

## **ACH VBC Resources**

#### **General VBC Resources**

- Out-Of-Pocket offered a short course on the basics of VBC. Please see the link to the recordings.
- VBC Assessment: Value Transformation Framework (VTF) Assessment
- Value-Based Payment Introduction and Module
- Implementing Value-Based Primary Care Delivery in Federally Qualified Health Centers: Includes
  Assessment Tools
- Integrated Care DC: The website is focused for the District of Columbia and their Medicaid providers. However, the website offers VBC tools and past learning collaborative presentations, including, but not limited to:
  - o <u>Business Transformation VBP Toolkit</u>
  - o Steps to Succeed along the Glide Path to Advanced Alternative Payment Models
  - o Forming Strategic Partnership Agreements and Care Compacts
  - Technology Infrastructure to Support VBP

# **VBC Attribution and Payment Methodology**

- Action-Brief-Attribution-Thresholds
- Understanding State and MCO Payment Methodology

#### **VBC Best Practices**

- A Playbook of Voluntary Best Practices for VBC Payment Arrangements
- Multi-payer alignment blueprint
- Cope Health Solutions and VBC Workflows
- VBP in Behavioral Health-HMA presentation
- Overcoming Population Health Pitfalls: 5 Proven Strategies for Value-Based Care Orchestration:
   <u>Slides</u> and <u>recording</u>
- Yuvo Health: Best Practices for FQHCs

# **NACHC's June 2024 Learning Series**

- Pathways to Progression Along the Value-Based Payment Continuum
- Implementing High Quality Primary Care within Value-Based Payment Models
- Optimizing Value-Based Payment Strategies while Mitigating Financial Risk

#### **VBC** and Medicaid

- May 2024: <u>Developing Primary Care Population-Based Payment Models in Medicaid: A Primer for States</u>, Center for Health Care Strategies
  - o This resource gives a basic overview of population-based payment models, especially for anyone with no to little experience in VBC
  - o Describes state and federal programs like Making Care Primary and Maine Primary Care Plus
  - o Describes payment, rate setting, risk adjustment, quality, patient assignment and provider eligibility, and model alignment efforts
  - o Briefly describes FQHCs as special consideration
- May 2024: <u>Building a Health Equity Focused into Value-Based Payment Design: Approaches for Medicaid Payers</u>, Center for Health Care Strategies
  - o This brief outlines how payers can embed a health equity focus into key decision points in payment model design
  - o Safety net providers and FQHC participation is prioritized

## **VBC and Health Equity**

- Building a Health Equity Focus into Value-Based Payment presentation
- INSTITUTE IB Health Equity And VBC Pt3
- INSTITUTE IB Health Equity And VBC safety net Pt2
- <u>Catalog Value Based Initiatives for Rural Providers</u>

### **VBC FQHC Articles**

<u>Federally Qualified Health Centers Can Make the Switch to Value-Based Payment, But Need</u>
 <u>Assistance</u>, The Commonwealth Fund, February 2024

### **VBC Contracting**

MCO Contracting Exercises and Examples: VBC MCO Contracting Exercises

### **VBC Contracting (Cont.)**

- The Aging and Disability Business Institute has produced the Resource Guide: Model Contracts for Community-Based Integrated Care Networks containing a set of three model contracts that provide examples of ways networks can frame contractual relationships with their participating CBOs (i.e., their network), with potential managed care payers and health care providers. Also included in the Resource Guide is an annotation narrative that explains certain contract provisions and how they impact the parties' working relationships. Note that this information should not be construed as legal advice.
  - o Network-CBO Model Contract
  - o Network-Payer Model Contract
  - o <u>Network-Provider Model Contract</u>
  - o Model Contract Annotations