Received from the Systematic Review of CMMI Primary Care Initiatives

Client: U.S. Department of Health and Human Services, Centers for Medicare & Medicaid Services, Office of Minority Health

Project Overview

The Comprehensive Primary Care (CPC) Initiative was launched in 7 markets, each of which contained approximately 75 participating primary care practices. The CPC seeks to promote collaboration between public and private health care payers to help primary care practices achieve a 3-part goal in health care delivery: better care for the individual, better health outcomes for populations, and lower costs through improvement of the care delivery processes. The purpose of this study is 1) to evaluate the CPC’s effects on cost, quality, and patient and provider experience, and 2) to provide ongoing rapid cycle feedback to CMS, providers, purchasers, and other stakeholders to promote learning and ongoing improvements at both the practice and market levels.

As part of this study, the project team is designing and conducting a systematic review of qualitative and quantitative findings of 6 primary care initiatives conducted by the Center for Medicare & Medicaid Innovation:

- Multi-Payer Advanced Primary Care Practice (MAPCP) Demonstration
- Federally Qualified Health Center (FQHC) Advanced Primary Care Practice (APCP) Demonstration
- Comprehensive Primary Care Initiative
- Independence at Home (IAH) Demonstration
- Primary care models included in the State Innovation Models (SIM) Initiative
- Primary care models included in the Health Care Innovation Awards (HCIA)

As a subcontractor to Mathematica Policy Research, Insight is coordinating, conducting, and analyzing telephone interviews with patients of practices participating in the CPC initiative. Insight is conducting the majority of the interviews with patients receiving care management, and is also interviewing patient/family representatives of participating practices’ Patient and Family Advisory Councils.

As part of the research, Insight will:

- Develop interview guides.
- Recruit interview participants.
- Conduct 52 interviews with patients and patient/family representatives.
- Develop a coding scheme and code and analyze results.
- Produce analytic summary tables and help develop the final report and affiliated materials.

Core Activities

Interview Protocol Design and Development; Qualitative Data Collection; Report Development

Products

- The summary report on participant interview findings will be submitted in July 2015.
- The final report to CMS will be submitted in December 2017.