

Physician-Focused Payment Model Technical Advisory Committee

Questions to Guide **Listening Session #2** for the September 2023 Theme-Based Meeting:

Encouraging Rural Participation in Population-Based TCOC Models

Topic: Incentives for Increasing Rural Providers' Participation in Population-Based Models

Tuesday, September 19, 9:10 a.m. – 10:40 a.m. EDT

Listening Session Subject Matter Experts (SMEs):

- **Alana Knudson, PhD, EdM** - Project Director, The Pennsylvania Rural Health Model (PARHM) Evaluation; Director, NORC Walsh Center for Rural Health; and Senior Fellow, NORC at the University of Chicago
- **Tom X. Lee, MD, MBA** - Chief Executive Officer, Galileo
- **Randy L. Pilgrim, MD, FACEP** - Enterprise Chief Medical Officer, SCP Health

Committee Discussion and Q&A Session

To assist in grounding the Committee's discussion, the questions for the presenters will focus on the following areas.

- A. Lessons learned regarding front end rural participation in alternative payment models (APMs).
- B. Enhancing infrastructure to address rural health needs.
- C. Designing financial incentives that encourage population-based model participation among rural providers.
- D. Integrating equity into value-based transformation and the design of future value-based models.

After each SME provides an 8-10-minute presentation, Committee members will ask the presenters questions.

The questions below are sample questions that Committee members may ask.

1. What are some lessons learned regarding front end rural participation in APMs?

- a) What are examples of promising APMs that include or target participation by rural providers?
 - i. What have been some lessons learned based on the experience of Federally Qualified Health Centers and Rural Health Clinics participating in the Medicare Shared Savings Program?
- b) What impact did participation in APMs have on rural providers' performance outcomes?

- c) What have been some lessons learned from Medicare Advantage and Accountable Care Organization (ACO) participation in rural communities?
- d) What have been some lessons learned from Medicaid and Marketplace plan participation in rural communities?
- e) How do the lessons learned vary for models that have been more rural-focused versus models that included participation of rural providers?
- f) What did participation patterns of rural providers look like? For example, did rural providers remain in or exit these APMs? What reasons did they report for joining or exiting a given APM? What could have been done, if anything, to prevent them from exiting the APM?
 - i. What financial incentives were provided to rural providers?
 - ii. What care delivery strategies did these rural providers adopt?

2. How can infrastructure be enhanced to address rural health needs? What are some promising approaches for addressing rural providers' infrastructure challenges? How can these approaches be incorporated to increase providers' participation in APMs?

- a) What limitations do rural providers face in using Health Information Technology (HIT) and data analytics? How do these limitations vary between ultra-rural and less rural areas?
- b) How can rural providers leverage HIT and data analytics to improve their chance of success in APMs?
- c) What approaches have integrated delivery systems, Accountable Care Organizations (ACOs), payers, and other health care systems used to address infrastructure issues in rural areas?
- d) What kinds of resources have been effective in assisting rural areas and rural providers in developing and sustaining the infrastructure to support value-based care?
- e) What are examples of important federal, state, and local resources needed for providers to participate in APMs?
- f) What are examples of successful initiatives supporting providers' engagement in value-based transformation in rural areas?

3. How can APMs' financial incentives be designed to encourage population-based model participation among rural providers?

- a) What payers, including Medicare fee-for-service, Medicare Advantage, Medicaid, and commercial payers, offer financial incentives to rural providers?
- b) What financial incentives have the most potential to improve rural providers' participation in APMs?
- c) What kinds of payment model design features are likely to be the most important for encouraging rural participation in population-based models?

- 4. What are some successful approaches for integrating equity into value-based transformation among rural providers? How can equity be further integrated into future value-based models?**
- a) What measures of social determinants of health (SDOH) and health-related social needs (HRSNs) are essential for evaluating rural quality of care? Are these measures currently applied in value-based models? Are there additional measures to consider?
 - b) What are examples of effective approaches that providers, ACOs, integrated delivery systems and payers have developed for addressing SDOH, HRSNs, equity and behavioral health in rural areas? What is the cost associated with implementing these programs, and what approaches have been used to secure the necessary funding for these programs?
 - c) What are some special considerations for rural providers' equity issues as they pertain to participating in value-based care models? How do these considerations vary depending on the type of rural area (e.g., by population density, provider capacity, rurality, geographic region)?
- 5. Are there any additional insights you would like to discuss regarding incentives for increasing rural providers' participation in population-based models?**

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Questions to Guide **Listening Session #3** for the September 2023 Theme-Based Meeting:

Encouraging Rural Participation in Population-Based TCOC Models

Topic: Successful Interventions and Models for Encouraging Value-Based

Transformation in Rural Areas

Tuesday, September 19, 10:50 a.m. – 12:20 p.m. EDT

Listening Session Subject Matter Experts (SMEs):

- **David C. Herman, MD** - Chief Executive Officer, Essentia Health
- **Ami Bhatt, MD, FACC** - Chief Innovation Officer, American College of Cardiology
- **Thad Shunkwiler, LMFT, LPCC** - Associate Professor, Department of Health Science and Director, Center for Rural Behavioral Health, College of Allied Health and Nursing, Minnesota State University, Mankato
- **Susan E. Stone, DNSc, CNM** - President, Frontier Nursing University

Committee Discussion and Q&A Session

To assist in grounding the Committee's discussion, the questions for the presenters will focus on the following areas.

- A. Innovative approaches for facilitating value-based transformation in rural areas.
- B. Opportunities for addressing telehealth issues unique to rural communities in Value-Based Payment (VBP) models.
- C. Success and challenges in developing the rural behavioral health workforce.
- D. Addressing social determinants of health (SDOH) and behavioral health in rural populations.

After each SME provides an 8-10-minute presentation, Committee members will ask the presenters questions.

The questions below are sample questions that Committee members may ask.

- 1. What are some innovative approaches for facilitating value-based transformation in rural areas? How do the approaches vary for different kinds of providers, including individual practices, hospitals and integrated delivery systems? How do these approaches vary by type of rural area (e.g., population density, rurality, geographic region, provider capacity)?**
 - a) What are some organizations that have been effective in implementing value-based care delivery in rural communities?

- b) What kinds of approaches have these organizations used (e.g., telehealth services; remote monitoring; e-consultations; use of freestanding emergency departments; and screening for and addressing health-related social needs and behavioral health needs)?
 - c) What kinds of resources have been effective in assisting rural areas and rural providers in developing the infrastructure to support value-based care?
 - d) What are examples of successful initiatives supporting providers and value-based transformation in rural areas?
- 2. What are some approaches to address rural communities' telehealth issues, particularly in alternative payment models? How do telehealth issues differ among patients versus providers in rural areas?**
- a) What policy levers and payment structures are needed to support telehealth adoption and use among rural providers? How can these be integrated into Alternative Payment Models for rural providers?
 - b) How would telehealth expansion benefit rural providers and the populations they serve? What are some potential unintended consequences of telehealth expansion? Can it potentially have unintended consequences regarding disparities in access to care in some settings?
 - c) What models have been successful at increasing telehealth access in rural communities?
 - d) What are some strategies to increase telehealth access specifically for patients and how do they vary among rurality, including remote and less rural areas?
- 3. What are some opportunities and challenges related to developing the rural health and behavioral health workforce?**
- a) What are some approaches rural providers can take to attract and retain their health and/or behavioral health workforce?
 - i. What incentives have proven effective among rural settings in attracting primary care providers and specialists?
 - ii. What incentives have proven effective among rural settings in attracting and retaining behavioral health specialists?
 - iii. What incentives have proven effective among rural settings in attracting and retaining ancillary staff?
 - b) To what extent can some of the health and behavioral health needs of rural patients potentially be met by non-rural providers?
- 4. How are rural patients' HRSNs and SDOH currently being addressed by their providers? What are some opportunities for improvement? Are there promising models that have improved patient outcomes through better incorporation of their HRSNs and SDOH?**
- a) What is the impact of issues related to SDOH and behavioral health in rural areas?

- b) What are examples of effective approaches that providers, Accountable Care Organizations (ACOs), integrated delivery systems and payers have developed for addressing patients' SDOH and behavioral health needs in rural areas? What is the cost associated with implementing these programs, and what approaches have been used to secure the necessary funding for these programs?
 - c) How can rural providers be empowered and incentivized to develop strategies for addressing social risk factors and needs faced disproportionately by the populations they serve? How can their performance in this regard be measured?
- 5. Are there any additional insights you would like to share about successful interventions and models for encouraging value-based transformation in rural areas?**