

Medicaid Innovation Accelerator Program (IAP) Maternal and Infant Health Initiative (MIHI) Medicaid Value-Based Payment Approaches for Maternal and Infant Health: Resource List

Description:

Intended to accompany the IAP MIHI Medicaid *Value-Based Payment Approaches for Maternal and Infant Health* webinar, this resource list provides hyperlinks to relevant Value-Based Payment (VBP) articles and toolkits.

Value-Based Payment (VBP): Overview

Description: Value-Based Payment (VBP) refers to a broad set of payment models that range from rewarding for performance in fee-for-service (FFS) to capitation, including alternative payment models and comprehensive population-based payments.

General VBP Resources

[Medicaid Delivery System and Payment Reform: A Guide to Key Terms and Concepts](#)

To help those interested in understanding the diversity of Medicaid reform initiatives under way or in development in states across the country, this guide defines key terms and concepts in Medicaid health care delivery and payment systems.

[Measuring Success in Health Care Value-Based Purchasing Programs](#)

This report summarizes VBP program goals and provides recommendations for the design, implementation, and monitoring and evaluation of VBP programs.

[The Road to Value-Based Care](#)

This brief describes and discusses VBP models for health care organizations interested in selecting, developing, or implementing these payment and delivery strategies.

[Value-Based Payments in Medicaid](#)

This brief explores state options for using managed care contracts to accelerate VBP adoption at the provider level.

Bundled Payments

Description: A *bundled payment* (also known as an *episode-based payment*) refers to a single payment to providers, facilities, or both, for all services to treat a given condition over a predefined episode of care. Such payments represent a greater financial incentive to providers than a situation in which the services are provided or billed separately under a typical fee-for-service arrangement.

General Bundled Payment Resources

[Clinical Episode Payment Models in Maternity Care](#)

This brief provides maternity care payment recommendations on pregnancy and childbirth, with a focus on greater alignment around Clinical Episode Payment (CEP) models.

[Transforming Maternity Care: A Bundled Payment Approach](#)

This issue brief describes the use of a bundled payment approach to catalyze cost reductions and quality improvements in maternity care.

Bundled Payments: Case Studies

[Bundled Payment Learning Collaborative Pilot in Texas](#)

Observations and recommendations from a bundled payment implementation for low-income children and pregnant women in Houston, Texas.

[Perinatal Episode – Tennessee](#)

This paper provides an overview of episode-based payments for the perinatal period for women with low- to medium-risk pregnancies; it also outlines measure of quality and sources of value.

[Perinatal Algorithm Summary – Arkansas](#)

This paper summarizes the perinatal algorithm v.1.16, which is used to implement episode-based payments for perinatal care in Arkansas.

Pay-for-Performance

Description: Pay-for-performance (P4P) programs financially rewards physicians, other health care providers, hospitals, and/or health care plans, if they meet or exceed predetermined benchmarks of health care quality, performance, and/or efficiency. P4P programs also can confer financial penalties for failure to achieve specified metrics.

General P4P Resources

[Pay-for-Performance](#)

This brief discusses the current state of P4P and outlines additional opportunities.

[Key Design Elements of Pay-for-Performance](#)

This paper provides an overview of key issues in the design of P4P programs.

PFP: Case Studies

[Health Choices MCO Pay for Performance \(P4P\) Program – Pennsylvania](#)

Overview of the Pennsylvania P4P program, which include efforts to increase the frequency of prenatal care and prenatal care in the first trimester.

[Reducing Preterm Births by Increasing 17P access – Louisiana](#)

This brief describes the nation's first P4P strategy targeting the initiation of progesterone therapy.

[Nurse-Family Partnership – South Carolina](#)

Policy brief on the South Carolina Nurse-Family Partnership Pay for Success Project, which pairs vulnerable first-time parents with nurses who provide support from early pregnancy through the child's second birthday.

Nonpayment Policy

Description: A policy of not paying for particular health services; this VBP approach represents a variation on P4P in which the payment decrement is 100 percent for selected services.

General Nonpayment Policy Resources

[The Payment Reform Landscape – Nonpayments](#)

This brief provides a brief overview of nonpayment programs.

Nonpayment policy: Case Studies

[Early Elective Delivery Policy – Indiana](#)

Provider bulletin from the Indian Health Coverage Program on the implementation of the nonpayment policy for early elective deliveries (EEDs), which became effective July 1, 2014.

[Birth Outcomes Initiative – South Carolina](#)

This case study examined how South Carolina used a policy of nonpayment for early elective deliveries.

Shared Savings

Description: Providers receive a financial award based on a percentage of aggregate total cost of care savings achieved during a specified performance period.

General Shared Savings Resources

[Key Design Elements of Shared-Savings Payment Arrangements](#)

This brief describes shared savings models, populations and services covered, assignment of providers, use of risk adjustment, and methodologies for calculating and distributing savings.

[Shared Savings Methodologies](#)

CMS guidance on designing and implementing shared savings models for Medicaid providers.

Shared Savings: Case Studies

[Patient-Centered Medical Home – Arkansas](#)

Fact sheet on shared saving methodology, outcomes, and opportunities in Arkansas Medicaid.

[Expansion of Bayou Health Medicaid Managed Care Program – Louisiana](#)

This paper describes managed care in Louisiana, which revamped its primary care case management program to a risk-based comprehensive managed care program, Bayou Health, that includes a shared-savings component.

Population-Based Payment Models

Description: Also referred to as *global payment* or *total cost of care payment* models, population-based payment (PBP) models incentivize and reward health care providers for delivering high-quality person-centered care within a defined or overall budget.

General PBP Resources

[Population-Based Payment Models: Overcoming Barriers, Accelerating Adoption](#)

Brief introduction to PBP models by the Health Care Payment Learning and Action Network. Includes information and resources on patient attribution, financial benchmarking, and strategies to accelerate PBP models.

PBP: Case Studies

[Oregon's Coordinated Care Model](#)

Coordinated care organizations (CCOs) in Oregon provide integrated, patient-focused health care for Oregon Health Plan (Medicaid) beneficiaries and state employees. A CCO is a local network of all types of health care providers (physical health care, mental health care, addictions, dental care) who have agreed to work together in their communities to serve beneficiaries. This report provides details on this model and benefits for organizations and stakeholders.