or Complex)
Remove Vagina Lesion
Treat Vagina Infection
Fitting Of Diaphragm/Cap
Pelvic Examination Under Anesthesia

OB-GYN Services
Exam Of Vagina W/Scope
Exam/Biopsy Of Vag W/Scope
Exam Of Cervix W/Scope
Exam/Biopsy Of Cervix W/Scope
Biopsy Of Cervix W/Scope
Endocerv Curettage W/Scope
Endocervical Curettage
Biopsy Of Uterus Lining
Biopsy Done W/Colposcopy Add-On
Dilation And Curettage
Insert Intrauterine Device
Remove Intrauterine Device
Fetal Non-Stress Test
Insert Cervical Dilator
Episiotomy Or Vaginal Repair
Obstetrical Care
Veginal Delivery + Postpartum Care



OB-GYN Services Cont'd

OB-GYN Services
External Cephalic
Delivery Of Placenta
Antepartum Care
Routine Ob Care
Cesarean Delivery Only + Postpartum Care
Routine Obstetric Care After Prevs C-Section
Vaginal Delivery Only After Prevs C-Section (includes Postpartum Care if necessary)
Routine Ob Care Post Vaginal Delivery After Prev C-Section
C-Section Only, After Attempted Vaginal Delivery After Prev C- Section (includes Postpartum Care if necessary)
Care Of Miscarriage 1St Trimester
Ob Us < 14 Wks (Single or Additional Fetus)
Ob Us >= 14 Wks (Single or Additional Fetus)
Ob Us Detailed (Single or Additional Fetus)
Ob Us Nuchal Measure (Single Gest or Add-On)
Ob Us Limited Fetus 1<
Ob Us Follow-Up Per Fetus
Transvaginal Us Obstetric

OB-GYN Services
Fetal Biophys Profile (W/ or W/O Non-Stress Testing)
Urinalysis Dip Stick/Tablet Reagnt (Auto or Non-Auto Microscopy)
Urine Pregnancy Test Visual Color Comparison
Delivery/Birthing Resuscitation
Home Visit For Newborn Care And Assessment
Initial Prenatal Care Visit
Prenatal Flow Sheet
Subsequent Prenatal Care
Postpartum Care Visit
Prenatal Care At Risk Assessm
Antepartum Management
Prenatal care, at-risk enhanced service package
Annual Gynecological Examinations
Annual Breast Exam
Insertion Of Levonorgestrel-Releasing Intrauterine Sys
Infant Safety (Including Cardiopulmonary Resuscitation Classes Nonphysician Provider, Per Session)
Cancer Screen; Pelvic/Breast Exam



Other Technical Data Notes

- ❑ All spending was based allowed amount
- ❑ The study population is restricted to:
 - Maryland residents only
 - Privately insured enrollees without age restrictions
 - Individual, Small Group, and Large Group (including fully-insured and self-insured non-ERISA- e.g., state and local gov't) market segments
- ❑ The study population excludes:
 - Kaiser and dental enrollees
 - Catastrophic product types
 - Medicare and Medicaid
 - Self-insured ERISA and Federal Employee Health Benefit (FEHB) health plans due to federal decisions in 2016 (SCOTUS court ruling — Gobeille vs. Liberty Mutual) and (OPM barring payers from reporting FEHB data to APCDs) in 2019, respectively.



Thank You