Accountable Care Collaborative Program

Primary Care Medical Provider
Per Member Per Month Rate Table

The following list contains information on per member per month payment to Primary Care Medical Providers for Medicaid clients enrolled in the Accountable Care Collaborative (ACC) program.

For more information about the ACC program visit the ACC website or contact Marceil Case at Marceil.case@state.co.us/303-866-3054.

EFFECTIVE DATE	AMOUNT
Effective through June 30, 2012	• $4.00 per member per month
Effective July 1, 2012	• $3.00 per member per month • Up to an additional $1.00 per member per month based on RCCO (Regional Care Collaborative Organization) regionalized performance on the Accountable Care Collaborative Key Performance Indicators (KPIs) (see table below). • The KPIs are determined based on quarterly regional fiscal-year-to-date performance. They will be paid out within 120 days from the last day of the quarter for which performance is calculated.

Incentive Payment Table

MEASUREMENT AREA	PERFORMANCE TARGET	INCENTIVE PAYMENT METHODOLOGY
Emergency Room Visits per 1,000 full time enrollees (FTEs)	Percentage improvement compared to the RCCO's own regional FFS baseline for the fiscal year or most recently available twelve-month period Targets and baselines are developed using historical data. The SDAC establishes a RCCO-specific baseline using actual fiscal year FFS experience from previous year data. **Level 1 Target**: Utilization below baseline but less than 5% improvement **Level 2 Target**: Baseline utilization minus 5% or more	**Level 1**: 66% of full amount **Level 2**: 100% of full amount The full amount available for this measure is $.33 PMPM for the RCCO and $.33 PMPM for the PCMPs.
Hospital Re-admissions per 1,000 FTEs	Percentage improvement compared to the RCCO's own regional FFS baseline for the fiscal year or most recently available twelve-month period Targets and baselines will be developed using historical data. The SDAC will establish a RCCO-specific baseline using actual fiscal year FFS experience from previous year data. **Level 1 Target**: Utilization equal to or below baseline but less than 5% improvement **Level 2 Target:** Baseline utilization minus 5% or more	**Level 1:** 66% of full amount **Level 2:** 100% of full amount The full amount available for this measure is $.33 PMPM for the RCCO and $.33 PMPM for the PCMPs.
Outpatient Service Utilization per 1,000 FTEs MRI, and CT scans, per 1,000 FTEs	Percentage improvement compared to the RCCO's own regional per full-time enrollee utilization of MRI and CT scans for the fiscal year or most recently available twelve-month period **Level 1 Target:** Utilization equal to or below baseline but less than 5% improvement **Level 2 Target:** Baseline utilization minus 5% or more	**Level 1:** 66% of full amount **Level 2:** 100% of full amount The full amount available for this measure is $.33 PMPM for the RCCO and $.33 PMPM for the PCMPs.