

# MDPCP ANNUAL REPORT SNAPSHOT

YEAR 2 - 2020

**MDPCP**  
MARYLAND PRIMARY CARE PROGRAM



## Annual Report Snapshot Year 2 - 2020

The [MDPCP](#)'s **second** year program objectives were:

1. Infrastructure Enhancement
2. Care Transformation
3. Quality and Utilization Improvement

This MDPCP Annual Report Snapshot summarizes the MDPCP's accomplishments for each objective during its second year.

The emergence of COVID-19 prompted an *ad hoc* objective for PY2: **Support practice and CTO efforts to address COVID-19, thereby mitigating the disease's impact on the state.**

# Infrastructure Development

*Continuing to build a strong, effective primary care delivery system to identify and respond to medical, behavioral, and social needs while contributing to controlling the growth of Maryland's Medicare Part A and B costs*



**CRISP**

## **CRISP**

Provided a suite of beneficiary claims reports designed for MDPCP practices



**SOCIALLY DETERMINED**

## **Socially Determined, Inc.**

Provided a specific COVID-19 Vulnerability Index (CVI) to practices to allow for prioritized, equitable attention to the needs of the most vulnerable patients



**The Hilltop Institute**

## **The Hilltop Institute**

Continually updated an AI model developed with MDH for predicting avoidable hospital events, available to practices through CRISP



**mosaic**  
GROUP

## **Mosaic Group**

Implemented the SBIRT program at the practice level to address behavioral health needs

## **Community-based organizations**

Supported patients' social needs through electronic referrals

# Care Transformation

*Improving population health through continuous, relationship-based primary care that proactively addresses medical, behavioral health, and social needs, and provides continuity of care*

1

Practices offered patients **greater access to medical treatment** (e.g. same/next-day appointments, telephone advice on clinical issues on weekends, etc.)

2

**Beneficiary follow-up rates** after ED and hospital discharge continued to **increase**

## Key takeaways from 2020

3

Practices' use of **care management expanded**

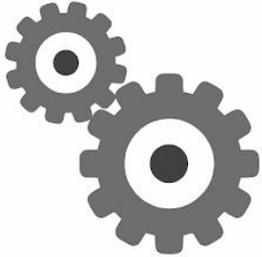
4

The number of practices **screening** their beneficiaries for **unmet social needs increased**

# Care Transformation

*Improving population health through continuous, relationship-based primary care that proactively addresses medical, behavioral health, and social needs, and provides continuity of care*

---



MDPCP practices brought **17.2%** of Medicare FFS beneficiaries into care management using data-driven strategies for risk stratification

---

With support from The Mosaic Group, **157** practices had fully implemented SBIRT (Screening, Brief Intervention, and Referral to Treatment), creating another line of defense against the opioid crisis in the community



# Quality and Utilization Improvement

*Establishing data tools and quality improvement processes that allow practices to monitor their performance*

## Compared to national CMS reporting

The majority of practices continued to perform above the national median on both eQMs. Note that these metrics are measured for all patients in the practice.

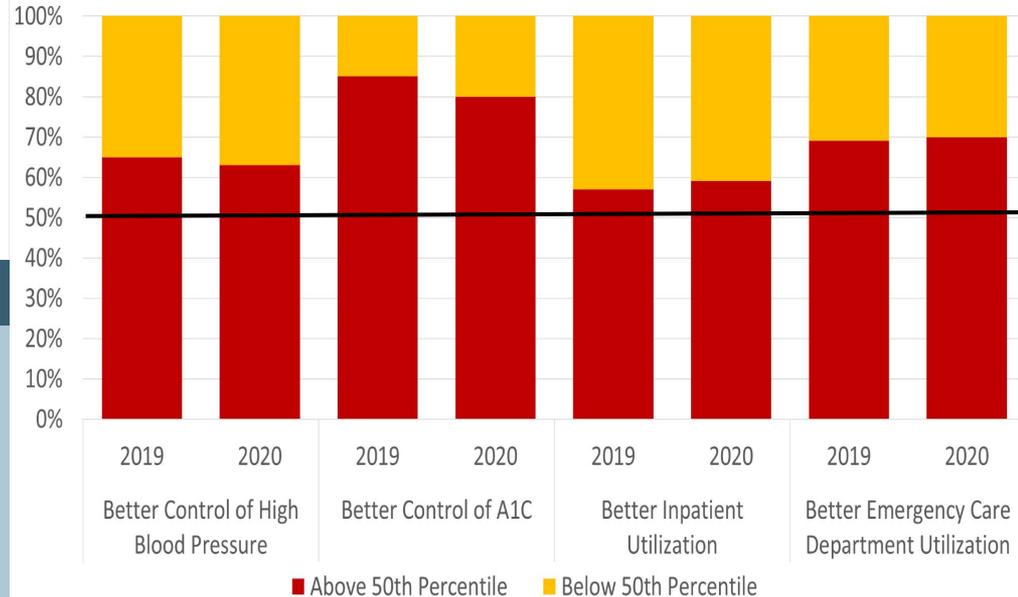
CLINICAL QUALITY

## Compared to all practices with MD FFS beneficiaries

Utilization decreased significantly when compared to historical, expected projections. Even after adjusting for the pandemic, MDPCP practices still performed better than the benchmark.

UTILIZATION

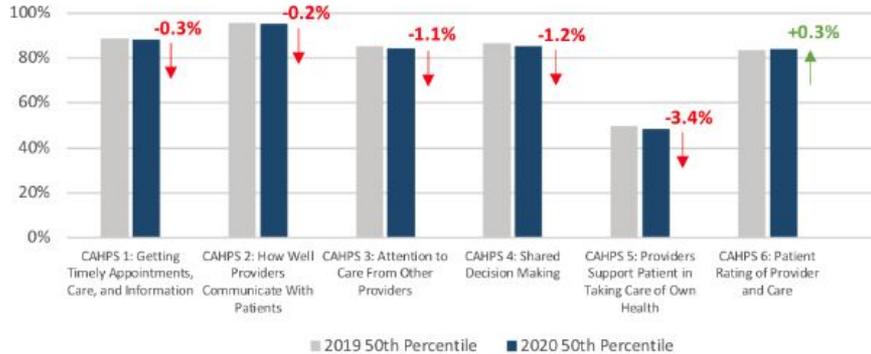
% of Practices' Clinical Quality and Utilization Outcomes Above and Below the 50th Percentile Benchmark, 2019 - 2020



# Quality and Utilization Improvement

*Establishing data tools and quality improvement processes that allow practices to monitor their performance*

The 50th Percentile of Practices' CAHPS Scores



PATIENT SATISFACTION

Compared to national CPC+ practices

Overall, CAHPS performance decreased slightly, though the CAHPS 6 Domain (Patient Rating of Provider & Care) increased by a small amount.

HSCRC Difference-in-Differences in Net Costs (Cost Savings in Millions)



COST

Compared to a closely-matched comparison group using a "difference-in-differences" analysis

MDPCP practices demonstrated reductions in utilization resulting in cost savings, even after accounting for the investment of program payments.

\*The cumulative savings are less than the difference between 2019 and 2020 due to compounding.

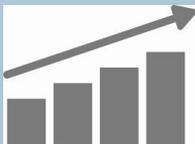
# ***Ad hoc COVID-19 Objective***

*Support practice and CTO efforts to address COVID-19, thereby mitigating the disease's impact on the state*

---



Initiation and execution of a webinar series to update participating primary care practices with timely information and resources regarding the pandemic



Provision of daily clinical guidance to practices on hospital admissions, ED visits, workflow guidance, and data analytics tools to prevent avoidable complications



Facilitation of practice enrollment in ImmuNet, a crucial step for receipt of the COVID-19 vaccines after the vaccines became available



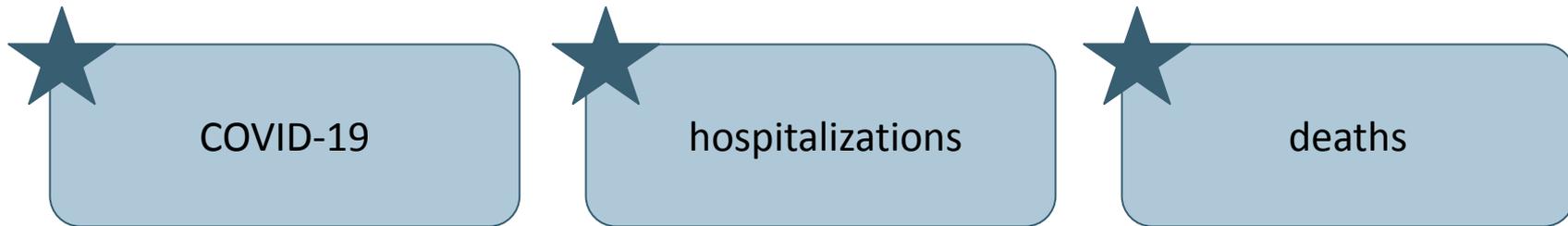
Support of practice efforts to provide vulnerable patients with expanded care through telemedicine and special accommodations (e.g. if in-person visits are needed)

# Ad hoc COVID-19 Objective

*Support practice and CTO efforts to address COVID-19, thereby mitigating the disease's impact on the state*

---

As a result of MDPCP efforts, compared to beneficiaries served by closely-matched practices, beneficiaries served by MDPCP practices experienced **lower rates** of:



The results were statistically significant.

## Annual Report Snapshot Year 2 - 2020

### Year 2

Find below the links to the report, including:

- [MDPCP 2020 Annual Report](#)
- [MDPCP 2020 Executive Summary](#)

### Year 1

Find below the links to the report, including:

- [MDPCP Year 1 Annual Report](#)
- [MDPCP Year 1 Executive Summary](#)
- [MDPCP Year 1 Visual Summary](#)

More information about MDPCP can be found [here](#).

You can reach us with any questions at [mdh.pcmode@maryland.gov](mailto:mdh.pcmode@maryland.gov).

# TESTIMONIALS



"I cannot thank our MDPCP team enough for all they do for our patients and to help us here in the office. Our patients have given wonderful feedback and we are so happy to see our at-risk population be given the extra support they need, especially during these uncertain times."  
-- **RN Site Clinical Coordinator & Case Manager**

"These succinct [COVID-19] update webinars for physicians have been extremely helpful. In particular, the updates on testing priorities, expectations of the ambulatory care providers, availability of PPE with use priorities, and future strategies for re-entry into society. Thank you!"  
-- **Physician**

"The MDPCP program has benefited our patients by providing an extra level of care coordination and another person to reach out to."  
-- **Practice Manager**

"We are currently in our second year of the MDPCP program. I can say without reservation that this is a visionary program. By supporting our practices financially along with providing clear benchmarks, it has allowed us to re-envision primary care as it was meant to be."  
-- **Physician**