

Maryland and Federal Government Announce partial agreement on Maryland Primary Care Program

Last year when the new Federal Administration took over concerns were raised, and changes were announced to the Maryland Primary Care Program. The Advance payment status was put at risk, open enrollment was cancelled, and other changes were announced. MedChi expressed concern to the Department of Health (MDH) and Center for Medicare and Medicaid Innovation (CMMI). The State began working to resolve the concerns, and for the last six months MedChi and the Maryland Hospital Association had regularly meetings to plan and prepare the State negotiating team. MedChi also communicated suggestions and concerns in writing to MDH and CMMI.

Last week, MDH and CMMI came to a preliminary agreement to establish a Track 3 for the Maryland Primary Care Program (MDPCP). Although CMS still needs to approve the Track 3 policy through a federal clearance process over the next several months, the MDPCP team wanted to provide an update on the preliminary Track 3 policies. MDH is confident that the collaborative negotiations with CMMI resulted in a positive progression for the program that will provide several benefits for participants.

Preliminary Track 3 concepts include the following. Please note again that CMS is seeking approval of these policies through a federal clearance process:

- CMMI and MDH anticipate the new Track 3 starting on January 1, 2023 for non-FQHC primary care practices.
- Track 3 includes the following payments:
 - Population-Based Payment (PBP)
 - Flat Visit Fee (FVF)
 - HEART payment
- Individual practices' total PBPM amounts will vary and will be a function of their average HCC score plus HEART payments.
- Track 3 will include a Performance-Based Adjustment (PBA) that will align with Track 2 measures and weighting.
- Practices will take on more financial risk when moving to Track 3, while also having the opportunity to achieve a positive payment adjustment for exceptional performance on measures.
- CTOs will continue supporting practices in all MDPCP tracks, including Track 3, and will receive similar funding allocations in Track 3 as in Tracks 1 and 2.
- Practices that participated in MDPCP as Track 2 practices in 2019 and 2020 will be required to move to Track 3 for PY 2023.

CMS anticipates releasing the next Request for Applications (RFA) in the spring/summer of 2022 for new practices, FQHCs, and CTOs to apply to participate in MDPCP beginning January 1, 2023. Additional information regarding Track 3 payments will be provided in that document. Current MDPCP participants do not need to respond to the RFA to participate in Track 3. If CMS approves Track 3 to start January 1, 2023, non-FQHC practices interested in transitioning to Track 3 will complete a transition application, similar to the current Track 2 transition request process.

MDH and CMMI continue to engage in discussions to introduce sufficient risk into the program for the purposes of reestablishing Advanced Alternative Payment Model (AAPM) participation status for practices in Tracks 1 and 2 for 2023.

Separately, MDH is working on an additional proposal to CMMI that would propose participation of Medicaid MCOs in the program. The proposal is expected to be submitted to CMMI by the end of 2021. If approved, MCOs could participate as an aligned payer in MDPCP as early as 2023.

We'd like to thank CMMI, the MDPCP Advisory Council, and our State partners for all of their support throughout this process, and we look forward to implementing the next iteration of the MDPCP. Additional details on Track 3 and other program updates will be shared as they become available.

If you are interested in this or any other value-based program, please reach out to MedChi for help. We are helping practices of all types and sizes understand and if they chose to contract into value-based programs.

Gene M. Ransom III
CEO MedChi The Maryland State Medical Society