

**ACOM 307**  
**Contractor VBP/APM Strategic Plan Template**

**CYE23 – CYE25 VBP/APM STRATEGIC PLAN**

**Contractor:** \_\_\_\_\_

**Contact Person and Title:** \_\_\_\_\_

**Overview**

The purpose of the Contractor VBP/APM Strategic Plan is to help AHCCCS better understand the impact of APMs and to allow Contractors to inform AHCCCS of their APM strategy, key objectives, approach, and proposed APM evolution over a three-year timeframe. The VBP/APM Strategic Plan must address, at a minimum:

- Proposed annual percentage targets for provider payments within APMs by LAN APM categories,
- Expected percentage of medical expenses to be paid out in Performance-Based Payments, and
- An approach to identify quality measures to be included in APMs for the next three years.

**Contractor APM Strategic Plan Questions**

1. Complete the attached Excel spreadsheet with the Contractor’s estimated targets for provider payments within APMs, by APM LAN Category, based on the Contractor’s most recent APM Strategies and Performance-Based Payments Incentive Certification submission and projected changes in APM strategies over time based on this APM Strategic Plan.
2. Provide any comments on the Contractor’s calculations in the attached Excel spreadsheet.
3. What is the Contractor’s strategy to meet the Overall APM Targets and Sub-Requirements for LAN-APM Categories 3 and 4, if applicable, over the next three years? Generally, describe:
  - a. The Contractor’s proposed APM contracting approach for CYE23 – CYE25,
  - b. How this strategy will better support high quality care and health outcome improvement,
  - b. How the Contractor will engage and support providers, and
  - c. How the Contractor will achieve the Category 3 and 4 targets, where applicable.

4. Identify specific annual milestones the Contractor will implement in CYE23 – CYE25 to gauge APM progress, such as the number of providers/members engaged in APM arrangements, or APM models implemented.
5. What is the Contractor’s overall goal in implementing this APM strategy relative to cost efficiency and quality improvement?
  - a. How is the Contractor incorporating cost efficiency objectives into its APM strategy? For models without total cost of care targets, does the Contractor track proxy measures for cost efficiencies?
  - b. What areas of quality is the Contractor trying to improve? Which quality metrics and benchmarks are utilized within the Contractor’s APM models? How does the Contractor’s strategy align with the Contractor’s performance measures?
  - c. How is health equity considered in the Contractor’s APM and quality approach?
6. Describe each of the Contractor's provider payment models that include APMs that will be maintained or implemented under this strategic plan to support efforts to meet or exceed the APM Targets in CYE23 - CYE25. For each applicable model, include the following information:
  - a. Which LAN Category or Categories does the model fall into?
  - b. What providers are/will be included within this model, how many are expected to be paid through this strategy, and what populations will be included? Distinguish if only primary care providers participate in the model, or if any other types of providers participate.
  - c. Which quality measures are included in the APM, and how do these measures align with ACOM 306 measures and the CMS Adult and Child Core Measures?
  - d. The Contractor’s implementation timeline, data sharing, and other support that will be provided to providers participating in this type of APM model during the three-year Strategic Plan period.
  - e. To the extent applicable for the APM model provide:
    - i. The minimum number of patients or volume that a provider must have to participate in the model.
    - ii. The member-provider attribution process/criteria related to the APM.
    - iii. The total cost of care/medical loss ratio methodology and services included in the APM.
    - iv. The levels of shared savings and/or risk that may be earned or borne by the providers, including risk adjustment methodology and how providers are protected from taking on excess risk.
  - f. Any other pertinent information.
7. Describe your provider engagement strategy and timeline, including:
  - a. How the Contractor will enter into new APM contracts with providers who do not currently participate in APM contracts, and
  - b. How the Contractor will support and successfully move providers into advanced APM categories where appropriate to the provider and the model.

8. Describe how you will address and implement the intent language included in ACOM Policy 307, including:
  - a. Alignment with ACOM 306 performance measures and current CMS Core Set of Child or Adult Health Care Quality Measures for Medicaid. Addition of at least one Targeted Investment performance measure for applicable qualified providers. See Section B #9 of ACOM Policy 307.
  - b. PCP assignment, assignment and attribution of members, alignment APM performance measures with NCQA technical specifications. See Section B #10 of ACOM Policy 307.
  - c. Data collection related to summary reports designed to identify changes in performance on APM targeted measures and changes in the cost-effectiveness of care for providers participating in APMs. See Section B #18 of ACOM Policy 307.