Introduction to Washington’s Community Health Access and Rural Transformation (CHART) Model

November 9, 2021

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Agenda

- Overview of the CHART model and Q&A: Rachel Quinn, HCA, CHART director
- Pennsylvania rural health model hospital: Loren Stone, Endless Mountains Health Systems chief executive officer
- Closing and next steps
CHART model goals

- Improve access to care in rural areas
- Improve quality of care and health outcomes for those living in rural communities
- Increase adoption of alternative payment models (APMs) among providers
- Improve rural provider financial stability
### Community Transformation Track
- Upfront funding
- Predictable finances through APMS
- Operational flexibilities

### Rural Accountable Care Organization (ACO)
- More information in spring 2022
- Advance shared savings payments to participate in Medicare Shared Savings Program (SSP)
CHART Model: Community Transformation Track

- **$5 million seven-year model from 2021 to 2028**
  - Planning year (2021-2022)

- **Defined community: North Central’s four county region**
  - Chelan, Douglas, Grant, and Okanogan

- CHART funding expenses

- Additional funding sources highly encouraged
Community Transformation Track

**Transformation Plan**
Community health care delivery redesign strategy

- **Quality Strategy**
- **Operational Waivers**

**Capitated Payment APM**
Participant Hospitals receive prospective, bi-weekly payments based on historical expenditures with Community- and hospital-level adjustments. Stability and predictability facilitates hospital transformation.

**Impact**
- Improved access to care for rural beneficiaries
- Improved quality of care outcomes and health for rural beneficiaries
- Increased financial sustainability for rural providers
Focused on the Community

Transformation Plans drive regional care improvements

Community benchmarks create geographic cooperation and accountability

Incentives to work with non-hospital-based providers and community partners
Key participants

- CMS/CMMI
- HCA (Lead Org)
- Participants Hospitals
- Advisory Council
- Consultants
## Timeline & major milestones

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<thead>
<tr>
<th>10/2021-12/2022</th>
<th>2023</th>
<th>2024</th>
<th>2025-2028</th>
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<tbody>
<tr>
<td>• Needs assessment</td>
<td>• Medicare APM begins</td>
<td>• Medicaid and aligned payers begin (&lt;at the latest&gt;) CTP updated</td>
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<td>• Advisory Council convened</td>
<td>• CTP updated</td>
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<tr>
<td>• First Community Transformation Plan (CTP)</td>
<td>• Medicaid APM developed</td>
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<td>• Participant Hospitals agree to Medicare APM</td>
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<td>Date</td>
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<tr>
<td>November 2021</td>
<td>CMS releases revised financial package for Medicare APM</td>
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<td>December 14, 2022</td>
<td>CMMI-sponsored office hours on Medicare APM</td>
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<td>Early summer 2022</td>
<td>HCA submits list of interested Participant Hospitals to CMS</td>
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<td>Early summer 2022</td>
<td>CMS sends draft Medicare CPA to interested Participant Hospitals</td>
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<td>November 2022</td>
<td>Participant Hospitals agree to Medicare APM</td>
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<td>January 2023</td>
<td>Medicare APM begins</td>
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Why CHART?

- Rural transformation requires collaboration
- Predictable revenue through Medicare capitated payment arrangement (CPA), Medicaid APM, and aligned APM
- Improved health outcomes and health equity for rural residents
- Upfront funding to invest in preventive services and population health
- New opportunities to combine public and private resources
- Be part of the process
Participant Hospital engagement opportunities

- HCA-hosted webinars
- CMMI-hosted webinars
  - December 14, 2022 office hours
- One-on-one meetings with hospitals to discuss Medicare APM
- Leadership presentations to public hospital boards upon request
Key CHART staff

- **CHART executive sponsors**
  - Mich’l Needham, chief policy officer: Mich'l.Needham@hca.wa.gov
  - Judy Zerzan-Thul MD, chief medical officer: Judy.Zerzan@hca.wa.gov

- **Rachel Quinn, CHART director**
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Thank you!

Questions?

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