



# Accountable Care Collaborative Program Design Decisions

*September 19, 2016*

The Accountable Care Collaborative is the core of Health First Colorado, Colorado's Medicaid program. It promotes improved health for members by delivering care in an increasingly seamless way. The program makes it easier to meet member and provider needs and makes smarter use of every dollar spent.

Over the last five years, the effort has shown real progress in creating a health care delivery program that improves health outcomes, better manages care and is a smarter use of resources. Like every other organization in today's health care landscape, Health First Colorado must continue to serve members and navigate the increasingly complex and volatile health care landscape. The most important improvement we can make for individuals is to continue to move toward more coordinated and integrated care that increasingly rewards improved health outcomes.

Key program design decisions for the next phase of the Accountable Care Collaborative that will make these important improvements are outlined in the table below.



Program Feature	Rationale	Input Activities & Information
<p>The creation of a single administrative entity for behavioral health and physical health called a Regional Accountable Entity.</p>	<p>Combining administrative responsibilities will promote integration of services and ensure accountability for comprehensive, person-centered care.</p> <p>Contracting with a single entity also supports the Department’s desire to realize administrative efficiencies.</p>	<p>In the Department’s 2014 Request for Information, many of the respondents suggested the creation of a single administrative entity.</p> <p>The concept was further supported by recommendations from the Accountable Care Collaborative Program Improvement Advisory Committee and its subcommittees.</p>
<p>The Department will continue a seven region structure based on the current Accountable Care Collaborative regions with one change. Elbert County will move to Region 3.</p>	<p>One of the frequently cited strengths of the Accountable Care Collaborative is that the program is local, flexible, and community-based. Seven regions allows for greater local presence and promotes the leveraging community resources to serve the needs of local populations.</p>	<p>In the Department’s 2014 Request for Information, many responses supported combining the Regional Collaborative Care Organization and Behavioral Health Organization regions to continue to support administrative agencies with pre-established relationships.</p> <p>In July 2015 stakeholder meetings were held in Loveland, Fort Collins, Greeley, and Kiowa. The goal of the meetings were to solicit community feedback on the regional placement of Larimer and Elbert Counties. Feedback from the community supported retaining Larimer County in Region 1 and moving Elbert County from Region 7 to Region 3.</p> <p>The Department sought input from the Accountable Care Collaborative Program Improvement Advisory Committee and its Subcommittees on the Accountable Care Collaborative regional structure as well as analyzed claims data to assess physical health utilization and referral patterns.</p>



<b>Program Feature</b>	<b>Rationale</b>	<b>Input Activities &amp; Information</b>
<p>Mandatory enrollment in the Accountable Care Collaborative for all full benefit Health First Colorado members.</p>	<p>Accountable care and capitated models work most effectively when members are connected to the Regional Accountable Entity and care providers as quickly as possible.</p> <p>The Accountable Care Collaborative has reported reductions in utilization of unnecessary high-cost services and reduced costs for enrolled members that could benefit all Medicaid Health First Colorado members.</p> <p>Mandatory enrollment would apply to all full-benefit Health First Colorado members including children, adults, individuals utilizing long term services and supports.</p>	<p>Mandatory enrollment is not a new concept for Health First Colorado. Currently, mandatory enrollment is a key feature of the Community Behavioral Health Services Program, the program that provides all Health First Colorado members with behavioral health coverage. Through automatic, mandatory enrollment Health First Colorado members are able to get connected to behavioral health services more quickly.</p> <p>The Department sought input and received support for mandatory enrollment from the Accountable Care Collaborative Program Improvement Advisory Committee.</p> <p>Additionally, budget analysis supported projected cost savings by including all full-benefit Health First Colorado members in the Accountable Care Collaborative.</p>



<b>Program Feature</b>	<b>Rationale</b>	<b>Input Activities &amp; Information</b>
<p>Phase II will provide primary care payments that incentivize continued evolution through greater team-based care, integration of services and higher standards.</p>	<p>In an effort to provide great coordinated and integrated care to Health First Colorado members, payments to primary care providers need to support the delivery of enhanced behavioral health services in the primary care setting, while incentivizing quality and cost efficiencies.</p>	<p>During the Enhanced Primary Care Medical Provider program and corresponding December 2013-May 2014 stakeholder process (specifically Accountable Care Collaborative Program Improvement Advisory Committee Provider and Community subcommittee), the Department received support for increasing payments to primary care medical providers for delivering higher levels of medical home care. Additional support for the enhanced Primary Care Medical Provider program was voiced at an August 2016 Program Improvement Advisory Committee Provider and Community meeting when preliminary results of the Enhanced Primary Care Medicaid Provider program were shared.</p> <p>Members of the Accountable Care Collaborative Program Improvement Advisory Committee also voiced continuing support for increasing payments to primary care medical providers to support greater coordination and integration at a member's medical home.</p> <p>Ongoing Department conversations with the Colorado Medical Home Coalition has also provided support for increased payments.</p>



<b>Program Feature</b>	<b>Rationale</b>	<b>Input Activities &amp; Information</b>
<p>The Department will pay for behavioral health services utilizing a modified capitation.</p>	<p>Capitated payments for behavioral health services preserves important flexibility for meeting the needs of individuals with severe and persistent mental illness and complex behavioral health conditions.</p> <p>Modifications in the covered diagnosis requirements will increase access to behavioral health services, particularly those delivered in primary care settings.</p>	<p>The Department’s 2014 Request for Information highlighted the value of the capitated behavioral health program, while also identifying barriers to care. Through a modified capitation, the Departments hopes to increase access while preserving flexibility for community supports.</p> <p>In December 2015 the Department engagement more than 175 community members, providers, advocates and others to discuss the proposed Phase II behavioral health payment structure. The meeting helped to provide additional support for retaining a capitation for behavioral services.</p> <p>Additionally, conversations with multiple community primary care providers offering on-site behavioral health services further identified the need for modifications to the current payment structure to better support integrated care models.</p>



Program Feature	Rationale	Input Activities & Information
<p>Direct payment of per member per month payments from Regional Accountable Entities to providers.</p>	<p>Results from the early years of the Accountable Care Collaborative show that it is important for regional entities to have flexibility and authority to develop incentives and payment structures to improve care.</p> <p>The Phase II model of allowing the Regional Accountable Entities to directly pay provider a per member per month will allow the regional entities implement payments that best support a primary care medical provider’s practice model and goals.</p>	<p>An external evaluation of the Accountable Care Collaborative conducted by the University of Colorado reported variation in primary care medical provider’s understanding and use of the current payment of the per member per month. By allowing regional authority and flexibility, the Department seeks to further understanding and utilization of the payments.</p> <p>The Department consulted the Accountable Care Collaborative Program Improvement Advisory Committee, which includes providers, on the best mechanism for paying providers their per member per month payment, while also providing the regional entities the flexibility to incent providers in a way that is tailored to the needs of the providers in the region.</p> <p>During the first phase of the Accountable Care Collaborative, the Regional Care Collaborative Organizations requested more opportunities to build relationships with primary care medical providers and ensure progress toward Accountable Care Collaborative outcomes. The regional entities believe this can be achieved, in part, by allowing the direct payment of a provider’s per member per month.</p>



Program Feature	Rationale	Input Activities & Information
<p>Phase II of the Accountable Care Collaborative will enhance care coordination requirements for the whole population in the Regional Accountable Entities' service area.</p>	<p>The population served by Health First Colorado is diverse and many members have complex needs that require unique care coordination approaches and competencies.</p> <p>A broader population health management approach by the Regional Accountable Entities will promote prevention and early intervention to support member health as well as increasing partnerships with community resources.</p>	<p>Members of the Accountable Care Collaborative Program Improvement Advisory Committee, and its subcommittees were regularly consulted during the first phase of the Accountable Care Collaborative on the best way to define and support care coordination</p> <p>The Department has also identified key population health learnings through the implementation of the Health First Colorado Accountable Care Collaborative: Medicare and Medicaid Program that supports a whole population approach.</p>

**For more information contact**

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# Accountable Care Collaborative

## Accomplishments

### Improve Health Outcomes

- Emergency room visits are decreasing
- Hospital readmissions are dropping
- Prenatal care has increased
- High cost imaging has decreased

### Better Coordinated Care

- **More Coloradans are connected to a medical home**, the single greatest predictor of improved health, especially for individuals struggling with complex health issues.
- **Greater coordination of care**, including behavioral health care and needed community supports like transportation services, is occurring.

### Smarter Use of Resources

- Providers are being paid for quality outcomes



**COLORADO**

Department of Health Care  
Policy & Financing



# Checks & Balances Between Each

## Federal Role

The role of the federal government is to determine if program design and operations comply with federal regulations.

Federal funds are provided only if CMS approves the program.

### *Mechanisms*

Fed. Waiver Approval  
State Plan Amdt Approval  
Contract/Rate Approval

## State Legislative Role

The role of the state legislature is to approve statutes, spending authorizations, and budget provisions to guide state programming.

State funds are subject to the decisions of the JBC & legislature.

### *Mechanisms*

State Statue  
Dept. Budget  
Approval of Budget Actions

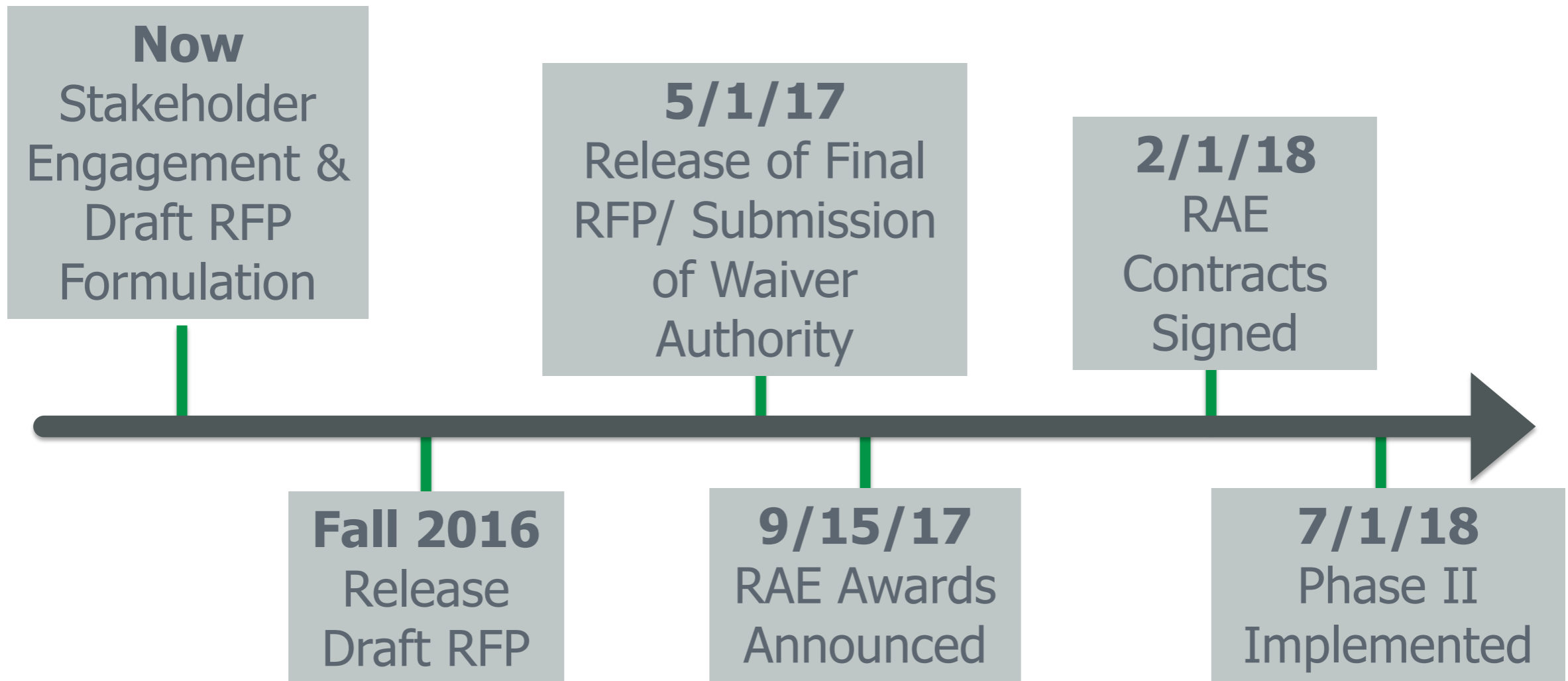
## State Department Role

The role of the state department is to design state programs and services to meet goals and objectives guided by legislative actions, regulatory requirements, and industry best practices.

### *Mechanisms*

Regulations  
Contract Requirements  
Policies & Procedures

# Procurement Timeline



# *Opportunities for Request for Proposal Feedback*

Following the release of the draft request for proposal, the Department will host a number of opportunities for the community, providers and advocates to learn about the request for proposal and provide feedback.

Webinar / phone

In-person meetings in each of the 7 Regional Accountable Entities

Acceptance of written input