The Colorado Regional Integrated Care Collaborative & Accountable Care Collaborative

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CRICC

Colorado Regional Integrated Care Collaborative

- Part of the CHCS Rethinking Care program
- Partnership between Department and local health plans to evaluate and improve enhanced care management for Medicaid clients with complex health care needs
- Two-year Pilot Program
  Random assignment design for program and control groups
- Benefits include: case management, care coordination and supplemental benefits
- Participating health plans: Colorado Access and Kaiser Permanente
Pilot Programs

Colorado Access
• Implemented CRICC program in June 2008
• Capitated HMO model
• Target enrollment: 2500 clients
  current opt out rate  20%

Kaiser Permanente
• Implemented CRICC program August 2009
• Kaiser Permanente is a ASO/PCCM Model within an integrated delivery system
• Target Enrollment: 600-800 clients
  Based on Colorado Access pilot, Kaiser Permanente expects a 50% opt out rate
Accountable Care Collaborative

- 85% of Medicaid population currently in FFS
- Hybrid Model-contains elements from PCCM, managed care, and ASO
- CMS Authority- 1932(a)
- Focus on regional improvement of health and affordability
- Create a delivery system that is client-centered
- Explicitly share accountability for improving health and healthcare
- Facilitate creation of statewide HIT platform
Regional Accountability for Health, Access and Cost Management
Preventable Causes of Death

Admission Rate for Acute and Chronic Indicators (2008)
Regional Care Coordination Organization

Functions:

• **Outcomes Management**
  Accountable for health and healthcare optimization for region

• **Provider Support**
  Billing, MMIS, clinical decision support

• **Care Coordination and Care Transitions**
  Coordination among care providers, between programs, and between phases in life

• **Medical Home Practice Redesign**
  Increase efficiencies within the practice with special attention to the unique issues and needs of Medicaid clients
Statewide Data Organization

Functions:

• Create a Web-based provider health information system

• Provide care management software support

• Extraction and analysis of statewide data to identify data-driven opportunities to improve care quality

• Offer provider IT support
Program Design

- Enrollment = 60,000 for the pilot
  40,000 adults and 20,000 children
- Formal program evaluation
- Prove revenue neutral or savings before additional expansion
- Clients assigned to provider through attribution
  Enhanced passive enrollment
- $20 PMPM to be shared between RCCO and providers
- Substantial gainshare with RCCO and the providers
- Pilot program starting in July 2010
Request for Information

• Map of possible regions
• 8 different maps in RFI, other ideas will be accepted

RFI can be found at: BIDS Web site at http://www.gssa.state.co.us/VenSols.

On the left of the screen, select “By Agency” and then select “Department of Health Care Policy and Financing”. You may obtain the RFI, responses to inquiries and any other information by selecting the RFI Number-HCPFKQ1001RFIACC.

• RFI response submission period closes 8/14/09