Care Delivery and Payment System Transformation Committee

Health Policy Commission

July 2, 2014

Agenda

- Approval of minutes from June 11, 2014 meeting
- Regulation for the Registration of Provider Organizations (RPO) Program
- Schedule of next committee meeting (August 13, 2014)

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- **Approval of minutes from June 11, 2014 meeting**
- Regulation for the Registration of Provider Organizations (RPO) Program
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Vote: Approving minutes

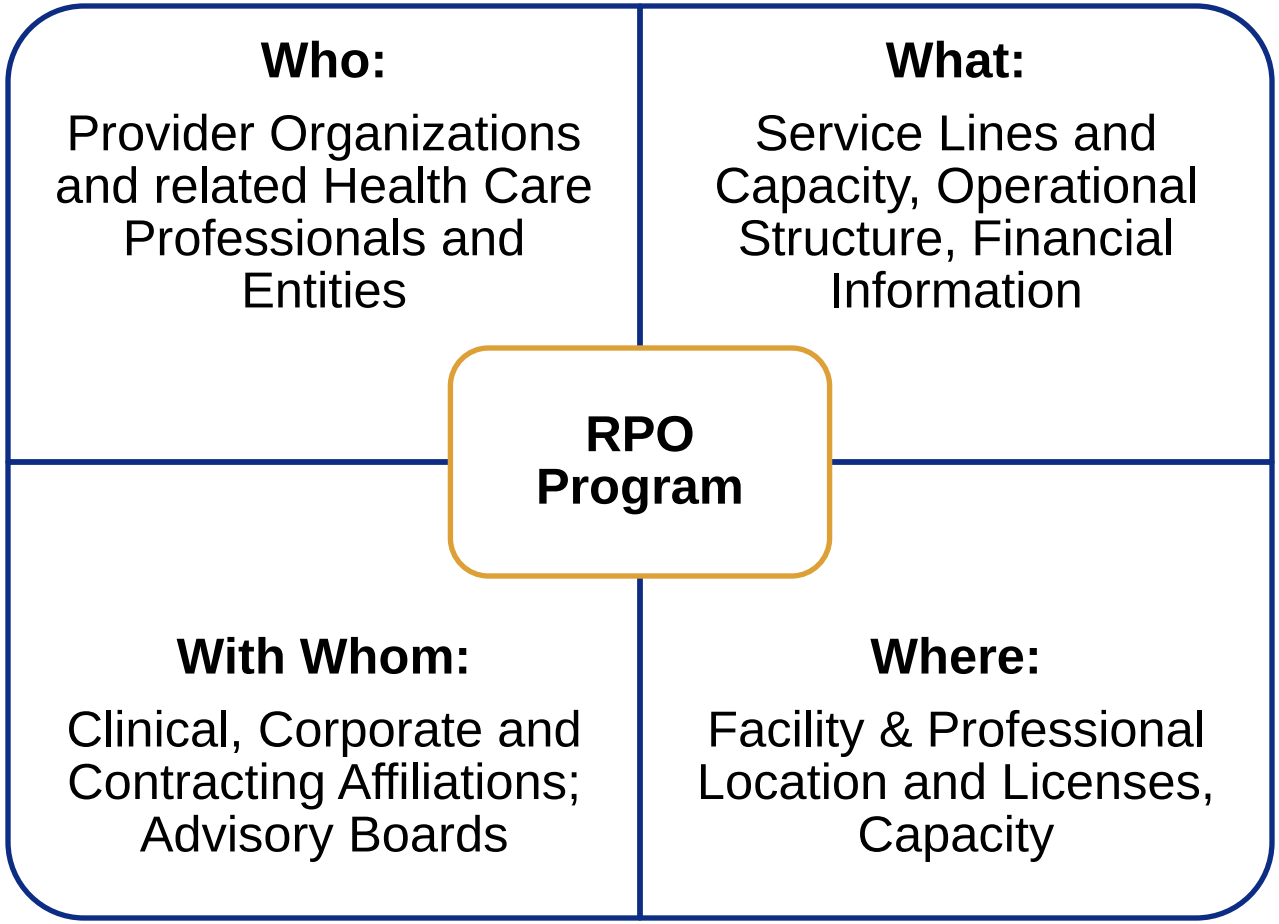
Motion: That the Care Delivery and Payment System Transformation Committee hereby approves the minutes of the Committee meeting held on June 11, 2014, as presented.

Agenda

- Approval of minutes from June 11, 2014 meeting
- **Regulation for the Registration of Provider Organizations (RPO) Program**
  - **Background and program development timeline**
  - **Recommended updates to regulation in response to public comment**
  - **Initial Registration: Part 1 timeline**
- Schedule of next committee meeting

Background of RPO

RPO enhances transparency of the health care marketplace in the Commonwealth and creates a centralized resource by gathering information on the composition, structure and relationships among and within Massachusetts health care providers.



Background of RPO

HPC relies on the following principles in designing RPO standards and submission materials:

1. Provider Organizations are faced with significant new responsibilities under Chapter 224. RPO must offer a streamlined registration process that prioritizes **administrative simplification**.
2. Provider Organizations have existing points of contact with many state agencies. RPO should **avoid requesting duplicative data** through ongoing coordination (e.g., with DPH, DOI, CHIA).
3. RPO must **balance** the importance of collecting data elements with the potential burden to Provider Organizations.
4. The RPO program should **phase in** the types of information that Provider Organizations must report over time.

RPO: Program development timeline

2013

- ☑ **April 23:** Summary of RPO listening sessions presented to Committee
- ☑ **July 25:** Initial RPO framework presented to Committee
- ☑ **November 20:** Initial RPO framework presented to Board
- ☑ **December 16:** Committee voted to issue draft regulation

2014

- ☑ **January 8:** Board voted to issue draft regulation
- ☑ **February 12:** Public Hearing on regulation
- ☑ **January 8 – April 25:** Public comment period on regulation and DSM
- ☑ **February – April:** Stakeholder meetings
- ☑ **April 9:** Listening session on regulation and DSM
- ☑ **May 12:** Committee review of public comment
- ☑ **June 11:** Committee deliberation
- ☐ **July 2:** Committee and Commission approval and issuance of regulation

Stakeholder and interagency engagement

RPO: Summary of public comment

- HPC solicited feedback on the proposed regulation and draft Data Submission Manual
- HPC received 19 total comments from Provider Organizations, payers and other stakeholders that fall into 3 broad categories: Regulation, Registration Process, and Data Submission Manual

Focus of Today's Meeting	Focus of Future Meetings
☐ Regulation	☐ Registration Process: Part 2
☐ Registration Process: Part 1	☐ Data Submission Manual: Part 2
☐ Data Submission Manual: Part 1	

Recommended updates to regulation in response to public comment

Regulation (958 CMR 6.02)

Affiliates / Affiliations

- The proposed regulation defined three types of affiliates: Corporate Affiliates, Contracting Affiliates, and Clinical Affiliates. These Affiliates were defined based on their relationship to the registering Provider Organization.
- The recommended regulation refers to the relationship itself – the affiliation – rather than one of the parties in the relationship. This change is necessary to reflect that affiliations are bi-directional.

Regulation (958 CMR 6.02)

Contractual Affiliate / Contracting Affiliation

- The term "Contract*ual* Affiliate" has been replaced with the term "**Contract*ing* Affiliation**" throughout the revised regulation to enhance precision and clarity.
- The definition of Contracting Affiliation has been expanded to include the phrase "**negotiates, represents or otherwise acts**" to the existing phrase "establishing contracts."

Recommended updates to regulation in response to public comment

Regulation (958 CMR 6.04)

Provider and Provider Organization

- The phrase "Provider and Provider Organization" has been changed to "Provider Organization" in most places to clarify that the responsibility to register resides squarely with the Provider Organization.

A **Registering/ed Provider Organization (RPO)** is a Provider Organization that has met the thresholds and is therefore required to submit an application for registration.

A **Provider Organization (PO)** is an entity that negotiates, represents, or otherwise acts to establish contracts with carriers or third party administrators (TPAs). A PO may represent itself, other providers or both.

A **Provider** is an entity that delivers healthcare services, such as a medical group or hospital. Providers that negotiate their own contracts with carriers and TPAs are also considered Provider Organizations.

Healthcare Professionals include individual practitioners such as physicians, nurses, or physician assistants. Healthcare Professionals are not required to register.

Recommended updates to regulation in response to public comment

Regulation (958 CMR 6.04)

Streamlined Registration for Qualified Provider Organizations

- If a Provider Organization establishes some of its contracts through another Provider Organization it may meet its obligation to register through the filing of an abbreviated application.

Regulation (958 CMR 6.05)

Timing Updates and Registration for Future RPOs

- The recommended final regulation no longer includes specific dates, allowing HPC greater flexibility in extending registration deadlines to be responsive to unanticipated challenges.
- The HPC will give future Provider Organizations that meet the registration thresholds at least 180 days notice for registration.

Recommended updates to regulation in response to public comment

Regulation (958 CMR 6.05)

Mandatory Updates

Off-cycle updates will be required for changes that:

1. Require a Material Change Notice to the HPC;
2. Require a Determination of Need by DPH; or
3. Affect an essential service as defined by DPH (e.g. closures)

AND affect information on file with the Commission.

Regulation (958 CMR 6.05)

Leveraging Data from Other Agencies

- HPC will continue to work closely with other Commonwealth agencies to streamline the registration process and minimize administrative burden.

Regulation (958 CMR 6.06)

Further Review

Providers and Provider Organizations can request further review by HPC of:

- A determination that the Provider Organization is required to register; or
- A determination that the Provider Organization's application is incomplete.

Provider Organizations will not be in violation of the regulation, if applicable, while under review.

Comments received not reflected in changes to final regulation

Regulation (958 CMR 6.05)

Removal of Key Elements of the Regulation

Stakeholders commented that some of the data elements in the proposed DSM were difficult to obtain or proprietary and confidential. The Commission will revisit these data elements with the CDPST Committee and the Board before release of the final DSM: Part 2.

Regulation (958 CMR 6.05)

NPSR-based limitations for Reporting Clinical Affiliations

Stakeholders commented that only those Clinical Affiliations that meet a NPSR-based threshold should have to be reported. The Commission believes that a revenue-based threshold is not appropriate for Clinical Affiliations. Clarification has been provided that certain Clinical Affiliations (e.g., those for research or training, and those not including 1+ hospitals) are not required to be reported.

Regulation (958 CMR 6.05)

FTE Reporting for Facilities and Practice Sites

The proposed DSM included FTE counts for facilities and practice sites as specified in statute. The Commission is considering requesting physician rosters in the first year of the registration program to minimize administrative burden, but has not changed the reference to FTEs in the regulation as required by law.

Recommended updates to Registration Process: Part 1 in response to public comment

Registration Process

Education and Training Sessions

HPC will hold in-person training sessions for Provider Organizations on the dates below and will hold additional educational trainings upon request.

When: Thursday, August 14, 2014 from 10 am to 12 pm
Where: Massachusetts Hospital Association

When: Tuesday, August 26, 2014 from 10 am to 12 pm
Where: Massachusetts Medical Society

Details about the educational training sessions will be available on the HPC website soon.

Registration Process

One-on-one Meetings

HPC will offer all Provider Organizations the opportunity to meet with program staff one-on-one to discuss the specifics of their organizational structure and ask any questions about how the requirements apply to them.

Instructions on how to register for one-on-one meetings will be available on the HPC website soon.

Communicating with the Health Policy Commission

In addition to trainings and one-on-one meetings the Commission will provide ongoing opportunities for comments and feedback.

HPC is developing an RPO section of its website that organizations can use to access pertinent documents and templates, review FAQs and education/training materials created by HPC, and find program contact information.

Please e-mail the RPO program at HPC-RPO@state.ma.us if you have questions.

HPC has developed an optional listserv that individuals and organizations can join to receive alerts and updates about the program.

If you would like to be added to the RPO listserv, please send the following information to HPC-RPO@state.ma.us:

Your full name

Your organization; and

Your preferred e-mail address

Initial Registration: Part 1

The Part 1 files ask for basic, high-level information about the Provider Organization and its Corporate and Contracting Affiliations.

Provider Organizations will not be asked to submit duplicative information in Part 2; any information submitted in Part 1 will be added to the Provider Organization's online application for registration.

Part 1	Background Information File	Description of Provider Organization, and contact information
	Corporate Affiliations File	List of Corporate Affiliates Corporate Organizational Chart
	Contracting Affiliations File	List of entities on whose behalf the Provider Organization negotiates, represents or otherwise acts to establish contracts with Carriers or TPAs
	Forms & Supporting Documentation File	INET User Agreement Affidavit of Truthfulness

Initial Registration: Part 1 timeline

Successful implementation of the registration program will require ongoing collaboration between HPC and Provider Organizations.

The Initial Registration process will prioritize partnership, support, and fluid communication for Provider Organizations.

Initial Registration: Part 1 Deadlines	
Actions	**Dates**
DSM: Part 1 Released	July 18, 2014 (Estimated)
Training Sessions	August – September 2014
One-on-one Meetings	August – October 1, 2014
Initial Registration: Part 1 Opens	October 1, 2014
Initial Registration: Part 1 Closes	November 14, 2014
DSM: Part 2 Released	Q4, 2014 (Estimated)
Initial Registration: Part 2	Q1, 2015 (Estimated)

Vote: Approving and advancing final regulation

Motion: That the Care Delivery and Payment System Transformation Committee hereby approves the attached PROPOSED final regulation on the registration program for provider organizations, developed pursuant to section 11 of Chapter 6D of the General Laws, and recommends that the Commission vote to approve and promulgate 958 CMR 6.00 at its meeting on July 2, 2014.

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- **Schedule of next committee meeting (August 13, 2014)**

Contact information

For more information about the Health Policy Commission:

- Visit us: http://www.mass.gov/hpc
- Follow us: @Mass_HPC
- E-mail us: HPC-Info@state.ma.us