

# PRIMARY CARE INNOVATION IN MEDICAID MANAGED CARE PROFILE: Pennsylvania

STATE PROFILE | AUGUST 2019



## 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](http://www.chcs.org/primary-care-innovation).

## Primary Care Innovation Vision

Pennsylvania's vision for primary care innovation is focused on broadening the principles used in the patient-centered medical home (PCMH) model to encompass smaller practices across the state's Medicaid program. This will enable primary care practices treating Medicaid beneficiaries to have supports in place to tailor care to meet individual's needs. This includes strengthening support and resources to address health-related social needs to improve health outcomes.

### Pennsylvania Medicaid Landscape

- Medicaid Enrollees: **2,835,800**
- Enrollees in Comprehensive Managed Care: **2,259,379 (79.7%)**

Source: [Medicaid Managed Care Enrollment and Program Characteristics, 2017](#). Effective July 2017.

## Advanced Primary Care Goals

- ✓ **Goal 1:** Implement a screening, assessment, and referral process addressing social determinants of health (SDOH).
- ✓ **Goal 2:** Leverage existing services to coordinate better physical and behavioral health integration across health care delivery systems.
- ✓ **Goal 3:** Implement value-based payment arrangements across physical and behavioral health plans to ensure whole person care.

## Existing Primary Care Initiatives

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- Pennsylvania implemented a **Community Based Care Management (CBCM)** Program with its physical health managed care organizations (PH-MCOs) in CY2015. PH-MCO contracts now explicitly reference addressing social determinants and enhancing behavioral health integration as goals of the CBCM program.
- The state implemented a **PCMH** model with its PH-MCOs in January 2017.
- The state received a federal demonstration grant under section 223 of the Protecting Access to Medicare Act of 2014 (H.R.4302) for seven **Certified Community Behavioral Health Clinics**. The grant is part of a comprehensive effort to integrate behavioral health with physical health.
- The [Telephonic Psychiatric Consultation Service Program](#) increases the availability of peer-to-peer child psychiatry consultation teams to primary care providers and other prescribers of psychotropic medications for children.
- The state implemented 46 **Opioid Use Disorder Centers of Excellence (OUD-COE)**, which comprise 26 behavioral health and 20 physical health clinics that provide buprenorphine/naltrexone accessibility and address SDOH needs. MCOs are required to contract with all selected OUD-COEs in their region.

## Managed Care Organization Contract Language

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- [In 2019](#), Pennsylvania's PH-MCOs' PCMH practices must serve at least 20 percent of an MCO's total membership and at least 33 percent of members that fall within the top fifth percentile of medical costs. PCMHs are also required to deploy their own CBCM teams that are not duplicative of PH-MCOs' care management services.
- Pennsylvania amended its [2019 MCO contracts](#) in order to: (1) add a definition of SDOH; (2) require MCOs to use SDOH screening to determine members in need of care or case management; and (3) require PCMHs to complete a SDOH screening tool using a nationally recognized tool and submit ICD-10 diagnostic codes for all patients. PA will align this contract language across its physical health and behavioral health plans.
- Pennsylvania implemented an **Integrated Care Plan** pay-for-performance program for integration and coordination of behavioral health and physical health services.

## Select Primary-Care Related Quality Measures

Examples of physical health quality measures used by programs within Pennsylvania’s Office of Medical Assistance include:

MCO Pay-for-Performance (P4P) Program <sup>1</sup>	Provider P4P Program <sup>2</sup>
<b>HEDIS</b>	<b>HEDIS</b>
<ul style="list-style-type: none"> <li>■ Adolescent Well-Care Visits</li> <li>■ Annual Dental Visit (ages 2 – 20 years)</li> <li>■ Comprehensive Diabetes Care: HbA1c Poor Control</li> <li>■ Controlling High Blood Pressure</li> <li>■ Prenatal Care in the First Trimester</li> <li>■ Postpartum Care</li> <li>■ Well-Child Visits in the First 15 Months of Life, 6 or more</li> <li>■ Well Child Visits in the Third, Fourth, Fifth and Sixth Years of Life</li> <li>■ Medication Management for People with Asthma 75 Percent</li> </ul>	<ul style="list-style-type: none"> <li>■ Adolescent Well-Care Visits</li> <li>■ Annual Dental Visit (ages 2 – 20 years)</li> <li>■ Comprehensive Diabetes Care: HbA1c Poor Control</li> <li>■ Controlling High Blood Pressure</li> <li>■ Prenatal Care in the First Trimester</li> <li>■ Postpartum Care</li> <li>■ Well-Child Visits in the First 15 Months of Life, 6 or more</li> <li>■ Well Child Visits in the Third, Fourth, Fifth and Sixth Years of Life</li> <li>■ Medication Management for People with Asthma 75 Percent</li> <li>■ Ambulatory Care – ED Visits</li> <li>■ Plan All Cause Readmission</li> </ul>
<b>Pennsylvania State Specific</b>	<b>Pennsylvania State Specific</b>
<ul style="list-style-type: none"> <li>■ Reducing Potentially Preventable Readmissions</li> <li>■ Frequency of Ongoing Prenatal Care: ≥81 Percent of Expected Number of Prenatal Care Visits</li> </ul>	<ul style="list-style-type: none"> <li>■ Frequency of Ongoing Prenatal Care: ≥81 Percent of Expected Number of Prenatal Care Visits</li> </ul>

<sup>1</sup>For 2019, the Pennsylvania Office of Medical Assistance selected nine HEDIS 2019 and two 2019 Pennsylvania Performance Measure (PAPM) as quality indicators (representing CY 2018 data) for the MCO Pay-for-Performance (P4P) program.

<sup>2</sup> For 2019, the Pennsylvania Office of Medical Assistance selected 11 HEDIS 2019 measures and one 2019 PAPMs and one electronic quality measure (representing CY 2018 data) for the Provider P4P program.