Comagine Health
Formerly Qualis Health and HealthInsight

Primary Care Practice – Alternate Payment Model (APM) General Readiness

Foundational elements of comprehensive primary care may help practices succeed regardless of whether they find that suitable APM contracting arrangements are available in their area.

The following are key general indicators of primary care practice readiness for APM participation. The capacity to perform on these indicators, and the experience of making the changes required, position practices for further changes in practice that may be expected or required under an APM.

Note that you may be ready for APM participation, even if there are some indicators you've not yet addressed.

Team-based primary care foundation:

- ☐ Annual Wellness Visits (AWV) or Welcome to Medicare: currently providing to at least 25% of your traditional Medicare population and (or) prepared to provide to 50% in the next year.
- ☐ Chronic Care Management (CCM): currently have at least 5% of your traditional Medicare population enrolled and prepared for at least 10% in the next year.
- ☐ Transitional Care Management (TCM): have capacity to provide TCM for traditional Medicare population (or providing through CCM program).
- ☐ Advance Care Planning: offered as part of AWV.
- ☐ Accurate Hierarchical Condition Category (HCC) risk coding: AWV and CCM processes capture comorbidities for comprehensive population health management.

High-impact population health management:

- ☐ Routine screening for diabetes (including in AWV); persons with pre-diabetes referred to Medicare Diabetes Prevention Program.
- ☐ Referral to Diabetes Self-Management Education programs.

EMR use:

- ☐ Practice uses certified EMR.
- ☐ Practice can report quality measures from EMR.
- ☐ Practice has taken steps to manage provider documentation burden.

In addition to these indicators, accountable care organizations may have their own participation requirements and expectations that practices should review.