

ACC Phase 3 Evaluation Follow Up

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PIAC

Topics to Cover

- Reminder of the logic model
- What you can expect from evaluation
- Walk through an example of an evaluation topic
- Discuss opportunities to engage PIAC and subcommittees on an ongoing basis
- Next steps



Logic Model

Monitoring and Evaluation

- Performance standards
- Audits

- Clinical quality measures
 - CMS Core Measures
 - Value-Based Payment Metrics
 - Health equity plan metrics

- Evaluation
 - Member surveys
 - Provider surveys
 - Quantitative analysis

Inputs & Activities

- Behavioral Health Benefit
- Network Management
- Member Supports

Outputs

- Members receive timely services
- Providers are paid
- Adequate networks are maintained
- Members receive care coordination

Outcomes

- Member health is improved
- Member and provider satisfaction

Impact

1. Improved access to care
2. Improved quality of care
3. Close health disparities and promote health equity for members
4. Improve the member and provider service experience
5. Manage care to protect member coverage, benefits and provider reimbursements

Accountability Tools

- Dept Meetings with RAEs
- Deliverables
- Incentive payments
- Commitment to Quality Program
- Program Improvement Advisory Committee
- Member Experience Advisory Councils
- Corrective Action Plans
- Action Monitoring Plans
- Data dashboards
- EQRO Validation and Audit Activities



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Evaluation Framework

Goals

1. Improved access to care
2. Improved quality of care
3. Close health disparities and promote health equity for members
4. Improve the member and provider service experience
5. Manage care to protect member coverage, benefits and provider reimbursements

Focus Areas

- Behavioral Health Benefit
- Network Management
- Member Supports

Research Questions

Set of research questions for each focus area that cover all five goals

Methods

Quantitative & qualitative methods

Complimentary provider experience data & member experience data

Reporting

Periodic public reports
TBD



What You Can Expect from Evaluation

- Evaluation is different than monitoring and research. It's an opportunity to dive deep into the most important questions about the ACC is impacting members and providers. It will answer "why" and direct us on how to improve.
- Take time to understand the intervention
- Broad scope will require focus and iteration
- More mixed methods than before
- Stakeholder and member involvement essential



DRAFT

Example - Care Coordination

Stage 1

How is implementation working?

- What are the implementation approaches and models of care coordination?
- Are RAEs submitting accurate and reliable data on care coordination?
- Is the capacity of care coordinators adequate to meet the need?
- Are there any early implementation challenges that need to be addressed before Stage 2 begins?

Stage 2

Are members and providers getting what they need from care coordination?

- What percentage of complex members who could benefit from care coordination actually received it? Are there notable patterns in who did not receive care coordination? Include breakouts by member cohort, model type, and dosage and duration. (equity component)
- Among members who received care coordination, what was the quality of the support they received, did it help them to navigate the health and social systems, and were their needs ultimately met?
- What types of support from RAE care coordination staff did primary care providers receive for their complex members, and was it high quality? (emphasis on smaller, rural, non-delegated providers that would benefit from additional support)
- In recognition of community-based organizations' support HFC's complex population, what are the strengths and weaknesses of RAE care coordination activities?

Stage 3

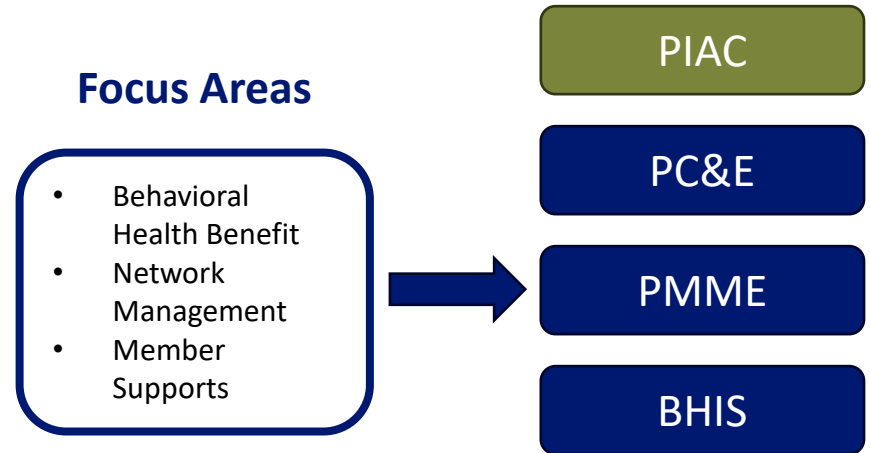
What is the impact?

- Did members who received care coordination have improved access to health and social services and were more likely to use their health home? (i.e., navigation, continuity of care)
- Are there significant differences in clinical outcomes and costs for members with chronic diseases (e.g., diabetes, maternity) who received care coordination?
- Do quality outcomes differ significantly by care coordination model, and if so, why?
- Are total health care costs for members receiving complex care coordination shifting from acute, higher-cost services to outpatient, lower-cost services?



Questions for You

- Engagement
 - Proposed: feedback on design and prioritization; context/interpretation of findings; community outreach support
 - PIAC v. subcommittees
 - Frequency
 - Recommendations



Next Steps

- Research & Analysis Team will create evaluation plans for each of the three sections including specific evaluation questions
 - These will be further developed this fall and then come to PIAC subcommittees for comment and prioritization
- Goal date for evaluation question review: January 2025

