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**Alternate Payment Model (APM) 101 -  
What We Really Need To Know**

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**AAMD VIRTUAL 46<sup>TH</sup> ANNUAL MEETING** **JAZZED ABOUT DOSIMETRY**


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- These need to be completed by Thursday, July 15

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## Notices



When a third-party payer is involved, the determination of reimbursement for services is the decision of the individual insurance company based on the patient's policy and the third-party payer guidelines. No guidance can adequately address reimbursement issues for the hundreds of insurance payers that exist. Efforts have been made to ensure the information was valid at the date of presentation. Reimbursement policies vary from insurer to insurer and the policies of the same payer may vary within different U.S. regions. All policies should be verified to ensure compliance. Therefore, it is essential that each payer be contacted for their individual requirements.



The websites listed in this presentation are current and valid as of the date of this presentation. However, webpage addresses and the information on them may change or disappear at any time and for any number of reasons. The attendee is encouraged to confirm or locate any URLs listed here that are no longer valid.



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## Objectives

Understand the recent reimbursement updates from Medicare impacting radiation oncology

Define the expectations and requirements that have been published for the RO APM

Understand how clinical workflows and EMR system customization may be impacted to allow for required reporting

Identify how this model may shift clinical practice patterns, treatment techniques and fractionation

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## Disclaimer

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Information consistent with Medicare publications available to the public

No new information or resources since announcement of delay

Changes in model may occur prior to implementation

Financial examples included in presentation

- Utilize 2018 reimbursement amounts
- Based on services performed in a facility setting
- Centered on common practice patterns and equipment
- Do not account for practice specific payment adjustments and factors

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## What Is An Alternative Payment Model?

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Departure from fee-for-service  
reimbursement method

Episodic  
payments based  
on diagnosis

Modality  
agnostic

Site-neutral

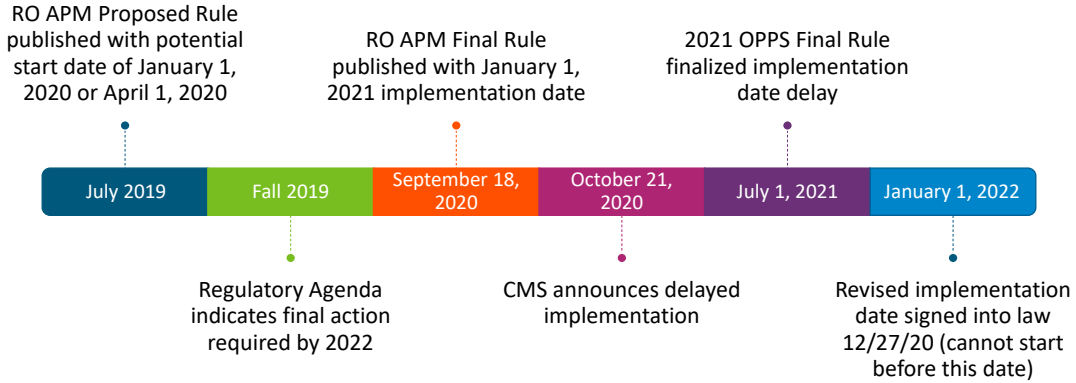
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# RO APM Timeline



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# Key Points

Mandatory for Traditional Medicare Only	At least a 4-year program	Participants selected randomly via CBSA
Includes typical radiation oncology settings	16 cancer types	Common treatment techniques

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## Episodic Payment



**90-DAY EPISODE OF CARE**



**50% OF PAYMENT AT INITIATION**



**50% OF PAYMENT AT COMPLETION**

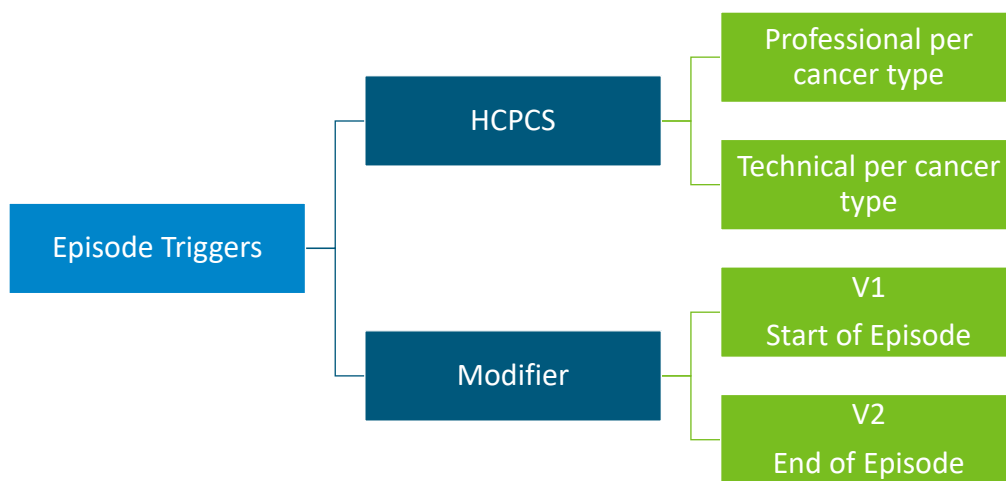
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## Episode Triggers

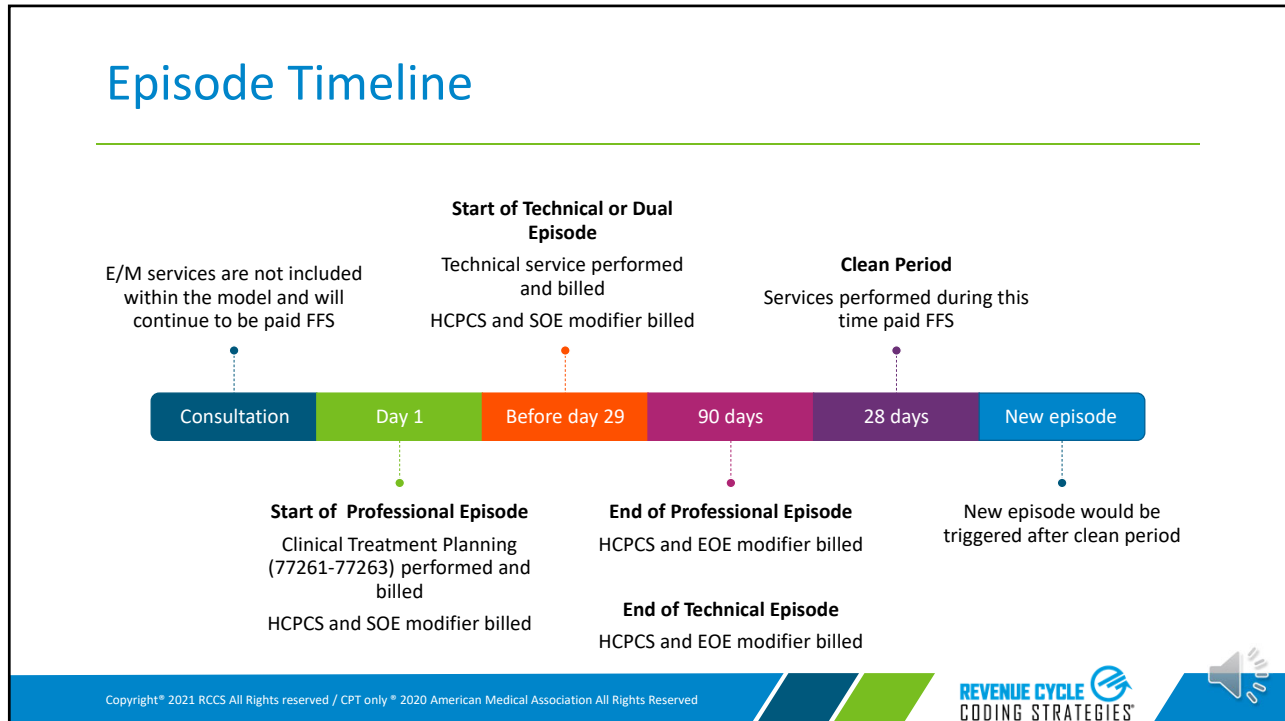


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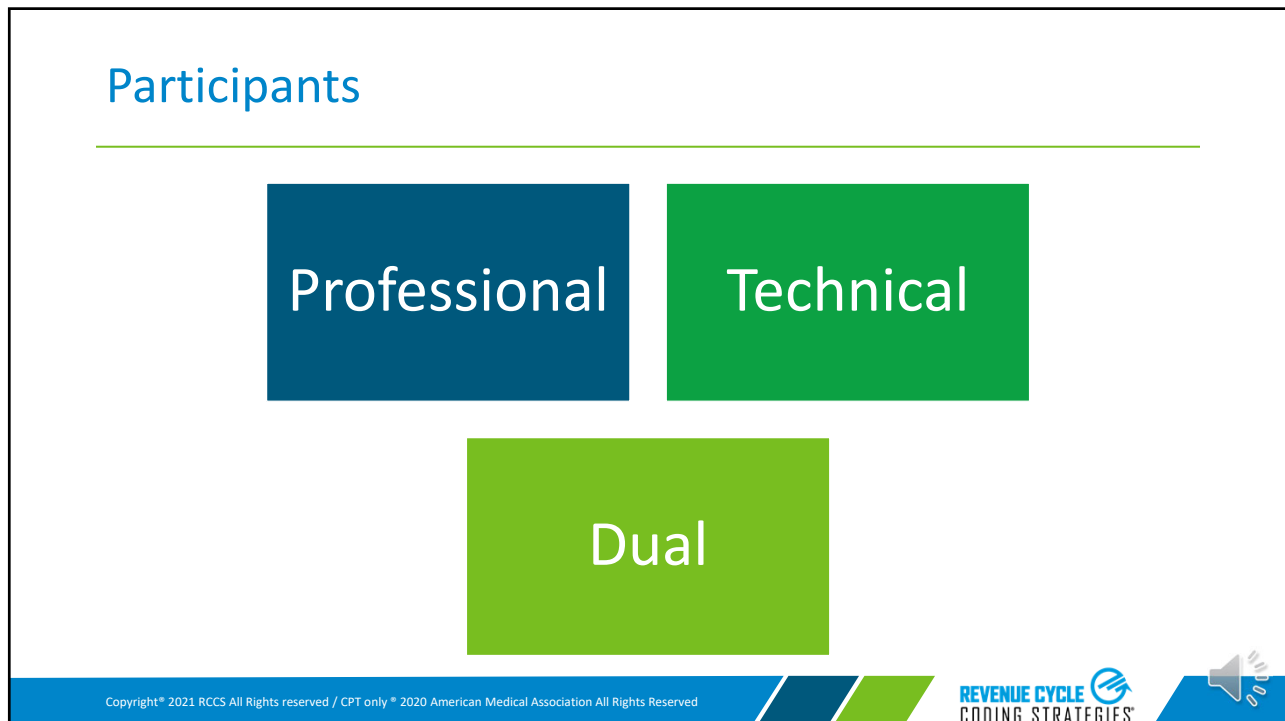
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# Participants

## Core Based Statistical Areas (CBSAs)

Randomly selected

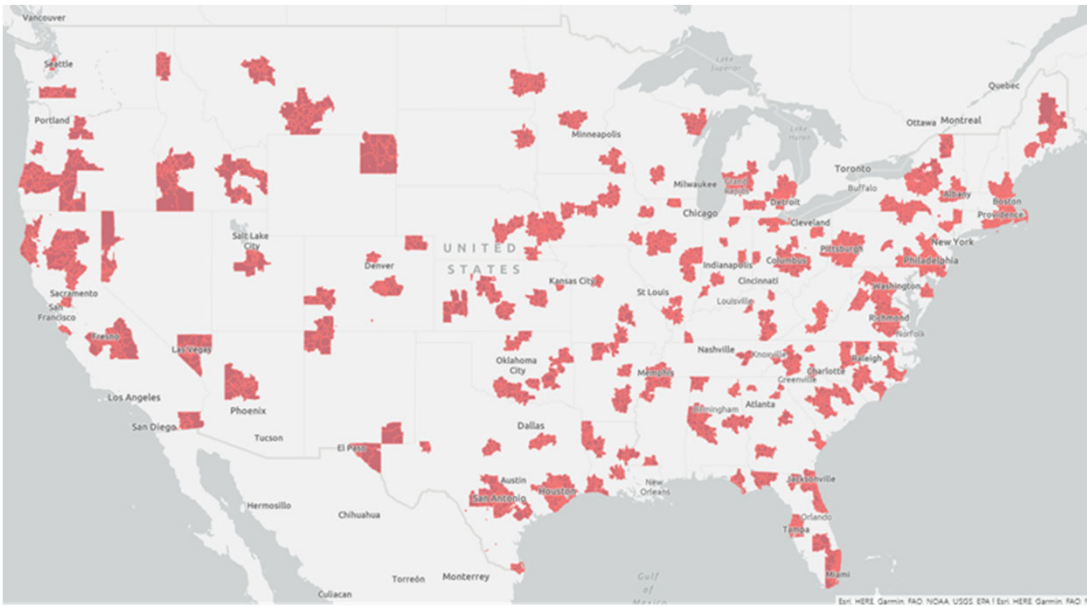
Linked by zip codes for service location

Non-selected paid under FFS as "control group"

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Map courtesy of Health Management Associates

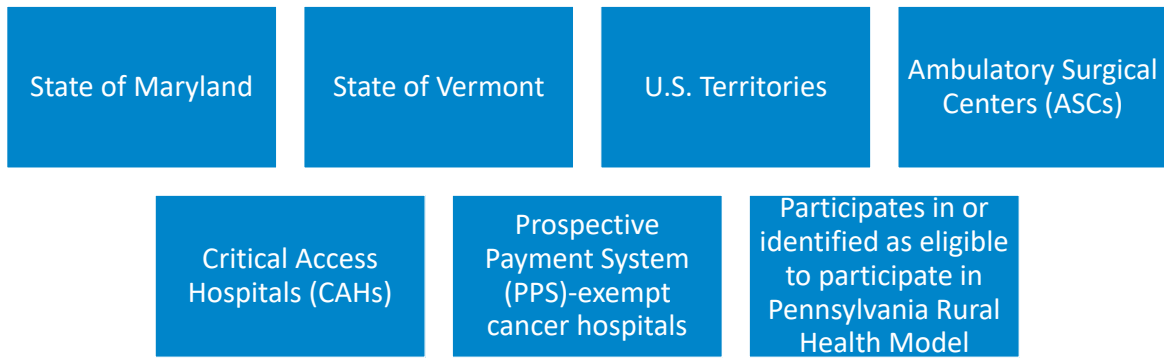
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## Excluded Participants

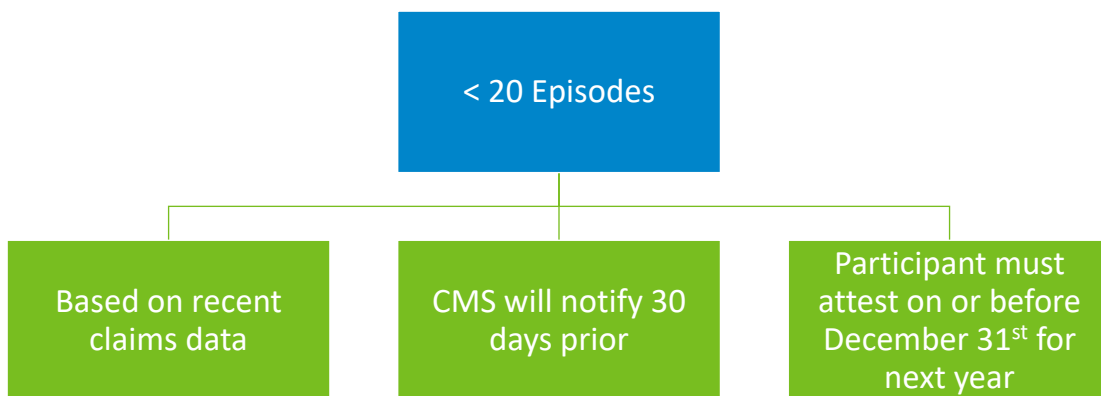


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## Low Volume Opt-Out



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## Cancer Types

16 cancer types selected

Commonly treated with radiation

Majority of all incidence of cancer types

Demonstrated pricing stability

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Cancer Type	ICD-10 Codes
Anal	C21.xx
Bladder	C67.xx
Bone Metastases	C79.5x
Brain Metastases	C79.3x
Breast	C50.xx, D05.xx
Cervical	C53.xx
CNS Tumors	C70.xx, C71.xx, C72.xx
Colorectal	C18.xx, C19.xx, C20.xx
Head and Neck	C00.xx, C01.xx, C02.xx, C03.xx, C04.xx, C05.xx, C06.xx, C07.xx, C08.xx, C09.xx, C10.xx, C11.xx, C12.xx, C13.xx, C14.xx, C30.xx, C31.xx, C32.xx, C76.0x
Liver	C22.xx, C23.xx, C24.xx
Lung	C33.xx, C34.xx, C39.xx, C45.xx
Lymphoma	C81.xx, C82.xx, C83.xx, C84.xx, C85.xx, C86.xx, C88.xx, C91.4x
Pancreatic	C25.xx
Prostate	C61.xx
Upper GI	C15.xx, C16.xx, C17.xx
Uterine	C54.xx, C55.xx

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## Exclusions



**Excluded**

- Benign neoplasms
- Cancers rarely treated with radiation
- Skin cancer diagnoses
- Kidney (excluded per Final Rule)



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## Modalities



**Included**

- 3D
- IMRT
- SRS
- SBRT
- Proton
- IGRT
- Brachytherapy



**Not Included**

- IORT
- Hyperthermia
- SIRT
- Electronic Brachytherapy
- Neutrons
- Radiopharmaceutical Therapy
- Superficial/Orthovoltage



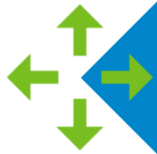
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## Pricing Methodology



National base rate assigned per diagnosis

- 90-day episode
- Professional rate
- Technical rate



Adjustments applied for:

- Trend factor
- Locality
- Historical experience
- Discount factor
- Incorrect payment withhold

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Table 3 -National Base Rates by Cancer Type (in 2018 Dollars)

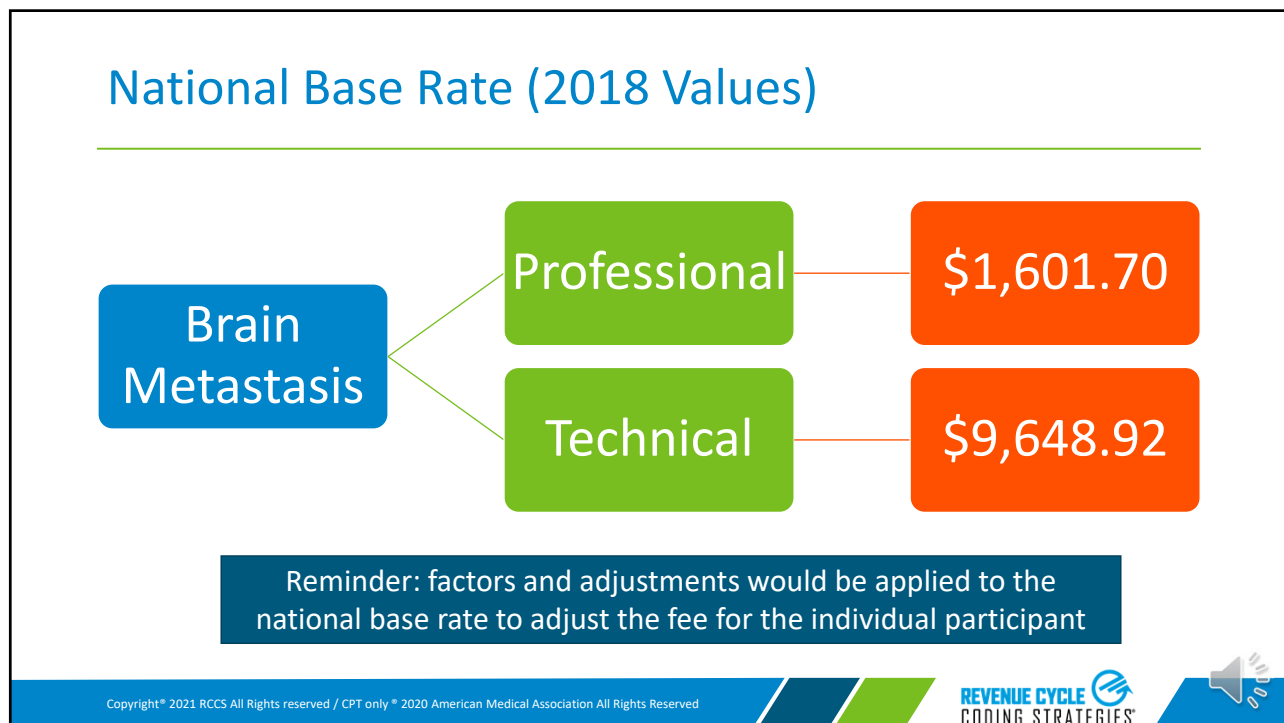
RO Model-Specific Placeholder Codes	Professional or Technical	Cancer Type	Base Rate
MXXXX	Professional	Anal Cancer	\$3,001.19
MXXXX	Technical	Anal Cancer	\$16,543.53
MXXXX	Professional	Bladder Cancer	\$2,688.35
MXXXX	Technical	Bladder Cancer	\$13,291.62
MXXXX	Professional	Bone Metastases	\$1,398.14
MXXXX	Technical	Bone Metastases	\$5,971.73
MXXXX	Professional	Brain Metastases	\$1,601.70
MXXXX	Technical	Brain Metastases	\$9,648.92
MXXXX	Professional	Breast Cancer	\$2,081.47
MXXXX	Technical	Breast Cancer	\$10,128.61
MXXXX	Professional	Cervical Cancer	\$3,829.34
MXXXX	Technical	Cervical Cancer	\$17,581.18
MXXXX	Professional	CNS Tumor	\$2,510.55
MXXXX	Technical	CNS Tumor	\$14,711.14
MXXXX	Professional	Colorectal Cancer	\$2,449.38
MXXXX	Technical	Colorectal Cancer	\$12,039.84



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Table 3 -National Base Rates by Cancer Type (in 2018 Dollars)			
RO Model-Specific Placeholder Codes	Professional or Technical	Cancer Type	Base Rate
MXXXX	Professional	Head and Neck Cancer	\$3,019.00
MXXXX	Technical	Head and Neck Cancer	\$17,485.19
MXXXX	Professional	Liver Cancer	\$2,082.23
MXXXX	Technical	Liver Cancer	\$11,976.09
MXXXX	Professional	Lung Cancer	\$2,181.23
MXXXX	Technical	Lung Cancer	\$11,993.83
MXXXX	Professional	Lymphoma	\$1,690.41
MXXXX	Technical	Lymphoma	\$7,854.53
MXXXX	Professional	Pancreatic Cancer	\$2,394.14
MXXXX	Technical	Pancreatic Cancer	\$13,384.14
MXXXX	Professional	Prostate Cancer	\$3,260.97
MXXXX	Technical	Prostate Cancer	\$20,248.82
MXXXX	Professional	Upper GI Cancer	\$2,585.57
MXXXX	Technical	Upper GI Cancer	\$13,530.21
MXXXX	Professional	Uterine Cancer	\$2,435.59
MXXXX	Technical	Uterine Cancer	\$11,869.29

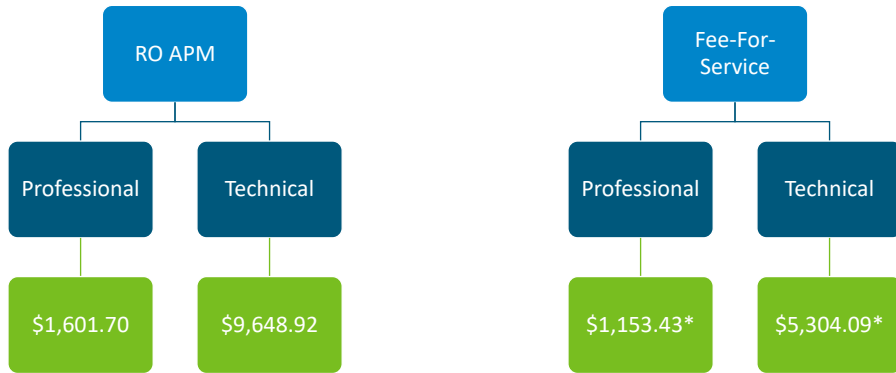
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## Comparison to Fee-For-Service

Example: 10 fraction 3D conformal whole brain irradiation in a hospital outpatient department



\* Does not include adjustments and withhold

## Workflow Changes



Identify



Evaluate



Communicate



Track



Report

## Identify



### Beneficiaries

- Determine patients required to participate
- Not all patients will be participants
- Based on patient's insurance

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## Roadblocks



Review each  
patient

Review each  
episode

Requires  
accurate payer  
information

Prior to start  
of treatment  
course

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## Evaluate

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Evaluate  
Case to  
Confirm:

Diagnosis

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Modality

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Previous Treatment

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## Roadblocks

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Accurate  
documentation  
of diagnosis

Review of ICD-  
10-CM list

Defined  
treatment  
modality

Evaluate timeline  
of previous  
episode

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## Best Practice

Engage front  
desk staff

Evaluate at  
time of  
consultation

Notify staff

- Alert
- EMR Icon



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## Track



Timeline

- Start of Professional Episode
- Completion of Treatment
- End of Episode
- Clean Period

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## Recommendations

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Electronic  
Systems

Tasks

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Scripting

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System Edits

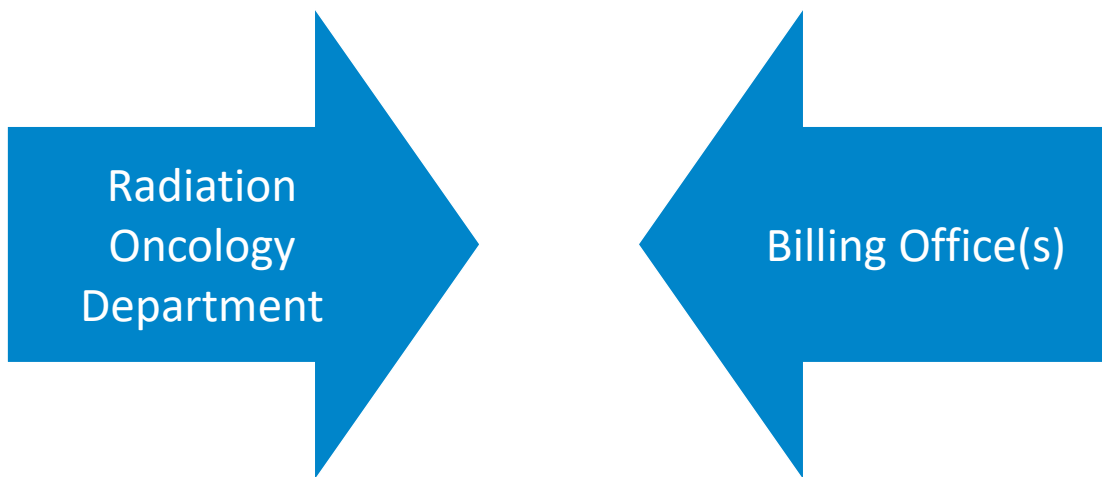
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## Communication

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## Key Communication

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### Department

- Collaboration between professional and technical charges

### Billing Office

- Patients included in the model
- Billing data (HCPCS codes / modifiers)
- Alert if recently treated
- Start/End of treatment and episode

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## Report

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Data related to four quality measures defined in the model

Basic clinical information not available on claims or captured in other quality measures

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## Clinical Data

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Prostate, breast, lung,  
bone and brain  
metastasis

Cancer stage

Disease  
involvement

Treatment  
intent

Specific  
treatment plan  
information

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## EMR Functionality

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Look for system updates and  
new functionality

Implement new workflow to  
capture discrete data elements

Set expectations for provider  
documentation

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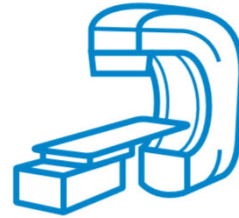
## Clinical Impact



Fractionation



Modalities



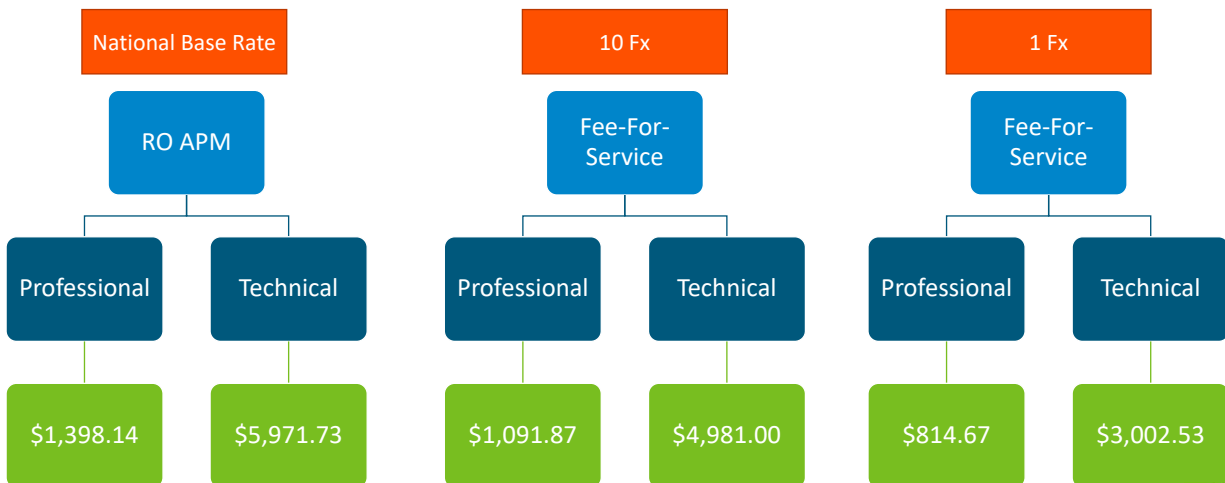
Equipment

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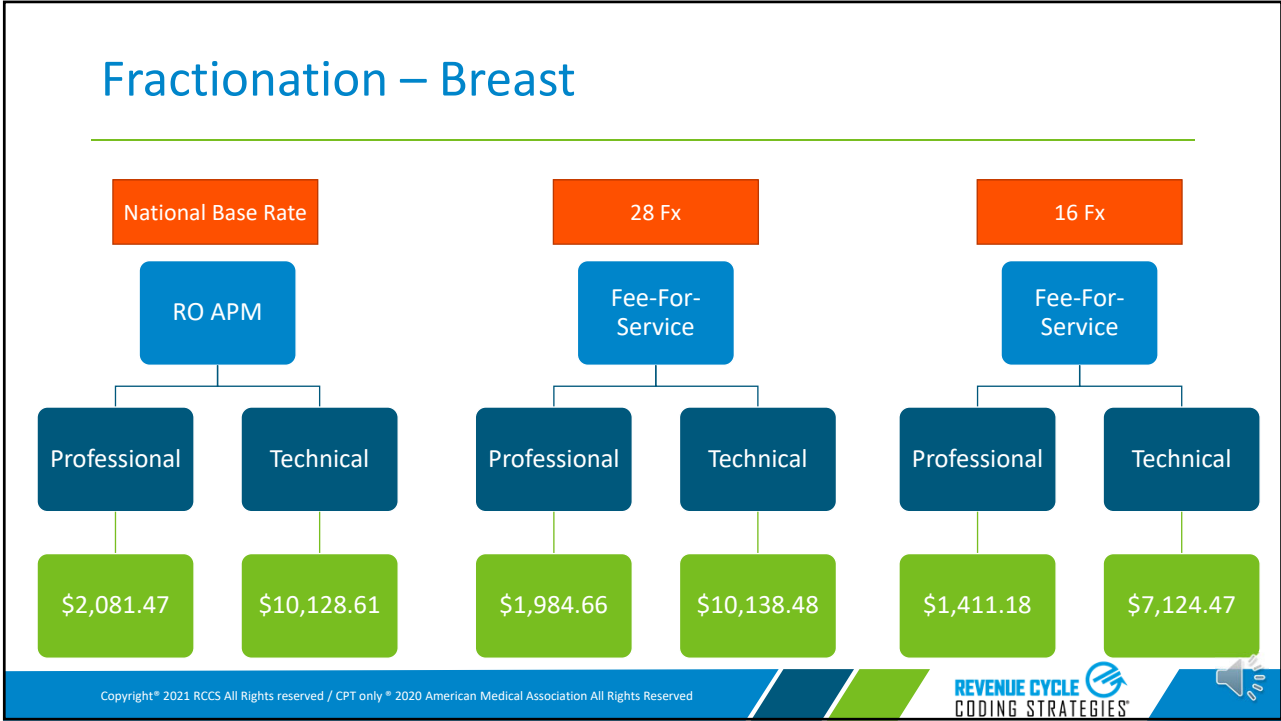
## Fractionation – Bone Metastasis



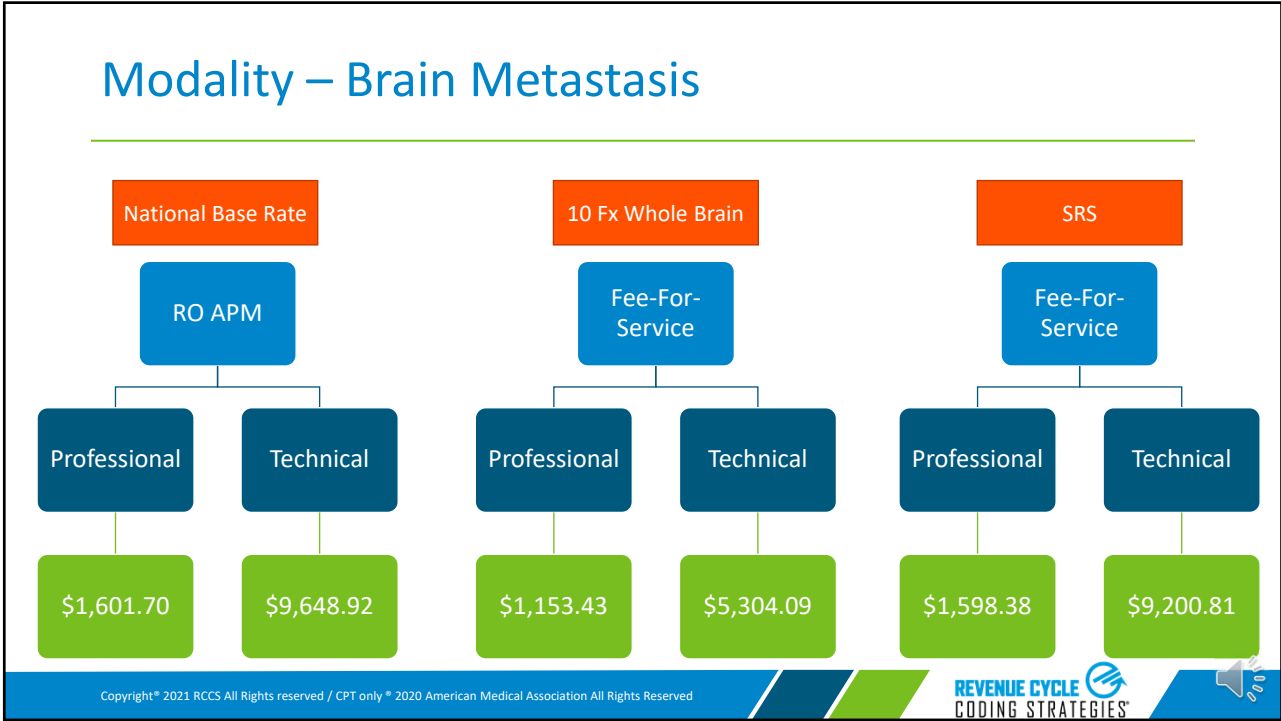
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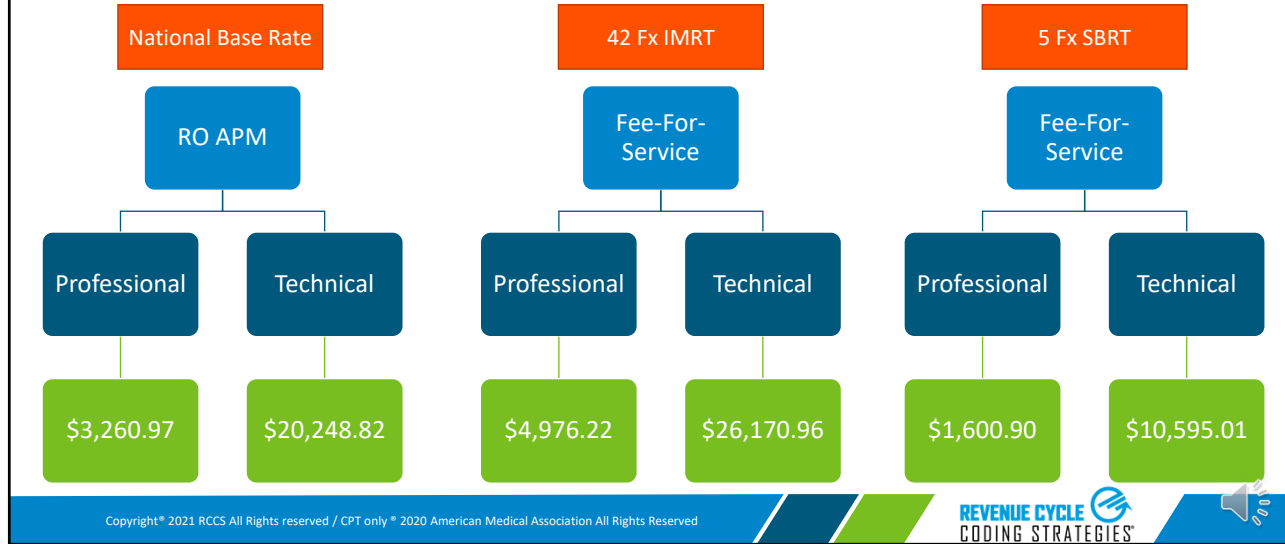


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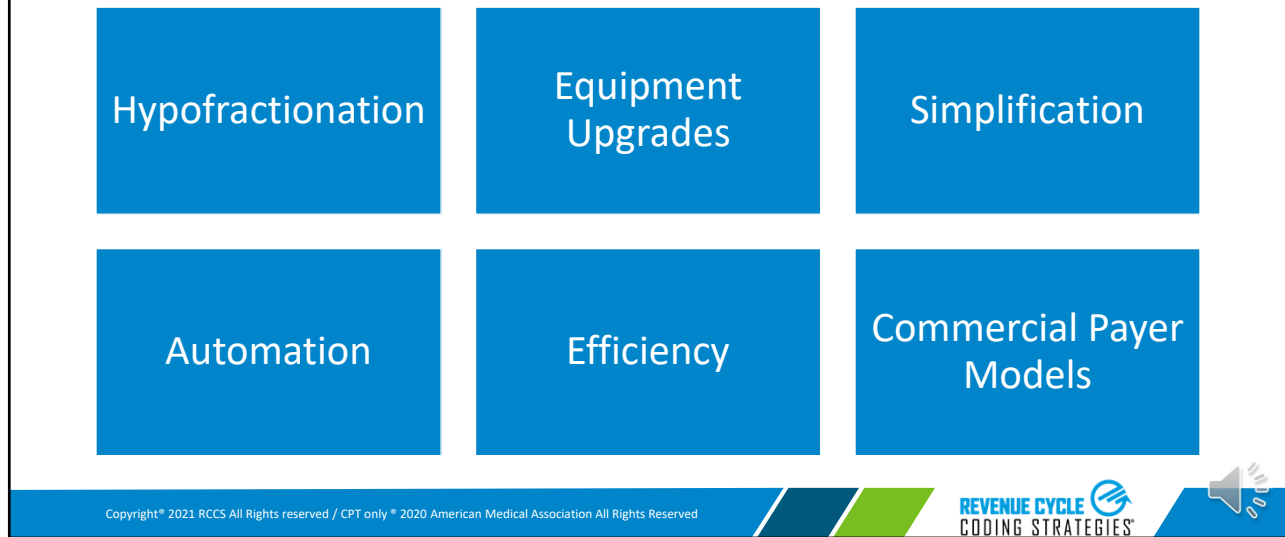
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## Modality – Prostate



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## Potential Future Trends



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## RO Model Resources

- **Publications**

- Final Rule
- Press Release
- Frequently Asked Questions
- Fact Sheet
- Participating ZIP code list
- Beneficiary letter
- Clinical Data Elements Informal Request for Information

- **Events**

- Special Listing Session – Onboarding Radiation Oncology Model Participants
- Radiation Oncology Model 101

- **RO Connect**

- Resource site for participants
- Library of resource documents
- Audio-visual recordings

<https://innovation.cms.gov/innovation-models/radiation-oncology-model>

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