Practice Documents & Participation

November Release:
- CTO Arrangement
- CRISP Participation Agreement Follow-up

December Release:
- Practice Participation Agreement (PA) with CMS
  - Practice Participation Agreement
  - Data Worksheet
- Registration for data access
  - Registration for Enterprise Policy Privacy Engine (EPPE)
  - Registration for Enterprise Identity Management (EIDM) Account
  - Register in December, Access in January
- *Final deadline to return PA and Arrangement: Friday, December 21*

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MARYLAND
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CTO Arrangement

Practices select services, countersign, and return to CTO and MDH-PMO via email at mdh.pcmodel@Maryland.gov by Dec. 21

Terms
- 2 pages
- Defines and confirms relationship based on practice Option selection
  - Effective Jan 1
  - Renews Annually Unless Terminated
  - Care Management Fee Split
  - Lead Care Manager
  - Data Sharing
  - Termination & Notification

Appendix A
- Details the services & staff offered by the CTO to all partner practices based on Option and Track
- Practices initial beside services they want to select

Appendix B
- Business Associate Agreement (BAA)
- Allows the CTO to have access via CRISP to quality and utilization reports available to the Practice
- Practice is the Covered Entity; CTO is the Business Associate
- May be originated by either Practice or CTO

MARYLAND
Department of Health

Practice Vetting in Progress

- Participation contingent on vetting and document submission:
  1. Vetting
     - Program integrity screening
     - Attribution
       - Minimum 125 Medicare FFS beneficiaries
       - Primary Care Taxonomy
     - Completion of vetting expected early Dec

  2. Document Submission - by December 21

MARYLAND
Department of Health

CRISP Mission, Vision, Values

Our Vision

To advance health and wellness by deploying health information technology solutions adopted through cooperation and collaboration.

Our Mission

We will enable and support the healthcare community of Maryland and our region to appropriately and securely share data in order to facilitate care, reduce costs, and improve health outcomes.

Our Guiding Principles

1. *Begin with a manageable scope and remain incremental.*

2. *Create opportunities to cooperate even while participating healthcare organizations still compete in other ways.*

3. *Affirm that competition and market-mechanisms spur innovation and improvement.*

4. *Promote and enable consumers' control over their own health information.*

5. *Use best practices and standards.*

6. *Serve our region's entire healthcare community.*

CRISP Support for MDPCP

CRISP has committed to support MDPCP in the following three ways:

1. CRISP will enable certain HIE tools which participating practices must use to facilitate better care coordination.

2. CRISP will provide claims-based reports to each participating practice for tracking progress and providing interventions.

3. CRISP will aggregate the quality measure submissions from participating practices to submit to CMS.

Claims-Based Reports

CRISP will provide standard reports to each participating practice location and their CTO (as applicable). These will be created by CRISP's partner hMetrix based on Medicare claims data.
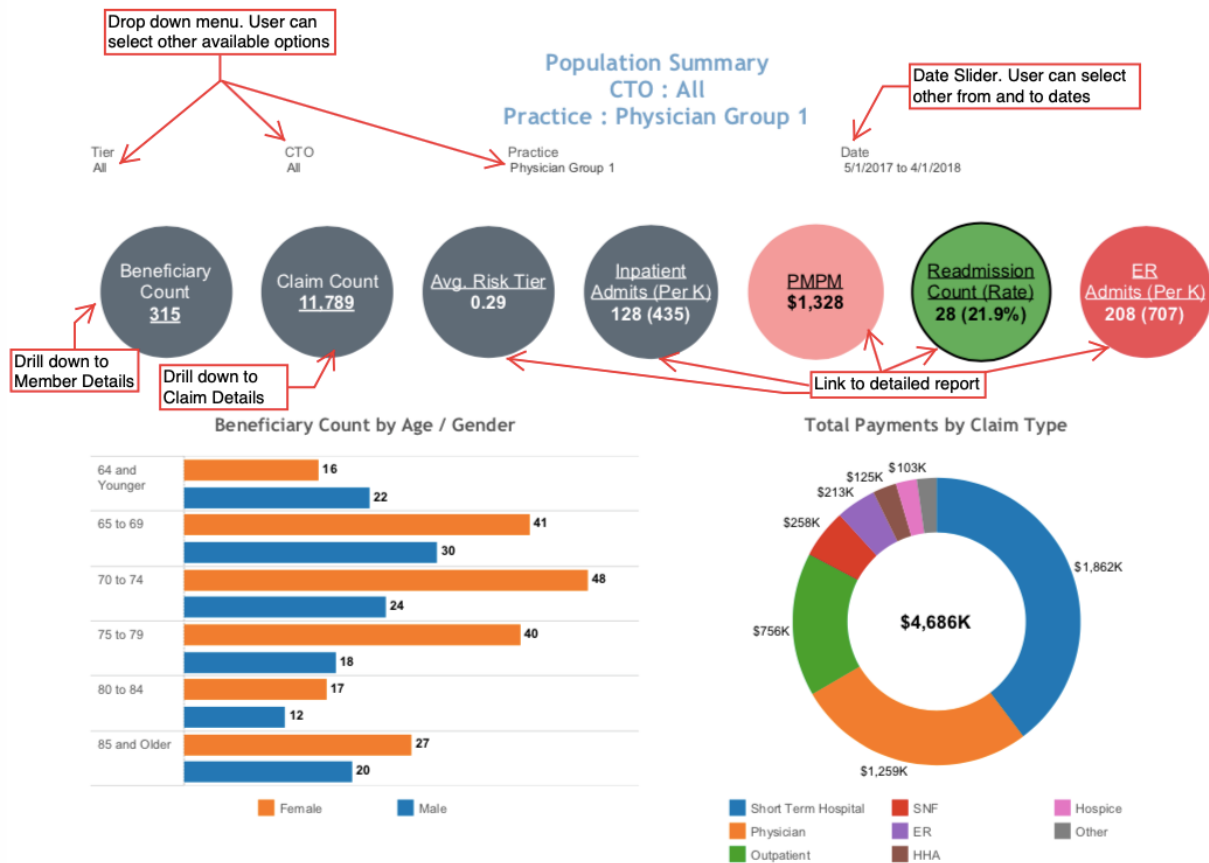
- ED visit rates for your practice
- Hospital admission rates for your practice
- Specialty referral patterns from your practice

These reports will rely on CMS attribution files to link Medicare beneficiaries with a practice location, and files to link practice locations with CTOs.

Population Summary
CTO : All
Practice : Physician Group 1

Drop down menu. User can select other available options

Date Slider. User can select other from and to dates

Tier — All
CTO — All
Practice — Physician Group 1
Date — 5/1/2017 to 4/1/2018

Beneficiary Count — 315
Claim Count — 11,789
Avg. Risk Tier — 0.29
Inpatient Admits (Per K) — 128 (435)
PMPM — $1,328
Readmission Count (Rate) — 28 (21.9%)
ER Admits (Per K) — 208 (707)

Drill down to Member Details
Drill down to Claim Details
Link to detailed report

Beneficiary Count by Age / Gender

Age	Female	Male
64 and Younger	16	22
65 to 69	41	30
70 to 74	48	24
75 to 79	40	18
80 to 84	17	12
85 and Older	27	20

Total Payments by Claim Type

$4,686K

$1,862K
$1,259K
$756K
$258K
$213K
$125K
$103K

Short Term Hospital
Physician
Outpatient
SNF
ER
HHA
Hospice
Other

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Base vs. Current Year Comparison (YTD)

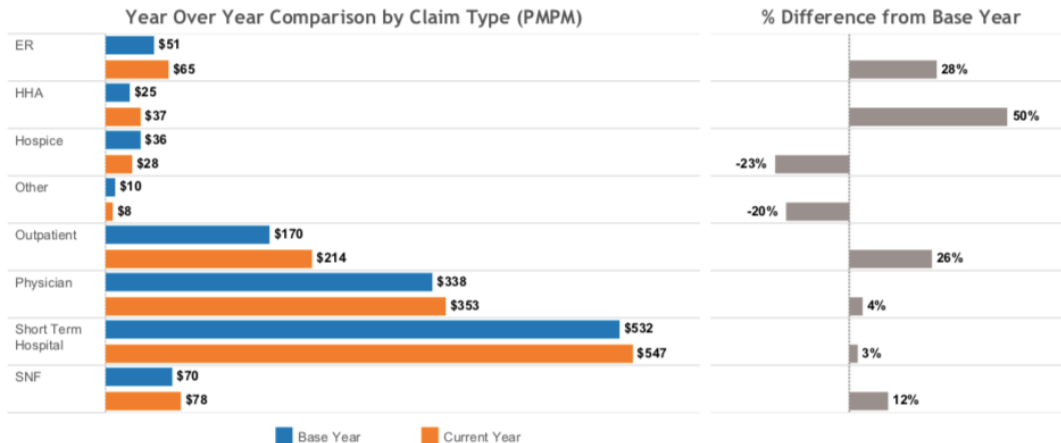|			
Tier	CTO	Practice	Time Period
All	All	Physician Group 1	YTD

Base Year: January 2017 - April 2017 / Current Year: January 2018 - April 2018

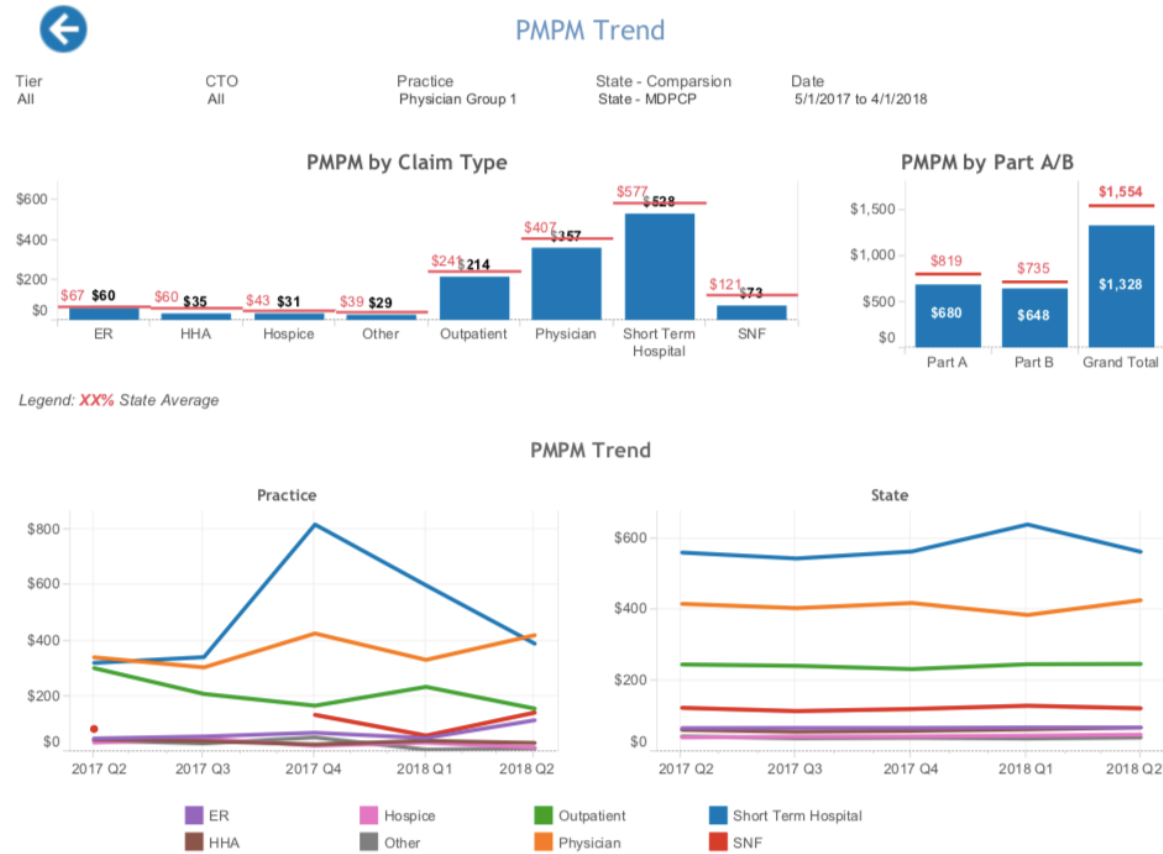|	Base Year	Current Year	% Difference
Beneficiary Count	289	307	6.2%
Beneficiary Month	1,128	1,199	6.3%
PMPM	$1,208	$1,329	10.0%
IP Admits Count	37	52	40.5%
IP Admits Per Thousand	394	520	32.2%
ER Admits Count	54	83	53.7%
ER Admits Per Thousand	574	831	44.6%

Year Over Year Comparison by Claim Type (PMPM)

Claim Type	Base Year	Current Year	% Difference from Base Year
ER	$51	$65	28%
HHA	$25	$37	50%
Hospice	$36	$28	-23%
Other	$10	$8	-20%
Outpatient	$170	$214	26%
Physician	$338	$353	4%
Short Term Hospital	$532	$547	3%
SNF	$70	$78	12%

Base Year   Current Year

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Early Wireframe: Drilldown by Payments

Top Providers by Payment Amount - Physician

Physician list populates for selected Specialty

Provider Name		Beneficiary Count - Practice	Claim Payment Amount - Practice	Avg. Claim Payment Amount - Practice
		303	$1,259,341	$124

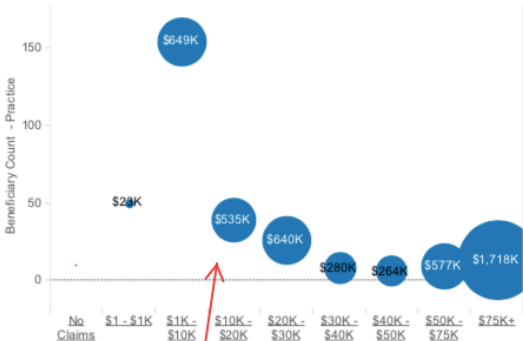| Provider Specialty	Beneficiary Count - Practice	Claim Payment Amount - Practice	Avg. Claim Payment Amount - Practice	Provider Name	Provider Specialty	Beneficiary Count - Practice	Claim Payment Amount - Practice	Avg. Claim Payment Amount - Practice
Internal medicine	227	$97,287	$58	Campochiaro,...	Ophthalmology	2	$19,485	$609
Ophthalmology	118	$83,685	$126	Watt,David	Ophthalmology	4	$13,592	$438
Vascular surgery	39	$74,600	$397	Diala,Prisca	Ophthalmology	5	$11,927	$373
Diagnostic radiology	228	$63,512	$53	Scott,Maria	Ophthalmology	6	$4,200	$145
Orthopedic surgery	70	$59,245	$105	Nesti,Heather	Ophthalmology	8	$3,840	$116
Clinical laboratory (b..	233	$55,551	$15	Schocket,Lisa	Ophthalmology	1	$2,437	$135
Ambulatory surgical ..	52	$47,254	$186	Frank,Lawren..	Ophthalmology	1	$1,953	$109
Ambulance service ..	71	$44,955	$155	Solomon,Jon..	Ophthalmology	2	$1,602	$146
Cardiology	138	$44,140	$60	Snow,Jeremy	Ophthalmology	9	$1,575	$37
Dermatology	88	$37,607	$80	Elliott,Ross	Ophthalmology	10	$1,574	$51
Nurse practitioner	125	$36,962	$53	Lee,Brian	Ophthalmology	2	$1,535	$70
Physical therapist				Tigani,Michael	Ophthalmology			

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Early Wireframe: Payment Band
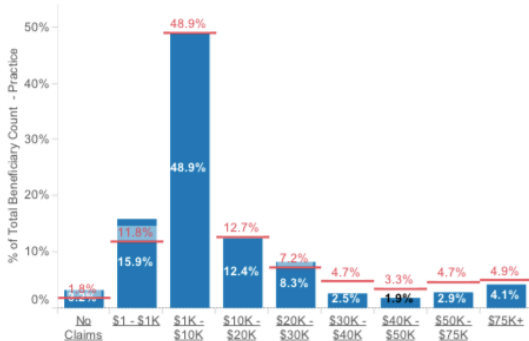
Beneficiary Payment Band Report

Tier	CTO	Practice	State - Comparsion	Date
All	All	Physician Group 1	State - MDPCP	5/1/2017 to 4/1/2018

Band Size vs. Total Payments

Drill down from bubbles to Member Details

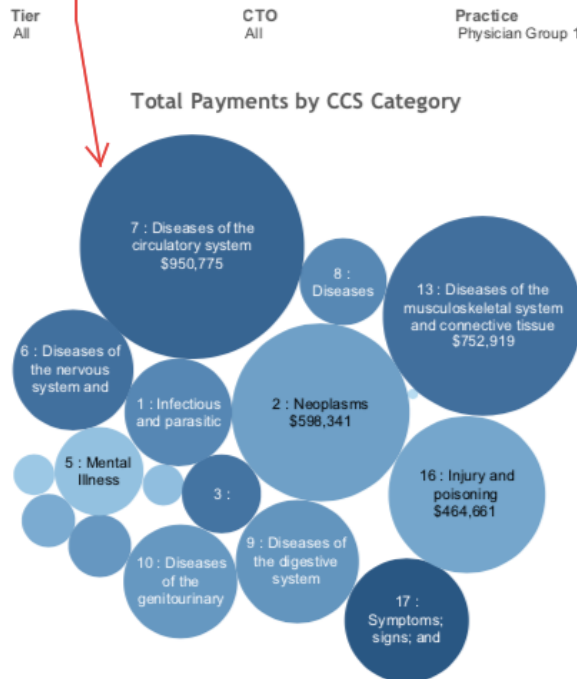### Beneficiary Distribution by Payment Band

Beneficiary Payment Band Details

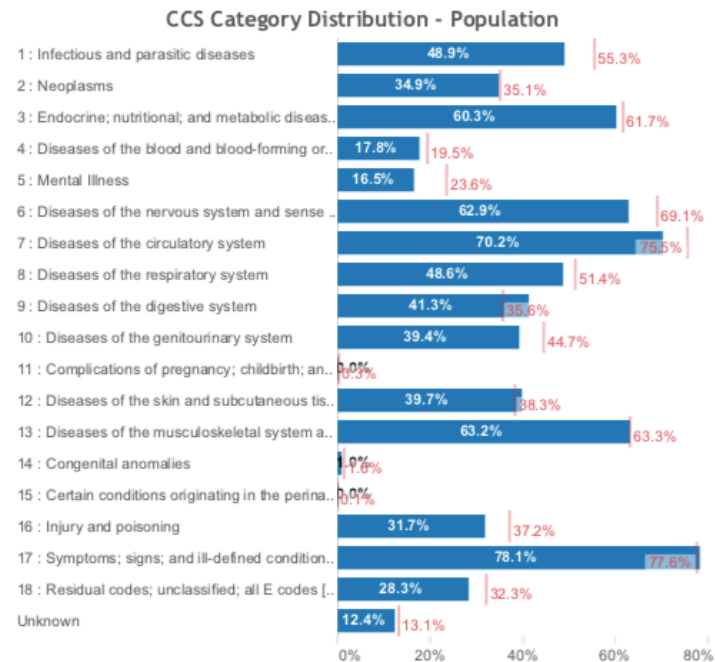| Paid Band	Beneficiary Count - Practice	% of Total Beneficiary Count - Practice	Claim Payment Amount - Practice	% of Total Claim Payment Amount - Practice	Beneficiary Count - State	% of Total Beneficiary Count- State	Claim Payment Amount - State	% of Total Claim Payment Amount - State
No Claims	10	3.2%			1,212	1.8%		
$1 - $1K	50	15.9%	$22,817	0.5%	8,063	11.8%	$3,804,675	0.3%
$1K - $10K	154	48.9%	$648,856	13.8%	33,474	48.9%	$141,783,276	11.6%
$10K - $20K	39	12.4%	$535,234	11.4%	8,674	12.7%	$123,368,826	10.1%
$20K - $30K	26	8.3%	$640,260	13.7%	4,935	7.2%	$121,318,615	9.9%
$30K - $40K	8	2.5%	$279,912	6.0%	3,233	4.7%	$112,471,734	9.2%
$40K - $50K	6	1.9%	$263,635	5.6%	2,269	3.3%	$101,519,768	8.3%
$50K - $75K	9	2.9%	$577,315	12.3%	3,198	4.7%	$193,960,852	15.9%
$75K+	13	4.1%	$1,717,565	36.7%	3,373	4.9%	$425,186,849	34.8%
Grand Total	315	100.0%	$4,685,593	100.0%	68,431	100.0%	$1,223,414,596	100.0%

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Diagnosis (CCS) Category Report

Drill down from bubbles to Member Details

Tier	CTO	Practice	State - Comparsion	Date
All	All	Physician Group 1	State - MDPCP	5/1/2017 to 4/1/2018

Total Payments by CCS Category

- 7 : Diseases of the circulatory system $950,775
- 8 : Diseases
- 13 : Diseases of the musculoskeletal system and connective tissue $752,919
- 6 : Diseases of the nervous system and
- 1 : Infectious and parasitic
- 2 : Neoplasms $598,341
- 5 : Mental Illness
- 3 :
- 16 : Injury and poisoning $464,661
- 10 : Diseases of the genitourinary
- 9 : Diseases of the digestive system
- 17 : Symptoms; signs; and

Bubble size represents Total Claim Payment Amount and color represents Beneficiary Count

CCS Category Distribution - Population

	%	State Avg
1 : Infectious and parasitic diseases	48.9%	55.3%
2 : Neoplasms	34.9%	35.1%
3 : Endocrine; nutritional; and metabolic diseas..	60.3%	61.7%
4 : Diseases of the blood and blood-forming or..	17.8%	19.5%
5 : Mental Illness	16.5%	23.6%
6 : Diseases of the nervous system and sense ..	62.9%	69.1%
7 : Diseases of the circulatory system	70.2%	75.5%
8 : Diseases of the respiratory system	48.6%	51.4%
9 : Diseases of the digestive system	41.3%	35.6%
10 : Diseases of the genitourinary system	39.4%	44.7%
11 : Complications of pregnancy; childbirth; an..	0.3%	
12 : Diseases of the skin and subcutaneous tis..	39.7%	38.3%
13 : Diseases of the musculoskeletal system a..	63.2%	63.3%
14 : Congenital anomalies	1.9%	1.6%
15 : Certain conditions originating in the perina..	0.1%	
16 : Injury and poisoning	31.7%	37.2%
17 : Symptoms; signs; and ill-defined condition..	78.1%	77.6%
18 : Residual codes; unclassified; all E codes [..	28.3%	32.3%
Unknown	12.4%	13.1%

0%   20%   40%   60%   80%

Legend: **XX%** State Average

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Early Wireframe: Professional Services

Professional Service details

Tier
All

CTO
All

Practice
Physician Group 1

State - Comparsion
State - MDPCP

Date
5/1/2017 to 4/1/2018

BETOS

BETOS 1	Beneficiary Count	Claim Count	Claim Payment Amount
D : Durable Medical Equip.	18	21	$38
I : Imaging	252	1,196	$104,763
M : Evaluation & Management	294	4,729	$370,623
O : Other	222	692	$174,658
P : Procedures	227	2,015	$365,106
T : Tests	276	2,256	$95,140
Y : Exceptions / Unclassified	49	220	$4,351
Z : Exceptions / Unclassified	196	753	$20,183

Top 20 Specialties

Provider Specialty	Beneficiary Count	Claim Count	Claim Payment Amount F
Internal medicine	227	1,077	$97,287
Ophthalmology	118	321	$83,685
Vascular surgery	39	106	$74,600
Diagnostic radiology	228	838	$63,512
Orthopedic surgery	70	235	$59,245
Clinical laboratory (billin..	233	1,089	$55,551
Ambulatory surgical cent..	52	85	$47,254
Ambulance service supp..	71	142	$44,955
Cardiology	138	526	$44,140
Dermatology	88	229	$37,607
Nurse practitioner	125	452	$36,962
Physical therapist	45	493	$36,230
Medical oncology	6	38	$29,728
Emergency medicine	128	228	$27,263
Physician assistant	126	290	$25,551
Anesthesiology	74	129	$22,641
Rheumatology	18	47	$20,644
Hematology/oncology	24	69	$20,085
General surgery	24	62	$19,149
Family practice	60	216	$17,390

Top 20 Places of Service

Place of Service	Beneficiary Count	Claim Count	Claim Payment Amount F
OFFICE	275	4,577	$614,569
INPATIENT HOSPITAL	96	1,178	$177,200
AMBULATORY SURGERY C..	53	226	$77,517
OUTPATIENT HOSPITAL	128	603	$60,564
INDEPENDENT LABORATO..	233	1,056	$56,074
AMBULANCE - LAND	71	142	$44,955
EMERGENCY ROOM - HOS..	148	553	$39,011
SKILLED NURSING FACILITY	23	359	$21,403
MASS IMMUNIZATION CEN..	89	106	$8,865
PATIENT'S HOME	20	128	$8,799
ASSISTED LIVING FACILITY	10	109	$8,766
URGENT CARE FACILITY	45	72	$5,613
NURSING FACILITY	15	101	$4,967
END STAGE RENAL DISEA..	2	19	$4,127
INDEPENDENT CLINIC	3	8	$880
COMPREHENSIVE INPATIE..	1	9	$626
UNASSIGNED	3	7	$483
MOBILE UNIT	1	1	$332
CUSTODIAL CARE FACILITY	1	1	$68
OTHER OR UNKNOWN	1	1	$46

Top 20 Providers

Provider Name	Beneficiary Count	Claim Count	Claim Payment Amount F
Arata,Elaine	132	475	$38,088
Dormu,Jeffery	1	24	$34,795
Farrell,Nicholas	1	15	$27,839
Yoon,Dustin	2	13	$27,137
QUEST DIAGNOSTICS I..	146	492	$20,826
Campochiaro,Peter	2	20	$19,485
Marcus,Roger	3	16	$17,627
Watt,David	4	12	$13,592
ANNE ARUNDEL COUN..	24	38	$12,546
Diala,Prisca	5	13	$11,927
LABORATORY CORPO..	91	254	$11,012
Hendricks,Carolyn	1	8	$10,820
Peterman,Angela	10	45	$8,816
King,Paul	9	27	$8,677
BALTIMORE COUNTY M..	14	25	$8,520
CHESAPEAKE EYE SUR..	9	14	$8,313
ANNE ARUNDEL UROL..	5	10	$6,820
MONTGOMERY COUNT..	14	19	$6,720
GENOMIC HEALTH INC.	2	2	$6,472
Greco,Stephen	1	21	$6,324

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Early Wireframe: Professional Services Filters

Professional Service details

Tier	CTO	Practice	State - Comparsion	Date
All	All	Physician Group 1	State - MDPCP	5/1/2017 to 4/1/2018

BETOS

BETOS 1	Beneficiary Count	Claim Count	Claim Payment Amount
I : Imaging	15	22	$1,027
M : Evaluation & Management	117	238	$20,249
O : Other	5	40	$43,035
P : Procedures	28	90	$17,256
T : Tests	46	73	$2,119
Y : Exceptions / Unclassified	1	3	$0
Z : Exceptions / Unclassified	12	18	$0

Selecting a row on any of the bottom three charts will filter the others

Top 20 Specialties

Provider Specialty	Beneficiary Count	Claim Count	Claim Payment Amount
Internal medicine	227	1,077	$97,287
Ophthalmology	118	321	$83,685
Vascular surgery	39	106	$74,600
Diagnostic radiology	228	838	$63,512
Orthopedic surgery	70	235	$59,245
Clinical laboratory (billin..	233	1,089	$55,551
Ambulatory surgical cent..	52	85	$47,254
Ambulance service supp..	71	142	$44,955
Cardiology	138	526	$44,140
Dermatology	88	229	$37,607
Nurse practitioner	125	452	$36,962
Physical therapist	45	493	$36,230
Medical oncology	6	38	$29,728
Emergency medicine	128	228	$27,263
Physician assistant	126	290	$25,551
Anesthesiology	74	129	$22,641
Rheumatology	18	47	$20,644
Hematology/oncology	24	69	$20,085
General surgery	24	62	$19,149
Family practice	80	216	$17,390

Top 20 Places of Service

Place of Service	Beneficiary Count	Claim Count	Claim Payment Amount
OFFICE	117	290	$70,899
AMBULATORY SURGERY C..	17	29	$12,305
OUTPATIENT HOSPITAL	2	2	$481

Top 20 Providers

Provider Name	Beneficiary Count	Claim Count	Claim Payment Amount
Campochiaro,Peter	2	20	$19,485
Watt,David	4	12	$13,592
Diala,Prisca	5	13	$11,927
Scott,Maria	6	16	$4,200
Nesti,Heather	8	20	$3,840
Schocket,Lisa	1	6	$2,437
Frank,Lawrence	1	6	$1,953
Solomon,Jonathan	2	7	$1,602
Snow,Jeremy	9	13	$1,575
Elliott,Ross	10	13	$1,574
Lee,Brian	2	12	$1,535
Tigani,Michael	1	9	$1,515
Reid,Deborah	2	7	$1,369
Pasquale,August	5	10	$1,135
Phillips,William	1	4	$1,046
Rutzen,Allan	2	8	$893
Hall,Alyson	3	10	$808
Wray,Misty	2	9	$755
Huang,Harry	2	3	$711
Buttross,Melanie	1	2	$662

Member Details
CTO : EMR and Practice Management Consultants, In.
Attributed Physician █████████

Beneficiary ID	Beneficiary Name	Gender	County Name	Beneficiary DOB	Age	HCC Score - Practice	Claim Count - Practice	Claim Payment Am..
██████	██████	Female	ANNE ARUNDEL	████	█	5.00	2	$749
██████	██████	Female	ANNE ARUNDEL	████	█	0.00	10	$1,849
██████	██████	Female	ANNE ARUNDEL	████	█	0.00	2	$134
██████	██████	Female	BALTIMORE	████	█	0.00	1	$126
██████	██████	Female	BALTIMORE CITY	████	█	0.00	3	$60
██████	██████	Male	MONTGOMERY	████	█	5.00	3	$559
██████	██████	Female	BALTIMORE CITY	████	█	5.00	1	$30
██████	██████	Male	ANNE ARUNDEL	████	█	0.00	4	$178
██████	██████	Male	BALTIMORE	████	█		2	$36
██████	██████	Male	ANNE ARUNDEL	████	█		1	$8
██████	██████	Female	ANNE ARUNDEL	████	█	0.00	1	$87
██████	██████	Female	BALTIMORE	████	█	0.00	3	$2,099
██████	██████	Female	MONTGOMERY	████	█	0.00	2	$704
██████	██████	Male	BALTIMORE CITY	████	█	15.00	8	$1,067
██████	██████	Female	ANNE ARUNDEL	████	█	0.00	5	$284
██████	██████	Female	BALTIMORE	████	█	0.00	1	$35
██████	██████	Female	ANNE ARUNDEL	████	█	0.00	1	$97
██████	██████	Female	ANNE ARUNDEL	████	█	0.00	2	$110
██████	██████	Male	ANNE ARUNDEL	████	█	0.00	1	$9
██████	██████	Male	ANNE ARUNDEL	████	█	0.00	1	$131
██████	██████	Female	BALTIMORE	████	█	0.00	2	$261
██████	██████	Male	ANNE ARUNDEL	████	█	0.00	1	$23
██████	██████	Female	ANNE ARUNDEL	████	█	0.00	1	$92
██████	██████	Male	MONTGOMERY	████	█	5.00	1	$0
██████	██████	Female	ANNE ARUNDEL	████	█	0.00	10	$748
██████	██████	Female	ANNE ARUNDEL	████	█	0.00	1	$50
██████	██████	Male	ANNE ARUNDEL	████	█	0.00	5	$4,097
██████	██████	Female	ANNE ARUNDEL	████	█	0.00	1	$50
██████	██████	Female	MONTGOMERY	████	█	0.00	3	$317
██████	██████	Male	MONTGOMERY	████	█	0.00	1	$23
██████	██████	Male	ANNE ARUNDEL	████	█	10.00	20	$8,795
██████	██████	Male	ANNE ARUNDEL	████	█	0.00	6	$375
██████	██████	Female	ANNE ARUNDEL	████	█		2	$20
██████	██████	Male	BALTIMORE	████	█	0.00	2	$232

Early Wireframe: Patient Detail All Claims

Claim Details for ▮
CTO : All
Attributed provider ▮

Beneficiary ID	Beneficiary Name	Claim From Date	Claim Through Date	Claim Type Group	Primary Diagnosis	Provider Name	Claim Count - Practice	Claim Payment Amount - Practice
▮	▮	▮	▮	Physician	D6489 : Other specified anemias		1	$59
					E1165 : Type 2 diabetes mellitus with hyperglycemia		1	$63
		▮	▮	Physician	N630 : Unspecified lump in unspecified breast		1	$244
		▮	▮	Physician	R5383 : Other fatigue		1	$49
					Z125 : Encounter for screening for malignant neoplasm of pr..		1	$25
		▮	▮	Physician	E1165 : Type 2 diabetes mellitus with hyperglycemia		1	$87
		▮	▮	Physician	Z96641 : Presence of right artificial hip joint		1	$126
		▮	▮	Physician	M545 : Low back pain		1	$192
					M47817 : Spondyls w/o myelopathy or radiculopathy, lumbos..		2	$164
		▮	▮	Physician	M961 : Postlaminectomy syndrome, not elsewhere classified		1	$62
		▮	▮	Physician	S6992XA : Unsp injury of left wrist, hand and finger(s), init en..		1	$7
					S52615A : Nondisp fx of left ulna styloid process, init for clos..		1	$44
					Z043 : Encounter for exam and observation following oth acc..		1	$7
			▮	Outpatient	S52615A : Nondisp fx of left ulna styloid process, init for clos..	UM Baltimore Washington Medical Center	1	$357
		▮	▮	Physician	M79642 : Pain in left hand		1	$117
		▮	▮	Physician	E1165 : Type 2 diabetes mellitus with hyperglycemia		2	$60
		▮	▮	Physician	S63259A : Unspecified dislocation of unspecified finger, init ..		1	$37
					Z01818 : Encounter for other preprocedural examination		1	$9
		▮	▮	Physician	Z01818 : Encounter for other preprocedural examination		1	$117
		▮	▮	Physician	I491 : Atrial premature depolarization		1	$105
		▮	▮	Physician	I517 : Cardiomegaly		1	$9
					M960 : Pseudarthrosis after fusion or arthrodesis		5	$6,062
					M961 : Postlaminectomy syndrome, not elsewhere classified		1	$572
					M4726 : Other spondylosis with radiculopathy, lumbar region		1	$221
					Z4789 : Encounter for other orthopedic aftercare		1	$9
			▮	Physician	M961 : Postlaminectomy syndrome, not elsewhere classified		1	$351
			▮	Inpatient	M961 : Postlaminectomy syndrome, not elsewhere classified	UM Baltimore Washington Medical Center	1	$37,690
		▮	▮	Physician	M961 : Postlaminectomy syndrome, not elsewhere classified		1	$74
		▮	▮	Physician	R531 : Weakness		1	$63
		▮	▮	Physician	R531 : Weakness		1	$42
		▮	▮	Physician	I10 : Essential (primary) hypertension		1	$120
					M961 : Postlaminectomy syndrome, not elsewhere classified		1	$74
					R52 : Pain, unspecified		1	$323
			▮	Inpatient	R5381 : Other malaise	UM Laurel Regional Hospital	1	$19,127
		▮	▮	Physician	Z98890 : Other specified postprocedural states		1	$63
		▮	▮	Physician	Z98890 : Other specified postprocedural states		1	$63

Thank you!

Updates and More Information:

https://health.maryland.gov/MDPCP

Questions: email MarylandModel@cms.hhs.gov

MARYLAND
Department of Health