

PRIDE PLAN PROFILE

# Commonwealth Care Alliance

*Increasing consumer-centeredness in primary care.*

Commonwealth Care Alliance (CCA) was established in 2003 through a collaboration between clinicians and community health and supports centers, advocacy groups, philanthropic funders, policymakers, and other health policy experts. Its mission is to create a more equitable and person-centered health care delivery system for individuals in Massachusetts with complex needs. Today, CCA is a consumer-centered health plan and care delivery system providing integrated health care and social services and supports for over 28,000 individuals dually eligible for Medicare and Medicaid through:

1. A Medicare-Medicaid Plan (MMP), which is part of One Care, the capitated model Financial Alignment Initiative demonstration in Massachusetts that serves dually eligible beneficiaries ages 21 to 64; and
2. A Fully Integrated Dual Eligible Special Needs Plan (FIDE SNP) for Senior Care Options, a Massachusetts program for dually eligible individuals age 65 and older.

### Quick Facts: CCA

- **Tax status:** Not-for-profit
- **Integration model:**<sup>1</sup> MMP, FIDE SNP
- **MMP enrollment:** 17,546
- **FIDE SNP enrollment:** 9,017
- **Service areas:** Senior Care Options, 10 of 14 Massachusetts counties; One Care, 9 of 14 counties

## Delivery System Partners: Providers Selected for the *Consumer Centered Innovations in Quality (CCIQ) Grants Program*

CCA views its members as experts in their own lives, is committed to delivering consumer-centered care and service to each of its members, and believes that consumer centricity drives improved outcomes. In 2018, CCA launched a new opportunity for CCA primary care providers – the CCIQ Grants Program – which will award up to three \$50,000 grants to support development and implementation of quality improvement projects that demonstrate provider/patient partnerships in design, implementation, and evaluation.

## PRIDE Promoting Integrated Care for Dual Eligibles

The *Promoting Integrated Care for Dual Eligible (PRIDE)* initiative, supported by The Commonwealth Fund and led by the Center for Health Care Strategies, is a learning collaborative of nine leading health plans to advance promising approaches to integrating Medicare and Medicaid services for dually eligible individuals.

This profile series highlights the leading-edge plans participating in *PRIDE* and how they are working with delivery system partners on specific initiatives to advance innovative care management practices for dually eligible populations.

## Partnership Focus

The CCIQ Grants Program targets primary care provider organizations that contract with CCA to provide care to CCA Senior Care Options and/or One Care members. The CCIQ Grants Program was designed to support innovative, collaborative initiatives directed at improving access to care and chronic condition management and addressing social determinants of health for patients with complex medical, behavioral, and social needs. The anticipated duration of funded projects will be 12 months from the award date.

## Description of the Planned Project

The CCIQ Grants Program includes technical assistance from CCA to assist grantees with project design and evaluation. Grantees will also participate in a half-day learning collaborative to learn from one another and share progress and outcomes at the end of the grant period.

One critical requirement of all funded proposals will be that the grantee include the feedback, opinions, and/or preferences of patients throughout all project phases. Applicants must choose one of four areas as the focus of their quality improvement project proposal:

- Improving primary prevention and/or care of chronic medical conditions for patients with physical disabilities;
- Improving primary prevention and/or care of chronic medical conditions for patients with mental illness;
- Improving quality of care by focusing on social determinants of health, such as food insecurity, lack of easily accessible or timely transportation, personal safety concerns, and lack of social support; or
- Improving care seeking and self-care behaviors by building community support to limit loneliness and social isolation.

The proposed projects must have clear and specific metrics. Measures may be drawn from validated quality metrics or survey tools (e.g., HEDIS, CAHPS, etc.) or identified by the project team specifically for the project. Ultimately, CCA seeks to fund proposals from providers that will work directly with patients to design a quality improvement project that addresses patients' perceived barrier(s) to care, enhances their experience of care, and improves access to and delivery of routine preventive care and/or key elements of care for the management of chronic medical conditions. CCA recognizes that given the expectation that patients will be active participants in the development and evaluation of the project, it is possible (and actually likely) that some elements of the submitted proposal will evolve over the course of the project. The strongest proposals will be those that most clearly articulate how patients will be engaged to test, develop, and validate specific project assumptions, potential interventions, and proposed measures.

### ABOUT THE CENTER FOR HEALTH CARE STRATEGIES

The Center for Health Care Strategies (CHCS) is a nonprofit policy center dedicated to improving the health of low-income Americans. It works with state and federal agencies, health plans, providers, and community-based organizations to develop innovative programs that better serve people with complex and high-cost health care needs. For more information, visit [www.chcs.org](http://www.chcs.org).

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<sup>1</sup> Managed care plans can be used to promote the integration of care for dually eligible beneficiaries. The Medicaid-Medicare Plans (MMPs) operating under the Financial Alignment Initiative demonstrations are highly integrated models that combine Medicare and Medicaid services, administrative functions, and financing. Dual Eligible Special Needs Plans (D-SNPs) are specialized Medicare Advantage plans that must contract with the Medicaid agency in the states in which they operate, and seek to provide enrollees with a coordinated Medicare and Medicaid benefit package. When D-SNPs are aligned with Medicaid managed long-term services and support (MLTSS) plans, they can attain a higher degree of integration than D-SNPs operating alone. Fully Integrated D-SNPs (FIDE SNPs) are a type of D-SNP created to promote the full integration and coordination of Medicare and Medicaid benefits — primary and acute care and LTSS — and financing of services, for dually eligible beneficiaries.