

CM Leadership Collaborative

10-01-2025

1. Information sharing and inquiry

- a. Impact of changes from CMS on reimbursement for video visits and secondarily will this impact the use of video conferencing for the PDCM codes?
 - i. Health systems are awaiting the decision from CMS and commercial insurance companies on the use of video visits.
 - ii. To date, insurance companies have not released any changes. They too are awaiting the specifics from CMS. It is not clear if the change will be limited to Medicare Advantage or to all products.
 - iii. Sue will outreach to BCBSM to verify the impact on the PDCM codes currently and any anticipated changes in 2026.
 - iv. Stacie Banghart from Priority Health will check with the billing team at PH. More information to come.
- b. Health Systems/PO's are noting discrepancies in the TOC/TCM reports from BCBSM. During auditing processes, systems are able to track the work was completed, but it does not appear all are getting credit. This includes the Medication Reconciliation 1111F code.
- c. CM and independent organizations. There is interest in learning how non-employed physician groups are managing the case managers. Currently, most are not contracting the CM'er for practices. Some are looking into centralized CM for independent practices.
- d. The 2026 PIP manual draft has been distributed to PO's and feedback received. The PH team is in the process of reviewing the feedback and where needed, will be updating and sending out a second draft in October. Stacie will share with the group the link to the next draft, including the feedback form. This will be the last preliminary version. The final version will be based on the response to the October version.
- e. Review of the changes to include APP's as providers for PCMH designation. All agree this will be helpful for the rural health clinics.

- f. For PO's with rural health clinics, there is concern with the Medicaid changes through the BBB and impact on rural health. Organizations are eagerly awaiting the states decision to participate in the Rural Health Transformation Package. Diane Marriot from the Michigan Multipayer Initiatives recently provided an update on this. If folks would like to learn more, Diane is eager to assist. She can be reached at dbechel@umich.edu. The website for the Michigan Multipayer Initiatives is: <https://mimultipayerinitiatives.org/>.
 - g. A CMS ppt on the Rural Health Transformation Package has been downloaded and will be added to the CM Leadership webpage.
 - h. Changes to the PCMH guidelines. PO's have heard the number of capabilities will go from 180 to 30. Little detail to date is known. The attestation for the updated version will be September 2026.
2. TBC Academy input
- a. Moderate and Complex Care Management. Much discussion on identifying patients with complex health needs, that incorporate a holistic approach. Some are looking at ways to identify patients with complexities.
 - i. To date there has been emphasis on individuals with chronic conditions, regardless of the level of complexity. This is in part related to easy identification, and comfort in taking a disease management approach.
 - ii. There was sharing on the value of having an ER CM'er partner to identify individuals with complex needs and high ER utilizers in real time, vs using a list from the payers. The payer list have lag times.
 - iii. Conversation included discussion on how hospital and primary care management has improvement opportunities. Many of the discussion points were similar to the Hospitalist BOOST model. Additional information on the BOOST model can be found here: <https://psnet.ahrq.gov/innovation/project-boost-increases-patient-understanding-treatment-and-follow-care>
3. Website
- a. Reviewed the website page and password for access. Shared any documents the group would like to have added or included can be submitted and posted. MI-CCSI is eager to work with the group to continue to evolve the website and explore how to best use it. For now, a great way to share documents reviewed/discussed in the CM Leadership meetings!

Thank you – Sue