



New Mexico Medicaid Primary Care Payment Reform

Performance measures to drive improved member health outcomes

Primary care is the foundation of thriving health care systems. Effective primary care is accessible, comprehensive (addressing preventative and acute concerns), whole-person, continuous, and based on trusted relationships between clinicians and patients. Studies show that every \$1 spent on primary care leads to \$13 in savings¹. However primary care providers are some of the lowest paid clinicians.

The Primary Care Payment Reform project is a **multi-year, 3-tiered quality framework** focused on understanding and improving access to care, patient experience of care, and reporting standards for primary care practices in order to **drive better member health outcomes**.

HEALTH EQUITY | WORKFORCE SUSTAINABILITY | HEALTH TECHNOLOGY

| Benefits to Providers & Practices | Benefits for Patients & Families |
|---|---|
| Sustainable workforce and improve workplace wellness Payment for care of patients Increased flexibility and administrative efficiency Team-based care approach Increased time with patients Sustainable financial models Improved IT resources | Increased health equity Increased access Better health care quality Whole-person, team-based care Integrated behavioral health, dental, and vision services Connection to social services and community resources |

Tier 1 of 3 Performance Measures Began July 1, 2024

HCA determined the performance measures by listening to and incorporating extensive stakeholder input from the Primary Care Council, primary care providers, and others. The payment reform model measures access to care and patient experience of care, starting with a pay-for-reporting model for the first 18 months to allow providers time to improve processes and train staff, then transitioning to a pay-for-performance model.

| Encounter Acceptance Rate Measure | Encounter Completion Rate Measure | Third Next Available Appointment Measure | Screening, Brief Intervention & Referral to Treatment (SBIRT) Measure | Patient Experience (PE) of Care Measure |
|--|--|---|---|--|
| Analyzed data of the number of accepted claims/encounters compared to the number of accepted and rejected claims/encounters. | Analyzes data of the number of accepted claims/ encounters compared to the number of patient visits for provider-rendered services by the practice by MCO. | Identifies the avg. length of calendar days between the day a patient requests a PCP appt. and the third next available appointment for a new patient physical, routine exam, or return visit exam. | Operationalize SBIRT, a comprehensive approach to early intervention and treatment of substance use disorders, over 9-month period to train staff and new workflows | To be implemented over a 9-month period, PCPs will collect and report the PE data based on the specified measures. |

¹ National Academies of Science, Engineering, and Medicine, [Implementing High-Quality Primary Care](#), 2021
 Questions? See the [Primary Care Council web page](#) or email us at NewMexicoPCPM@healthmanagement.com