



Recommendation to the PIAC: Care Coordination Requirements for ACC v2.0

August 7, 2015

Summary

The Department has asked for feedback regarding care coordination requirements for the single administrative entities that will undertake this process for both physical and behavioral health in the next iteration of the Accountable Care Collaborative.

Specifically, the Department has asked for feedback regarding the following points;

- Whether or not there should be special care coordination requirements for specific populations (and thoughts on what these special requirements might be)
- Appropriate level of specificity in future contracts
- Responsibilities and duties currently missing in the scope of work that should be included in future requirements
- How to successfully measure care coordination.

Recommended Action

In reviewing these decision points, the Provider & Community Issues Sub-committee has formulated a workgroup. The workgroup has recommended the following principles be considered in any decisions regarding care coordination requirements in the next iteration of the Accountable Care Collaborative;

- Care coordination responsibilities should be delegated – consistently across regions – to providers who have the capacity to take on that responsibility.
- Regional Care Collaborative Organizations (RCCOs) should be required to describe their strategy for coordinating care of clients with complex healthcare needs.
- Care coordination measurements should focus on outcomes, not on processes.
- Care coordination outcomes and KPI measurements should be aligned.
- The Department should consider aligning with already established care coordination standards – such as the National Committee for Quality Assurance (NCQA) Primary Care Medical Home (PCMH) standards.
- RCCOs performing care management should follow NCQA guidelines for care coordination with an effort being made to achieve accreditation.

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- If a Primary Care Medical Provider (PCMP) has already received recognition from a nationally recognize accrediting agency (i.e. NCQA), that recognition should be utilized to establish the PCMPs ability to meet State and RCCO care coordination standards (i.e. Enhanced Primary Care Medical Provider, care coordination delegation, etc.) and a separate assessment should not be conducted.
- Care coordination measurement should consider the setting (RCCO vs. practice-level)
- Process for delegation of care coordination should be standardized such that the relationship between the RCCO and its delegates is similar across regions.
- Stratification should be standardized across RCCOs and should distinguish between pediatric vs. adult members.
- The Department should consider a communication requirement such that RCCOs will notify each other when clients move between regions.
- The Department should consider the Association of Maternal & Child Health Programs care coordination standards for children and youth with special healthcare needs.

