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Health and Human  
Services

# Value-Based Care in Rural Texas Subcommittee

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# Draft Recommendation Language (1 of 2)

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## **1. HHSC should establish standards and a working definition for an Accountable Pharmacy Organization (APO) and work with stakeholders to increase engagement with APOs.**

- Defining an APO provides clarity when discussing the types of pharmacy organizations involved in value-based payment (VBP) contracting. The concept of an APO is distinct from other pharmacy contracting entities (i.e., pharmacy services administrative organization or PSAO).
- Increasing VBP arrangements with APOs should improve patient outcomes. Pharmacists will be incentivized to longitudinally engage patients when paid to produce outcomes and lower costs.



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# Draft Recommendation Language (2 of 2)

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**2. HHSC should develop guidance for MCOs to reimburse pharmacists for services within a pharmacist's scope of practice and provide a list of services that fall within that scope which may be reimbursable by MCOs.**

- It would be helpful if HHSC could provide additional clarity and guidance to MCOs for paying pharmacists for services under the medical benefit like all other providers. While MCOs could pay pharmacists today, low utilization may indicate a lack of knowledge about these payment options.

**3. HHSC should develop guidance for rural providers and MCOs related to alternative certification methods that expand the use of community health workers (CHWs) to address rural workforce shortages, gaps in rural health access including maternal care, and result in new APM opportunities.**



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