A Few Reminders for Participants

• There will be time for participants’ questions at the end
• Send questions to presenters via the chat box at right
• Can’t hear us through your computer speakers? Use the listen-only teleconference: 1 (855) 257-8693, code 590 1302 #

• A webinar recording will be available later at http://dhss.alaska.gov/healthyalaska
MEDICAID REDESIGN

Update on Reform Progress

- Payment Reform Consulting Services
- Coordinated Care Demonstration Project
- 1915 (i) and (k) Options
- Telehealth Workgroup
- Health Information Infrastructure Plan
- Quality & Cost Effectiveness Workgroup
- Annual Medicaid Reform Report
- Staying Informed
Medicaid Payment Reform Consulting Services

• Contract Awarded to Milliman, Inc.
• Contractor will provide actuarial support for several reforms:
  – Coordinated Care Demo Project
  – 1115 Behavioral Health Waiver
  – Shared Savings Model for Emergency Care Dept. Improvement
  – Primary Care Case Management
  – Innovative Payment Reform Models
    • Bundled Payments
    • Penalties for Hospital Readmissions and Outcome Failures
    • Payment models proposed in Coordinated Care Demo Projects (If Applicable)
Coordinated Care Demonstration Projects (CCDP)

Purpose:
“...assess the efficacy of a proposed health care delivery model with respect to cost for, access to, and quality of care for medical assistance recipients.”

SB 74
Key Features of CCDP from SB 74

Proposals must include 3 or more of the following:

1. Primary care-based management
2. Care coordination with primary care provider assignment
3. Health promotion
4. Transitional and follow-up care after inpatient treatment
5. Referral to community and social support services
6. Sustainability; Replicability
7. Integration and coordination of benefits, services, and utilization management
8. Local accountability for health and resource allocation
9. Innovative payment process
Key Features of CCDP from SB 74

- DHSS may contract with:
  - Provider-led entities
  - Accountable Care Organizations
  - Managed care organizations
  - Primary care case managers
  - Prepaid ambulatory health plans

- Fee structures may include:
  - Global payments
  - Bundled payments
  - Capitated payments
  - Shared savings and risk
  - Other payment structures
Other Key Features of CCDP

• No money for planning and development
  – Opportunity for new reimbursement structure

• Behavioral Health Reform Alignment
  – Community or regional integrated models welcome
  – Statewide BH models not accepted
    • Would preempt 1115 BH Waiver efforts

• Tribal entities not required to respond to RFP
  – Partnership between Tribal and non-Tribal entities welcome
  – Tribal entities may use Tribal Consultation process
CCDP Timeline

• September 15, 2016: RFI issued
• October 2016:
  – Contract with payment reform and actuarial consultant: Milliman
  – RFI responses due
• December 30, 2016: Request for CCDP Proposals (RFP) issued
• February or March 2017:
  – CCDP proposals due to the department
  – Proposal Review Committee (PRC) convened
• March – April 2017: Department and payment reform/actuarial consultant analysis of proposals for PRC
• May 2017: PRC review of proposals
• May – June 2017: Selected CCDP offeror negotiations with Department
CCDP Timeline

• **Implementation Date(s):** Dependent on:
  – Negotiations between CCDP entity and state
  – Federal approvals of contractual relationships, state plan amendments, and waiver requests (if necessary)
  – Statutory, regulatory and system changes required (if necessary)
CCDP Next Steps

• **Release of RFI Response Summary:** Today!

• **Release of RFP**  
  – December 30, 2016

• **Release of Medicaid Data Book**  
  – TBD, pending compilation by Milliman
1915 (i) and (k) Options

- Contracted with HMA to analyze potential opportunities, costs, and savings associated with these options
- Recommendations presented to the Inclusive Community Choices Council (ICC Council)
- Department is reviewing the recommendations and will develop a timeline for implementation
- HMA’s Recommendations:
  - Oct 19\textsuperscript{th} presentation on the findings:
    [http://dhss.alaska.gov/dsds/Pages/MRICC/MRICC.aspx](http://dhss.alaska.gov/dsds/Pages/MRICC/MRICC.aspx)
Telehealth Workgroup

• Workgroup to identify opportunities, barriers and solutions for expanding the use of telehealth
• In August, solicited stakeholder representatives
• Final Report / Recommendations due by July 1, 2017
• Meetings:
  – 1st Meeting: November 2nd
  – 2nd Meeting: January 27, 2017 (all day meeting)
• Check Public Notices for meeting announcements
Telehealth Workgroup Members

- Brooke Allen, Behavior Analyst
- Connie Beemer, Alaska State Hospital & Nursing Home Association
- Denise Daniello, Alaska Commission on Aging
- Mark Erickson, MD, Alaska Psychiatric Institute
- Brent Fisher, Alaska Sleep Clinic
- Matthew Hirschfeld, MD, Alaska Native Medical Center
- Philip Hofstetter, Norton Sound Health Corporation
- Laura Hudson, Alaska Regional Hospital
- Laura Johnston, Southcentral Foundation
- Richard Kiefer-O’Donnell, University of Alaska
- Ken McCarty, Discovery Cove Recovery & Wellness Center
- Monique Marquis, Fairbanks Memorial Hospital
- Trina McCandless, Emergency medical services
- Robert Onders, MD, Alaska Native Tribal Health Consortium
- Georgiana Page, Alaska eHealth Network
- Patti Paris, MD, Alaska Chapter of American College of Emergency Physicians
- Christopher Simon, Tanana Chiefs Conference
- Mark Williams, Providence Health & Services Alaska
- Thad Woodard, MD, Private Practice Pediatrician
Health Information Infrastructure Plan

• Contract awarded to HealthTech Solutions LLC to support the Health Information Infrastructure Plan
• Stakeholder Workgroup to convene soon
  – Request for workgroup members will be sent to the Medicaid Redesign list-serv
• CMS just approved DHSS HITECH funding request that includes support for several of the reforms
  – 90/10 Match
Quality and Cost Effectiveness Workgroup

• Identify annual quality and cost effectiveness targets
  – Workgroup meets annually
• Report / Recommendations due by July 1, 2017
• Meetings:
  – 2nd Meeting: Dec. 5th at 1:30 p.m.
  – Public Notices for meeting announcements
Quality and Cost Effectiveness Workgroup members

- Kathy Allely, Parent of IDD Medicaid waiver recipient
- Barbara Berner, School of Nursing, University of Alaska Anchorage
- Dave Branding, Juneau Alliance for Mental Health
- Alan Gross, MD, Petersburg Medical Center
- Andrea Gurley, Alaska Regional Hospital
- Amberly Hobbs, Mountain-Pacific Quality Health
- Jerry Jenkins, Anchorage Fairbanks Community Mental Health Services
- Patty Linduska, Alaska Primary Care Association
- Jenny Love, MD, Anchorage Neighborhood Health Center
- Nancy Lovering, Speech-language pathologist, private practice
- Rebecca Madison, Alaska eHealth Network
- Jacqueline Marcus-Ledford, Yukon Kuskokwim Health Corporation
- Jeannie Monk, Alaska State Hospital & Nursing Home Association
- Nick Papacostas, MD, Alaska Chapter of American College of Emergency Physicians
- Jim Roberts, Alaska Native Tribal Health Consortium
- Sharon Skidmore, Physical Therapy for Kids, LLC
- Bill Sorrells, Cornerstone Clinic Medical Center
- Steve Tierney, Southcentral Foundation
Annual Medicaid Reform Report

- SB74 established the Medical Assistance Reform Program
- Requires an annual report to the legislature on status / results
  - By November 15 of each year
- Annual Medicaid Fraud, Payment Error Rate Measurement and Eligibility Quality Control Report
  - produced jointly with the Department of Law
  - also due to the legislature on November 15 of each year
MEDICAID REDESIGN

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  – Enter your email address
  – Click Save
  – Scroll down to “Medicaid”
  – Select “Medicaid Redesign”

• Public Notices

The Healthy Alaska Plan

Email Updates
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– Click Save
– Scroll down to “Medicaid”
– Select “Medicaid Redesign”

Public Notices

Press releases
– Subscribe to DHSS Press Releases & Newsletters
Questions?

Thank you!