

## Summary Guidelines for Using Care Management Fee (CMF) and Comprehensive Primary Care Payment (CPCP)

The CMF and CPCP is intended to support augmentation staffing and training related to non-visit-based and historically non-billable services that align with the CPC+ care delivery transformation aims: better care, smarter spending, and healthier people. Qualifying activities include wages and care delivery tools to improve care coordination, implement data-driven quality improvements, and enhance targeted support to patients identified as high risk. Source: CPC+ Payment Methodology, February 17, 2017.

### CMF and CPCP Payments can be used for the following:

- Wages for new staff to perform care delivery requirements (care manager, pre-visit preparation, quality data analyst, etc.)
- Wages for existing staff performing care delivery requirements
- Care delivery tools (shared decision making aids)
- Training and travel for CPC+ activities

### Prohibited Expenses

- Health IT upgrades or purchases
- Income tax payments
- Imaging equipment or durable medical equipment
- Medications
- CME (not directly related to CPC+)
- Office supplies
- Payments to CPC+ providers for activity outside of CPC+

**Note:** *There are no spending requirements for the Per Beneficiary Incentive Payment (PBIP). However, the practice must meet designated performance thresholds at the end of each year to avoid full or partial repayment of the PBIP to CMS.*

Please contact your State Practice Facilitator for specific questions or comments regarding the CPC+ program requirements.