

**Attachment J – RAPPs Preprint Question 43.**

**43. Describe how this payment arrangement is expected to advance the goal(s) and objective(s) identified in Table 7. If this is part of a multi-year effort, describe this both in terms of this year's payment arrangement and in terms of that of the multi-year payment arrangement.**

RAPPs is a directed payment program (DPP) that incentivizes the provision of primary and preventive services for Medicaid-enrolled individuals in rural areas of the state. As a condition of participation in the program, a provider must report data for all measures for which it is eligible. The program also focuses on the management of chronic conditions. Component 1 will provide a uniform dollar increase in the form of prospective, monthly payments to all participating RHCs to enhance structures that promote better access to primary and preventive services. The structure measures include reporting on electronic health record (EHR) use, telemedicine/telehealth capabilities, and care coordination. Component 2 will be a uniform percent rate increase for certain services. For Component 2, providers will report on quality metrics focused on preventive care and screening and management of chronic conditions that will be used in the evaluation of the program. Component 1 includes structure measures and requires semi-annual reporting of status/progress for all Component 1 measures. Component 2 includes process measures based on Improvement Over Self (IOS). In the first year of the program, the enrolled providers will submit baseline data for IOS measures.

All measures must be reported by an RHC for the RHC to be eligible for payment.