



November 2024

A Message to Our Readers

Dear MDPCP Colleagues,

I have several important updates to share with you this month!

AHEAD Model

Last week, the [State and CMS announced a formal agreement](#) for Maryland to participate in the AHEAD Model through 2034! The AHEAD Model, the next iteration of the Maryland Total Cost of Care Model, allows us to continue our innovative health transformation efforts including hospital global budgets and **advanced primary care investments**. Here are a few key terms from the new Agreement related to MDPCP:

- **Continuation of MDPCP through 2028** (extension to 2034 will be revisited with CMMI by 2028)
- Introduction of the national AHEAD Primary Care Program designed to recruit new primary care practices who are not in MDPCP into a Medicare primary care alternative payment model
- Requires the State to establish an aligned Medicaid primary care alternative payment model by January 2026 (Maryland is aiming to launch the Medicaid program by July 2025)
- Medicaid first requirement by 2027- starting in January 2027, participation in the Medicaid primary care alternative payment model will be required to participate in Medicare primary care alternative payment models, including MDPCP

- **Sunsets Track 3 as of December 31, 2025.** Please see the [CMS communication](#) distributed to all participants earlier this week for further details.

More detail on the AHEAD agreement, including a summary presentation, is available [here](#). We are excited to continue to partner with you to provide advanced primary care to more and more Marylanders!

2025 MDPCP Participation

While we look to the future, we also have important deadlines to maintain your MDPCP participation for 2025:

- Review, sign, and submit your PY2025 Participation Agreement (PA) Amendment by Fri, November 15th
- If you or your practices want to pay back unearned PBIP in full and avoid a demand letter, please send payment by Thu, November 21st

Respiratory Virus Season

Lastly, now that we are in the middle of respiratory virus season, it is a critical time to ensure your patients are vaccinated against COVID-19, flu, and RSV. Use the CRISP [Vaccine Tracker](#) to identify which of your patients need a vaccine, outreach to them and provide them with vaccine education, and consider participating in the [Vaccine Access Initiative](#) to help your patients get these critical vaccines and mitigate adverse outcomes.

Sincerely,
Chad Perman
Executive Director, MDPCP Management Office

Upcoming Deadlines

PY2025 Participation Agreement (PA) Amendments: **Fri, November 15th**

Last day opt to pay unearned PBIP without interest or avoid a demand letter: **Thu, November 21st**

Deadline to pay unearned PBIP without interest: **Sat, December 28th**

Save the Date

Upcoming MDPCP Events

Q4 '24 CRISP Open Office Hour: **Wed, November 13th (12 - 1 PM)**

Q4 '24 Care Manager Affinity Group: **Wed, December 4th (12 - 1 PM)***

If you would like a list of upcoming events for the entire year, please check out the [2024 MDPCP Learning Live Calendar](#).

*If you are unable to register for an event, please email Shiva Rings (shiva.rings1@maryland.gov) with your name, role, and email address and he will get you registered for the event and added to a calendar invite.



[Connect Events Page](#)

MDPCP Updates

Vaccine Access Initiative

Ensure your eligible patients are up-to-date on vaccines, by participating in the Vaccine Access Initiative. In this Initiative, you can invite an identified local pharmacy partner into your clinical space to vaccinate your patients. This opportunity is open to 20 counties in Maryland.

What's required to participate?

- Identify dates for a vaccine clinic
- Outreach to eligible patients and help sign them up for the vaccine clinic

The pharmacy partner will purchase and bring the vaccines and related supplies. They will also take care of the documentation and reporting the vaccinations to ImmuNet.

Review [this flyer](#) to confirm your practice is eligible based on your practice's county and reach out to begin next steps. Reach out to your Practice Coach or Rachel Grisham (rachel.grisham@maryland.gov) with any questions.

CMMI Updates

PY 2025 Participation Agreement

The seventh MDPCP program year will begin January 1st, 2025. Given minimal changes needed for PY 2025, participants will sign a bilateral amendment to the Participation Agreement (PA) rather than a new full PA for PY 2025. Continued participation in MDPCP for 2025 is contingent upon participant execution of the 2025 PA bilateral amendment via e-signature in the [MDPCP Portal](#) **no later than Fri, November 15th, 2024.**

Practices/FQHCs and CTOs may access and sign their applicable PA amendment in the MDPCP Portal by navigating to the My Practice/CTO Info tab, Participation Agreement sub-tab and select PY – 2025 in the Yr/Qtr dropdown menu. Instructions for the e-

signature process are available on Connect for [practices](#) and [CTOs](#). Please contact MarylandModel@cms.hhs.gov with any questions about the PA Amendment or signature process.

PY 2023 Quality, Utilization, and Efficiency Summary Reports

CMS issued the PY 2023 Quality, Utilization, and Efficiency Summary Reports in September and October 2024. Practices that started Track 3 in 2023 received their Performance Based Adjustment (PBA) report in September and practices that were in Track 2 in 2023 received their Performance Based Incentive Payment (PBIP) report in October. Practices and CTOs may access the reports in the [MDPCP Portal](#) by navigating to the Reports tab, then Practice Reports/CTO Reports.

These reports provide your practice's scores on CAHPS, eCQMs, the efficiency measure (TPCC), and utilization. PBA or PBIP impacts are noted in each report. You can refer to the [PY 2023 Performance Measures Guide](#) on Connect for more information on quality, utilization, and efficiency and the [PY 2023 Financial Methodology](#) on Connect for details on the PBA and PBIP process and calculation.

PY2024 CAHPS Survey

CMS is in the process of updating the CAHPS Information Packet and accompanying materials for the PY2024 survey. These documents are expected to be released in December and reflect no major changes in the protocol and similar roster submission dates as last year.

There will be a slight change in the processing of the rosters, so please review the Information Packet, the December PMO newsletter and the CAHPS Roster Intake email blast (in January) for important information about how to ensure your roster has been submitted and approved for PY2024.

We do encourage practices to provide email addresses, phone numbers and Spanish-language preference, which are all optional, but have been shown to increase the representativeness of survey responses.

Upcoming PY 2025 Financial Methodology Release

The 2025 Financial Methodology document is expected to be released in December

2024, following publication of the final 2025 Physician Fee Schedule (PFS) rule. The 2025 Financial Methodology is expected to include:

- Addition of ACO Primary Care Flex to the list of no-overlaps policy
- Update of PCS attribution code list for newly added codes from the final 2025 PFS
- Continued suppression of MDPCP eCQM BMI Screening and Follow-up Plan (CMS69)
- Update benchmarks years for remaining PBIP/PBA measures to reference 2023
- Update of ADI composition score to use estimates from 2018 – 2022 instead of 2017 – 2021
- Update of CMS-HCC version from v24 to v28
- Update of AHU and EDU measurement from 2024 to 2025 HEDIS specifications
- Update of Track 3 PBP and FVF payment rates due to 2025 PFS updates

PY 2024 Quarter 3 FAQs

The [PY 2024 Quarter 3 FAQs](#) are available on Connect. This document includes questions and answers from Connect and MDPCP events from July 2024 – September 2024. Check out the FAQs for helpful information on HEART payment, PBA, business changes, and more!

Health Equity and Social Risk Factors Spotlight

Check out our new resource! The [HEART Payment User Group Summaries document](#) outlines the information practices and CTOs shared at past MDPCP HEART Payment User Group meetings. Timestamps and links to session recordings enable you to review at-a-glance what other MDPCP participants are implementing with their HEART payments.

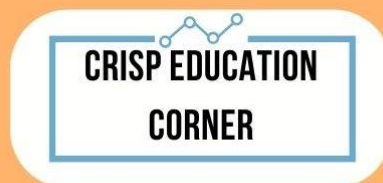
National Rural Health Day

November 21 is National Rural Health Day! In Maryland, [25%](#) of residents live in rural areas. These communities face unique healthcare challenges, including a lack of healthcare providers and difficulty accessing providers due to (1) geographic isolation, (2) socioeconomic status, (3) limited transportation, and other factors. This learning [module](#) provides an overview of health equity in rural communities and addresses some unique challenges that rural communities may face.

What can we do to support rural health?

1. Support rural providers. Only 12% of the country's physicians practice in rural communities and 61% of the country's Health Professional Shortage Areas are located in rural areas. The shortage of health care providers in rural areas exacerbates rural health disparities by limiting access to quality, timely care and patient-provider communication.
2. Expand access to care in rural areas. Telehealth services are an essential tool for reaching rural populations facing provider shortages and transportation challenges. Offering virtual services has increased access to quality health care to rural populations.

CRISP Updates



CLICK HERE

Hello!

We appreciate your commitment to using the CRISP Portal and the MDPCP Reporting Suite to ensure your continued success in the program. As we approach the end of another program year, I want to remind you that 2024 eCQM reporting is approaching! Over the next few months, please ensure your quality data is complete and accurate for the year.

Reminder: To meet your CRISP requirements, continue to view your practice's MDPCP reports and upload your ENS patient panels and care alerts at least every 90 days.

If you have any CRISP-related questions or feedback, please contact me at candice.morrison@maryland.gov.

*Thanks,
Candice Morrison
Health IT Program Manager*

CRISP Reporting Services (CRS)

MDPCP Reporting Suite

Population Summary Report Enhancements

- The background color on the Population Summary has been changed to white for improved contrast against the conditional measures.
- The CTO ID and CTO Name are now available in the global filter (similar to the Practice ID global filter).

MDPCP Reporting Suite Release on Fri, November 8th:

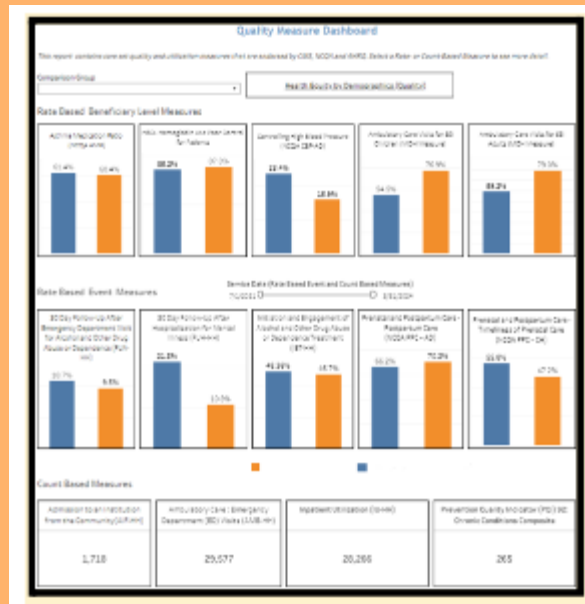
- Q4 MDPCP Attribution and Preliminary claims data through September 30th
- Updated 2024 Performance reports: AHU/EDU report and TPCC report

Multi-Payer Reporting Suite Updates

CRISP has added two new reports to the Multi-Payer Reporting suite. As we continue to develop and enhance the reporting suite, we encourage you to check out all the reports and data available for your Medicare and Medicaid beneficiaries in your practice.

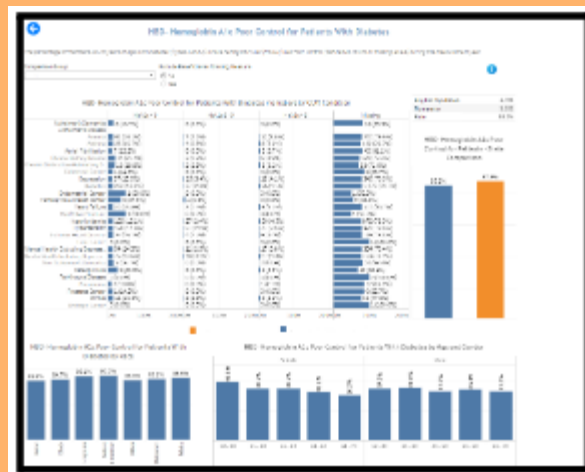
- Quality Measure Dashboard - The Quality Measure Dashboard allows users to view the performance of a subset of the CMS Core Set of Health Care Quality Measures for Medicaid Health Home Programs and other quality indicator measures. The measures are calculated at the beneficiary level on a rolling 12-month basis that ends 3 months prior to the latest available claims data in the application.

Summary Report View



The dashboard's drill-down feature provides deeper insights into specific measures, enabling users to understand trends and patterns within their population better.

Drill Through Report View

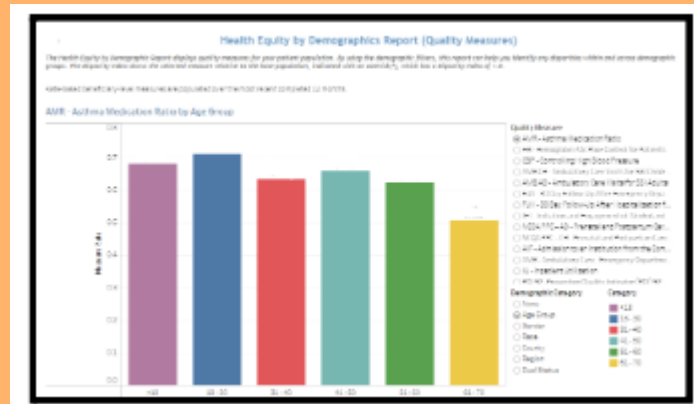


* Note: (Click one of the measure graph bars to get this view)

- Health Equity by Demographics Quality Report - The Health Equity by Demographics (Quality) report enables users to analyze quality measures across various demographic categories. These categories can be viewed individually or compared simultaneously through multiple charts. Beneficiary-level measures,

such as AMR, HB, and CBP, are displayed as bar charts, while rate-based or count measures are shown in monthly line charts. The Demographic Category selection dictates how the data is segmented in the visualizations. Choosing the same or a different category in the Separate Charts menu will further divide the data across multiple charts.

Report View



CRISP HIE Portal

E-Referral Tool Refresher: In 2020, CRISP introduced an e-referral tool on its Unified Landing Page (ULP). The tool allows providers to refer patients to various Community-Based Organizations (CBOs) that can meet a wide variety of social needs.

Use Case

Submitting an e-referral via the CRISP portal can be a good way to use the SDOH assessment results to connect patients to the resources they need. CRISP e-referrals can connect patients to:

- Self-management programs for chronic diseases such as diabetes
- Home delivery for meals and food services (Meals on Wheels, Moveable Feast, WIC)
- Home healthcare (a homemade plan in various counties)

How to Access the CRISP e-Referral Tool (located in the CRISP HIE Portal)

Below are some tips on accessing and using CRISP Social Determinants of Health (SDOH) information. Please use the CRISP e-Referral Tool when possible!

- The Social Needs Data tab allows providers and staff to view SDOH assessments and ICD-10 codes reflecting social conditions for MDPCP beneficiaries.
- To access an MDPCP beneficiary's assessment, search for the patient and click on the clinical info tile. The Social Needs Data tab and SDOH assessments are located there.

If you want to request a CBO to be added to the directory to manage referrals in CRISP, please contact Michelle Nnorom, the CRISP SDOH project manager, via email at Michelle.Nnorom@crisphealth.org

Upcoming CRISP Events

The Q4 CRISP Open Office Hour is scheduled for noon on Wed, November 13th. Please [register here!](#) CRISP will present on the CRISP Event Notification Delivery (CEND) and the Population Explorer tool. This is a continuation of last quarter's CEND webinar, which addresses best practices for using CEND and Population Explorer more robustly and efficiently and explores these tools' advanced features and functionality to seamlessly access other CRISP tools directly.

Behavioral Health Integration

Medication for Opioid Use Disorder (MOUD) Toolkit and Expansion Efforts

This month, Mosaic Group's SBIRT Corner is pleased to showcase the continued expansion of Medication for Opioid Use Disorder (MOUD) initiatives across Maryland and introduce the **MOUD toolkit, which is accessible to all practices!**

Expansion

Mosaic Group's MOUD technical assistance, including practice facilitation, and

provider and staff training, is expanding statewide. Building on our previous updates, we are excited to welcome several new practices to the MOUD expansion program:

- **Menocal Family Health** – Frederick and Wicomico Counties
- **Gonzaga Family Health** – Allegany County
- **Dr. Ashvin Patel** – Charles County
- **Dr. Motamedi and Associates** – Montgomery County
- **South Mountain Community Health** – Washington County
- **Johns Hopkins Community Practices** – 24 practices across Maryland
- **Johns CTO affiliated practices** – 6 practices across Maryland

We would like to highlight the innovative approach of the **Johns Hopkins CTO** team, which worked collaboratively with Mosaic Group to develop a comprehensive, system-wide strategy that includes a provider webinar series, e-learning modules, and internal report development to track outcomes effectively.

MOUD Toolkit

In collaboration with the Maryland Primary Care Program Management Office at the Maryland Department of Health, Mosaic Group is proud to launch an MOUD toolkit, now available to all MDPCP providers. The toolkit offers 8 tools designed for providers and staff use, along with two patient-facing resources. Additional tools will be introduced over the coming months to further enhance MOUD implementation. Current tools available for use include:

- ["Getting Started with Buprenorphine"](#) - a guide to assist providers supporting patients interested in MOUD through assessment, treatment, and follow-up.
 - ["Provider Information on MOUD Medications"](#) – a quick reference for providers to support shared decision-making with patients on which medication is most appropriate for the patient.
 - ["MOUD Medication for Patients"](#) – a patient-friendly document detailing all available MOUD options.
 - Much more!
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Check out the [Mosaic Group MOUD Toolkit](#) today!

Please reach out with any questions or feedback:

Heather Raley hraley@groupmosaic.com 443-469-7570

Resources

MDPCP Reporting Suite Resources

- [Viewing Mental Health Advance Directives in CRISP](#)
- [CRISP Report Guide](#)

MDPCP Program Resources

- [2024 Financial Methodology v4](#)
- [2023 Financial Methodology v4](#)
- [2024 Performance Measures Guide v2](#)
- [2024 Getting Started Guide v2](#)
- [2024 Advancing Primary Care Guide](#)

If you have any questions, please contact CMMI at marylandmodel@cms.hhs.gov or the State PMO at mdh.pcmodel@maryland.gov.

Have a great week,
- The MDPCP PMO Team
