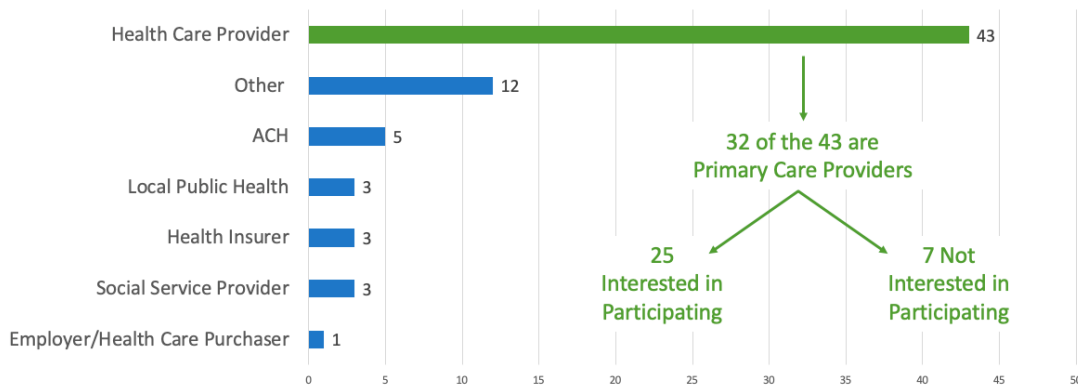
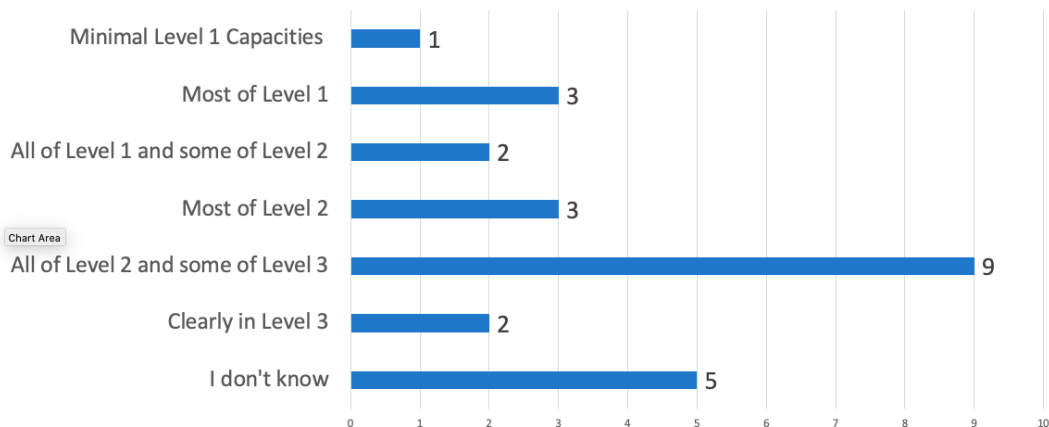


## PCTM Public Input - Final Respondent Organizations and PCTM Interest



## PCTM Public Input Primary Care Provider Self-Assessed Certification Level



## Overall Themes

### What about the Multi-payer PCTM are you most excited about? (weighted ranking)

- 1) Reduced administrative burden due to payer standardization
- 2) Aligned measurement of quality
- 3) Support for team-based care
- 4) Practice transformation funding
- 5) Quality incentive payments
- 6) Improved provider supports

### What concerns do you have related to model implementation?

- Attribution and empanelment
- Behavioral health integration and resources
- Implementation complications due to COVID
- Concerns of negative impacts including lack of choice, lower quality, and higher costs
- Consistency with Federally Qualified Health Center/Rural Health Center (FQHC/RHC) requirements and support
- Impacts on non-primary care providers
- Increased administrative burden
- Involvement and support for small providers
- Provider supports, including technical assistance and HIT
- Quality alignment
- Overall resourcing and reimbursement
- Support for social determinants of health (SDoH) resources
- Transition considerations including ease, reasonable timelines, follow-through, and impact of competing priorities
- Translation/applicability for primary care medical homes (PCMHs)

### What advice do you have for implementation in January 2023?

#### *Prioritize Certain Elements*

- Access to critical providers
- Adequate resources to support model
- Aligned quality
- Attribution and empanelment
- Behavioral health integration
- Communications
- Patient engagement
- Provider supports including implementation guides, and data
- Reducing administrative burden
- Risk stratification
- Team based care supports
- Translation to PCMH
- VBP expectations

#### *Include specific stakeholders*

- ACHs
- Consumers and consumer advocates
- CBOs and community (SDoH) partners
- Federal partners (CMS/Medicare)
- Local PH
- Navigators
- Provider associations
- FQHCs and RHCs
- Payers
- Providers beyond primary care
- Pediatricians
- Naturopaths
- Rural SUD treatment agencies
- Tribes