



# Primary Care Investment Analysis and Reporting Plan

## *Workgroup Considerations*

**AUGUST 24, 2023**

# Overview



- ▶ In 2022, the legislature passed Senate Bill 734, *Maryland Health Care Commission – Primary Care Report and Workgroup*
- ▶ The MHCC is required to annually report on ways to improve quality and access to primary care services, with special attention to increasing health care equity, reducing health care disparities, and avoiding increased costs to patients and the health care system
  - Reporting begins December 2024
- ▶ The law requires MHCC to convene a Primary Care Workgroup (workgroup) to obtain input on the scope and methodology for the analysis; the workgroup convened in November and has met regularly to develop a Primary Care Investment Analysis and Reporting Plan (Plan)

# Primary Care – Investment Definitions



## NARROW

Usually includes general practice, internal medicine, pediatrics, nurse practitioners (“NP”), physician assistants (“PA”), and a core set of primary care services related to primary care in offices and outpatient settings.

## BROAD

Typically expands on the narrow definition to include some combination of other providers namely obstetrics and gynecology, behavioral health (e.g., psychiatrists and psychologists), and clinical social workers.

## MARYLAND

Encompasses office visits, preventive care, and a broad set of other services when performed by family medicine, general practice, internal medicine, pediatrics, geriatricians, NPs, and PAs. This includes providers employed or under contract with a nursing home, FQHC, urgent care center, or retail clinic. Behavioral health services are included when provided by a primary care provider or by a behavioral health provider when the billing provider has a primary care taxonomy. Obstetric and gynecologic services are part of the definition when performed by a primary care provider.



**Staff Recommends: Maryland Definition** *(informed by broad and narrow definition)*

# Investment – Approach



## VOLUNTARY TARGET

### ***Advantages:***

- ▶ Engages stakeholders in a collaborative process and inspires shared commitment
- ▶ Less likely to hasten overall cost growth because payors can adjust the pace of increased primary care spending

### ***Drawbacks:***

- ▶ May result in slower progress in reaching primary care spending goals

## REQUIRED INVESTMENT

### ***Advantages:***

- ▶ More likely to achieve primary care spending goals

### ***Drawbacks:***

- ▶ More likely to increase costs



***Staff Recommends:*** Voluntary Target

# Investment – Target Options



## SINGLE TARGET

### *Advantages:*

- ▶ Easier to communicate

### *Drawbacks:*

- ▶ May not recognize differences across populations

## TARGET FOR EACH PAYER TYPE

### *Advantages:*

- ▶ Recognizes differences in populations and covered services across payer types

### *Drawbacks:*

- ▶ May be confusing to stakeholders
- ▶ May raise questions regarding the methodology and fairness of different targets



***Staff Recommends:*** Target For Each Payer Type (*private/government*)

# Annual Improvement – Strategy



## ABSOLUTE IMPROVEMENT

### **Advantages:**

- ▶ Sets a vision for the future

### **Drawbacks:**

- ▶ Targets are rarely met as quickly as hoped
- ▶ Less guidance on how to operationalize (how much spending should increase each year)

## RELATIVE IMPROVEMENT

### **Advantages:**

- ▶ Acknowledges that care delivery transformation takes time
- ▶ More predictable increases in revenue

### **Drawbacks:**

- ▶ May feel less inspiring than a single number



**Staff Recommends:** Relative Annual Improvement

# Investment Calculation – Approach



## PERCENT OF TOTAL MEDICAL EXPENSE

### **Advantages:**

- ▶ Consistent with other state and national approaches
- ▶ Tries to communicate that increased spending on primary care should reallocate rather than increase total spending

### **Drawbacks:**

- ▶ Does not recognize differences in total cost of care across states

## PER MEMBER PER MONTH AMOUNT

### **Advantages:**

- ▶ Easier to reflect the cost of achieving primary care delivery goals, sustainably and efficiently
- ▶ More consistent with how payers typically measure health care costs

### **Drawbacks:**

- ▶ May not resonate with stakeholder audiences unfamiliar with per member, per month calculations

 **Staff Recommends:** Per Member Per Month and As a Percent of Total Medical Expense



# Private Payer

*Investments in Primary Care*



# Narrow Definition



- ▶ Core set of primary care services with core set of primary care providers
  - Primary care core CPTs plus primary care core taxonomies
  - A detailed list of primary care services and provider specialties are in the Appendices

Narrow (Allowed Amount)	Primary Care Spending as a Percent of Total Medical			Primary Care Per Capita Medical Spending		
	2019	2020	2021	2019	2020	2021
Aetna	5.5%	5.3%	5.6%	\$216	\$203	\$252
CareFirst	6.4%	5.9%	5.9%	\$286	\$258	\$285
CIGNA	7.4%	6.5%	7.1%	\$252	\$225	\$290
UHC	5.6%	5.4%	6.2%	\$213	\$207	\$277
Other	6.1%	5.4%	6.1%	\$186	\$175	\$341
<b>Total</b>	<b>6.3%</b>	<b>5.8%</b>	<b>6.1%</b>	<b>\$264</b>	<b>\$242</b>	<b>\$282</b>

Narrow (Patient Liable Amount)	2019	2020	2021	2019	2020	2021
Aetna	8.9%	8.4%	9.0%	\$40	\$34	\$44
CareFirst	8.2%	6.3%	6.7%	\$50	\$34	\$41
CIGNA	13.8%	13.1%	12.5%	\$49	\$43	\$52
UHC	10.2%	8.3%	9.4%	\$53	\$39	\$54
Other	7.5%	7.8%	8.3%	\$41	\$37	\$66
<b>Total</b>	<b>9.0%</b>	<b>7.3%</b>	<b>7.8%</b>	<b>\$50</b>	<b>\$36</b>	<b>\$44</b>

*Patient Liable Amount Includes: Deductible, Co-Insurance, Co-payment, and Other Non-Covered Charges*

# Broad Definition



- ▶ Core set of primary care, behavioral health, and OB/GYN services rendered by primary care providers
- ▶ Behavioral health services rendered by a behavioral health care providers were included if the billing provider taxonomy code was primary care

Broad (Allowed Amount)	Primary Care Spending as a Percent of Total Medical			Primary Care Per Capita Medical Spending		
	2019	2020	2021	2019	2020	2021
Aetna	5.6%	5.4%	5.7%	\$220	\$206	\$259
CareFirst	6.5%	6.0%	6.1%	\$292	\$266	\$292
CIGNA	7.5%	6.7%	7.3%	\$256	\$229	\$295
UHC	5.7%	5.5%	6.3%	\$216	\$211	\$283
Other	6.3%	5.7%	6.2%	\$192	\$184	\$349
<b>Total</b>	<b>6.5%</b>	<b>6.0%</b>	<b>6.2%</b>	<b>\$269</b>	<b>\$248</b>	<b>\$288</b>

Broad (Patient Liable Amount)	2019	2020	2021	2019	2020	2021
Aetna	9.0%	8.6%	9.3%	\$41	\$34	\$45
CareFirst	8.3%	6.5%	6.8%	\$51	\$34	\$42
CIGNA	13.9%	13.3%	12.7%	\$49	\$44	\$52
UHC	10.3%	8.5%	9.6%	\$54	\$39	\$55
Other	7.8%	8.3%	8.4%	\$42	\$39	\$67
<b>Total</b>	<b>9.1%</b>	<b>7.5%</b>	<b>7.9%</b>	<b>\$50</b>	<b>\$36</b>	<b>\$45</b>

*Patient Liable Amount Includes: Deductible, Co-Insurance, Co-payment, and Other Non-Covered Charges*

# Next Steps



- ▶ Finalize the draft Plan; tentative presentation at the September 21<sup>st</sup> Commission meeting
- ▶ Submit the Plan to the Governor and Maryland General Assembly by December 1st
- ▶ Reconvene the workgroup in October to begin building out select elements of the Plan
- ▶ Plan implementation in 2024

# Questions





# **APPENDIX**

## **Technical Data**

# Technical Data Notes



- ▶ All spending was based on 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

# 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 *(Continued)*



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
Vaginal Delivery + Postpartum Care

# OB-GYN Services *(Continued)*



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 Assessment
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