

Strategies to increase investment in primary care

Strategy: Adopt flexible payment models

Payment models	Notes
Expand implementation of the alternative payment & advanced care model (APCM) for community health centers that provides flexible reimbursement via a monthly population-based payment (capitation). Care could be further improved with increased payment rates.	Would only apply to payers that Oregon could regulate.
Require all payers to implement an aligned VBP model. Could center around the PCPCH program.	Would only apply to payers that Oregon could regulate.
Expand use of social risk adjustment in VBP models to provide additional funding to support care for members with health-related social needs.	Would only apply to payers that Oregon could regulate.

Payment amount and timing	Notes
Option for clinics to receive prospective performance-based incentive payment.	PCSC LC in process. Would only apply to payers that Oregon could regulate.
Require all payers to maintain practices' payment rates when increasing quality incentive payments.	Would only apply to payers that Oregon could regulate.

Support for practices	Notes
Expand payers providing technical assistance to support provider participation in VBP	Would only apply to payers that Oregon could regulate.

Strategy: Pay for whole-person team-based care

Payment models	Notes
Require all payers to pay a per member per month (PMPM) for PCPCHs.	PCSC LC in process. Would only apply to payers that Oregon could regulate.

Payment amounts	Notes
Expand use of and payment for Medicare Advanced Primary Care Management and Behavioral Health Integration codes.	Only applies to Medicare.
Increase Medicaid rates for primary care.	Expensive; would only apply to Medicaid.
Study the true cost for providers to deliver whole-person team-based care.	Deb Cohen and others have done this.
Develop mechanisms to enforce the 12 percent primary care spend target and consider increasing the target.	Needs regulatory authority/capacity to enforce.
Measure if funding designated for primary care within health systems reaches frontline primary care practices and report at the health system level.	Others are trying to figure out how to do this; status unclear. Deb Cohen would likely know.