# Update on Sustainability Payments for PCMH Kids

# PCMH Kids Cohort 1 practices will be ending their 3-year contract with the health plans on 12/31/18. PCMH Kids practices that meet the OHIC PCMH Rhode Island definition will be eligible for commercial health plan sustainability payments effective 1/1/19. OHIC recently published a “Frequently Asked Questions” document (insert link) which highlights sustainability expectations.

# If you are part of a system of care (SOC), your practice is encouraged to reach out to your SOC leadership to discuss “next steps” in working with each of the health plans to ensure that the SOC successfully negotiates for PCMH Kids sustainability payment on your practice’s behalf. You will also want to have conversations with the SOC leadership to understand how your practice will realize the benefits of the sustainability payment so that your practice can continue to provide care coordination services and function as a patient centered medical home. Outlined below are some of the key sustainability questions addressed in the OHIC FAQ document.

# PCMH Kids leadership is in the process of meeting with Managed Medicaid health plans (NHPRI and United) to discuss bridge funding that is needed for the PCMH Kids practices to successfully sustain the PCMH model between 1/1/19 and 6/30/19. It is anticipated that starting 7/1/19, the Managed Medicaid plans will be including PCMH Kids sustainability payments in the 7/1/19 budgets.

# OHIC FAQ Sustainability Questions and Responses

# If a practice meets the definition of PCMH, when will it get Support Payments?

* + - * 1. Commercial health plans are obligated to pay practices Support Payments when the health plan includes the practice in its OHIC PCMH target count. Plans may make the payments directly to the practice or to the contracting entity with which the practice is affiliated. Plans are not obligated to pay Support Payments to practices that meet the OHIC PCMH definition, but are not included in the health plan’s PCMH target count.
        2. The health plan must make payments every year that the practice is included in the PCMH target count. OHIC will be assessing practice achievement in October of each year. A practice that newly meets the definition can expect to receive payment during the next calendar year following OHIC PCMH recognition, if the practice is to be included in the health plan’s PCMH target count for OHIC.

# How much will the Support Payment be to practices?

* + - * 1. The level of Support Payments will be negotiated between the practice and the health plans. OHIC is not setting a payment level, but has told health plans that the levels must be meaningful to the practices.

# Do the payments apply to all of my patients, or only certain ones?

* + - * 1. OHIC has regulatory authority only over fully insured commercial health plans. Therefore, payments must apply to your patients who are covered by fully insured benefits. The OHIC regulations also require that fully insured accounts not shoulder more than their fair share of the costs of the PCMH recognition program.
        2. Historically, the health plans have also made payments for patients covered by self-insured accounts for practices participating in CTC-RI. OHIC anticipates, but cannot require, that they will continue to do so.

# What happens if the practice does not meet the definition of PCMH?

* + - * 1. If the practice does not meet the PCMH definition, the health plans will not be able to include them in their PCMH target count.
        2. While under OHIC regulations the health plan will no longer be obligated to make Support Payments if the practice does not meet the PCMH definition, the health plan will not be precluded from doing so. Final decisions on whether a practice that doesn’t meet the definition shall receive support payments is the responsibility of the payer. Payers reserve the right to do review the accuracy of practice self-attestation for the purposes of determining payments.

# Can practices resubmit data to meet the PCMH definition?

* + - * 1. Practices may submit data annually to OHIC, as described in the response to question 3, above. Any questions about reporting or resubmitting data can be directed to [cory.king@ohic.ri.gov](mailto:cory.king@ohic.ri.gov)

# Once a practice is recognized as a PCMH, will it always be recognized as a PCMH by OHIC?

* + - * 1. No. A practice must meet each element of the definition of PCMH annually.