



Health Homes for Iowa Medicaid Members

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Updates on 3 Initiatives

- Primary Care Health Home Program
- Specialized Health Homes for members with a Serious and Persistent Mental Health (SPMI) Condition
- Financial Alignment Model for Dual Eligibles (Medicare-Medicaid members)



Authority: ACA Section 2703

- Option to submit State Plan Amendment (SPA) depicting a health home model targeting chronic conditions:
 - Primary Care SPA:
 - Approved June 8, 2012 / **Effective July 1, 2012**
 - Specialized Population SPA (kids Mental Health focus):
 - In development
 - TA and CMS consultations through the end of 2012
 - Target effective date April 2013
- Draw 90/10 Federal match for 8 Qrts for Health Home Services



“Primary Care”

Health Home Statistics for Members

- Member consents to enroll by PCP
- As of December 1st:
 - 1853 members assigned
 - 46% Tier 1
 - 40% Tier 2
 - 12% Tier 3
 - 2% Tier 4
 - Almost half are Duals



“Primary Care” Health Home Statistics for Providers

17 Health Home Entities Enrolled:

- 20 counties
- 54 different clinic locations
- 492 individual practitioners

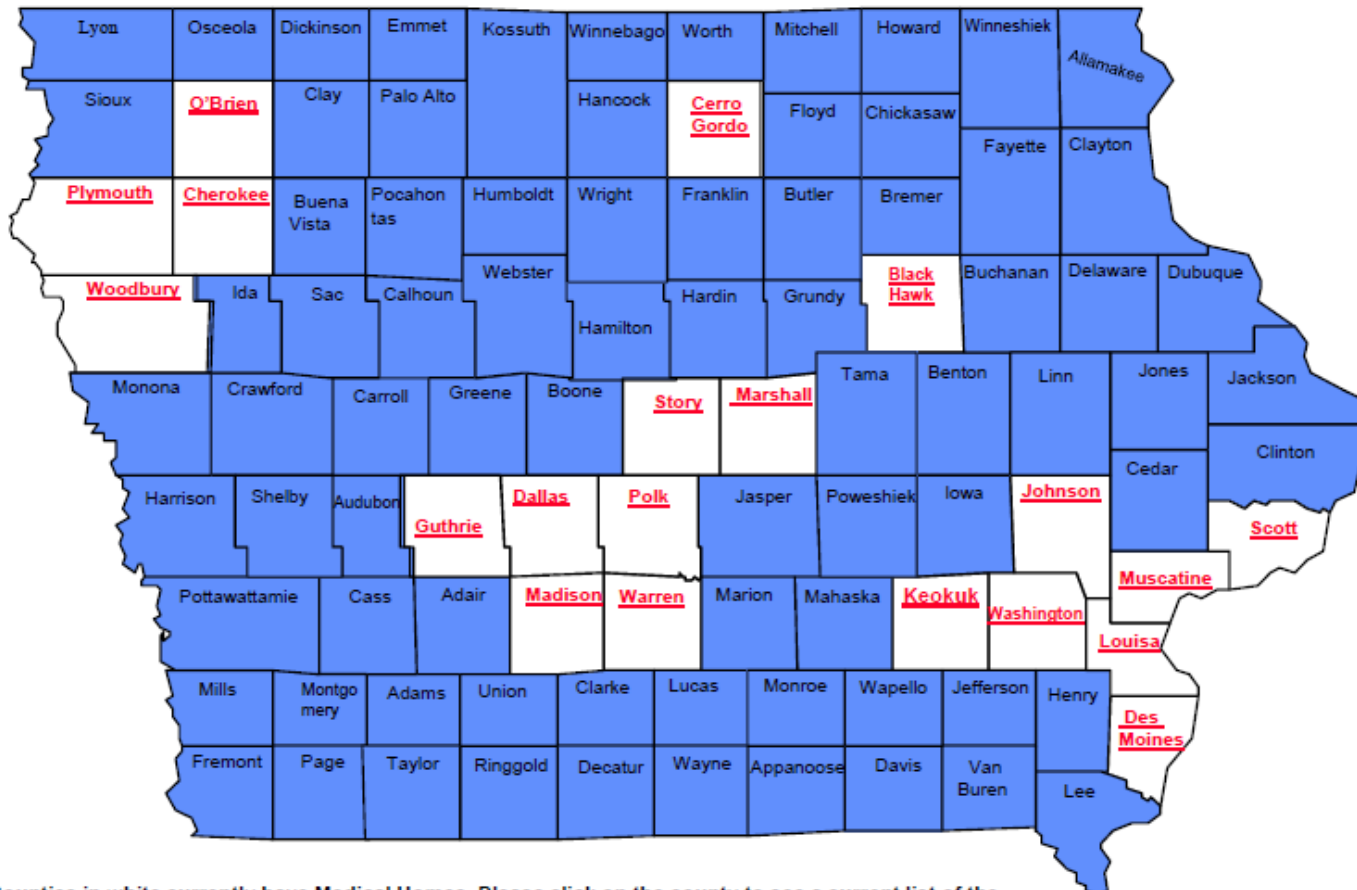
IME Support of new network:

- Two Implementation TA meetings (1:1)
- Collaborative Learning Network (Monthly)



Iowa Department of Human Services

Iowa Medicaid Health Homes – October 2012





Primary Care HH Payment Methodology

In addition to the standard FFS reimbursement...

Patient Management Payment :

- Per Member Per Month (PMPM) targeted only for members with chronic disease
- Tiered payments increase (levels 1 to 4) depending on the number of chronic conditions
- Performance payment tied to achievement of quality/performance benchmarks



Primary Care Payment Rate

Member's Tier	PMPM Rate
Tier 1 (1-3 chronic conditions)	\$12.80
Tier 2 (4-6 chronic conditions)	\$25.60
Tier 3 (7-9 chronic conditions)	\$51.21
Tier 4 (10 or more chronic conditions)	\$76.81

- Practice uses Patient Tier Assessment Tool to identify correct tier
- Health Home submits monthly HCFA claim with diagnosis codes that support the tier
- Payments are verified retrospectively through claims data, using the normal IME verification process.



Ensure desired outcomes are achieved

Payment is directed to only practices that commit to providing:

- Comprehensive Care Management
- Care Coordination
- Health Promotion
- Comprehensive Transitional Care
- Individual and Family Support Services
- Referral to Community and Social Support Services

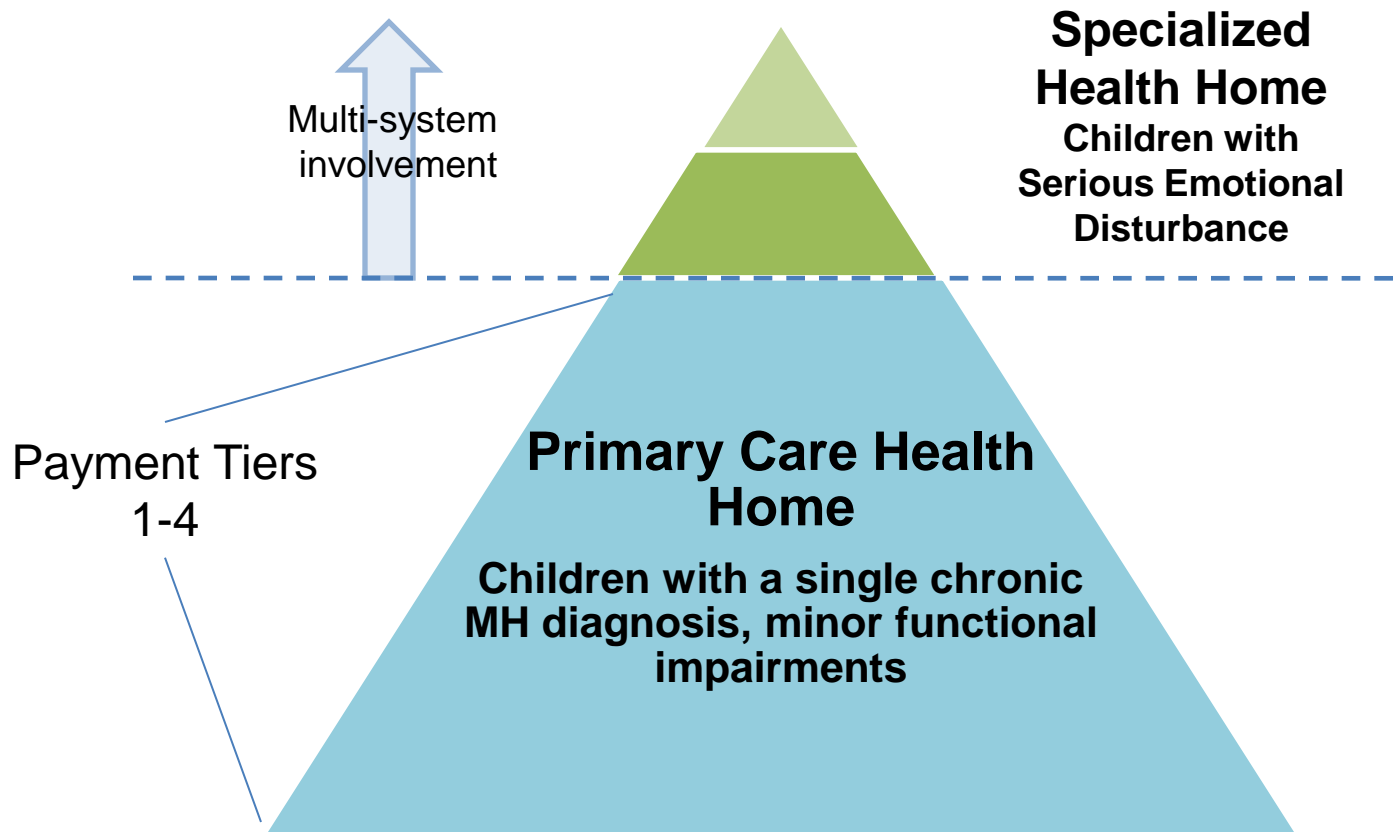


“Specialized” Health Home

- Expansion of health home model for adults and children with serious and persistent mental illness
 - Pilots operating for adults
 - Children’s concept developed by Children’s Disability Workgroup to implement “**Systems of Care model**”
 - Many details yet to be determined, but key details very likely to include:
 - Specialized provider requirements due to special population needs
 - Administered through the Iowa Plan
 - Additional payment tiers above the current 4 tiers due to high need of the population
 - Patient/Family Centered, peer support, team approach



Primary Care and Specialized Health Home Model – Example for children with a mental health condition





Dual Eligibles

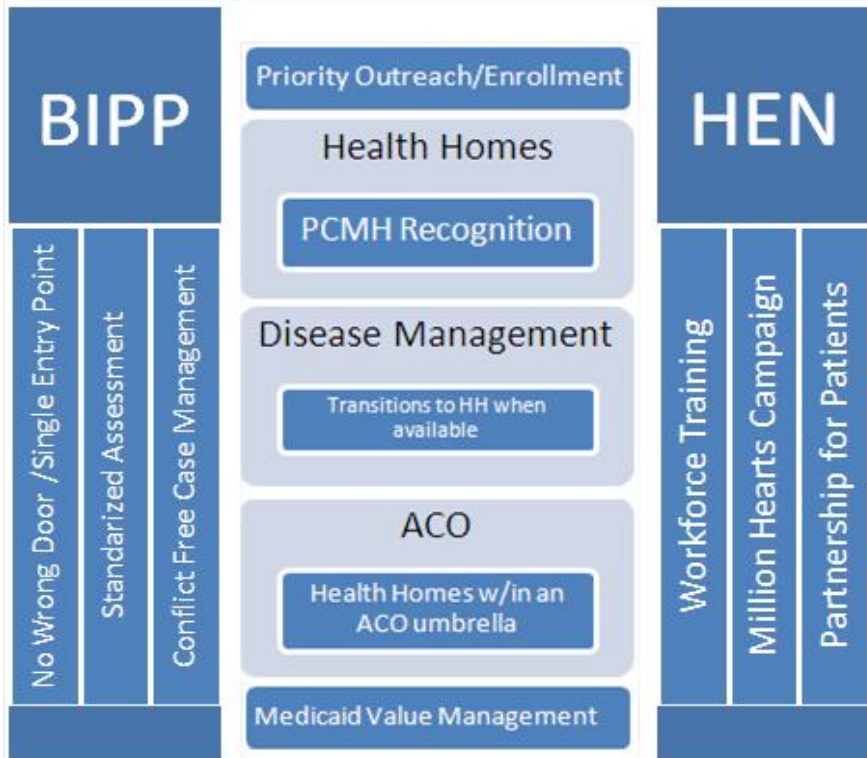
- **Authority:** CMS Medicare-Medicaid Coordination Office
- 2 Options to Integrate Care for Duals:
 - Capitated (3 way contract between MCO, CMS and State)
 - Managed FFS (MOU between CMS and State with the ability to Share Savings)
 - Must meet quality Standards and Conditions
 - Must commit to a 3 year Demonstration



Original Proposal



Iowa's Medicare-Medicaid Population



- 3 **IME** Member Strategies
- 1 **IME** Infrastructure Initiative
- 1 **IHC** Infrastructure Initiative



Duals Proposal Update

CMS conversations has led to the following shifts from the original plan:

- Likely start early 2014
- Focus on Health Home as the chief strategy
- Likely require a benchmark volume of dual eligible members enrolled to start



Questions?

Contact

Medicaid Health Home Program

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<http://www.ime.state.ia.us/Providers/healthhome.html>



SIM Design Grant

- State Innovation Model Initiative:
 - IME submitted an application on 9/24/2012 on behalf of the Governor's office
 - Anticipated Award Date 12/4/2012
 - Innovation Center plans to award up to \$50M to up to 25 States Model Design Efforts
 - Potential round two for design awardees in Spring of 2013



SIM Design Grant

- Looking for a broad vision of Health System Transformation
 - Multipayer, Quality, Value based, etc...
- Six month design phase to produce:
 - Detailed State Health Care Innovation Plan
 - Stakeholder Engagement Process
 - Testing Model for Implementation



SIM Design Grant

- Iowa Strategies involve:
 - IME adopting the Wellmark ACO model,
 - Already used by many Iowa Healthcare systems
 - Include Medicare and a significant % of population is managed under the same ACO model
 - Address the Medicaid LTC population in the Design
 - Significant expense to Medicaid
 - Include the Healthiest State Initiative in the Design,
 - Focus on sustainability, long term changes, etc..



SIM Design Grant

- Iowa Strategies involve:
 - Requested 1.4M in design dollars:
 - Vendor to perform analytics (loading the data, reviewing opportunities)
 - Technical Assistance vendor for help in Medicaid Administrative work (FTE to manage State Plan, Waiver, etc...)
 - Milliman to perform actuary activities