



# MaineCare

## Accountable Communities Initiative

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**December 5, 2012**

**<https://www.maine.gov/dhhs/loms/vbp>**

# MaineCare- Maine's Medicaid Program

- Approximately 340,000, one in four, Mainers are enrolled in MaineCare
- MaineCare accounts for about 1/3 of Maine's overall budget
- Maine is a wholly fee for service state.
- MaineCare has over 400 PCPs participating in Primary Care Case Management (PCCM). Enrollment is mandatory for TANF populations, children, pregnant women and childless adults below 100% FPL.
- Rated 8<sup>th</sup> healthiest state in the nation
- Oldest median age in the nation



# In August 2011, Maine DHHS announced Value-Based Purchasing Strategy

The Department moved away from a Managed Care philosophy focused principally on cost-containment to leverage on-the-ground initiatives to achieve the right care for the right cost.

## Create Accountable Communities

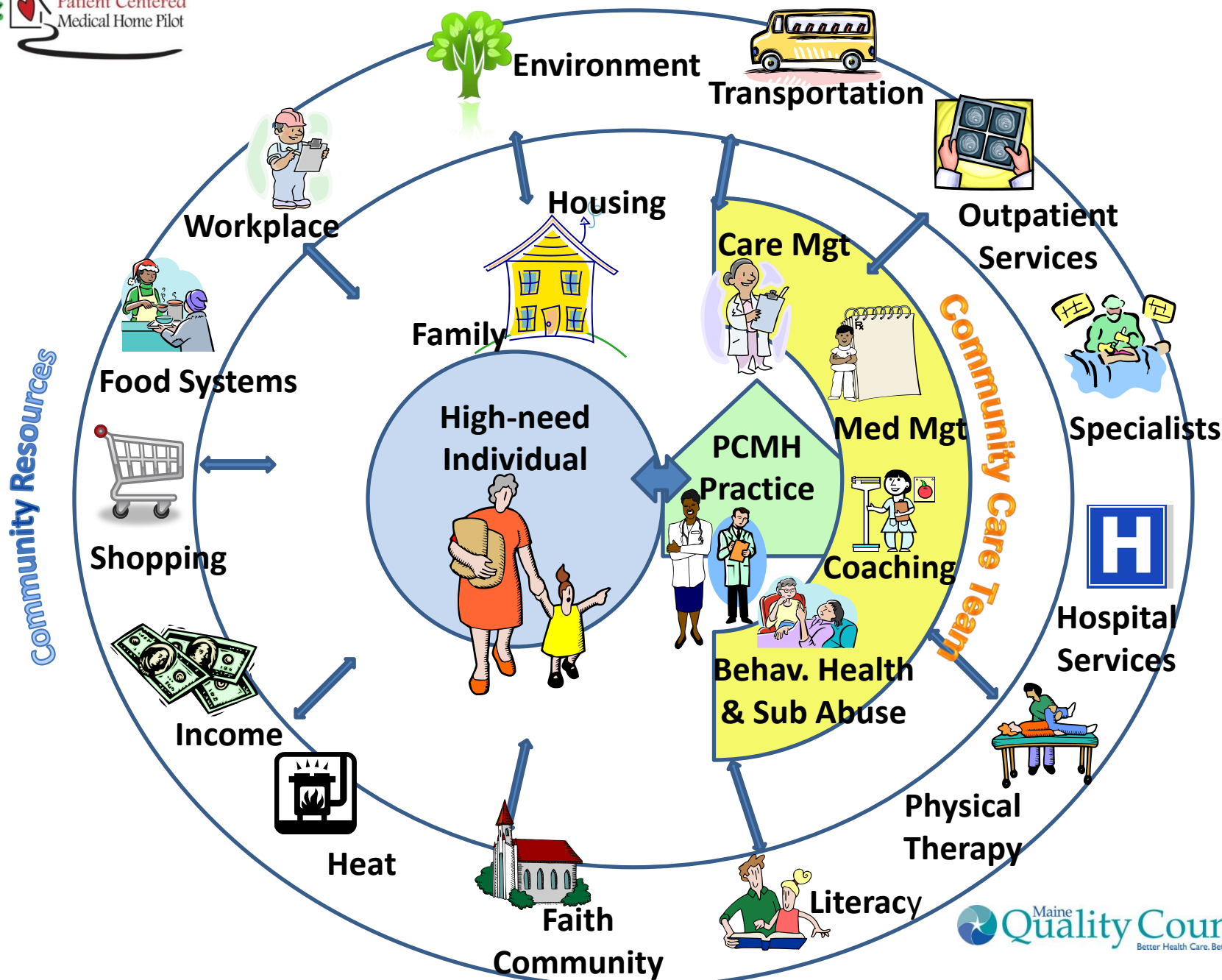
### Improve Transitions of Care

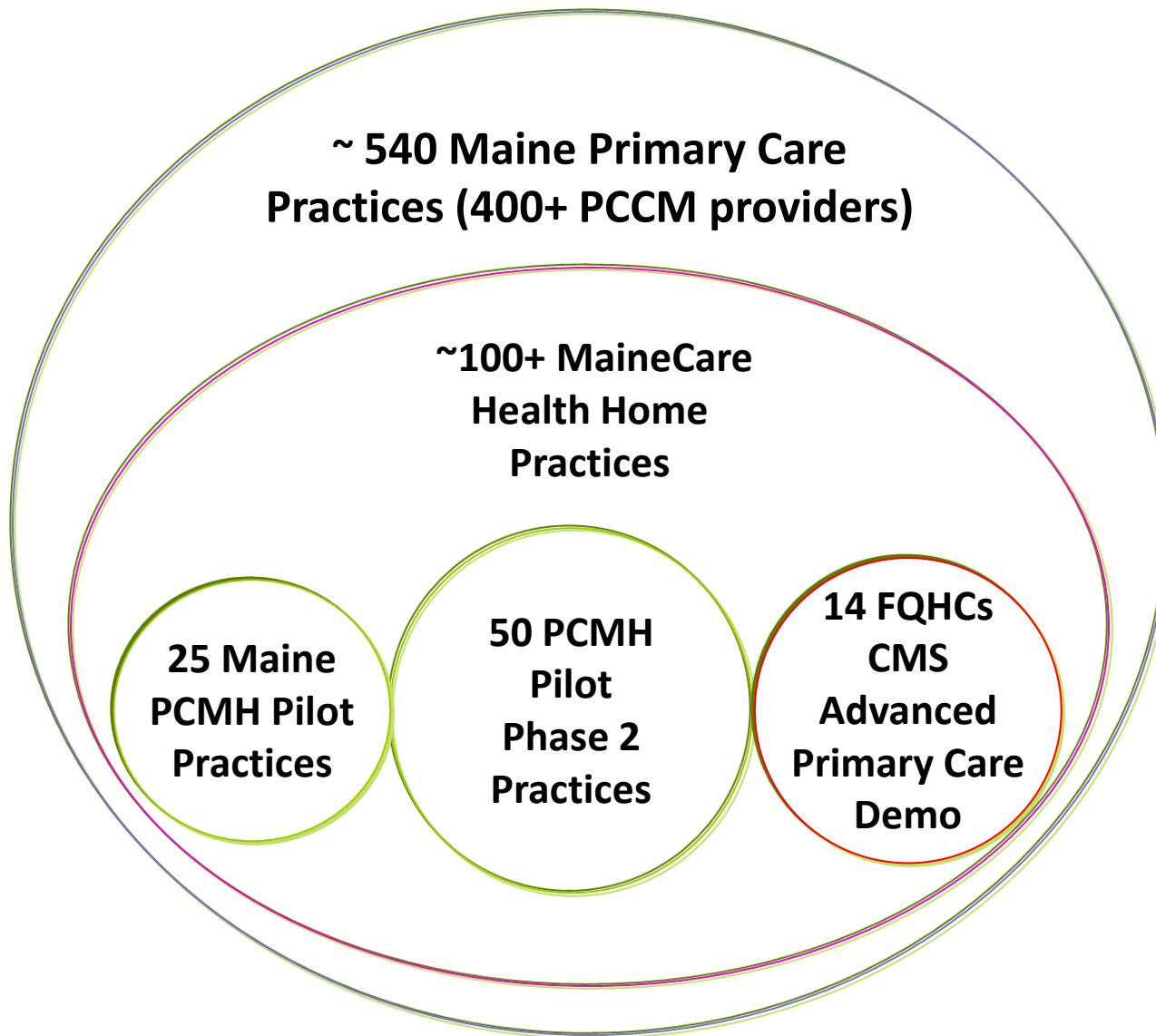
- ED Collaborative Care Management Initiative
- Health Homes focus

### Strengthen Primary Care

- Maine PCMH Pilot/ Health Homes Initiative
- Reform of Primary Care Provider Incentive Payment program

# Maine Multi-Payer Patient-Centered Medical Home Pilot





## Basic Components:

- Providers come together to engage in an alternative contract with the Department to share in any savings achieved for an assigned population.
- The amount of shared savings depends on the attainment of quality benchmarks.
- Open to any willing and qualified providers statewide
  - Qualified providers will be determined through an application process
  - Accountable Communities will not be limited by geographical area
- All fully eligible Medicaid members eligible, including duals
- Members retain choice of providers
- Alignment with aspects of other emerging ACOs in the state wherever feasible and appropriate
- Flexibility of design to encourage innovation

# Accountable Communities Proposed Shared Savings/ Losses Models

The Department has proposed that the Accountable Communities Initiative feature two models:

1. Shared Savings Only: minimum 1000 patients attributed
  - » Share in a maximum of 50% of savings, based on quality performance
  - » Are not accountable for any downside risk in any of the three performance years
  - » Subject to lower per patient cap
2. Shared Savings & Losses: minimum 2000 patients attributed
  - » Share in a maximum of 60% of savings, based on quality performance
  - » Are not accountable for any downside risk in the first performance year
  - » In year 2, are accountable for up to 5% of any losses.
  - » In year 3, are accountable for up to 10% of any losses.
  - » Must demonstrate capacity for risk sharing



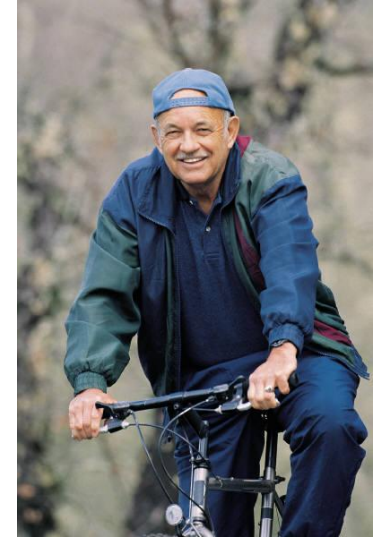
# How do PCMH and Accountable Communities fit together?

**The Bike  
=  
Accountable  
Community**



For MaineCare, the Accountable Community is vehicle, or “bike,” that allows providers to come together to share in any savings they achieve from providing coordinated, quality care.

**The Rider  
=  
PCMH**



The PCMH is an on-the-ground model to provide more coordinated and high quality care. A PCMH makes an excellent “rider” for an Accountable Community “bike.”

In the interest of flexibility, MaineCare is not requiring that PCMHs be a part of Accountable Communities. They do, however, provide a natural foundation.