

Accountable Care Collaborative

Phase III

State Medical Assistance & Services Advisory Council

11/16/2022



Agenda

1. ACC History
2. ACC Phase III Overview
3. Priority Initiatives
4. Next Steps

ACC History



Managed Care in Colorado Medicaid



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.

Regions

Accountable Care Collaborative



- Region 1 - Rocky Mountain Health Plans
- Rocky Mountain Health Prime
- Region 2 - Northeast Health Partners
- Region 3 - Colorado Access
- Region 4 - Health Colorado, Inc.
- Region 5 - Colorado Access
- Denver Health Medicaid Choice (DHMC)
- Region 6 - Colorado Community Health Alliance
- Region 7 - Colorado Community Health Alliance



Join Physical & Behavioral Health

Regional Accountable Entity

**Physical
health care**

Per member/
per month

**Behavioral
health care**

Behavioral health
capitation



Role of RAEs

- Promote members' physical and behavioral health
- Contract with a regional network of Primary Care Medical Providers (PCMPs) to serve as medical home
- Administer capitated behavioral health benefit
- Support providers in coordinating care across disparate providers
- Provide administrative, financial, data and technology, and practice transformation assistance





Questions?



ACC Phase III Overview



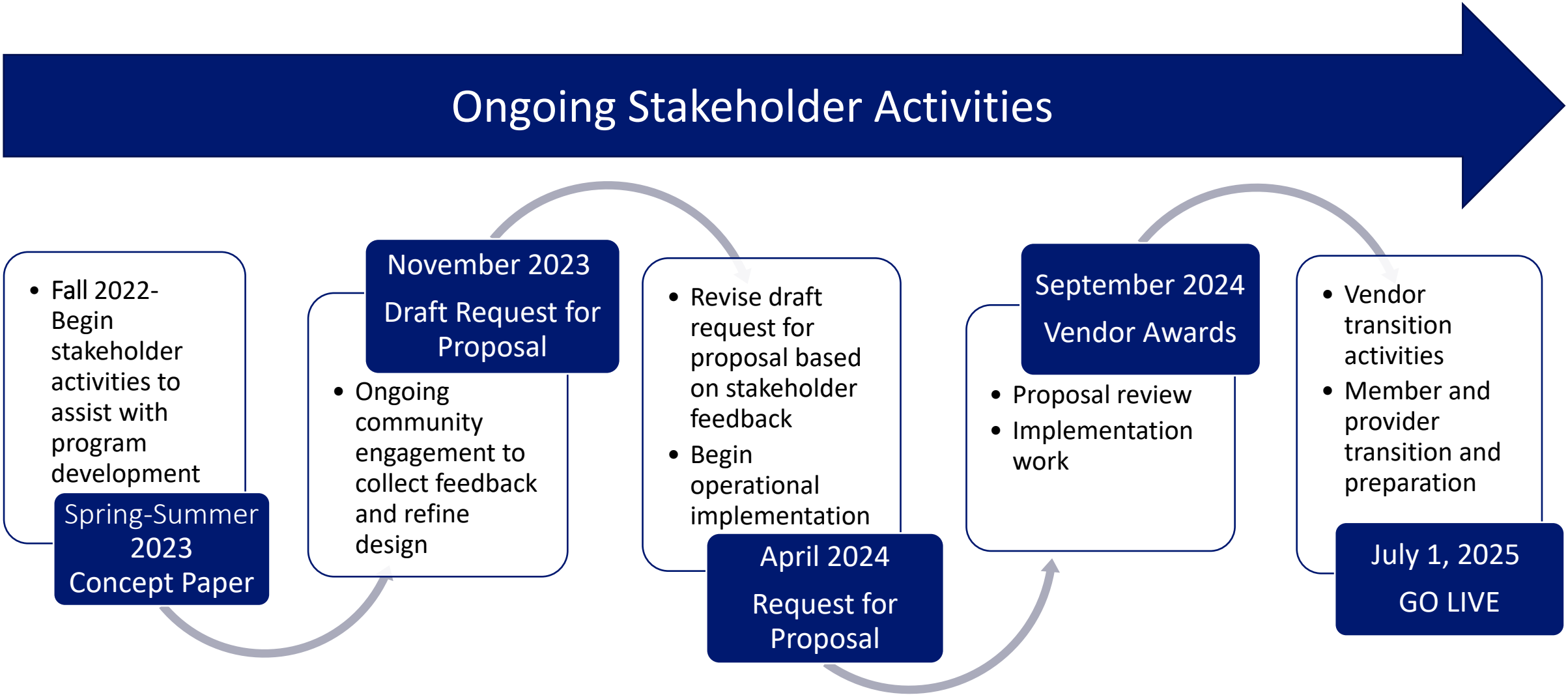
Creating ACC Phase III

- Build on strengths of Phase II
- Align with advances made by other state agencies
- Incorporate input received over the past several years
- Identify opportunities for improvement
- Focus on Priority initiatives
- We need your input!



Timeline

Ongoing Stakeholder Activities



ACC Phase III Goals

- Improve quality care for members
- Close health disparities and promote health equity
- Improve care access
- Improve the member and provider service experience
- Manage costs to protect member coverage and benefits, and provider reimbursements

Commitments to Continuity

- Compliance with federal guidance supporting paying for value
- Coordinated behavioral, physical and community-based services through a regional delivery system with the existing seven regions
- A hybrid managed care model to allow for robust benefits and member supports by improving the capitated behavioral health benefit and innovating the managed fee-for-service infrastructure for physical health
- Collaboration with state agencies to provide high quality, whole-person care that improves health equity and the overall health of Medicaid members



Questions

Priority Initiatives to Address Opportunities





Member Communication and Support

Accountability for Equity and Quality



Improving Referrals to Community Partners

Alternative Payment Methodologies



Care Coordination

Children and Youth



Behavioral Health Transformation

Technology and Data Sharing



Member Communication & Support

- **Opportunity:** Improve coordination of services and supports for members so they can more easily and readily access needed resources by better leveraging the contracted partners most closely aligned with members. Improve clarity of communication so members can more easily understand and access their benefits.

Accountability for Equity & Quality



- **Opportunity:** Enhance primary care and behavioral health accountability for both providers and RAEs, with the goal of closing health disparities, improving health care quality and outcomes, and driving affordability.

Improving Referrals to Community Partners



- **Opportunity:** RAEs connect members to community supports outside of Medicaid covered services to better address their health-related social needs.

Alternative Payment Methodologies



- **Opportunity:** Implement member incentives and advance alternative payment models across the spectrum – such as primary care, maternity care, behavioral health, prescription drug, specialty care, and more – to enhance quality care, close disparities and improve member health outcomes while driving affordability.

Care Coordination



- **Opportunity:** Establish standards for care coordination for populations with unique needs, such as pregnant people and individuals with disabilities.



Children & Youth

- **Opportunity:** Improve access and outcomes for children and youth, particularly those in child welfare, involved with the justice system, or with special health care needs. Improve the experience of the caregivers and providers who support them.

Behavioral Health Transformation

- **Opportunity:** Align with and support the work of the Behavioral Health Administration to achieve shared goals, increase overall care access, and implement a more effective system of safety net behavioral health services. Increase access to culturally competent community-based services by addressing gaps in the continuum of mental health and substance use disorder services.



COLORADO

Department of Health Care
Policy & Financing

Technology & Data Sharing

- **Opportunity:** Leverage technology to improve access to services and data sharing among HCPF, the RAEs, and providers to enhance coordination, reduce duplication, and propel data-driven decision-making.





Reactions, Questions, & Ideas

Next Steps



Upcoming Stakeholder Activities

- Regional PIAC and MAC/MEACs throughout the winter
- December Public Meeting - Date TBD (will be posted on website)
- Community Roundtables with Partner Organizations

- Online survey coming in December

Website and ACC Updates Newsletter: [Colorado.gov/HCPF/accphase3](https://colorado.gov/HCPF/accphase3)



Thank You for Your Engagement!

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