# Accountable Care Collaborative (ACC)

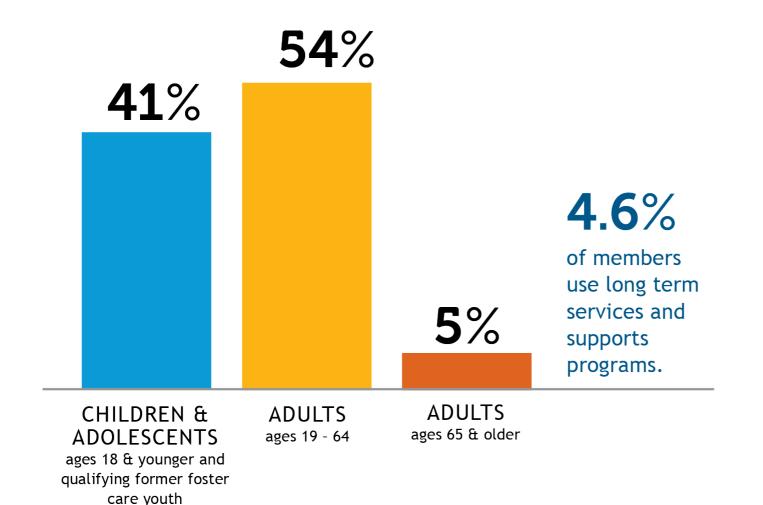
An Introduction

### **Our Mission**

Improving health care access and outcomes for the people we serve while demonstrating sound stewardship of financial resources



### HCPF: WHO WE SERVE VIA MEDICAID



Federal Poverty Levels by Family Size\*

FAMILY OF 1 FAMILY OF 4 \$16,620 \$34, 248

\*Some earning more may still qualify

Nearly 1.26 million Coloradans (about 22.1% of the population)





### Managed Care in Colorado Medicaid

#### **Accountable Care Collaborative**

- Administered by RCCOs
- Managed FFS for Physical Health
- Medical Home
- Cost savings
- Iterative

#### Community Behavioral Health Services Program

- Administered by BHOs
- Capitated Mental Health and SUD Services
- Cost Savings

### Accountable Care Collaborative Phase II

- Administered by RAEs
- Join administration of physical and behavioral health
- Refine focus on cost and outcomes

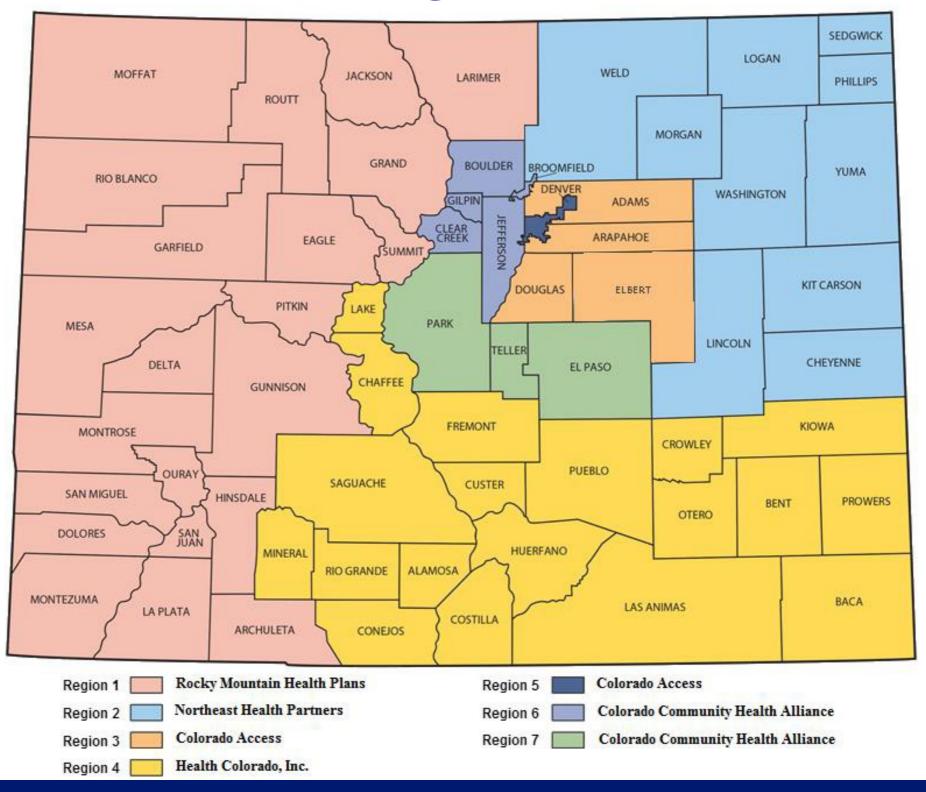
1995

2011

2018



### Regions



### Accountable Care Collaborative

### Improve Health and Reduce Costs

Medical Home

Ensure

Medicaid

members

have a focal

point of

care.

Behavioral Health

Comprehensive community-based system of mental health and substance use disorder services.

## Regional Coordination

Medicaid
members have
complex needs
and are served by
multiple systems.
Regional umbrella
organizations
help to
coordinate across
systems.

### **Data**

Members,
providers and the
system receive
the data needed
to make real-time
decisions that
improve care,
increase
coordination of
services and
improve overall
efficiencies.

### Accountable Care Collaborative

### Goals

To improve member health & reduce costs

### **Objectives**

- 1. Join physical and behavioral health under one accountable entity
- 2. Strengthen coordination of services
- 3. Promote member choice and engagement
- 4. Pay providers for the increased value
- 5. Ensure greater accountability and transparency



### Accountable Care Collaborative

### Regional Accountable Entity

# Physical health care

Per member/
per month

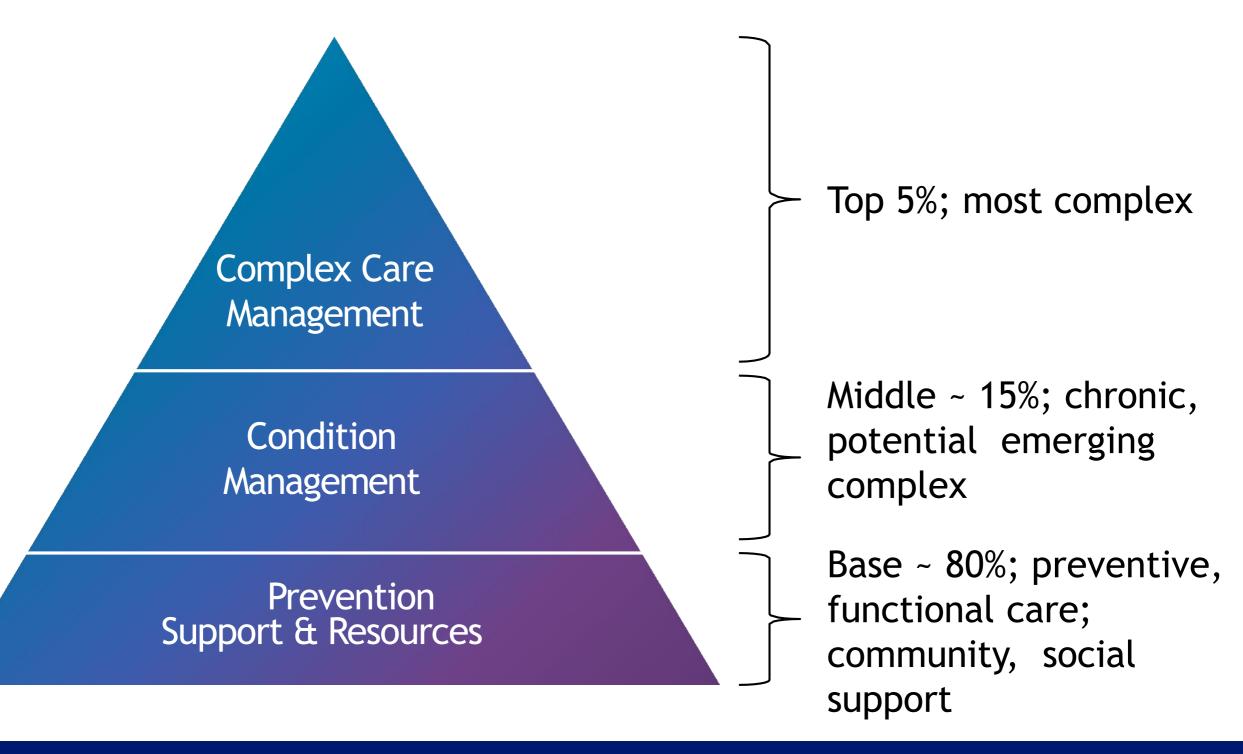
### Behavioral health care

Behavioral health capitation

## Refining ACC Focus

- Department focus on member health improvement
- Governor's health care affordability objectives
- Medicaid Cost Control goals

# Statewide Approach to Addressing Member Health



### **Cost Trend and Outcome Metrics**

- Cost Trend Dashboard
- Clinical Risk Stratification Dashboard
- Performance Pool Outcome Metrics
- Deliverables
- Payment

# Role of RAEs: Primary Care Network Management

- Contract with a network of Primary Care Medical Providers (PCMPs) to serve as medical home
  - PCMPs expected to meet certain requirements
- Pay administrative payments to PCMPs to serve as medical home (e.g. care coordination)
- Support providers in coordinating care across disparate providers
- Provide administrative, financial, data and technology, and practice transformation assistance

## Role of RAEs: Behavioral Health Network Management

- Contract with statewide network of behavioral health providers
  - Credential providers to ensure quality
  - Negotiate reimbursement rates
- Utilization management of covered behavioral health services
- Reimburse behavioral health providers for all services covered under the capitated behavioral health benefit

# Capitated Behavioral Health Benefit

Members must meet the following criteria

- Have a covered mental health or substance use disorder diagnosis
- Service is medically necessary
- Require a covered service

# Capitated Behavioral Health Benefit

#### State Plan/Medical Services

Behavioral Health Assessment

School-Based Mental Health Services

**Psychotherapy** 

Physician Services

Pharmacological Management

Outpatient Day Treatment

**Outpatient Hospital** 

Psychosocial Rehabilitation

**Crisis Services** 

**Emergency Services** 

Inpatient Psychiatric Hospital

### State Plan/Medical Services— SUD Specific

Substance Use Disorder Assessment

Alcohol/Drug Screen Counseling

**Medication Assisted Treatment** 

Social Ambulatory Detoxification

### Community-based/Alternative Services

Prevention/Early Intervention

Clubhouses/Drop-in Centers

**Vocational Services** 

Intensive Case Management

**Assertive Community Treatment** 

Residential (Mental Health)

Respite Care



# Limited Managed Care Capitation Initiatives

Capitated Physical Health Services

- Rocky Mountain Health Plans Prime operates in 6 counties in Region 1
- Denver Health Medicaid Choice operates in 4 counties

## Pay for Performance

- Key Performance Indicators
- The Behavioral Health Incentive Program
- Flexible Funding Pool
- Public Reporting





## Thank You!

