



colorado health institute

.....

# WEBINAR SERIES



colorado health  
INSTITUTE

# Webinar Basics

- How do I ask questions during the webinar?
- Recorded webinar and PowerPoint slides will be available after the webinar.
- Special thanks to our funders:



# Your Presenter



**Jeff Bontrager**

Director of Research on  
Coverage and Access

**Colorado Health  
Institute**

# Colorado's Medicaid Toolbox

Approaches to Improving  
Quality and Controlling Costs

November 14, 2012

**2012 Webinar Series**



**colorado health**  
**INSTITUTE**

# Medicaid's Challenges

- Escalating health care costs
- Budgetary pressures
- Rising enrollment
- Provider participation
- Improving quality of care and health of enrollees



# The Traditional Toolbox of Medicaid Options

- Reducing eligibility
  - Reducing benefits
  - Reducing payments to providers
- ➔ Use innovative approaches to redesign payment and delivery



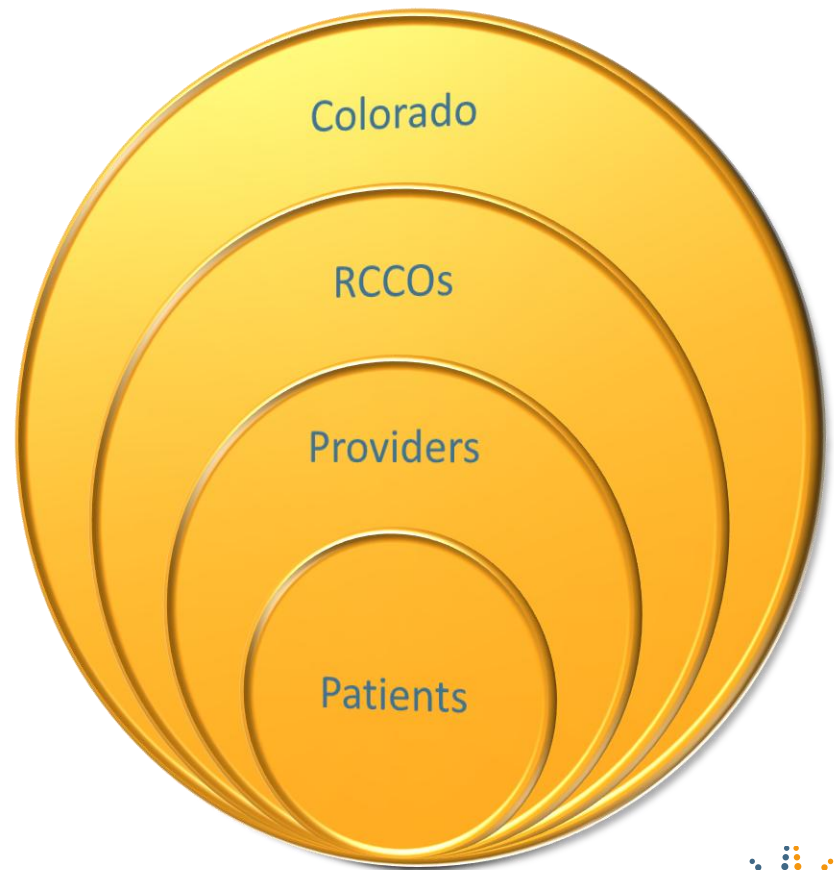
# Poll #1

- Of these four approaches, which is LEAST appealing to you?
  - A. Reducing eligibility
  - B. Reducing benefits
  - C. Reducing payments to providers
  - D. Using innovative approaches



# Today's Discussion: A Systems Agenda

- Refresher: What is the Accountable Care Collaborative (ACC)?
  - What do the latest findings say?
- What are the ACC's challenges and successes among:
  - The Regional Care Collaborative Organizations (RCCOs)?
  - The providers?
  - The patients?





# Three Takeaways

- Evidence on cost effectiveness of care coordination is mixed, though holds promise
- Many Colorado safety net providers committed to the ACC, but others are weighing benefits
- ACC impact on patient experience and quality of care needs further exploration
- *Bonus: Early ACC results show modest savings but promising reductions in expensive services*





*A Brief ACC Primer  
(Bonus: What the  
First Results Show)*

# Poll #2

- How familiar are you with the ACC?
  - A. Very familiar
  - B. Somewhat familiar
  - C. Not very familiar
  - D. Accountable *what?*



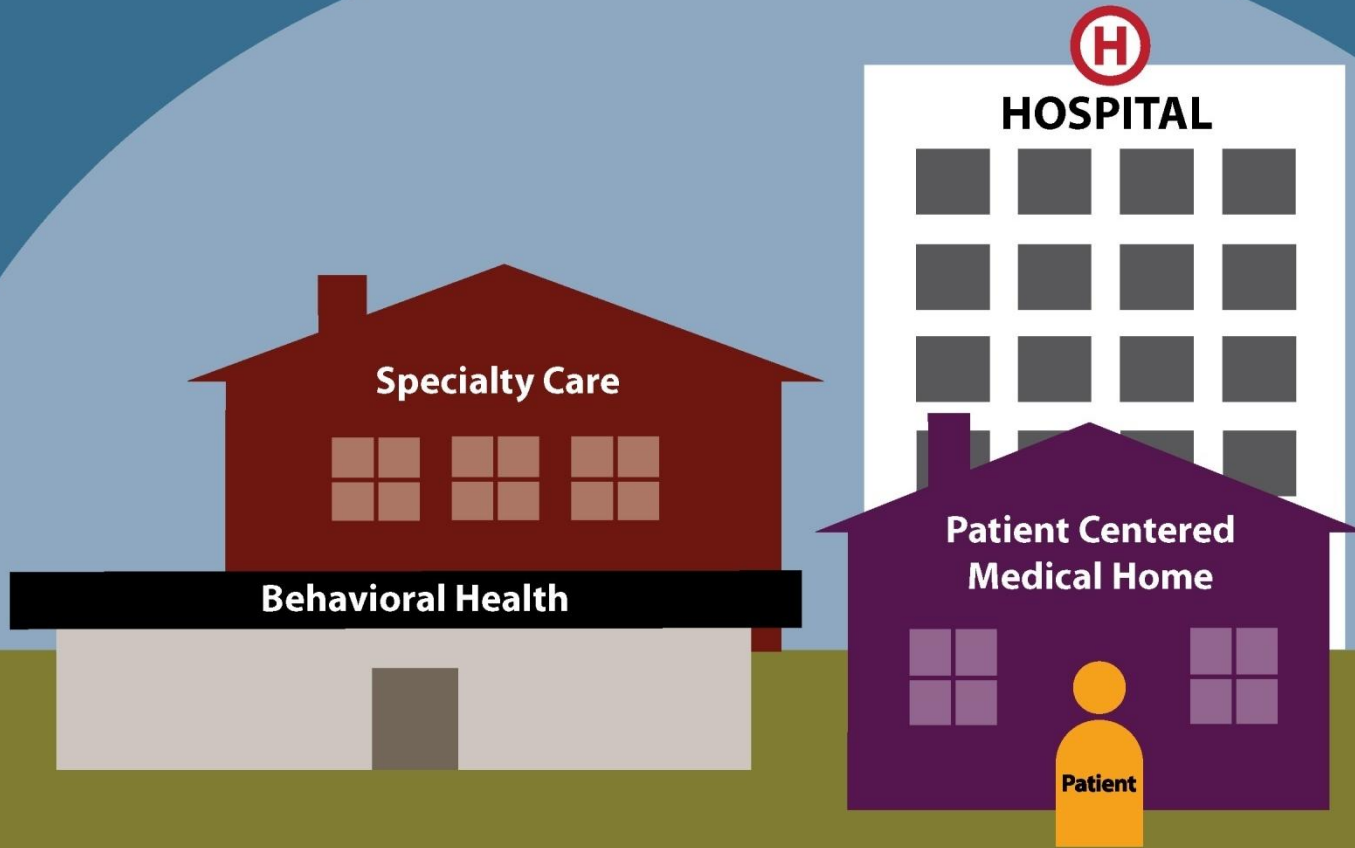
# Defining Care Coordination

- *An approach to integrating health care and social support services that is:*
  - *Client-centered*
  - *Assessment-based*
  - *Interdisciplinary*
  - *Evidence-based*
- *An individual's needs and preferences are assessed, a comprehensive care plan is developed, and services are managed and monitored by an identified care coordinator*



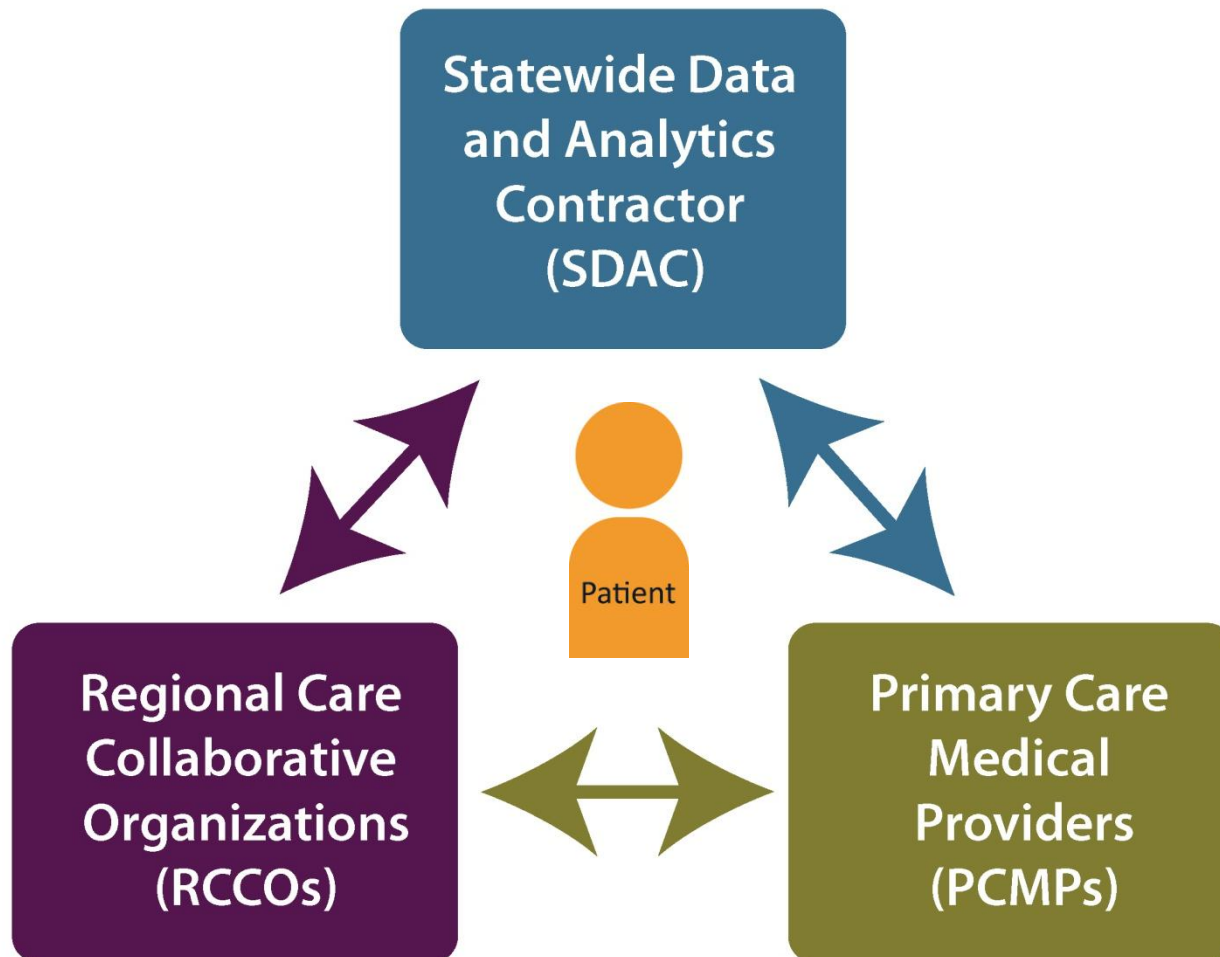
# How Care Coordination in the ACC Works

## Care Coordination

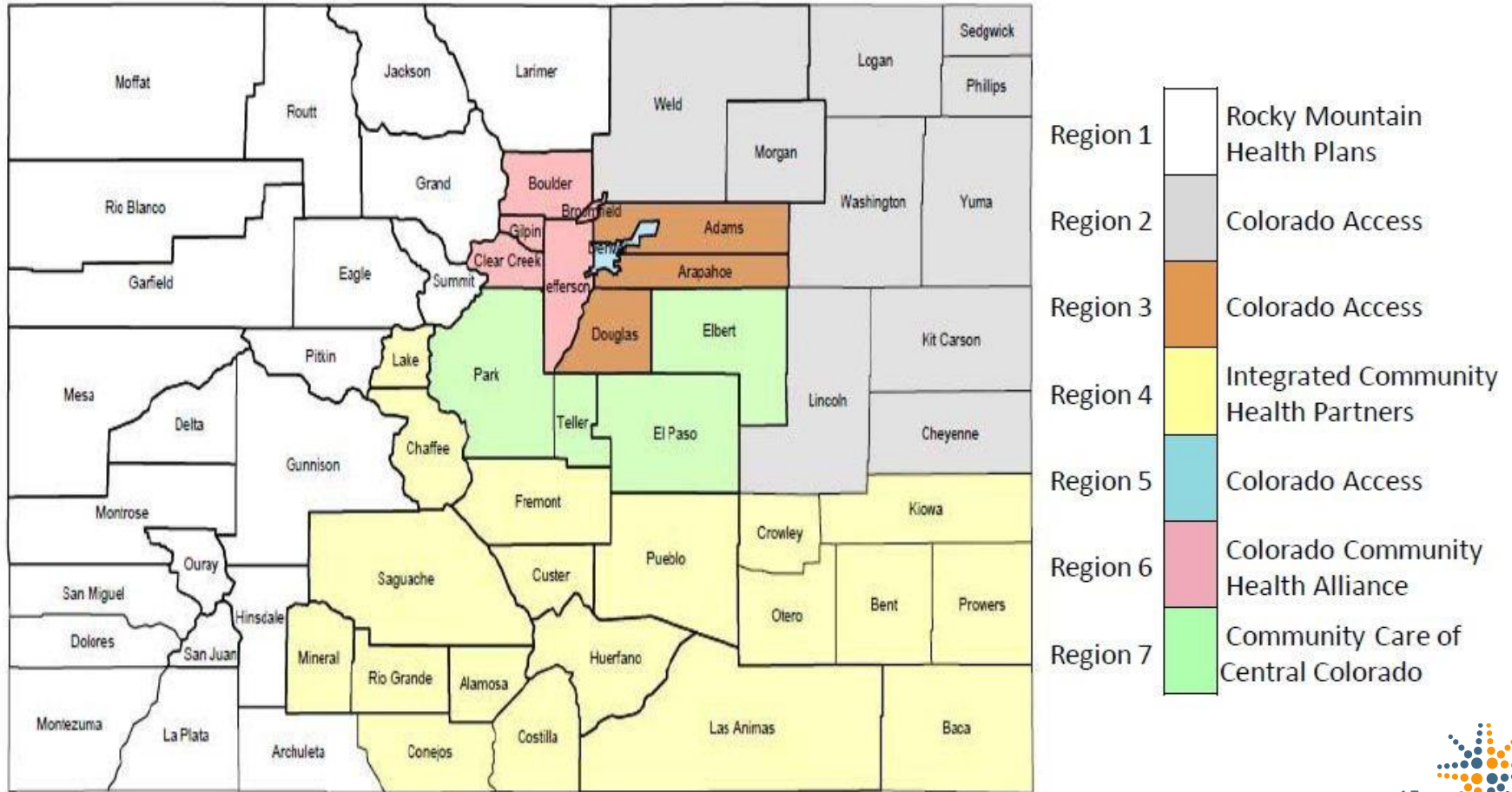


## Data and Analytics

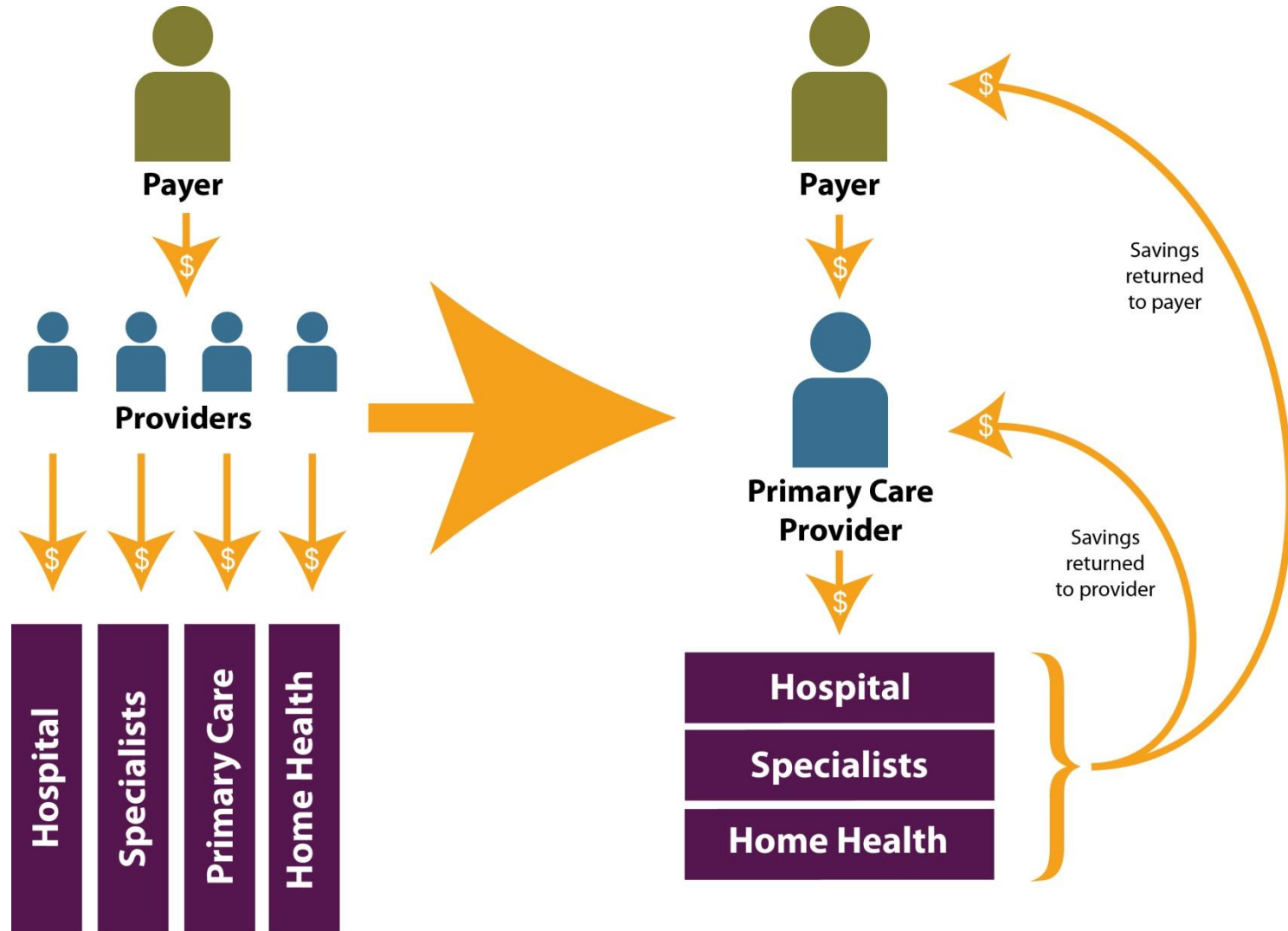
# Colorado's ACC Model



# The ACC's Seven Regional Care Coordination Organizations (RCCOs)



# Payment Reform under Accountable Care





# Analyzing the First Data (FY 2011-12)

- Estimated gross savings: \$9 million - \$30 million
- Administrative costs: About \$18 million
- When compared to non-ACC enrollees:
  - 8.6 percentage point reduction in hospital readmissions
  - Lower rate of increase in ER visits
  - Use of MRIs and other high-cost imaging decreased three percentage points
- Lower rates of preventable hospitalizations for enrollees with diabetes and asthma

Source: HCPF. Report to the JBC: ACC Annual Report (November 1, 2012)



# The Safety Net Advisory Committee (SNAC) Lab

- CHI-convened quarterly Learning Labs provide a forum for raising the collective knowledge about early challenges, successes and lessons learned.
- Participants:
  - HCPF
  - RCCOs
  - Safety net providers and associations
  - Consumer advocates
  - CDPHE
  - Philanthropy
  - Other stakeholders





# *Use of Evidence-Based Care Coordination Approaches*

# What Does the Evidence Say?

- Accountable care concepts are generally untested, but more is being done
- North Carolina program demonstrated promising cost savings results, reduced hospital readmissions, though results recently questioned
- For care coordination, the results are mixed
- Some improve quality and outcomes but don't decrease costs

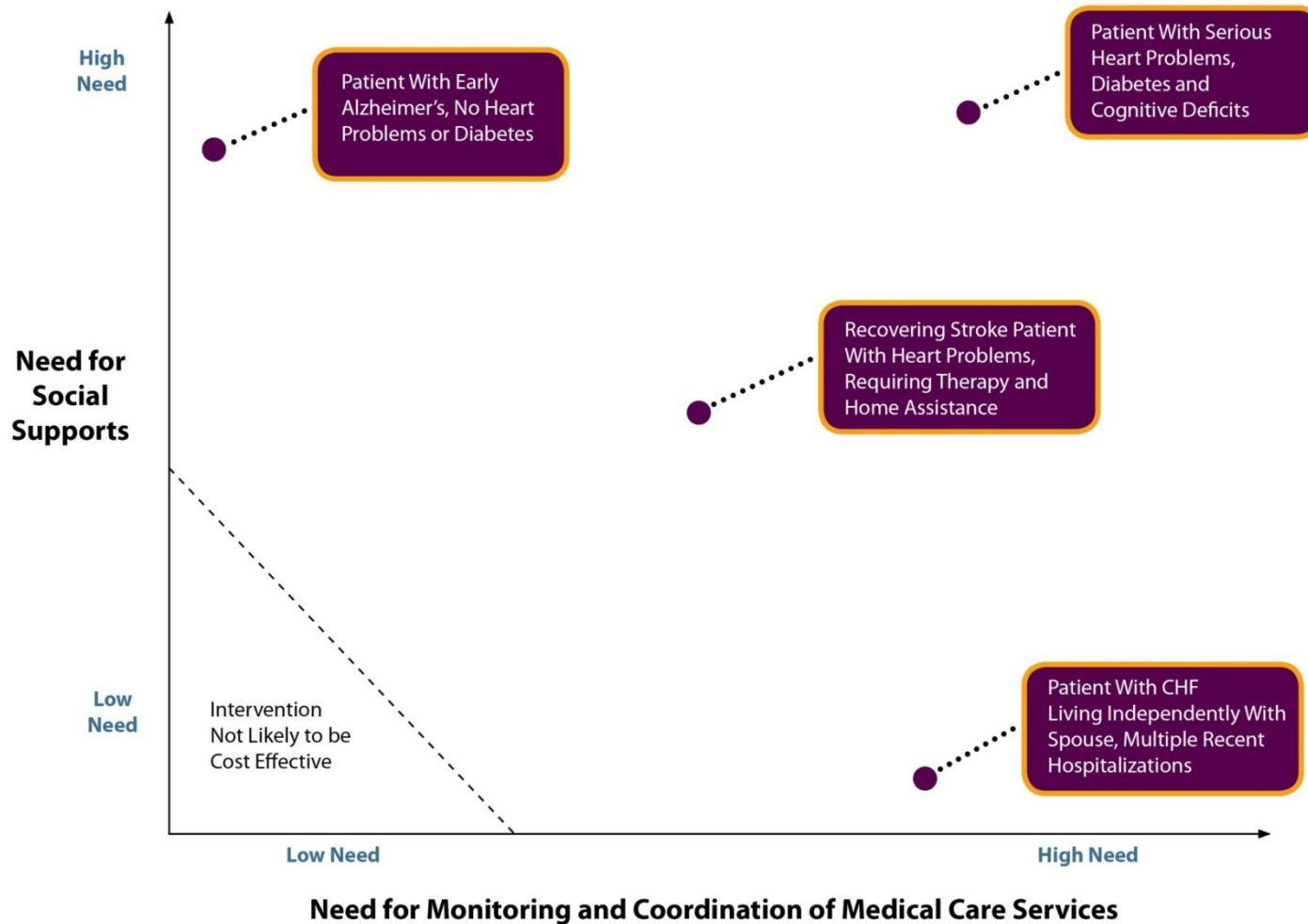


# What Does the Evidence Say? (Continued)

- Among the successful approaches (for Medicare beneficiaries):
  - In-person contact
  - Transitional care interventions
  - Self-management education interventions
  - Coordinated care interventions (e.g., targeting)

# Which Patients Benefit from Coordinated Care?

## Health-Related and Social Support Needs of Beneficiaries with Chronic Illnesses



Adapted from Brown, R. (2009).

# Tools Used by the RCCOs



Evidence Basis



Targeting  
Scheduling



Multi-Disciplinary  
Teams



Combining  
Data Resources



Community-Driven  
Approaches



Assessing  
Risk Tiers

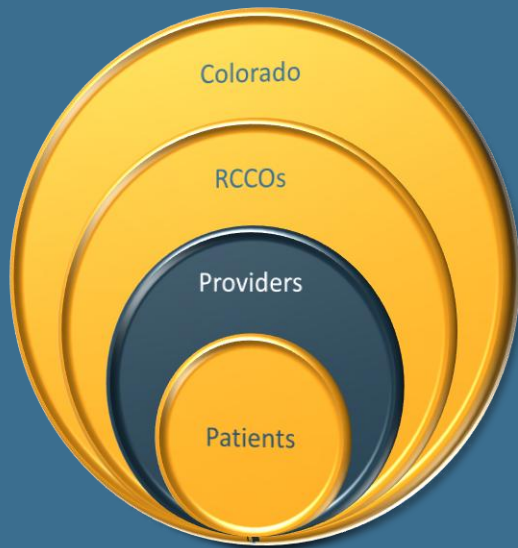


Contracts and  
Relationships



Integration  
of Services





# *Safety Net Participation in the ACC*

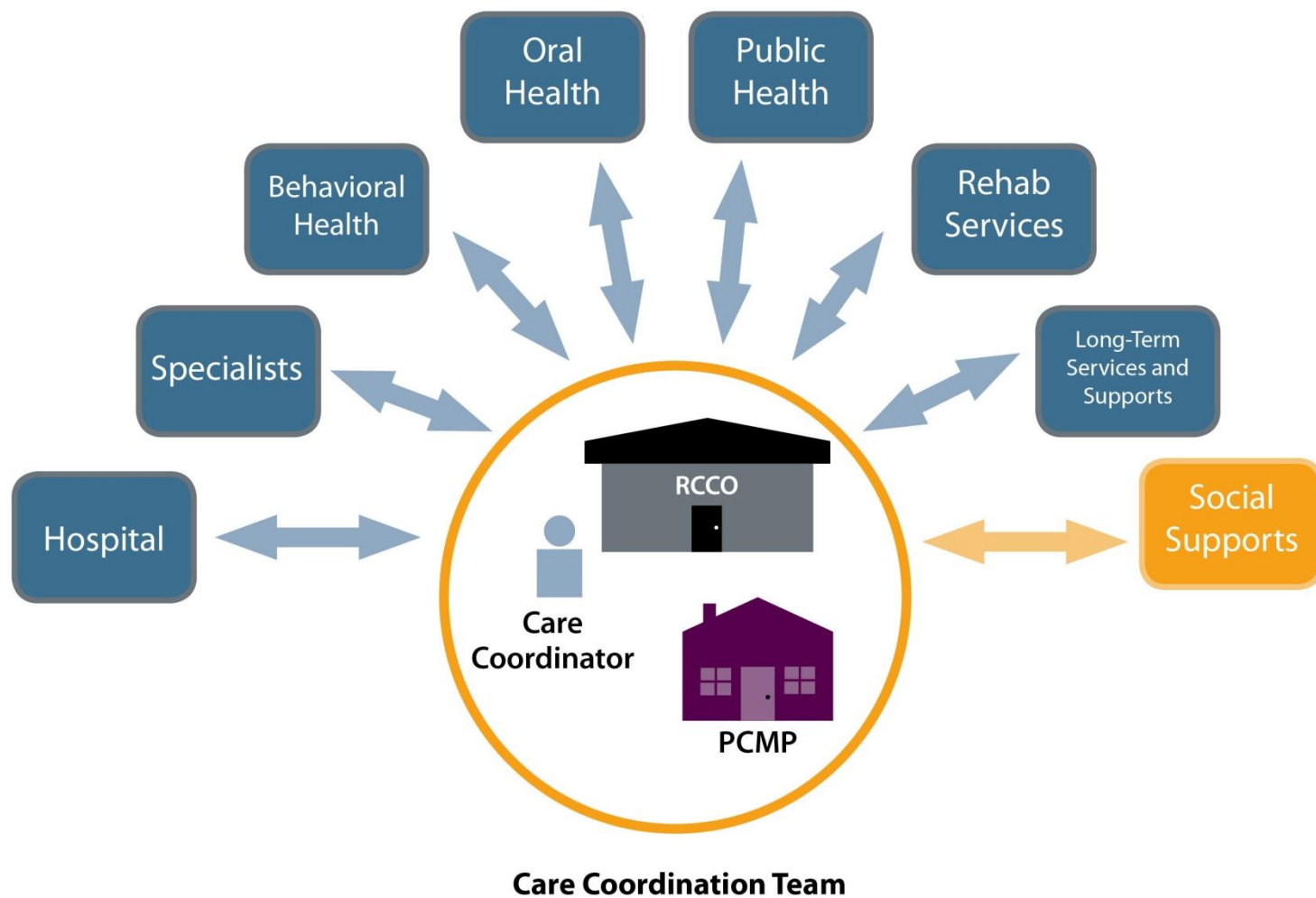


# Questions Raised by Safety Net Providers

- Local public health:
  - Is Medicaid reimbursement an option for maintaining direct preventive services?
  - If so, how to coordinate with the medical home?
- Community health centers:
  - In what ways can attribution issues be resolved?
  - How can opportunities for expansion be achieved efficiently?
- Community-funded safety net clinics and rural health clinics:
  - How does the ACC fit into a clinic's business model with relatively small Medicaid panels?
  - How to handle more adults in need of services?
  - How do care coordination models work in rural communities?
  - To what degree does current clinical work align with the PCMH model?
- Oral and behavioral health:
  - What approaches or options are available for greater integration?<sup>25</sup>



# Coordination of Health Services



## Poll #3

What do you perceive to be the greatest barrier to safety net providers' participation in the ACC?

- A. Attribution process (matching/maintaining enrollees in medical homes)
- B. Integration of services
- C. Figuring out how to make the ACC work in their business model
- D. Clinical redesign to implement the medical home
- E. Something Else/Don't know





# *The ACC and Assessing the Patient Experience of Care*

# Questions About the Patient Experience

- Impact on quality of care?
- Is there a disincentive to provide needed high-cost services?
- What is enrollees' experience with attribution and entry into the system?
- How can the grievance process be improved?
- How can patient voices be heard?
- How do we measure patient experience?



# Assessing the Patient Experience of Care

- Still early in the process; focus on implementation, indicators
- Lack of good patient experience measures
- Using the Consumer Healthcare Providers and Systems (CAHPS) survey?





*Future Directions*

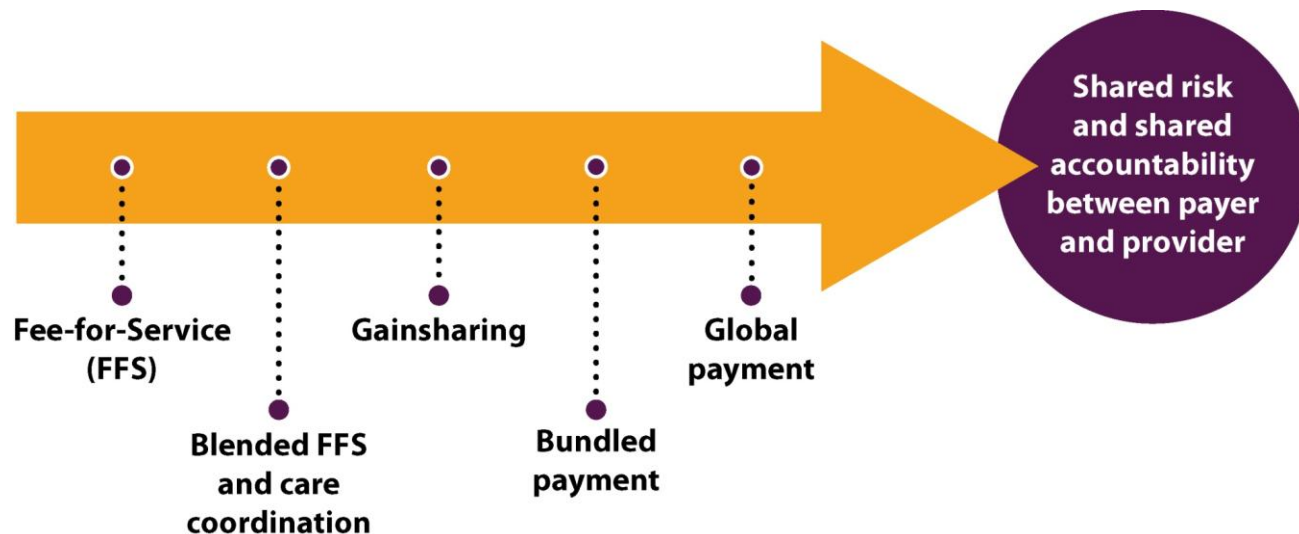
# ACC Questions for 2013

- Should Colorado expand Medicaid?
- What are the implications of the ACC on the HCPF budget?
- Expansion of ACC to those dually eligible for Medicaid and Medicare?
- What will we learn from the new Medicaid payment reform proposals launched by the ACC Payment Reform Initiative (HB12-1281)?



# Medicaid ACC Payment Reform Initiative

- HB12-1281 encourages the use of new, innovative payment models, including global payments
- RCCOs may submit proposals for new payment projects
- Proposals due April 1 and selected by July 1, 2013



# Poll #4

- Colorado will be faced with the choice to expand Medicaid. If you had to make the decision, what is the most important question that you would want answered?
  - A. How many Coloradans would it affect?
  - B. Do we have an adequate network of providers?
  - C. How much will it cost?
  - D. In what ways can we incorporate new models of payment and delivery system reform?
  - E. Some other question not listed



# Questions?

## Resources:

- Information on CHI's SNAC Labs available here:

<http://www.coloradohealthinstitute.org/key-issues/detail/safety-net-1/snac-labs-2012-13>

- HCPF ACC Annual Report:

<http://www.colorado.gov/cs/Satellite/HCPF/HCPF/1233759745246>

- *Coming soon! CHI Summary of ACC Annual Report*



# Upcoming Webinars

- **November 28: 2013 Budgets and Strategies: Colorado's Health Agencies - CHI Staff**
- **December 12: To Expand or Not To Expand: Colorado's Looming Medicaid Decision - Michele Lueck**
- **December 19: Legislative Forecast: Health Care Policy Trends to Anticipate in 2013 - Megan Lane**





*Photo: Chris Schneider*



**Jeff Bontrager** 720.382.7075 [bontragerj@coloradohealthinstitute.org](mailto:bontragerj@coloradohealthinstitute.org)