The Medicaid ACC

Examining the Past, Looking to the Future

January 10, 2013

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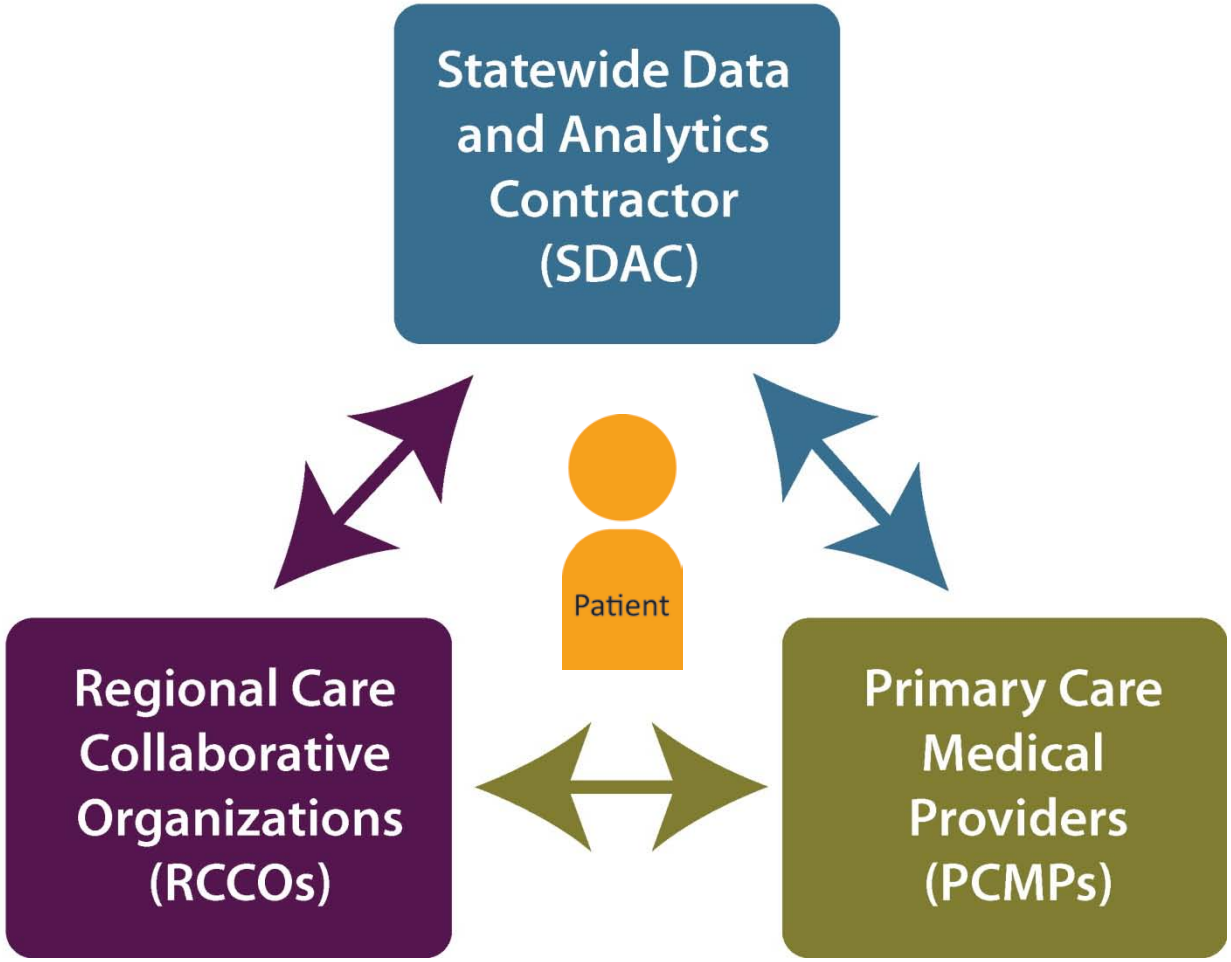
Colorado's ACC Model



SNAC Lab Objectives

- Leverage our collective focus on vulnerable populations
- Provide a forum for opportunities and lessons learned
- Develop a shared body of evidence

Today's Focus

Past

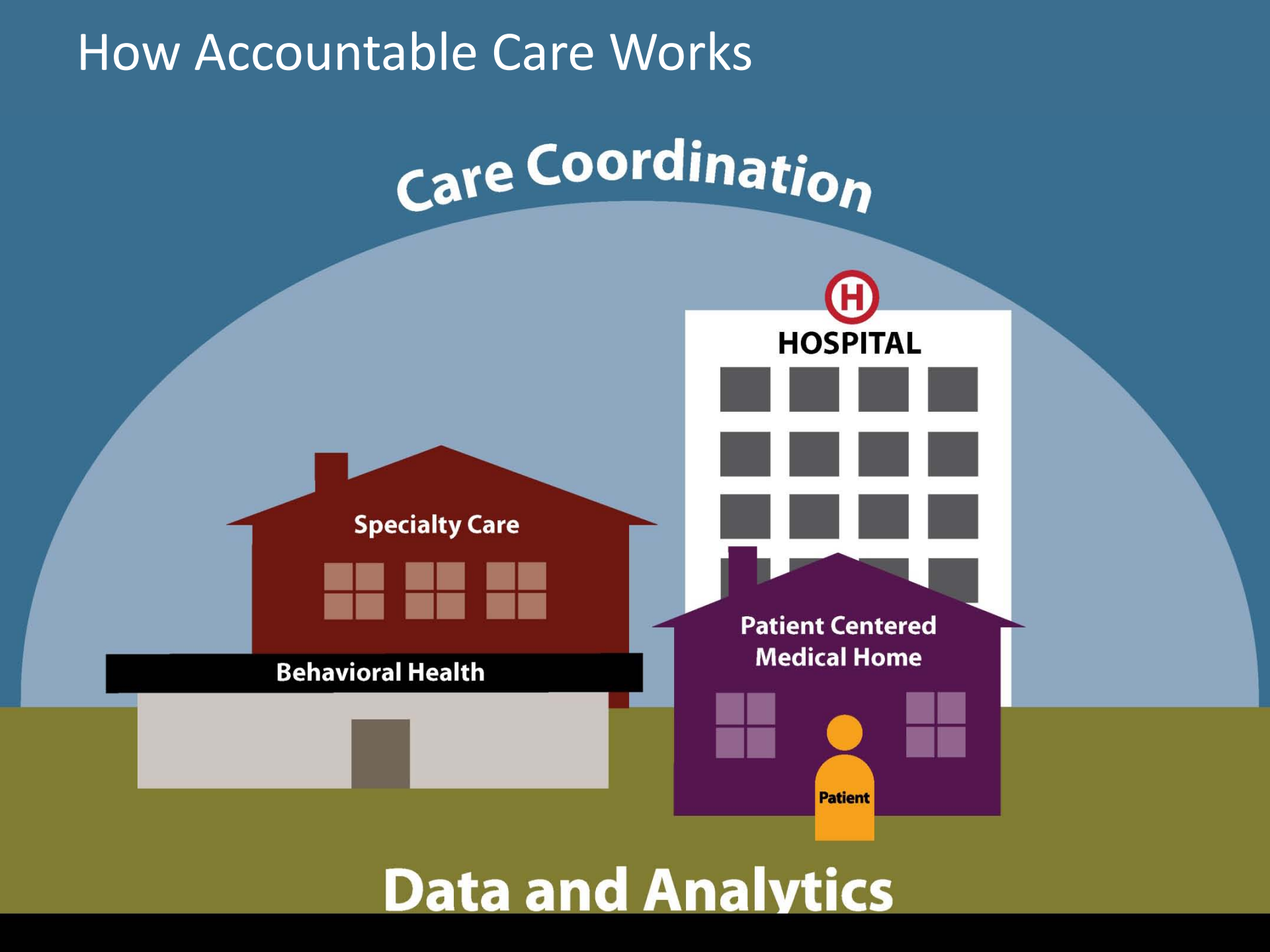
Present

Future

1. Where we are: RCCOs and providers have harnessed data but challenges remain.
2. Looking back: Initial findings point in the right direction but the jury is still out.
3. Looking ahead: What's on the horizon (for ACC and SNAC)?

Power and Pitfall: Leveraging Data in the ACC

How Accountable Care Works



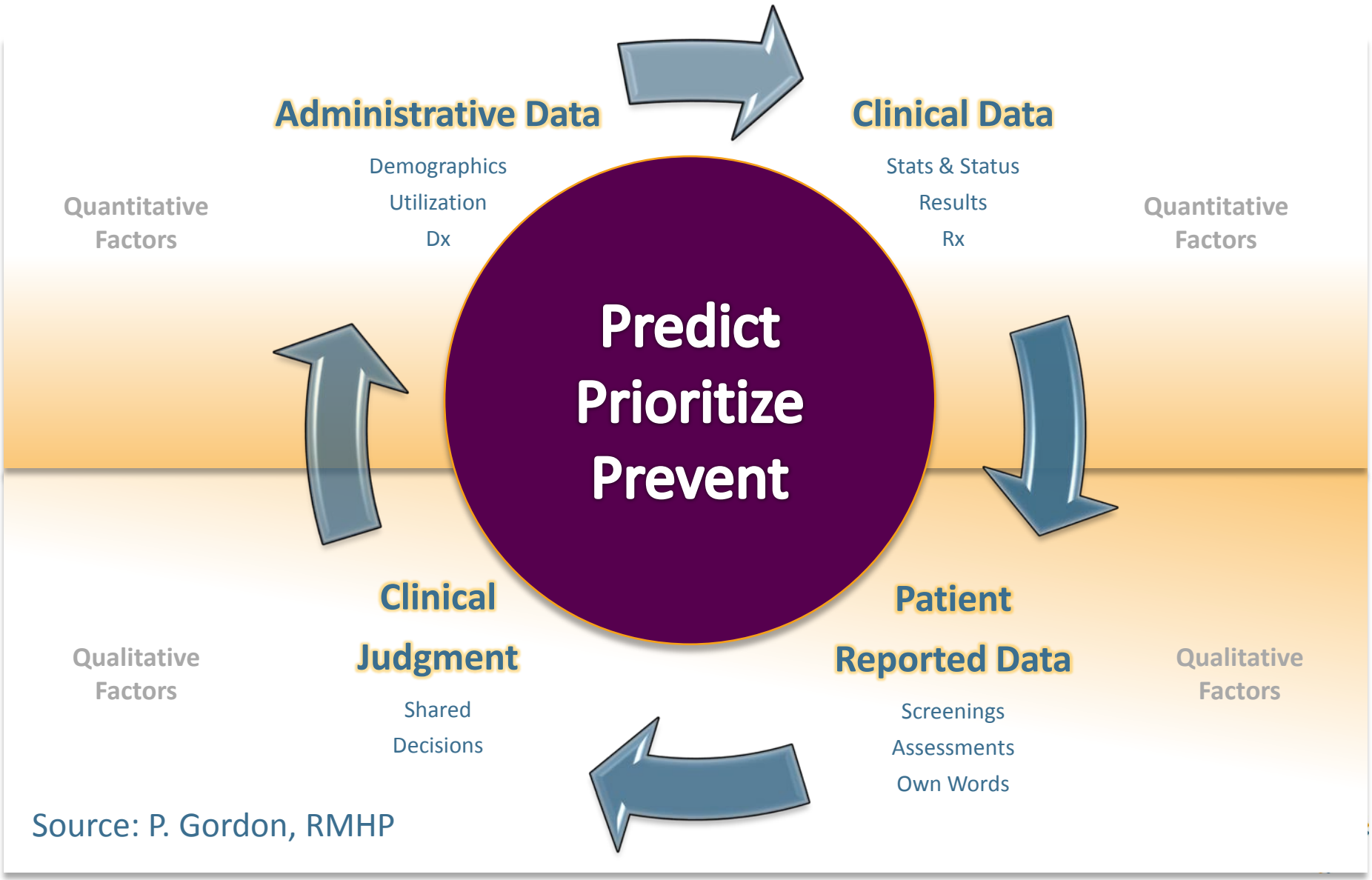
Data in the ACC: A Primer

- SDAC = State Data and Analytics Contractor (TREO Solutions)
- Dashboard = Web-based interface for viewing a number of Medicaid claims-based metrics
- Metrics include:
  - Total cost of care
  - Potentially preventable events
  - Utilization
  - Key Performance Indicators (rates of hospital readmissions, ED visits, high-cost imaging)

Case Study: Mountain Family Health Centers

Photo: Brian Clark

Population Health Management: The Three Ps



Source: P. Gordon, RMHP

Data and the ACC: Questions

- What are the promises and challenges of SDAC data?
- Which data sources augment SDAC data?
- Consider other indicators or data sources?
- How to measure quality?

Looking Back: What the Initial Data Tell Us

Preliminary Analysis: ACC Cost Savings

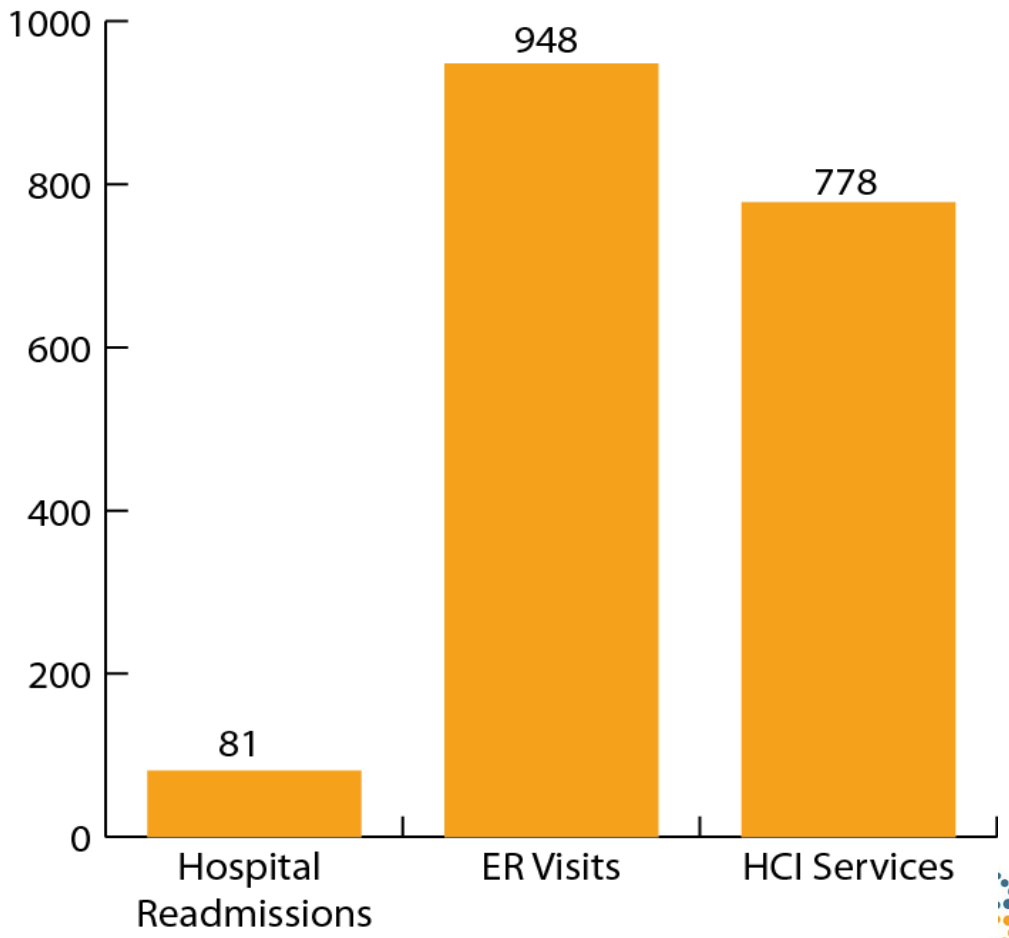
- Estimated gross savings: Between $9 million and $30 million
- Administrative costs: About $18 million
- HCPF estimate of net savings: About $3 million (FY 2011-12)

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

Preliminary Analysis: Key Performance Indicators

- Positive but limited
- Results on use of expensive services
- Short-term and long-term monitoring

Estimated number of high-cost services avoided among ACC enrollees, FY2010-11 to FY 2011-12



Hearing from You

- What are two or three biggest questions that you want answered?
- How would you measure success?
- What the key issues for 2013?

Looking Ahead (Part One): CAHPS Medicaid Expansion HB12-1281

Assessing the Patient Experience

- Still early; focus on implementation, indicators
- Lack of good measures
- Grant to collect Consumer Healthcare Providers and Systems (CAHPS) survey
  - By RCCO
  - For comparison with regular Fee-For-Service Medicaid

cahps® Surveys and Tools to Advance Patient-Centered Care

Medicaid Expansion: Governor's Projections

Total cost (state and federal) 2013-2022: $13.5 billion

State cost of $1.4 billion (270,200 new enrollees):

- $1.3 billion to expand under existing state expansion mechanism (220,300 Coloradans)
- $128 million to expand Medicaid under ACA (59,500)
- No expected impact on general fund through savings and other public funding
- ACC/Payment system reform: Savings of $86 million

Source: HCPF (Jan 2013). Expanding Colorado Medicaid: Caseload and Cost Projections. http://www.colorado.gov/cs/Satellite/HCPF/HCPF/1251573887522

Looking Ahead (Part Two): What's in Store for the SNAC?

SNAC Labs: Year in Review

- **SNAC Lab Topics 2012-13:**
  - ACC 101
  - Care coordination models
  - Organizational DNA
  - Integration of oral health care
  - Patient experience of care
  - Safety net perspectives on the ACC
  - HB12-1281 strategies and opportunities
  - The data story

Questions and a Proposal

- Dissemination?
- In what ways can CHI inform the discussion around the ACC?
  - Other safety net issues?
- What are the burning ACC questions?
- What about the learning lab format have you liked? What needs improving?

Some Options for the SNAC

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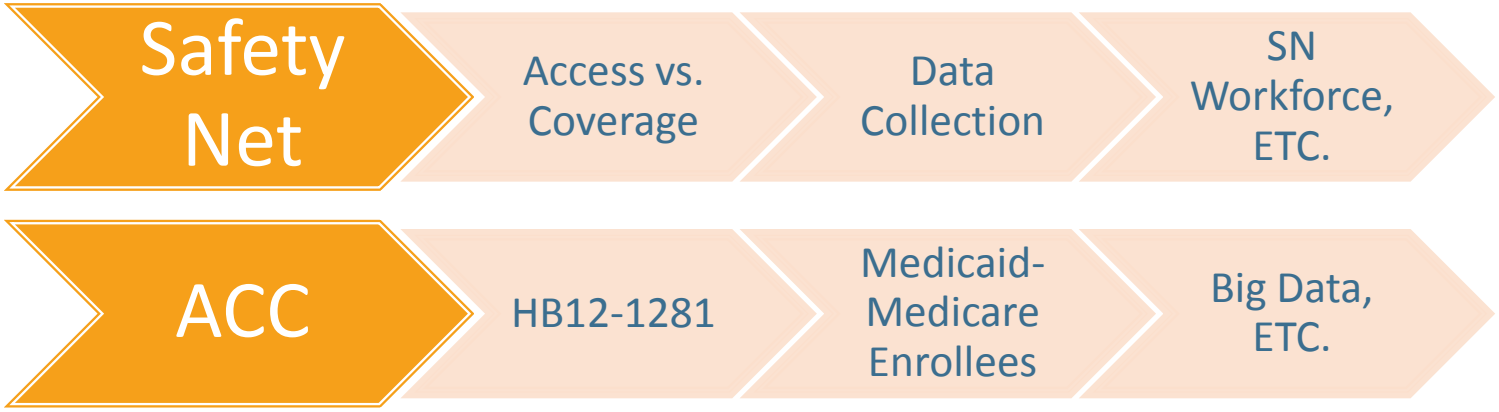

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