

## The Rhode Island Care Transformation Collaborative (CTC-RI)

CTC-RI’s mission is to lead the transformation of primary care in Rhode Island. CTC-RI brings together critical stakeholders to implement, evaluate and spread effective models to deliver, pay for and sustain high quality, comprehensive, accountable primary care.

### History

Launched in 2008 by the Office of the Health Insurance Commissioner, the Care Transformation Collaborative of Rhode Island (CTC-RI) brings together key health care stakeholders to promote care for patients with chronic illnesses through the patient-centered medical home (PCMH) model.

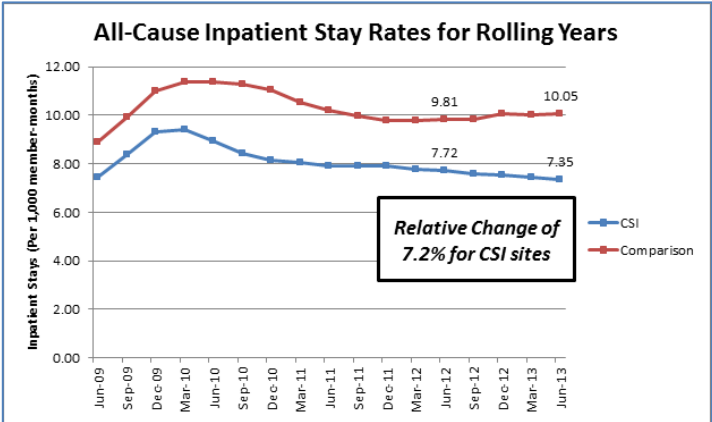
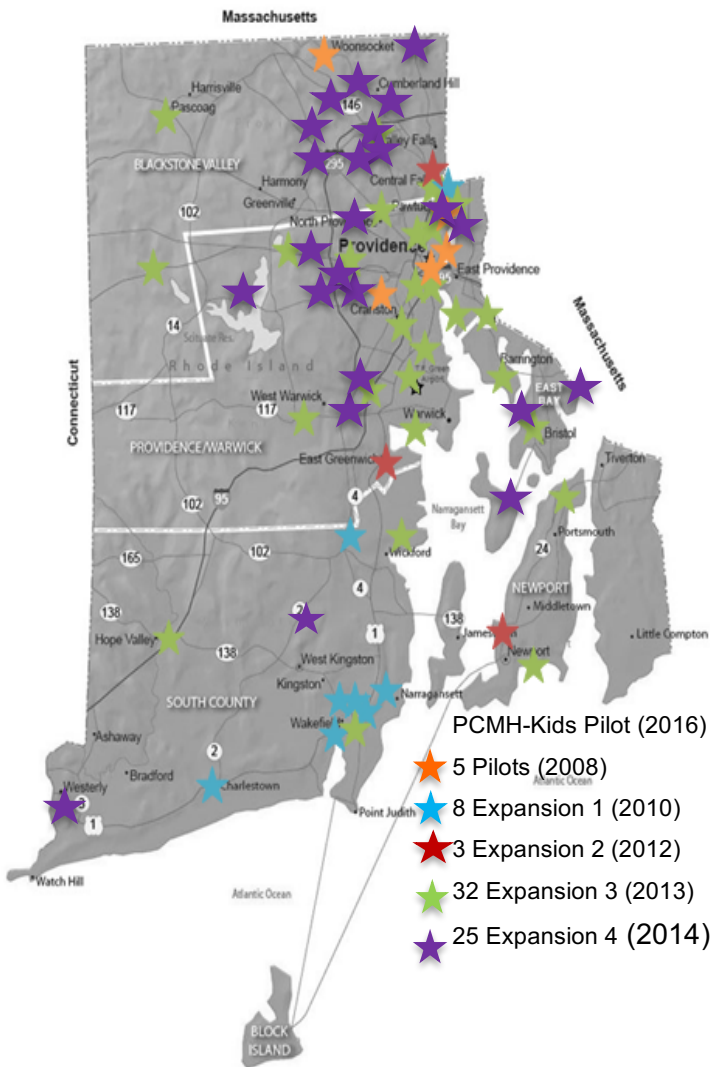
CTC-RI began with five pilot sites in 2008 and has grown to 46 practices with 80 practice sites with pediatric practices being added in 2016. . Currently, approximately 330,000 Rhode Islanders receive their care from CTC-RI practices. **Over the next four years, up to 20 practices will be added each year, with the goal of providing over 500,000 Rhode Islanders with access to a PCMH.**

### Results

PCMHs improve health outcomes, help patients have better care experiences and reduce expensive, unnecessary hospital and emergency department visits. Here in Rhode Island, CTC-RI practices are showing that effective PCMHs truly make a difference for patients, providers and payers, as well as the entire health care system.

#### Clinical quality

- CTC-RI rewards practices for performance and improvement on clinical quality measures related to diabetes, high blood pressure and depression. To qualify for payments, practices must either demonstrate a 50% improvement from their baseline or meet a specified benchmark level for four of the six quality measures. They have done so for the last four years.



#### Utilization

- In 2013, the practices in the most experienced CTC cohort realized a 7.2% reduction in hospital admissions

#### Patient experience

- According to 2014 Consumer Assessment of Healthcare Providers and Systems (CAHPS) survey, patients are realizing the immediate benefits of PCMHs. CTC-RI practices as a whole have met targets for access, communication and office staff with directional improvement noted in shared decision making, self-management support and behavioral support

#### National recognition

CTC-RI practices were among the first in the country to be recognized as medical homes of the highest quality. Of the 29 sites eligible to apply for NCQA recognition, 22 sites have applied; all sites that applied have obtained the highest level of recognition (Level 3)

External evaluation

- Meredith Rosenthal, Ph.D. of the Harvard School of Public Health, with support from the Commonwealth Fund, conducted an evaluation of the early years of CTC-RI (2008-2010). Dr. Rosenthal found that at the end of two years, CTC-RI practices had higher NCQA scores, greater provider job satisfaction and improvements on a number of quality measures, particularly those related to diabetes.

Leadership and Funding

The administration of the project is supported through the Rhode Island Foundation and led by a team from the University of Massachusetts Medical School.

Support for the practices comes through the developmental contract, an agreement negotiated between the health plans and the participating primary care practices under the auspices of the Office of the Health Insurance Commissioner. The contract calls for payments to supplement the traditional fee-for-service structure, providing practices with per member per month payments designed to drive practice transformation and quality improvement. These supplemental payments allow the practices to make structural enhancements, including the addition of a Nurse Care Manager, who oversees care coordination efforts, as well as an analytical structure to use electronic medical records to track patient data.

CTC-RI is supported by funding from public and private payers in Rhode Island, along with grant funding from government and non-governmental sources.

Table: Staff Surveys of Pilot Sites in Year 1 and Year 2 of CSI-RI

Standard	Baseline	Post-intervention
Access & communication	70.6%	88.9%
Patient tracking & registry functions	60.0%	95.2%
Care management	30.0%	96.8%
Patient self-support management	6.7%	83.3%
Electronic prescribing	18.8%	70.0%
Test tracking	40.8%	100.0%
Referral tracking	60.0%	100.0%
Performance reporting & improvement	48.0%	97.0%
Advanced electronic communication	6.3%	11.3%

Funding Sources	
Blue Cross Blue Shield RI (BCBSRI)	Medicare
Neighborhood Health Plan (NHP)	Medicaid
Tufts Health Plan	Office of Health Insurance Commissioner (OHIC)
United Health Plan (UHP)	Lifespan

Care Transformation Collaborative Practices

- Anchor Medical Associates (Lincoln, Providence, and Warwick)
  - Associates in Primary Care (Warwick)
  - Barrington Family Medicine, Solmaz Behtash, North Kingstown Family Practice, Primary Care Barrington, Wickford Family Medicine
  - Blackstone Valley Community Health Center (Central Falls and Pawtucket)
  - John Chaffey, Coventry Primary Care Associates
  - Charter Care Medical Associates
  - Coastal Medical (East Providence, Narragansett, Pawtucket, Providence, and Wakefield)
  - Comprehensive Community Action Program (Cranston, Coventry, and Warwick)
  - East Bay Community Action Program (East Providence and Newport)
  - East Greenwich Pediatrics (East Greenwich)
  - Family Health and Sports Medicine (Cranston)
  - Hasbro Pediatric Primary Care (Providence)
  - Hasbro Medicine-Pediatric Primary Care Clinic (Providence)
  - Internal Medicine Partners (North Providence)
  - Kristine Cuniff, MD (Narragansett)
  - Medical Associates of RI (Bristol and Barrington)
  - Memorial Hospital Family Care Center (Pawtucket), Internal Medicine Center (Pawtucket), Family Medicine at Women’s Care (Pawtucket)
- Nardone Medical Associates (Pawtucket)
  - Ocean State Medical (Johnston)
  - Pediatric Associates (East Providence)
  - Providence Community Health Centers
  - Richard Del Sesto (East Greenwich)
  - SouthCoast Health System (Linden Tree Health Center, Tiverton Family Practice, Family Medical Middletown, Family Medicine Center)
  - South County Hospital Family Medicine (East Greenwich)
  - South County Hospital Primary Care and Internal Medicine/Wakefield and Westerly
  - South County Internal Medicine (Wakefield)
  - South County Walk-In and Primary Care (Narragansett)
  - Stuart Demirs, MD (Charlestown)
  - Thundermist Health Center (Wakefield, West Warwick, and Woonsocket)
  - Tri-Town Community Action Program (Johnston)
  - University Family Medicine (East Greenwich)
  - University Internal Medicine (Pawtucket)
  - University Medicine (8 sites – East Providence, Newport, Portsmouth, Providence and Warwick)
  - WellOne Primary Medical and Dental Care (Foster, North Kingston, and Pascoag)
  - Women’s Primary Care, Women’s Medical Collaborative (Providence)
  - Wood River Health Services (Hope Valley)