PRINCIPAL ACCOUNTABLE PROVIDER (PAP)

- **If I am a PAP, do I still get paid with the same regularity (e.g., when I bill do I get paid now or must I wait until everyone in the group has billed?)**

  Yes. All providers, PAPs included, will continue to bill separately for services delivered and will receive reimbursement according to existing fee schedules as they do today. The sharing of savings or excess costs will be determined on a regular basis based upon a provider’s average costs across all episodes within a given performance.

- **Do providers choose if they want to be a PAP? Is participation required?**

  The PAP is designated by the payer based on three criteria: decision making responsibility, the ability to coordinate or direct other providers delivering care, and responsibility for a meaningful share of costs or volumes. The calculation is completed using claims data and does not require input from the provider. A provider cannot opt in or out of the role of being a Principal Accountable Provider.

- **Why would I want to be a PAP?**

  The PAP has the opportunity to share in savings when care is delivered at a cost below the commendable threshold. The gain sharing is a financial benefit the provider can see directly. PAPs will also receive performance reports to help understand costs and quality drivers.

- **How do PAPs get their performance data? What information is included?**

  Providers will access performance data and the new reports via a secure online web portal. Reports will contain performance information related to both quality and cost. Payers will follow a standard report format, and include all PAP-relevant episode types in each report. Providers will receive separate reports from each payer, though all will include episode-level detail. Reports will be issued regardless of whether minimum caseload has been met. The secure site will include guides to reading the reports and links to additional information about the initiative.

- **I'm not a PAP. Am I eligible for gain sharing?**

  Initially, only PAPs will be eligible for gain sharing payments from the payers.

- **What administrative changes are involved when I become a PAP?**

  No specific changes are required for episodes without Provider Portal entry. For episodes with Provider Portal entry, PAPs will be required to enter limited information online later this year. Principal Accountable Providers may choose to invest in further coordination of care and are encouraged to take a holistic view of their patients care.
■ **What happens if another provider drives the cost? Will the PAP be responsible for this cost?**

In any one case, another provider may contribute to greater expense for patients being cared for by a PAP. Even so, PAPs remain accountable for the average cost of care across all of their episodes. If on average, the episodes in a performance period are above the acceptable limit, then they will be responsible for the sharing of excess costs. This is intended to reward providers for coordinating care with high-quality, efficient providers.

■ **Will a patient still have to have a referral from my PCP to receive services from a PAP?**

The episode model operates with the current system. The vast majority of current referral requirements will remain in place. Each payer will determine exact changes separately and communicate those clearly to their members.

■ **What about providers who have the sickest patients?**

When the provider’s performance is evaluated, a number of steps are taken to ensure that the measurement is fair. Adjustments may be made for patient risk/severity and outlier cases are excluded. Provider level adjustments may include stop-loss provisions, adjustments for providers in areas with poor physician access, cost-based facilities, differences in regional pricing, and exclusions for providers with low case-volume.

■ **How is the PAP assigned for care delivered in an ER?**

It depends on the episode, but generally the episode-specific guidelines for PAP assignment still apply to care provided in an ER, and have been developed taking these instances taken into account.