

# USING VALUE-BASED PAYMENT TO INCREASE ENROLLMENT OF HIGH BURDEN POPULATIONS INTO SELF MEASURED BLOOD PRESSURE PROGRAMS

## Overview and Purpose

The Wyoming Department of Health, Chronic Disease Prevention Program (CDPP) is providing value-based payments to eligible existing Self Measured Blood Pressure (SMBP) programs in Wyoming to support enrollment of high-burden populations. High-burden populations are those who are disproportionately affected by hypertension due to socioeconomic characteristics or restricted access to healthcare.

Strong scientific evidence shows that SMBP monitoring plus clinical support helps people with hypertension lower their blood pressure. SMBP plus clinical support can improve access to care and quality of care for people with hypertension while making blood pressure control more convenient and accessible across the population. Clinical support includes regular one-on-one counseling, web-based or telephonic support tools, and educational classes.

It is estimated the cost of administering an SMBP program with clinical support to one participant per month is \$133.00.

## Value-Based Payment

VBP is payment tied to outcomes. Under this program, the outcome of interest is SMBP participation. The CDPP will reimburse the eligible program based on individual participation attendance of the participants, qualifying for the program (see Participant Eligibility below).

## Program Eligibility

VBPs will only be available to healthcare systems who previously were awarded and completed the Cardiovascular Disease Prevention Grant released by CDPP. **VBPs will be based on the availability of federal funds.** The CDPP will only reimburse for VBP session attendance during the term of June 30, 2022 to June 29, 2023. VBP funding shall not exceed one (1) year, per eligible program, from the date the first VBP for session attendance is made to the eligible program (e.g., paid invoice).

Sessions which occur before or after the end-date will not be eligible for reimbursement. eligible programs are encouraged to develop or obtain a sustainable funding source to continue to support VBPs beyond the one (1) year of CDPP funding.

In order to receive federal funds, eligible programs must be in good standing with the Wyoming Secretary of State, registered on SAM.gov and have a current W-9 on file with the State of Wyoming.

## **Participant Eligibility**

VBP participant eligibility shall be determined by the eligible program. The following information must be submitted to the CDPP for prior approval:

1. **Definition of High-Burden Population:** Federal guidance requires VBP support enrollment of high-burden populations. The eligible program is required to define their high-burden population, effectively defining participant eligibility requirements. Eligible programs are encouraged to consider an individuals' financial means/federal poverty level status, insurance status (e.g., none, underinsured), ability to qualify for services under a sliding fee scale, and/or other enrollment barriers that would limit participation based on their ability to pay.
2. **Eligibility Determination Process:** A description of the process and/or mechanism that will be used to document and verify participant eligibility requirements are met.
3. **Clinical support intervention:** A description of what interventions will be used.

## **Performance Measures**

VBPs will be distributed based on participants' attendance at each clinical support intervention including initial patient set up and education. Reimbursement will occur per participant per month attended, regardless of program completion.

The eligible program must report the following de-identified participant information to the CDPP:

1. The total number of participants within each healthcare system utilizing the VBPs to cover the cost of SMBP program participation;
2. Within each monthly invoice the eligible program shall include the number and dates of the clinical support interventions attended by each VBP recipient; and
3. The total number of participants who utilized the VBP program during the term (ending June 29, 2023).

## **Final Report**

A final report will be required from each eligible program that includes aggregated participant outcomes. This report will be due at the end of the period on June 29, 2023.

The eligible program must report the following de-identified participant information to the CDPP

1. Number and percent of providers with a protocol for identifying patients with undiagnosed hypertension;
2. Number and percent of patients with high blood pressure and high blood cholesterol referred to a self-measured blood pressure monitoring program;
3. Number and percent of patients with high blood pressure that have a self-management plan;
4. Number of patients with high blood pressure in adherence to medication regimes.

5. Number of adults with known high blood pressure whose hypertension becomes controlled or improves as a result of utilizing clinical support (subgrant period); and
6. Clinical quality data from your clinic.

### **Value-Based Payment Amount Determination**

VBP reimbursement will follow the amounts outlined in **Attachment A**. The eligible program must submit **Attachment B** to [amber.nolte@wyo.gov](mailto:amber.nolte@wyo.gov) with the required information prior to receiving VBP funds. The eligible program will invoice CDPP for the VBPs monthly following the outline in **Attachment C**. A final report will be required with cumulative data from the funding term. Data requirements can be found in **Attachment D**.

## Attachment A

Value-Based Payment Projections for SMBP Programs with Clinical Support		
<b>Funding Period</b>	<b>Cost per participant per month</b>	<b>Total number of sessions to be completed during current funding term</b>
<i>June 30, 2022 to June 29, 2023 (12 months)</i>	<i>\$133.00</i>	<i>Up to 12</i>

## Attachment B

**What is your organization's definition of a high-burden population?** *Eligible programs are encouraged to consider an individual's financial means/federal poverty level status, insurance status (e.g., none, underinsured), ability to qualify for services under a sliding fee scale, and/or other enrollment barriers that would limit participation based on their ability to pay. In addition, high burden populations may include but are not limited to: geographically underserved, Medicaid and Medicare beneficiaries, Hispanic/Latino Americans, African Americans, and American Indians.*

**How will your organization determine Value-Based Payment participant eligibility?** *A description of the process and/or mechanism that will be used to document and verify participant eligibility requirements are met.*

**What type of clinical support intervention will your organization provide?** *Clinical Support Interventions may include regular one-on-one counseling, web-based or telephonic support tools, and educational classes.*



## Attachment D

### Final Report

1. Number and percent of providers with a protocol for identifying patients with undiagnosed hypertension.
2. Number and percent of patients with high blood pressure and high blood cholesterol referred to a self-measured blood pressure monitoring program.
3. Number and percent of patients with high blood pressure that have a self-management plan.
4. Number of patients with high blood pressure in adherence to medication regimes.
5. Number of adults with known high blood pressure whose hypertension becomes controlled or improves as a result of utilizing clinical support. (during funding term)
6. Please provide the following clinical quality data from your clinic
  - o CMS ID 236: Controlling High Blood Pressure
  - o CMS ID 438: Statin Therapy for the prevention and treatment of CVD