

Highlights in this issue

Focus on CPC+ P.2

Pharmacy/Primary Care

Collaboration P.3

New Practices 5

Inaugural Clinician Conference Created with Clinicians in Mind

From Allen Dobson, MD, Chairman

I am looking forward to the Inaugural CCPN Clinician Conference at the Grandover Resort in Greensboro on May 21-22. We will welcome distinguished speakers Mandy Cohen, MD, MPH, Secretary of the North Carolina Department of Health and Human Services, and Craig Jones, MD, founder and former director of Vermont Blueprint. We also will offer attendees the opportunity to learn more about payment reform, quality improvement and CCPN services.



While these are important topics, and our speakers are experts with important messages for us, it's been my experience while gathering with smaller CCPN groups across the state over the last year that the

opportunity to connect one-on-one with each other is arguably as valuable as the formal presentations.

We have purposefully structured the agenda to give meeting participants opportunities to interact with the CCPN Board of Managers and peers from across the state. CCPN is a physician-led organization. That means each one of you is a leader in CCPN. We believe that gathering to share ideas, successes and challenges is so critical to the mission of CCPN that we are offering the first Clinician Conference at no charge to our CCPN clinicians.

Engagement and participation by CCPN members will determine how successful we are in the future. I want to take this chance to say "thank you" to those who completed the CCPN practice survey. The survey results will be shared in Greensboro. A summary of the results also is on page 4.

If you have already registered for the Clinician Conference, thank you. If you have not, please [click](#) & register now. See you in Greensboro!



Resource Corner

- [May Medicaid Bulletin](#)
- The NC Department of Health and Human Services is seeking additional public input through May 25, 2017, on the Medicaid and NC Health Choice programs transformation. For Medicaid transformation information and progress updates, [click here](#).



Great Opportunity

The CCNC Practice Transformation Network (PTN) Initiative is specifically recruiting CCPN practices interested in becoming better prepared to operate and succeed in the new value-based healthcare environment. Participation in the PTN program is free and includes a coach to help your practice acquire the quality improvement skills that payers are demanding to avoid future penalties. More than 145 CCPN practices are currently involved in this exciting initiative. For more information, please contact Donna Bowen at dbowen@n3cn.org.



Dr. Mann Offers CCPN Overview at NC Pediatric Spring Open Forum

Dr. Larry Mann, a CCPN board member, presented at the NC Pediatric Spring Open Forum in Wilmington, NC, on Saturday, April 29. He discussed the extent of current membership of CCPN, which covers a large portion of North Carolina. The network now includes almost 2,000 pediatric and adult clinicians across the state.

CCPN is working to build a high-performing, quality network to support practices and clinicians in value-based health reform. CCPN is building the infrastructure to support clinical integration; develop and report on pertinent quality and cost metrics to drive improvement; implement single signature contracting with all of the Managed Care Organizations



Dr. Larry Mann

chosen to do business in Medicaid reform; and, creating single-source credentialing for providers.

Comprehensive Primary Care Plus—Round 2

*From Robert Eick, MD, CCNC
Deputy Chief Medical Officer*

The Centers for Medicare and Medicaid Services (CMS) Innovation Center is in the process of selecting new regions for participation in Round 2 of the Comprehensive Primary Care Plus (CPC+) initiative. CPC+ is a public-private partnership aimed at redesigning and aligning health care delivery across multiple payers to provide more comprehensive primary care. Pivotal to this redesign are three payment components paid to practices – a Care Management Fee, a Performance-Based Incentive Payment, and, for more advanced, Track 2 practices, a Comprehensive Primary Care Payment as an alternative to fee-for-service. These payments are meant to be aligned across all participating payers, which may include Medicare, State Medicaid, commercial, Medicare Advantage plans, and others.



CPC+ Round 1 began in January 2017 and consists of 14 regions across the U.S., comprising 54 payers, 13,090 clinicians across 2,891 practices, and more than 1.7 million patients. Round 2 will begin in January 2018 and will welcome up to 2,609 new practices in up to 10 new regions. The new regions will be announced in late spring 2017, with practices in selected regions able to apply in late summer or early fall 2017.

The North Carolina Division of Medical Assistance (DMA) submitted an application for CPC+ participation in early April 2017. If North Carolina is selected as a Round 2 region, CPC+ would be an ideal opportunity for practices to leverage an enhanced, innovative payment structure to redesign the way that primary care is delivered, with the goal of improving outcomes, patient and provider experience, and reducing cost. More information can be found at <https://innovation.cms.gov/initiatives/comprehensive-primary-care-plus>.

Collaboration by Pharmacy & Medical Practice Improves Outcomes for Patients

CCPN physician and Board of Managers member Dr. Stephen Hsieh of High Rock Internal Medicine in Lexington and community pharmacy owner Russell Patterson of Tyro Family Pharmacy are collaborating to deliver improved medication use and outcomes for high-risk patients.

Facilitated by Neal Roberts, PharmD/ Pharmacy Program Director at Northwest Community Care Network in Winston-Salem, physician and pharmacist met to identify primary health concerns frequently seen with their patients: hypertension, cholesterol, and diabetes medication adherence. With the realization that practice quality measures align well with pharmacy Medicare Star ratings*, they set to work enhancing the collaborative role that community pharmacists play in providing integrated clinical services to patients.



Russell Patterson of Tyro Family Pharmacy, Lexington

Dr. Hsieh granted Patterson remote access to his Electronic Medical Record (EMR) to share patient labs and plans of care. He referred high risk patients that were identified in his practice to the community pharmacy for work on medication adherence, refill synchronization, home

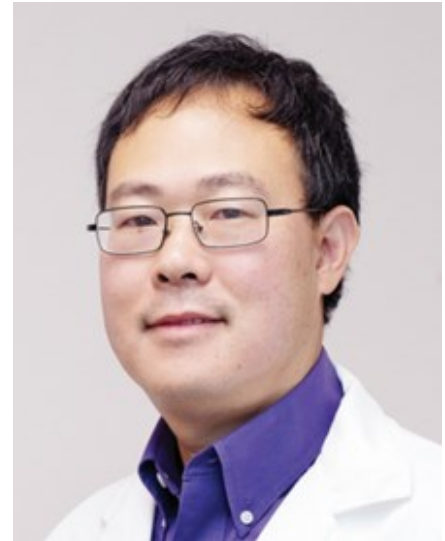
delivery, Comprehensive Medication Management/Medication Therapy Management (MTM) and other services.

Russell Patterson, owner of Tyro Pharmacy in Lexington, sees the collaboration of pharmacist and provider as an “investment in tomorrow.” Both face similar pressures in today’s health care environment, including shrinking reimbursement, tighter regulation, and increased pressure to prove quality of care. Working together in an integrated collaborative model that is replicable and sustainable will ensure both survive in the ‘pay for performance’ model.

Initial results indicate that this care integration has improved patients’ adherence to medications, and that the community pharmacy was able to reinforce the physician’s instructions and plan of care. The pharmacy also alerted the physician about any non-adherence issues, so that follow-up visits with those patients could be scheduled.

The program has proved very successful. Outcomes have demonstrated improved adherence to chronic medications, improved quality measure reporting for the practice – critical in a value-based system, and increased patient satisfaction and engagement. Encouraging results have led to a pilot that utilizes community pharmacists to assist with Annual Wellness visits at Dr. Hsieh’s practice site one day per week. This allows for enhanced patient assessment screenings, and enables a larger population of eligible Medicare recipients to have access to these screenings.

Patterson believes “three key points assure future success in health care:



CCPN physician and Board of Managers member Dr. Stephen Hsieh of High Rock Internal Medicine in Lexington

focus on helping patients achieve good outcomes, improve practices’ quality metrics, and produce a return on investment that assures long-term sustainability and access to care – the patient now has access to two providers, their community pharmacist and their physician.” Working with Dr. Hsieh’s practice has enhanced the role that community pharmacists play in clinical care, and is proving that providing high-quality accountable care produces positive outcomes for everyone.

“It is exciting to work with Tyro Family Pharmacy and Northwest Community Care Network, and to redefine primary care with integrated pharmacists to enhance quality and value for our patients,” says Dr. Hsieh. “They have been instrumental in assisting our efforts to improve quality, closing care gaps and educating our patients on medication compliance. I anticipate that we will see improvement in our quality measures to assist us with our MIPS efforts in 2017.”

** Medicare Star ratings measure on a 1-5 star scale how well Medicare Advantage and Part D prescription plans perform*



Attendees listen to a presentation during the Newport Meet and Greet in mid-April.



CCPN Board of Managers

Greg Adams, M.D.,
Boone, NC

Debbie Ainsworth,
M.D.,
Washington, NC

Terry Daniel, M.D.,
Vice Chairman
Eden, NC

Allen Dobson, M.D.,
Chairman
Mt. Pleasant, NC

Stephen S. Hsieh,
M.D., Lexington, NC

Larry D. Mann, M.D.,
Raleigh, NC

Ted Nifong, M.D.,
Winston-Salem, NC

Survey Shows Cost Is Biggest Purchasing Issue

One hundred thirty-nine practices responded to the CCPN purchasing survey this spring. Thank you for such a great response!

The survey asked various questions about practice purchasing procedures for vaccines, administrative supplies, medical/patient care supplies, office equipment and information technology.

In addition, respondents provided information about purchase frequency, satisfaction with current vendors, annual amounts spent, vendor contracts, what could be improved/changed with current vendors and how willing practices are to change vendors.

Cost ranked as the number one thing practices said they would improve about vendors. Most respondents said they would be willing to change vendors for significant cost savings. Here are some additional highlights:

Vaccines

Two-thirds of practices purchase vaccines directly from the manufacturer. Annual cost per unit responses are still being analyzed.

Administrative Supplies

Most practices reported having a contract for administrative supplies, but the contract is for a year or less.

Medical/Patient Care Supplies

Almost all respondents spend less than \$300,000 annually on medical supplies

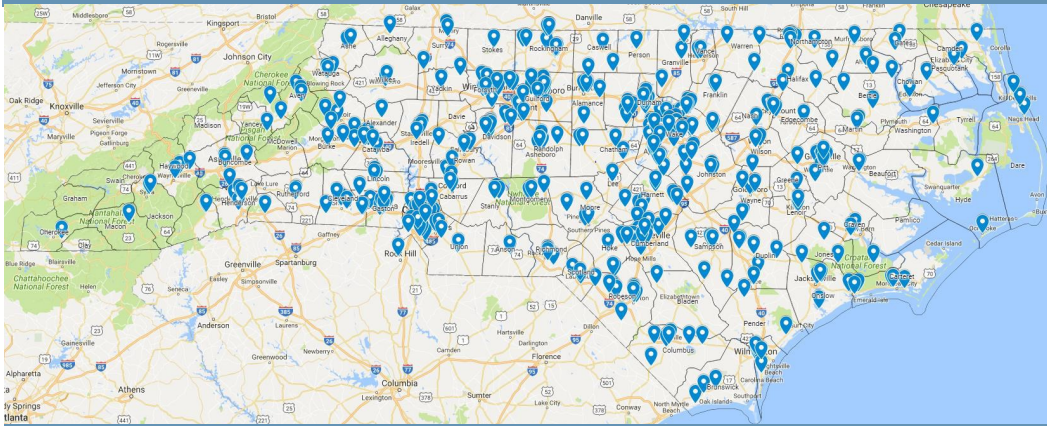
Office Equipment and IT

Nearly all practices indicated they purchase office and IT equipment only on an as-needed basis and spend less than \$100,000 annually on office equipment and IT.



At a spring meeting are network leaders from CCWJC network – Dr. Bob Bilbro, Associate Medical Director; Tara Kinard, Executive Director and Dr. Betsey Tilson, Medical Director.

CCPN: Spanning North Carolina



As of May 1, 2017

609 Practices

1,964 Clinicians

CCPN now includes Primary Care and Behavioral Health Clinics that are part of the following FQHC organizations

Advance Community Health

Anson Regional Medical Services

Bakersville Community Health Center

Bertie County Rural Health Association

Blue Ridge Community Health Services

Cabarrus Rowan Community Health Centers

Carolina Family Health Centers

Caswell Family Medical Center

CommWell Health

First Choice Community Health Center

Gaston Family Health Services

Goshen Medical Center

High Country Community Health

Kinston Community Health Center

Lincoln Community Health Center

Metropolitan Community Health Services

MERCE

MedNorth Health Center

Ocracoke Community Health Center

Person Family Medical Center

Piedmont Health Services

Roanoke Chowan Community Health Center

Robeson Health Care Corporation

Rural Health Group

Stedman-Wade Health Services

Triad Adult & Pediatric Medicine

United Health Centers

West Caldwell Health Council

Western NC Community Health Services

Welcome New Practices

Agape Community Health Clinics

Eagle Medical Center

Gaffney Health Services

Horizons Health

Lacy Colson, MD

Holly Springs Pediatrics

Home Town Direct Care

S.M. Shah, MD, PA

Starlight Pediatrics

Walk-In Family Care

Western Carteret Medical Center

Wilmington Health Access for Teens

Click for a full list of CCNP practices



Tell Us What's Changed

Have clinicians joined or left your group?

Have you recently changed addresses, phone numbers, or tax identification numbers?

Please let us know!

Getting Involved

Want to know more about CCPN committees and how you can get involved with CCPN?

Contact Us

Denise Levis Hewson
Chief Operating Officer, CCPN
dlevis@n3cn.org

Torlen Wade
Executive Vice President, CCNC
twade@n3cn.org



2300 Rexwoods Drive
Suite 140
Raleigh, NC 27607

Contact Shelley Keir at: skeir@n3cn.org. Submit changes to Shelley Keir at: skeir@n3cn.org.