

January 30, 2015

The Honorable Dianne Primavera, Chair Public Health Care and Human Services Committee 200 E. Colfax Avenue Denver, CO 80203

Dear Representative Primavera:

Enclosed please find a legislative report to the House Public Health Care and Human Services Committee from the Department of Health Care Policy and Financing on Medical Homes for Children.

Section 25.5-1.123 of the Colorado Revised Statutes requires the Department to submit a written report each year on the progress made toward maximizing medical homes.

The report consists of information regarding children with a medical home who are enrolled in the State Medical Assistance Program (Medicaid) or the Children's Health Plan *Plus* (CHP+).

If you require further information or have additional questions, please contact the Department's Legislative Liaison, Zach Lynkiewicz, at Zach.Lynkiewicz@state.co.us or 720-854-9882.

Sincercly

Susan E. Birch, MBA, BSN, RN

Executive Director

SEB/cl

Enclosure(s): 2015 Medical Homes for Children Report



Cc: Representative Jonathan Singer, Vice-Chair, Public Health Care and Human Services Committee

Representative Jessie Danielson, Public Health Care and Human Services Committee Representative Joann Ginal, Public Health Care and Human Services Committee Representative Jovan Melton, Public Health Care and Human Services Committee Representative Dominick Moreno, Public Health Care and Human Services Committee Representative Max Tyler, Public Health Care and Human Services Committee Representative Lois Landgraf, Public Health Care and Human Services Committee Representative Kathleen Conti, Public Health Care and Human Services Committee Representative Justin Everett, Public Health Care and Human Services Committee Representative Janak Joshi, Public Health Care and Human Services Committee Representative Jon Keyser, Public Health Care and Human Services Committee Representative JoAnn Windholz, Public Health Care and Human Services Committee Representative Council Library

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COLORADO

Department of Health Care Policy & Financing

REPORT TO THE HOUSE PUBLIC HEALTH CARE AND HUMAN SERVICES COMMITTEE

ON

MEDICAL HOMES FOR CHILDREN

JANUARY 30, 2015



Overview

This report is presented to the Health and Human Services Subcommittee of the Colorado General Assembly in response to Senate Bill 07-130 (SB07-130), Medical Homes for Children. SB07-130 requires an annual report from the Department of Health Care Policy and Financing (the Department) on the progress made toward maximizing the number of children with a medical home who are enrolled in the State Medical Assistance Program (Medicaid) or the Children's Health Plan *Plus* (CHP+).

In a medical home, the child or youth, his or her family, primary care physician, and other health professionals develop a trusting partnership based on mutual responsibility and respect for each other's expertise. Together, families, health care professionals and community service providers identify and access medical and non-medical services needed to help the child and family.

SB07-130 specifically requires that a medical home include the following components:

- Health maintenance and preventive care
- Anticipatory guidance and health education
- Acute and chronic illness care
- Coordination of medications, specialists, and therapies
- Provider participation in hospital care
- 24-hour telephone care

Partnership Activities

To meet the goals of SB07-130, the Department, the Colorado Department of Public Health and Environment (CDPHE), providers, advocates and other community stakeholders are participating in the Colorado Medical Home Initiative (so that every child enrolled in Medicaid and CHP+ has access to health care in a medical home).

While the Department is primarily responsible for implementing SB07-130, CDPHE is recognized as a national leader in the Medical Home Model, especially as it relates to children with special health care needs. Together, the departments participated in the following activities in 2014:

Children and Youth with Special Health Care Needs Systems Integration Grant – Colorado is one of twelve state implementation grantees focused on increasing the number of children and youth with special health care needs who receive integrated care through a medical home. Although CDPHE is the lead on this grant, the Department plays a key role in this statewide effort to increase the proportion of children and youth with special health care receiving care through a medical home by 20% over 2009-2010 levels by 2017.



Colorado Medical Home Coalition – The Colorado Medical Home Coalition is one of two working groups that make up the Colorado Medical Home Initiative, a statewide effort to promote a medical home approach to health care. The purpose of the Colorado Medical Home Coalition —made up of a group of Colorado leaders engaged in planning and oversight for the Colorado Medical Home Initiative effort—is to unite partners and align efforts to strategically promote a medical home approach statewide. The Colorado Medical Home Coalition's vision is to ensure that all Coloradans have access to and experience a patient/family- centered medical home. Overall Colorado Medical Home Coalition objectives include working to build and implement sustainable systems that support quality health care for all children and youth in Colorado, reinforcing the medical home approach as a core concept of quality health care, promoting care-coordination partnerships between families and providers, and encouraging a team approach among all health care providers. The Department and CDPHE provide shared leadership for the Colorado Medical Home Initiative.

Colorado Medical Home Community Forum – In addition to the Colorado Medical Home Coalition, the other working group is the Colorado Medical Home Community Forum, a bimonthly meeting of Colorado stakeholders representing various agencies, families, medical facilities, organizations, and policymakers from all over Colorado.

The Accountable Care Collaborative Program

SB07-130 requires that Colorado Medicaid and CHP+ maximize the number of children with a medical home. The Accountable Care Collaborative (ACC) is the Department's primary program to improve client health and reduce costs. One of the ACC's main goals aligns directly with SB07-130 – to engage all enrolled clients with a medical home. In the ACC program, a medical home is provided by enrolled Primary Care Medical Providers, or PCMPs. The ACC program has two other main components—seven (7) Regional Care Collaborative Organizations (RCCOs) and the Statewide Data and Analytic Contractor (SDAC). The RCCOs ensure that clients receive enhanced care coordination and support practices in providing a medical home level of care. The SDAC provides population level data to support practice improvement efforts and client level data to support the targeting and care of individual clients.

In December 2014, over 392,000 children/youth were enrolled in the ACC program, with 82% of enrolled children attributed to a medical home (PCMP).

Enhancing Primary Care Standards - The ACC program also began incentivizing PCMPs to meet enhanced primary care standards in 2014. Enhanced PCMPs must meet at least 5 of the following 9 standards:

- Provision of regularly scheduled weekend and evening appointments
- Delivery of timely clinical advice by telephone or secure electronic message during and after office hours



- Use of data to identify special patient populations in need of extra services and support
- On-site access to behavioral health care providers
- PCMP generates a list of patients actively receiving care coordination
- Use of Medicaid approved behavioral health or developmental screening tools
- Tracking of referrals to specialty care providers
- Willingness to accept new Medicaid clients for the majority of the year
- Collaboration between patient/family/caregiver to develop and update an individual care plan

The RCCOs are responsible for documenting which standards are met by practices seeking this designation. RCCOs also provide support to practices that require additional resources to meet the standards. The Department is developing an evaluation plan to test the efficacy of the policy and payment change.

Incentivizing Medical Home Attribution - In addition to incentivizing PCMPs to meet enhanced standards, in 2014, the Department changed the payment methodology to incentivize the RCCOs to ensure that as many members as possible are attributed to a medical home. The RCCOs' per member per month payment is reduced for each member that is unattributed to a PCMP for a continuous period of six months or longer. This tiered payment model increases RCCOs' motivation to link long-term unattributed members of the ACC to a medical home.

Greater Integration and Collaboration - The Department recognizes the vital role that behavioral health and oral health providers play in children's' health and is currently working on a variety of initiatives that would further integrate these providers, as well as other specialists, into the ACC program. These initiatives include the development of health teams that work together to coordinate medical and non-medical care needed by children and families, development of health homes, and use of technology to enhance communication between primary and specialty care providers.

The increased emphasis on integration can be seen in the Statewide Performance Improvement Projects. Each RCCO in the ACC participates in these projects, which are designed to achieve improvement in clinical and non-clinical care areas that will positively impact health outcomes and member satisfaction. In FY 2014-2015, several RCCOs chose to implement projects related to Adolescent Depression Screening in Primary Care with Transition of Care to a Behavioral Health Provider when indicated.

Conclusion

The Department participated in a number of efforts to increase the number of children in medical homes. In addition to those efforts, the Department has evolved policy and practices within the ACC to connect more clients with a medical home and to improve the quality of care and support



provided. The Department looks forward to enhancing the care received by children in medical homes by continuing efforts to provide coordinated and integrated care.

