



Department
of Health

New York State Patient Centered Medical Homes Quarterly Report



September 2022

Program Highlights and Background

A Patient-Centered Medical Home (PCMH) is a model of care where each enrollee has an ongoing relationship with a personal physician and a care team. The physician and care team, which can include nurse practitioners, physician assistants, registered nurses, social workers, and care coordinators, take collective responsibility for meeting all the enrollee's health care needs. The PCMH model also emphasizes greater care through open scheduling, expanded hours, enhanced communication among all involved with an enrollee's care, and any other means to ensure that an enrollee obtains proper care in a culturally and linguistically appropriate manner. NCQA's PCMH recognition is awarded to practices and their providers that meet a set of predetermined standards for providing high quality primary care services.

On April 1, 2018, the New York State Department of Health (NYSDOH) released NYS PCMH, an innovative model for primary care transformation. NYS collaborated with NCQA to develop this exclusive transformation model for all eligible primary care providers in New York State. NYS PCMH will expand access to high-performing primary care which is key to improving value in health care and achieving the Triple Aim goals of improved health, better health care and consumer experience, and lower cost. NYS PCMH requires practices to achieve a higher number of criteria to achieve recognition than prior standards, with emphasis placed on behavioral health, care management, population health, value-based payment arrangements, and health information technology capabilities. As of the dates applicable to the data in this report, practices and their providers in New York State can only be recognized by the NYS PCMH standards.



NYS currently has the greatest number of practices and providers¹ with NCQA PCMH recognition compared to all other states in the country; 19.8% of all PCMH practices and 16.3% of providers in the country operate in NYS. As of September 2022, 2,279 practices and 9,257 providers have achieved recognition under the NYS PCMH standards. Smaller practices with only one provider working at the site currently make up the largest portion of NYS PCMH-recognized practices (31%).

As of September 2022, 8,567 (36%) primary care physicians (PCPs) in Medicaid managed care (MMC) were recognized as a NYS PCMH-recognized provider and over half (67%) of Medicaid managed care (MMC), Health and Recovery Plan (HARP), and HIV Special Needs Plan (SNP) enrollees were assigned to a PCMH-recognized PCP².

Office-based practitioners and Article 28 clinics recognized as NYS PCMHs by NCQA receive additional payment for primary care services through the New York Statewide Medicaid PCMH Incentive Payment Program, in two ways. For managed care enrollees, DOH provides payments to the health plans through a non-risk payment for the sole purpose of health plans making enhanced payments to qualified providers. For Medicaid fee-for-service (FFS) enrollees, payments are made to qualified providers by DOH as an 'add-on' for qualifying visits. Around \$178 million was paid to PCMH-recognized providers via increased capitation payments by MMC plans from January 2022 through September 2022.

¹NCQA recognized providers include the following credentials: Medical Doctor (MD), Doctor of Osteopathy (DO), Nurse practitioner (NP), Family Nurse Practitioner (FNP), Acute Care Nurse Practitioner (ACNP), Certified Registered Nurse Practitioner (CRNP), Adult Nurse Practitioner (ANP), Pediatric Nurse Practitioner (PNP), and Physician Assistant (PA).

²Source: Panel data is reported to the NYS Department of Health by the MMC plans quarterly. Panel data is a list of MMC enrollees and the providers they are assigned to and is not based on visit history.

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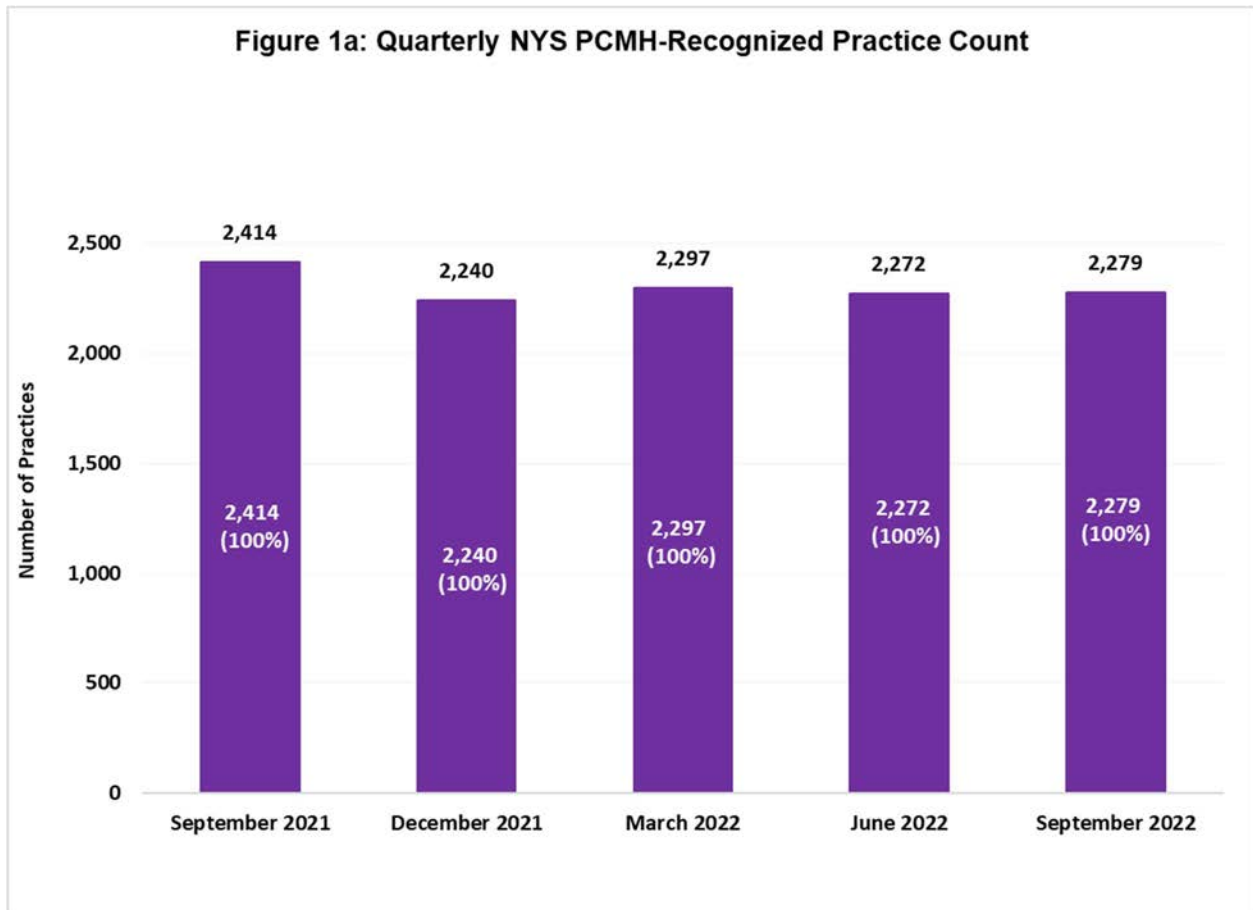
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Section 1: Practice Information

Figure 1a illustrates the number of NYS PCMH-recognized practices from September 2021 to September 2022.



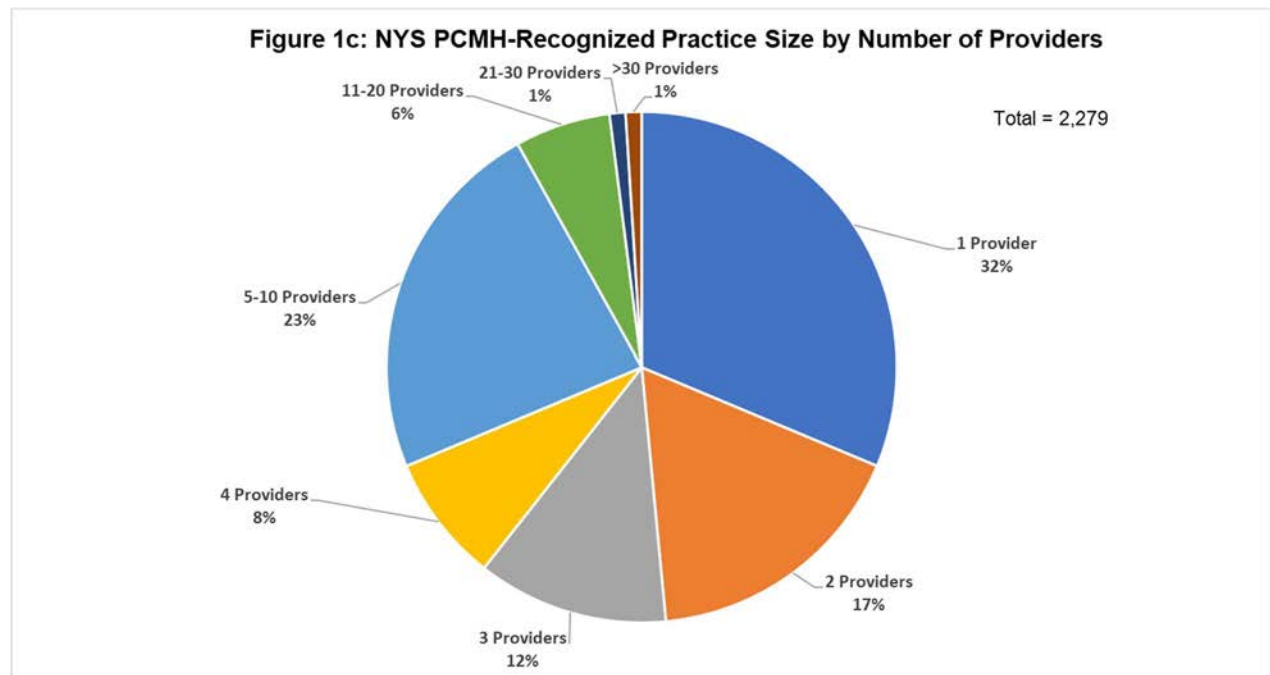
All practices are achieved by the NYS PCMH recognition and remained stable with slight variation in the number of NYS PCMH recognized practices from September 2021 to September 2022.

Section 1: Practice Information

Figure 1b shows the number and percent of all NYS PCMH-recognized practices by Quality Assurance Reporting Requirements (QARR) region. * Most recognized practices are located in the NYC (42%) and Western New York (18%) regions.

Figure 1b: NYS PCMH-Recognized Practices in NYS by QARR Region		
Region	Number of PCMH-Recognized Practices	Percent of PCMH Recognized Practices
Central	222	10%
Hudson Valley	228	10%
Long Island	237	10%
NYC	956	42%
Northeast	226	10%
Western	410	18%
All	2,279	100%

Figure 1c shows the number and percent of NYS PCMH-recognized practices in NYS by number of providers. Practices with only one reported provider (31%) make up the largest proportion of NYS PCMH-recognized practices. There is also a high proportion of practices with 5-10 providers (24%).

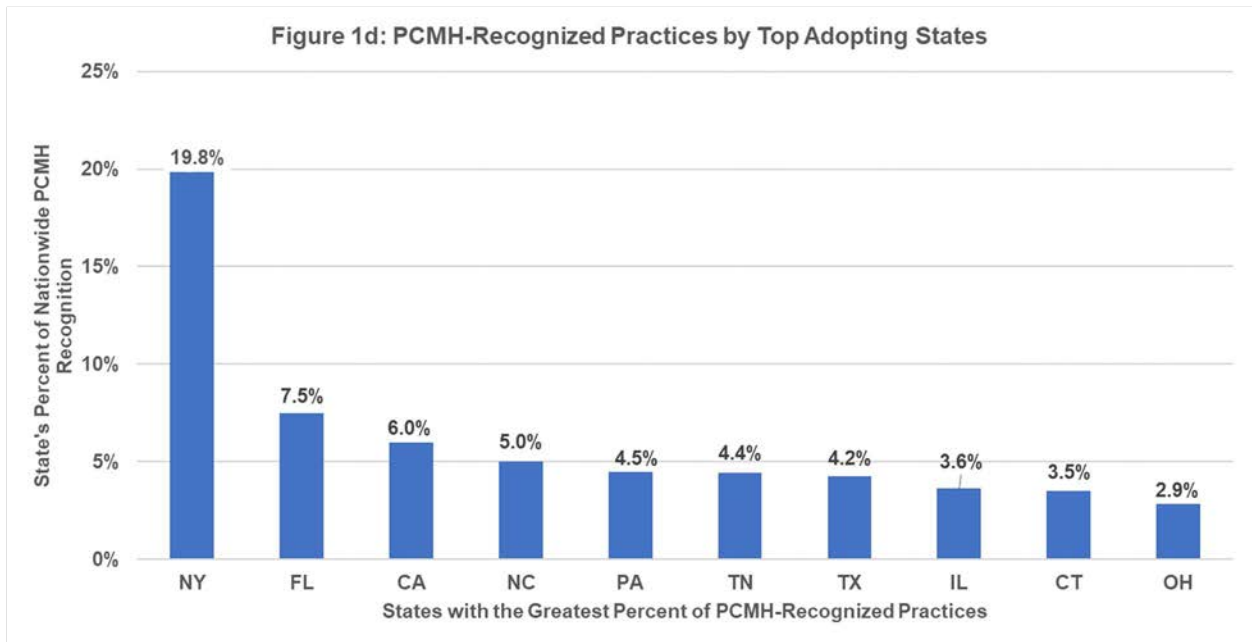


The data in Figure 1b and Figure 1c was derived from the most recently available NCQA-recognized provider lists (for this report: September 2022).

*The regions in Figure 1b are the Quality Assurance Reporting Requirements regions and can be found here: https://www.health.ny.gov/health_care/managed_care/reports/eqarr/2022/about.htm

Section 1: Practice Information

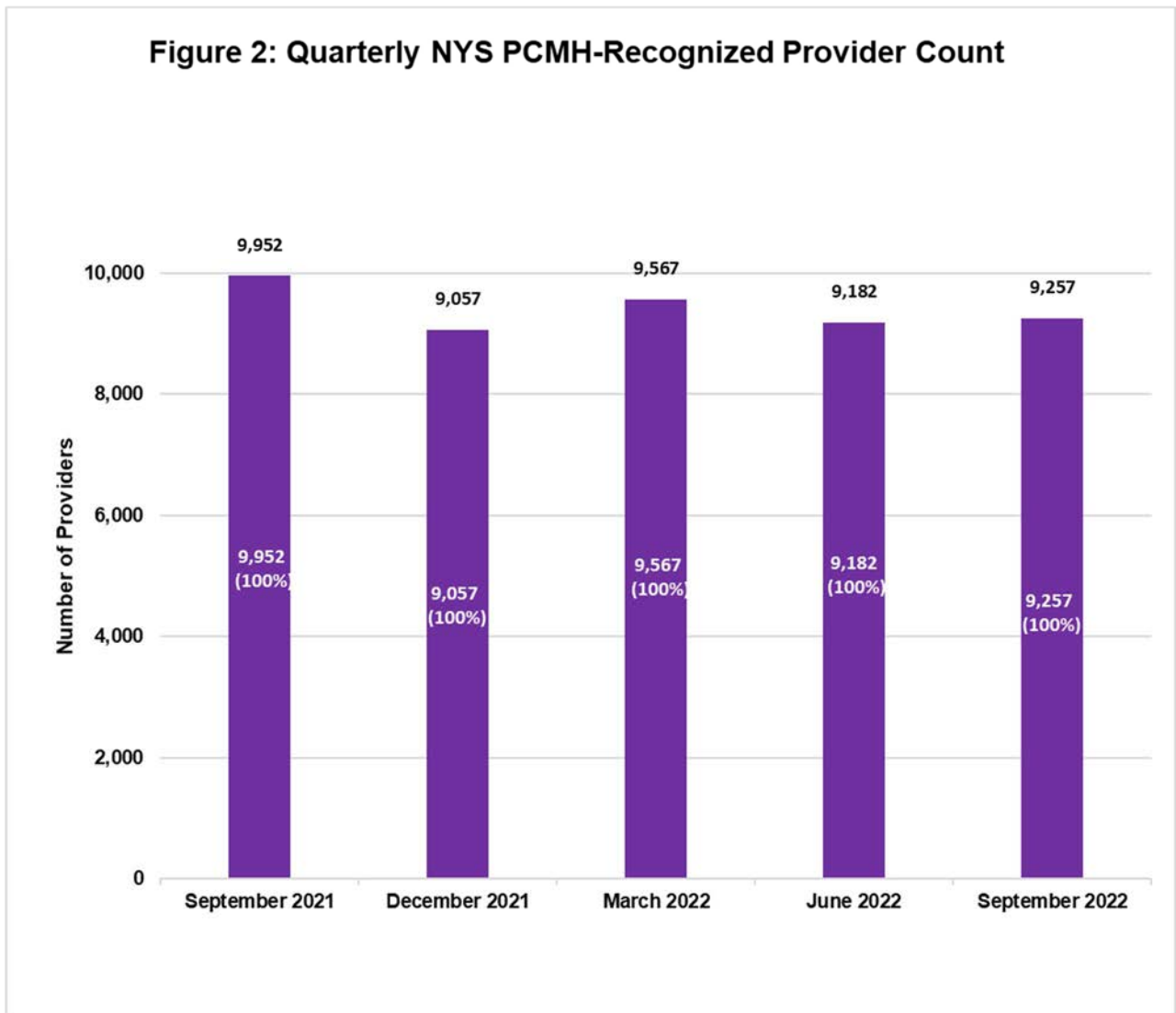
Figure 1d displays the 10 states with the most NCQA PCMH-recognized practices in the country as of September 2022. These states account for 61% of all PCMH-recognized practices in the country; all other states that are not included in this graph represent the remaining 39% of PCMH-recognized practices in the country. NYS remains the state with the highest percentage of practices with NCQA's PCMH recognition with around 20% of all PCMH-recognized practices in the country operating in NYS. Providers may participate in other primary care transformation programs that are like NCQA's model. However, this figure only represents the PCMH providers that are recognized by NCQA.



The data in Figure 1d was retrieved from NCQA's website at: <https://reportcards.ncqa.org/practices> (for this report: September 2022).

Section 2: Provider Information

Figure 2 shows the number of NYS PCMH-recognized providers from September 2021 to September 2022.



All providers have achieved NYS PCMH recognition, the number of NYS PCMH recognized providers decreased from 9,952 in September 2021 to 9,257 in September 2022.

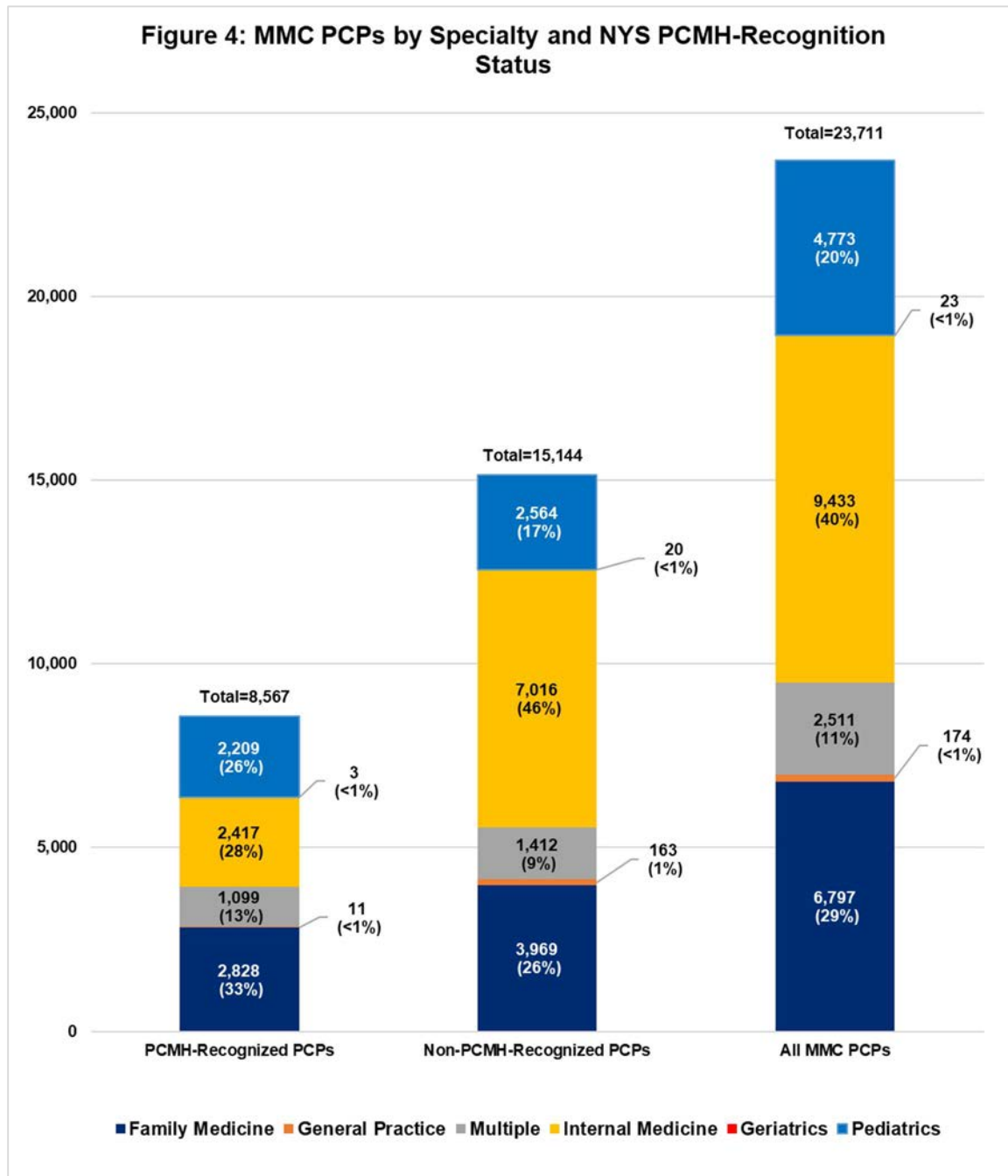
Section 2: Provider Information

Figure 3 shows the proportion of NYS PCMH-recognized PCPs that participated with MMC from September 2021 to September 2022. PCPs are defined as MDs, DOs, and NPs who have a primary or secondary specialty in Internal Medicine, Family Medicine, Pediatrics, Geriatrics, or General Practice. There are 8,567 PCMH-recognized PCPs that participate with MMC as of September 2022. Around 93% of PCMH-recognized PCPs participate with MMC. There may be other NYS PCMH-recognized PCPs that participate with FFS Medicaid that are not included in this figure. Although only 36% of MMC providers are recognized as a NYS PCMH, over half of the Medicaid population is assigned to these PCPs, indicating that these providers have large Medicaid panels. On page 13, Figure 7a shows the number of MMC enrollees assigned to NYS PCMH-recognized PCPs.

Figure 3: Proportion of All PCPs in MMC That are Recognized as a NYS PCMH by Quarter					
	September 2021	December 2021	March 2022	June 2022	September 2022
PCMH PCPs participating with MMC	8,921	8,842	8,665	8,468	8,567
All PCPs participating with MMC	23,750	25,288	23,604	22,770	23,711
PCMH Penetration Rate in MMC	38	35	37	37	36

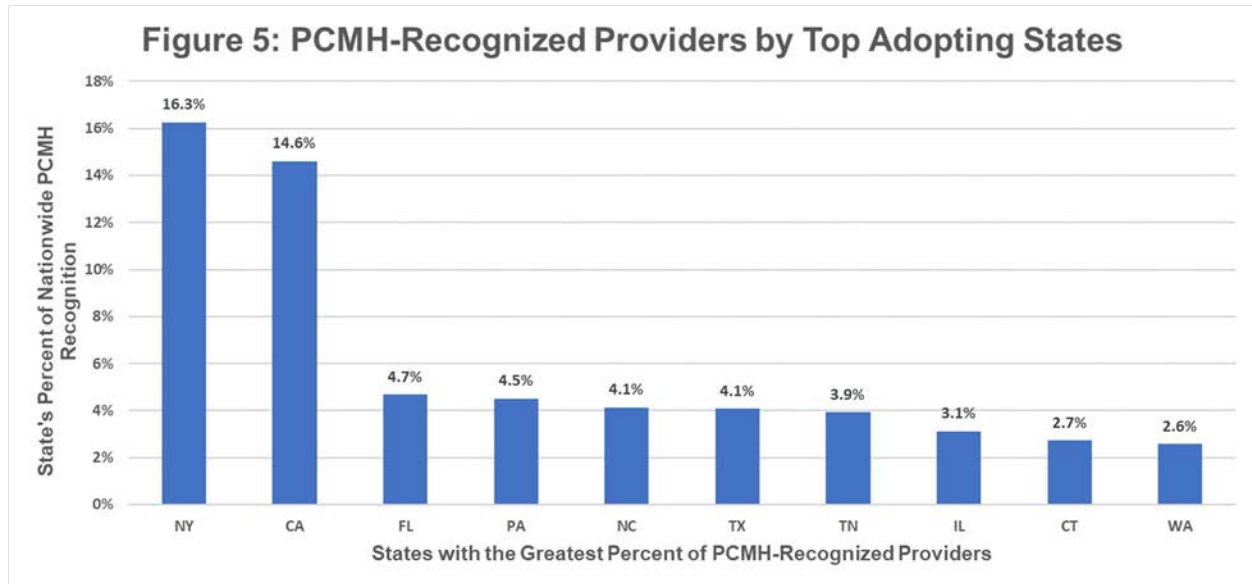
Section 2: Provider Information

Figure 4 shows the percentage of NYS PCMH-recognized PCPs, non-PCMH-recognized PCPs, and all PCPs that participate in MMC in NYS. As of September 2022, there are 690 NYS PCMH-recognized providers that do not participate with MMC or have another specialty outside of the primary care specialties presented in this report. These providers may participate in Medicaid FFS.



Section 2: Provider Information

Figure 5 displays the 10 states with the most NCQA PCMH-recognized providers in the country as of September 2022. These 10 states account for 61% of all PCMH-recognized providers in the country; all other states that are not included in this graph represent the remaining 39% of PCMH-recognized providers in the country. As of September 2022, NYS had the highest percentage of providers compared to the other states with NYS representing 16.3% of all PCMH-recognized providers in the country. Providers may participate in other primary care transformation programs that are like NCQA's model. However, this figure only represents the PCMH providers that are recognized by NCQA.



Section 3: Enrollee Information

Figure 6 shows the NYS PCMH penetration rate for MMC, HARP, and HIV SNP enrollees. A higher proportion of HIV SNP enrollees are assigned to a PCMH recognized PCP compared to other Medicaid product types.

Figure 6: NYS PCMH Penetration Rate of Assigned MMC, HARP, and HIV SNP Enrollees				
	Assigned MMC Enrollees	Assigned HARP Enrollees	Assigned HIV SNP Enrollees	Total Enrollees
Total Enrollees As signed to a PCMH Recognized Provider	3,462,796	111,503	12,914	3,587,213
Total Enrollees As signed to a non PCMH Recognized Provider	1,740,786	49,826	2,577	1,793,189
Total Enrollees	5,203,582	161,329	15,491	5,380,402
PCMH Penetration Rate	67	69	83	67

Figure 6 uses plan reported panel data (for this report: March 2022) and the March 2022 NCQA recognized PCMH provider lists.

Section 3: Enrollee Information

Figure 7a shows the number of MMC, HARP, and HIV SNP enrollees assigned to NYS PCMH-recognized PCPs from September 2021 to September 2022. As of September 2022, 67% of NYS MMC enrollees are assigned to NYS PCMH-recognized PCPs.

Figure 7a: MMC, HARP, and HIV SNP Enrollees Assigned to NYS PCMH-Recognized PCPs by Quarter					
	September 2021	December 2021	March 2022	June 2022	September 2022
MMC Enrollees Assigned to PCMHs	3,519,565	3,543,494	3,403,528	3,399,665	3,587,213
Enrollees Assigned to Non PCMHs	1,659,153	1,719,980	1,733,281	1,742,605	1,793,189
Total Enrollees	5,178,718	5,263,474	5,136,809	5,142,270	5,380,402
PCMH Penetration Rate	68	67	66	66	67

Figure 7b shows the rate of auto-assignment between NYS PCMH-recognized and non-NYS PCMH recognized practices in MMC. Auto-assignment is a process where an enrollee is assigned to a PCP by their health plan when the enrollee did not select a PCP. As of September 2022, the majority of MMC, HARP, and HIV SNP enrollees were not auto-assigned. Enrollees assigned to a PCMH-recognized provider had the highest rate of auto-assignment.

Figure 7b: Auto-Assignment Rates Between NYS PCMH-Recognized and Non-NYS PCMH Recognized PCPs in MMC, HARP, and HIV SNP					
	Not Auto Assigned	Auto Assigned	Not Reported	Unassigned	Total Enrollees
Total Enrollees Assigned to a NYS PCMH Recognized Provider	2,085,434 58%	1,489,935 42%	11,844 <1%	0 0%	3,587,213 100%
Total Enrollees Assigned to a non NYS PCMH Recognized Provider	955,873 53%	741,802 41%	3,282 <1%	92,232 5%	1,793,189 100%
Total	3,041,307 57%	2,231,737 41%	15,126 <1%	92,232 2%	5,380,402 100.00%

Medicaid (FFS): There were 61,778 unique Medicaid FFS enrollees that had a qualifying visit resulting in an add-on payment, with a PCMH-recognized provider from January 1, 2022 to September 2022.

Section 3: Enrollee Information

Figure 8 shows how select demographics of MMC, HARP, and HIV SNP enrollees assigned to NYS PCMH-recognized PCPs, are distributed as compared to the demographics of enrollees assigned to non-NYS PCMH-recognized providers. There is a higher proportion of enrollees assigned to a NYS PCMH-recognized provider in the Central, Northeastern and Western regions of New York. A higher proportion of Black, Asian and Hispanic New Yorkers, those who receive TANF or Supplemental Security Income, and those who are 0-20 years of age are also assigned to NYS PCMH providers when compared to the demographics of the percent of enrollees assigned to non-NYS PCMH-recognized providers.

Figure 8: MMC, HARP, and HIV SNP Enrollee Characteristics			
Demographic Category		Members Assigned to NYS PCMH Providers (%)	Members Assigned to Non-NYS PCMH Providers (%)
Region	New York City	54.2	58.08
	Central	7.58	7.08
	Long Island	8.26	12.37
	Hudson Valley	8.71	10.64
	Northeast	6.46	4.32
	Western	14.76	7.49
Race	Black	15.38	14.19
	White	23.95	26.35
	Asian	10.37	10.12
	Hispanic	25.38	22.46
	Other	24.89	26.86
Aid Category	Safety Net	30.12	39.27
	Supplemental Security Income	6.72	5.74
	TANF	63.07	54.89
	Other	0.07	0.09
Age	0-20	44.74	33.54
	21-54	43.17	51.78
	55-64	9.81	11.69
	65-74	1.93	2.47
	75+	0.33	0.49
Gender	Male	47.48	48.17
	Female	52.51	51.82

Demographic data presented in Figure 8 is based on the September 2022 panel, September 2022 Medicaid enrollment data, and NCQA recognized provider lists (for this report: September 2022).

Section 4: Expenditures

The figures in this section display the amounts paid for the New York Statewide Medicaid PCMH Incentive Payment Program. Figure 9 shows the amount spent on NYS PCMH-recognized providers via increased capitation payments to practices for their MMC, HARP, HIV SNP, and CHP enrollees from January 2022 through September 2022.

Figure 9: Medical Home Spending by MMC Product Line January 2022 through September 2022					
	MMC	HARP	HIV SNP	CHP	Total
Total	\$ 160,213,705	\$ 5,547,199	\$ 653,143	\$ 11,216,540	\$ 177,630,587
*The Family Health Plus (FHP) program ended on December 31, 2014. PCMH payments are only given for MMC, HARP, HIV SNP, and CHP products, and Medicaid FFS Add-ons. The HARP plans began serving NYC enrollees in October 2015 and began serving the rest of the state in July 2016.					

For more information on PCMH initiatives in Medicaid, please visit:

https://www.health.ny.gov/health_care/medicaid/program/update/medup-pa-pn.htm#patiented

Important Links

Information on New York State PCMH Initiatives in Medicaid

https://www.health.ny.gov/health_care/medicaid/program/update/medup-pa-pn.htm#patiented

New York State PCMH Brochure

https://www.health.ny.gov/technology/nys_pcmh/docs/pcmh_brochure.pdf

New York State PCMH Standards and Guidelines

<https://store.ncqa.org/recognition/patient-centered-medical-home-pcmh.html>

NCQA PCMH-Recognition State Comparison

<https://reportcards.ncqa.org/practices>

<https://reportcards.ncqa.org/clinicians>

Previous PCMH Quarterly Reports

https://www.health.ny.gov/technology/nys_pcmh/

Questions?

Contact the Office of Quality and Patient Safety, NYSDOH, via email at:

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