IN BRIEF
Increasingly, states are seeking more advanced primary care models that better address the diverse health-related needs of patients, including behavioral health and social needs. This profile is part of a series that explores how five states — Louisiana, Hawaii, Pennsylvania, Rhode Island, and Washington State — are using their managed care purchasing authority to advance primary care models. The states were participants in Advancing Primary Care Innovation in Medicaid Managed Care, a national learning collaborative made possible by The Commonwealth Fund and led by the Center for Health Care Strategies. A companion toolkit, Advancing Primary Care Innovation in Medicaid Managed Care: A Toolkit for States, is also available that summarizes strategies for advancing primary care innovation. It includes design considerations, and sample contract and procurement language, with a focus on four key delivery areas: (1) addressing social needs; (2) integrating behavioral health into primary care; (3) enhancing team-based primary care approaches; and (4) using technology to improve access to care. To learn more, visit www.chcs.org/primary-care-innovation.

Primary Care Innovation Vision
As laid out in its Vision for Health Care Transformation, Hawaii aims to: advance behavioral health integration approaches, such as the Collaborative Care Model; extend primary care teams by integrating social services; and increase primary care investment. The state released a related request for information in September 2018 and plans to release a managed care request for proposals in summer or fall 2019.

Advanced Primary Care Goals

✔ Goal 1: Encourage primary care providers (PCPs) to screen for behavioral health (BH) needs, and enhance primary care capacity to address those needs.

✔ Goal 2: Encourage PCPs to screen for health-related social needs, and enhance primary care capacity to address those needs.

✔ Goal 3: Increase overall spending/investment in primary care, with a focus on more prevention, early intervention, and primary care services.
Existing Primary Care Initiatives

- The majority of the Medicaid beneficiaries receive medical, behavioral health, and long-term care services through the Quest Integration (QI) managed care program, implemented in 2015.
- Hawaii is participating in the Comprehensive Primary Care Plus (CPC+) initiative.
- Med-Quest Division is building the Hawai‘i ‘Ohana Nui Project Expansion (HOPE) program, a five-year initiative to develop and implement a roadmap to achieve a vision of healthy families and healthy communities. QI will be the vehicle for the HOPE program, which includes an emphasis on health promotion, prevention, and primary care.

Managed Care Organization Contract Language

- Under Hawaii’s 2013 QI RFP/contract, as amended and effective in 2018 and 2019, primary care providers must use a medical home model “based on the domains of patient-centered, accessible, comprehensive, coordinated, evidence-based, and performance measurement.”
- Medical home practices receive increased reimbursement, through two tiers of criteria with higher payment to the Tier 1 Medical Home compared to the Tier 2 Medical Home.
- The state imposes specific contract percentage targets for “Value-Driven Health Care” for the first three years of the contract. These are only for primary care providers and hospitals, and the targets are 50 percent of contracts for year one; 65 percent for year two; and 80 percent for year three. Payments for medical homes are included in the value-based purchasing requirements.

Select Primary-Care Related Quality Measures

Following are current primary-care related pay-for-performance measure in Hawaii’s MCO contracts:

- Comprehensive Diabetes Care – Eye Exam (Retinal) Performed
- Comprehensive Diabetes Care – HbA1c Control
- Childhood Immunization Status – Combination 3
- Follow-Up After Hospitalization for Mental Illness – 7-Day Follow-Up
- Plan All-Cause Readmissions – Total
- Well-Child Visits in the First 15 Months of Life – Six or More Well-Child Visits
- Well-Child Visits in the Third, Fourth, Fifth and Sixth Years of Life