

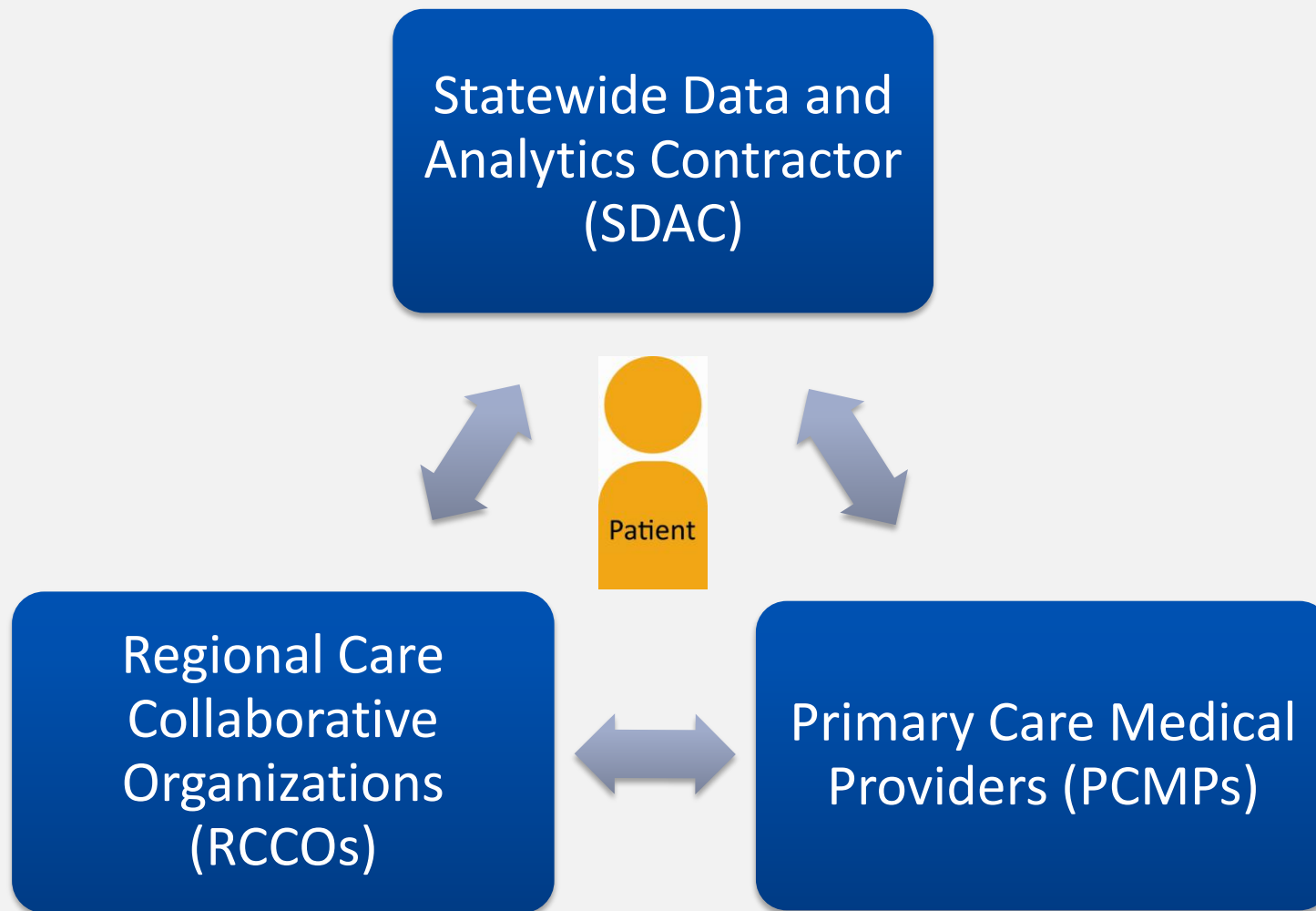
Colorado Medicaid's Accountable Care Collaborative Program



Evolution of Payment Reform in Colorado

- Unsustainable unmanaged FFS delivery system.
- Non-value based PCP payment under PCCM model.
- Children's Medical Home enhanced rates for well child services. More robust contract requirements.
- ACC Pay for Performance within broader delivery system reform.

ACC Program Components



Components of the ACC

RCCO Responsibilities

Regional Care
Collaborative
Organizations

RCCOs

- Achieve financial and health outcomes
- Ensure comprehensive care coordination and a Medical Home level of care for every Member through:

Network
Development/Management
Provider Support
Medical Management and Care
Coordination
Accountability/Reporting

Components of the ACC

- **PCMP** serves as a Medical Home

Member/family centered

Whole person oriented

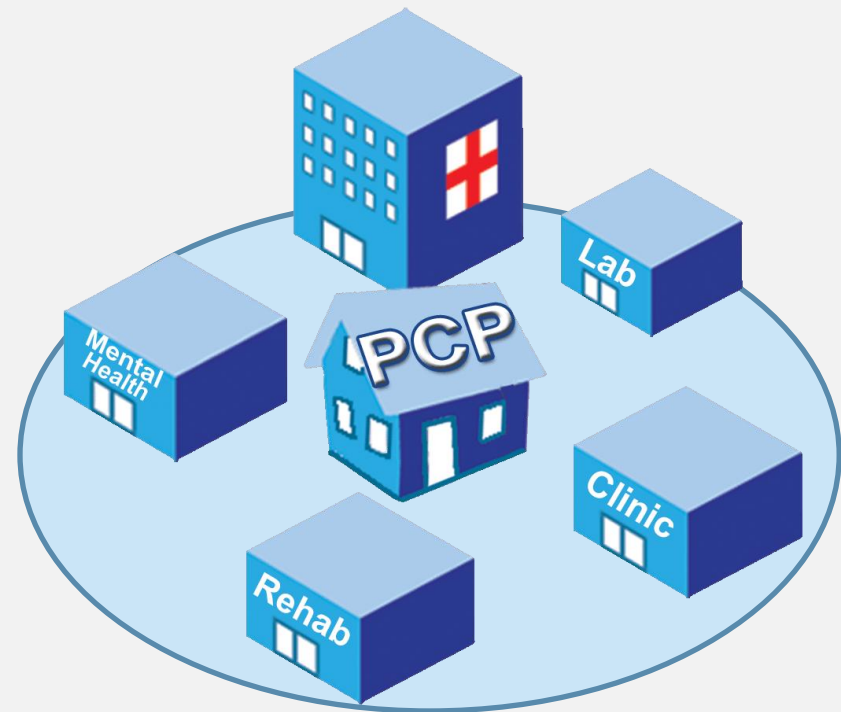
Coordinated care

Promotes client self-management

Care provided in a culturally sensitive and linguistically sensitive manner

Accessible

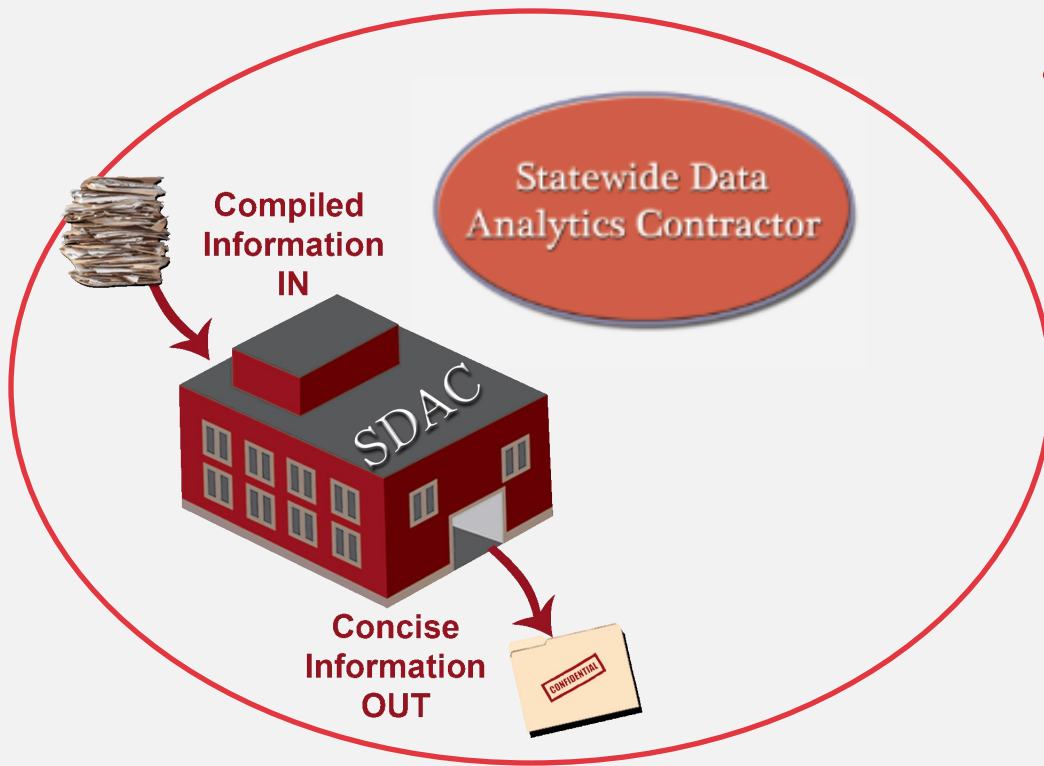
PCMP Responsibilities



Components of the ACC

SDAC Responsibilities

- Data Repository
- Data Analytics & Reporting
- Web Portal & Access
- Accountability & Continuous Improvement



Client Selection & Enrollment

Clients enrolled from FFS and PCPP

- Initial ratio of 1/3 children, 2/3 adults
 - Excluded institutionalized and Medicare-Medicaid enrollees
 - If possible, clients attached to a provider by claims history
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- Fall 2012, removed cap on children to begin aligning with Medicaid ratio of 1/3 adults, 2/3 children
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- Voluntary (passive) enrollment*
 - Clients notified by enrollment letter
 - Call contracted Enrollment Broker to opt out
 - Clients may also change PCMPs via Enrollment Broker

*Adults without Dependent Children are mandatorily enrolled

PCMP & RCCO Reimbursement

- FFS reimbursement to PCMPs for medical services
- Per Member Per Month (PMPM) payment to PCMP for medical home services
- PMPM payment to RCCOs for PCMP support and member care coordination*
- PMPM to RCCOs was adjusted in November 2012 to account for changes in case mix (more children)
- Incentive Payments initiated July 2012

*Children's Medical Home providers do not receive the PMPM because they are already receiving the enhanced rate.



First Year Results

- Estimated cost reduction of \$20 million, but actual savings hard to calculate.
- When compared to non-ACC enrollees:
 - 8.6 percentage point reduction in hospital readmissions
 - Lower rate of increase in ER visits
 - Use of MRIs and other high-cost imaging decreased three percentage points
- Lower rates of preventable hospitalizations for enrollees with diabetes and asthma
- Report to Colorado Joint Budget Committee delivered on Nov. 1st. Report available online at:
<http://www.colorado.gov/cs/Satellite?c=Page&childpagename=HCPF%2FHCPFLayout&cid=1233759745246&pagename=HCPFWrapper>.



Next Steps

- Enhanced Integration
- CPC Initiative
- Medicare-Medicaid Enrollees
- 1281 Payment Reforms
- Shared Savings
- Enhanced Data Collection and Sharing

Questions?

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