Together4Health is a Coordinated Care Entity (CCE), a provider model developed by the State of Illinois that emphasizes care coordination and care transitions across health care, housing, and social services. Together4Health is owned by 34 provider organizations including five hospital systems, eight health centers, eight social services and supportive housing organizations, nine mental health and addiction services providers, an AIDS organization, and a data development and management warehouse. This diverse provider profile gives Together4Health experience serving adults with physical disabilities, serious mental illness, and substance abuse and individuals who are dually eligible for Medicare and Medicaid.

Heartland Health Outreach, the health care branch of Heartland Alliance – an anti-poverty organization in the Midwest – led the development of Together4Health, including its multidisciplinary care coordination model. Heartland Alliance’s anti-poverty, human rights-oriented mission permeates the organizational and service delivery structure of Together4Health.

Medicare-Medicaid Integration Status

Together4Health began enrolling Medicaid beneficiaries in December 2013, leveraging its unique position as a provider-led organization to serve hard-to-reach populations, including people who are homeless. After its initial three years of operation, Together4Health plans to become a Managed Care Community Network (MCCN) focusing on vulnerable adults over the age of 18 with multiple chronic conditions. MCCNs are entities in Illinois, similar to managed care organizations, but with different financial requirements. MCCNs are owned, operated, and governed by Illinois providers and either deliver or coordinate primary, secondary, and tertiary health services to Medicaid beneficiaries through a contract with the state’s Department of Healthcare and Family Services. Currently, as a CCE, Together4Health does not participate in Illinois’ financial alignment duals demonstration. However, the population that Together4Health specializes in serving shares many of the characteristics of individuals dually eligible for Medicare and Medicaid. This expertise makes them uniquely suited to participate in this consortium.

Key to Success: A Group of Safety Net Providers

The safety net providers in Together4Health stress the importance of leaving their offices to meet participants in the community and connect them with the full range of services needed to improve their health. By including housing and other social services in its care coordination model, Together4Health’s goal is to provide participants with all the services and supports they need to be engaged in their own health care. Identification and outreach to individuals in homeless shelters and other sites throughout Chicago strengthen Together4Health’s approach to serving hard-to-reach populations. Care coordination teams are primarily community-based and work in conjunction with provider organizations to help participants navigate care transitions and become more actively engaged in their own care.

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The Promoting Integrated Care for Dual Eligibles (PRIDE) initiative, made possible by The Commonwealth Fund, is a consortium of high-performing health care organizations focused on improving the care of individuals dually eligible for Medicare and Medicaid. The Center for Health Care Strategies (CHCS) is helping PRIDE members to identify and test innovative strategies that enhance and integrate care for Medicare-Medicaid enrollees. CHCS is a nonprofit health policy resource center dedicated to advancing access, quality, and cost-effectiveness in publicly financed health care. For more information, visit www.chcs.org.
Together4Health stresses the importance of connecting individuals with the full range of needed services, as illustrated by the story of one participant -- an older man who was ready to tackle his substance abuse problem. On a visit with his Together4Health community health worker, the man revealed that he has more success keeping sober when he feels busy and has things to do. He also noted his goal of finding an eye doctor. The community health worker helped the individual to identify what was most important to him in a vision provider and coached him on strategies to find such a provider. The community health worker also helped the participant build his skills for contacting providers, asking questions, and structuring his days to maximize his time and feel productive. With the skill building, the individual reported that he was very happy: he was currently sober, had visited an eye doctor, and felt empowered by accomplishing two of his goals. This example demonstrates the key to Together4Health’s model – assessing individual needs, coordinating care, and working with participants to develop goals, build skills and help them independently manage their health.

1 CCEs are paid on a fee-for-service basis and receive a care coordination fee with pay-for-performance incentives, and eventually will be eligible for shared savings. The Centers for Medicare & Medicaid Services has not permitted CCEs to participate in Illinois’ capitated financial alignment duals demonstration.