Illinois Health Connect PCCM Provider and Quality Management (PQM) Subcommittee Minutes

3/20/2014 12pm-1pm

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Attendees:	
Sherri Cohen	Chicago Dept of Public Health
Kwame Foucher	Cigna Health Spring
Angie Markum	Illinois Eye Center
Amanda Attaway	ISMS
Beth A Volin	Rush
Pam Bunch	HFS
Carmela Carlson	Primary Care Associates
Anna Carvalho	LaRabida
Cathy Hawkins	Primary Care Associates
Gerri Clark	UIC-Division of Specialized Care for Children
Debby Cook	HFS
Carole Eataock	Family Nurse Practitioner Nurse Mgr.
Edward Pont	ICAAP
Ginnie Flynn	IAFP
Greta Bradley	Loyola University Medical Center
Amy Harris-Roberts	HFS
Donald Feldott	Highland Pediatric & Adolescent Medicine
Imelda Carlos	Dr. Imelda S Carlos
Judy King	
Jenny Bolliger	Tremont Medical Clinic
Daniel Johnson	Universiy of Chicago
Karen Whitsitt	Pediatric Health Associates
Kathleen Shanahan	Primary Care Associates
Kathy Warman	North Arlington Pediatrics
Kelly Carter	ІРНСА
Bridget Larson	HFS
Marie Lindsey	Cecily & John Leach College of Nursing University of St. Francis
Martine Nelson	Doctine
Meryl Sosa	Illinois Psychiatric Society
Michele Ptak	Primary Care Associates
Nancy Mertzenich	IHC PSR
Omar Sawlani	MD
Kathy Pavkov	OSFMG
Sharon Pittman	HFS
Ken Ryan	Illinois State Medical Society

Sharri Sadala	HFS
Marissa Sanders	Mesirow Financial
Scott Allen	ICAAP
Regina Shasha	UIC
Veronica Shelton	Sinai Medical Group
Theresa Larsen	Meridian Health Plan
Tim Wall	Ped Health
Daniel Perez	A to Z Pediatric and Youth Healthcare

1. New Provider and Quality Management (PQM) Subcommittee (Dr. Siddiqi)

- New Provider and Quality Management subcommittee has formed from the merged Provider Network and Quality Management subcommittees and meets quarterly.
- Next meeting will be held on 12-1pm Wed June 18^{th, 2014}.
- Email Jonathan Jackson (jjackson@automated-health.com) to join the distribution list.

2. IHC Website - New Care Coordination box http://www.illinoishealthconnect.com

- New IHC Website addition of Care Coordination webpage that links to top links from HFS including HFS Care Coordination webpage with additional links that contain specific info about the roll-out
- At the bottom of the IHC Care Coordination webpage, there are two green boxes labeled CCEs and ACEs which contain contact info for the CCEs and will eventually link to ACEs contact info
- Strongly encourage providers to visit the CCE websites and contact them in order to contract with any CCE and ideally improve the continuity of care of your patients currently seeing their existing providers.

2. IL Medicaid Managed Care – Care Coordination Roll-out (Dr. Siddiqi)

a) HFS Care Coordination Expansion Map

http://www2.illinois.gov/hfs/SiteCollectionDocuments/CCExpansionMap.pdf

- The Illinois Medicaid reform law [PA 96-1501], requires that by January 1, 2015, at least 50 percent of the individuals covered under Medicaid be enrolled in a care coordination program that organizes care around their medical needs.
- HFS seeks to improve outcomes and the quality of care provided to patients, improving patient experience and satisfaction with their care, and also decreasing overall costs.
- This expansion map was recently updated 03/20, 2014. This map is key to understanding where the roll-out is occurring, but also to understand all the acronyms that describe all of the different managed care entities.
- There are 5 mandatory managed care regions Cook & Collar counties, Quad cities, Rockford Region, Central IL, Metro-East region colored/labeled on the map.
- If you are in a white region, the Illinois Health Connect PCCM program will continue in its current form as mandatory plan choice with the option for patients

to enroll and join a VMCO - purple triangle in select counties– examples: Meridian, FHN, and Harmony.

• If you are in a colored mandatory managed care region, the roll-out has already begun with patients in the SPD population (seniors and persons with disabilities). Joining either an ICP plan or a CCE plan (red squares - initial examples were Aetna Better Health and IlliniCare) beginning in 2011 and has continued to roll-out as a mandatory option with City of Chicago being the most recent expansion region for ICP and CCE plans.

<u>ICP</u>

- 1. Aetna Better Health
- o 2. IlliniCare Health Plan (Centene)
- 3. Community Care Alliance of Illinois (CCAI)
- 4. Meridian Health Plan of Illinois
- o 5. Molina Healthcare
- 6. Health Alliance Medical Plan
- 7. Blue Cross Blue Shield
- 8.Cigna-HealthSpring
- 9.Humana Health Plan

<u>CCE</u>

- o 1. Macon
- 2. Precedence
- o 3. Together4Health
- 4. Be Well Partners in Health
- 5. Entire Care
- MMAI plans are for patients who are dual eligibles and enrolled in both Medicare A and B and also receiving full Medicaid benefits many of the same ICP plans listed above are also MMAI plans depending on your region.
- HFS is testing innovative models that offer risk-based care coordination through provider-organized networks of fee-for-service Care Coordination Entities (CCEs) and Managed Care Community Networks (MCCNs). Each CCE (blue dots) will serve approx. 1,500 Medicaid clients in the first year as they establish and test their models before expanding.
 - 5 Care Coordination Entities (CCE) plans (3 in Cook County, 1 Central IL region, 1 Quad Cities region).
 - Care Coordination Entities
 - Be Well Partners in Health- Cook
 - Healthcare Consortium of Illinois (Entire Care)-Cook
 - Together4Health- Cook
 - Macon County Care Coordination (My Health Care
 - Consortium)
 - Precedence Care Coordination
 - Managed Care Community Network (MCCN)
 - Community Care Alliance of Illinois
 - In the near future, CountyCare will be an MCCN choice in Cook County

- Care coordination roll-out for families and children in the Medicaid patient population:
 - Some of the families (approximately 250,000 recipients) have opted out of IHC and chosen one of three MCOs as a voluntary Managed Care Option
 - Soon all the families and children in Mandatory managed care regions (colored regions) will begin to move out of IHC and enroll into the Medicaid expansion programs which include Accountable Care Entities (ACEs) and MCO's (HMOs or MCCNs) depending on the county.
 - HFS has issued an ACE contract list on the HFS website. IHC will update our green ACE box webpage with the contact info of the ACEs as soon as that info is available on HFS website. It is important to understand that these materials and HFS links will continue to be updated as HFS moves forward with the roll-out.
 - The managed care coordination roll-out for families and children will phase in across all 5 mandatory regions.
 - Currently newly eligible ACA adults in Cook County are not assigned to any plan including IHC and are straight FFS. Outside of cook county, newly eligible ACA adults are enrolled into IHC until later this year. Under expansion they will have to select a new plan choice if they are in a managed care colored region. This is a phased roll-out scheduled to begin this summer but will likely continue to move patients based on geographic regions over a period of months.
 - CCMNs (Blue star on your map) are care coordination entities (CCEs) for Children with Complex Medical Needs – 3 awarded and scheduled to begin in July – Lurie, OSF, and La Rabida
- IHC's role in the HFS Care Coordination roll-out
 - Illinois Health Connect is a Primary Care Case Management "PCCM" program and will serve as the PCCM administrator for the CCEs and ACEs.
 - Providers who want to participate in the CCEs and ACES will need to be enrolled in the Illinois Health Connect PCCM network and providers will continue to receive your current IHC reimbursement structure of fee-forservice payments, CMF 2/3/4 PMPM and bonus payments. The CCEs may eventually become an MCO or MCCN, at which time the payment structure for providers will change. The ACEs are on a three-year pathway to full-risk captitated payments moving to the MCO model as well, but for now the current payment structure within IHC will continue when a provider joins and contracts with a CCEs, CCMNs and/or ACEs. Occasionally, incorrect messaging has been led providers to believe that they need to disenroll with IHC due to the managed care roll-out and this is NOT the case. In order to participate in the CCEs, CCMNs, and ACEs, a provider must be enrolled with IHC PCCM program and part of the CCE, CCMN, and/or ACE network.
 - The current IHC Phase I PCP to PCP referral system will still be required as part of the ACE and CCE network, but will be limited to the providers within the particular ACE or CCE plan, so that PCPs within one ACE will

need to refer to another PCP within the same ACE if another PCP other than the assigned PCP is seeing the patient.

b) HFS Care Coordination Roll-out Schedule

http://www2.illinois.gov/hfs/SiteCollectionDocuments/CCRollOutPlan.pdf

- This flow-chart HFS link helps pull all the information on care coordination together and updates on expansion efforts. Able to follow the options for a Medicaid population subset, for example, families and children and newly eligible adults on the right will have the following options: ACEs, MCO, and MCCNs.
- c) HFS Care Coordination Roll-out Summary (2 pages- Jan 2013-Jan 2015) http://www2.illinois.gov/hfs/SiteCollectionDocuments/CareCoorPlan.pdf
 - Easy and quick read written summary
 - Nice overview of the different managed care coordination plans and Medicaid population subsets being served (SPD and CCMN)

2. CCE updates – HFS CCE Project Manager Molly Siegel

SPD CCE PLANS:

- a) Macon CCE My Health Care Coordination (Central IL) www.myhealthcarecoordination.com
- b) Precedence CCE (Quad Cities) www.unitypoint.org/quadcities/precedence-cce.aspx
- c) EntireCare <u>http://www.hcionline.org/</u> (Cook County)
- d) Be Well http://bewellpartnersinhealth.com/ (Cook County)
- e) Together 4 Health <u>http://www.t4hillinois.org/</u> (Cook County)
 - All CCEs have begun taking on enrollment from 900-1500 patients
 - Providers need to enroll or continue to be enrolled with IHC in order to participate in a CCE. Must also be part of CCE network.
 - Providers will continue to receive their current reimbursement of fee-forservice, IHC care management fees, and IHC bonus payments until further notice
 - The Children with Complex Medical Needs (CCMN) CCEs include LaRabida (Cook), Lurie (Cook), and OSF (downstate). These CCEs will be ready to take on enrollments starting in July
 - Providers are encouraged to contact the SPD CCE and CCMN CCE plans in their local regions in order to contract with them and continue to provide care to their patients as they move into a CCE plan
 - Dr. Siddiqi reminded everyone that HFS Project Manager Molly Siegel provided a SPD CCE presentation twice for IHC providers last winter, which was recorded and is a 20min video saved to the IHC Care Coordination webpage. The link is provided on the IHC CCE webpage that can be found by clicking on the CCE green box on the IHC Care Coordination webpage. Also, the contact information for SPD CCE and CCMN CCE plans are available on the IHC CCE Webpage.

3. ACE updates – HFS ACE Project Manager Bridget Larson

- a) ACE Program Overview
- b) ACE Implementation Updates

http://www2.illinois.gov/hfs/PublicInvolvement/cc/ACE/Pages/default.aspx

- Accountable Care Entities (ACE) will be serving the families and children and newly eligible ACA Adults population beginning in July
- Patients will have a choice between an ACE, MCO, and MCCN
- An ACE will serve approximately 40,000 patients in Cook County and include the following provider types: primary care, specialty care, hospitals, and behavioral healthcare
- An ACE will be responsible for care coordination for Medicaid clients and will be paid \$9PMPM by the state
- An ACE will be on a 3-year path to a new payment structure different from the current fee-for-service: shared savings within 18 months, partial risk after 18 months, and full risk capitated payments after 3 years
- 11 ACE solicitations received. PCPs in an ACE must be enrolled as an IHC PCCM. Providers will continue to receive their current reimbursement within IHC of fee-for-service, care management fees, and bonus payments until further notice
- Providers are encouraged to contact the ACE plans in their local regions in order to contract with them and continue to provide care to their patients as they move into an ACE plan

4. Sign up for IHC webinars (Now CME accredited for clinical/practice management topics – 1.0 hour AAFP CME credit) <u>http://www.illinoishealthconnect.com/provider/providereducation/providereducation.aspx</u>

5. IHC PCCM Provider Subcommittee Upcoming Dates:

- a) Provider & Quality Management (PQM) Subcommittee: Wed June 18th 2014(Q2)
 b) Behavioral Health: Wed March 26th (Q1) and Wed May 14th 2014 (Q2)
- b) Behavioral Health: Wed March 26th (Q1) and Wed May 14th 2014 (Q2) Email Jonathan Jackson at <u>jjackson@automated-health.com</u> to join email invite list

6. PQM Subcommittee Q&A

• Providers were asked to email IHC Provider Services Manager Jonathan Jackson at <u>jjackson@automated-health.com</u> with any questions about the HFS Care coordination roll-out, CCE plans, and ACE plans. These questions will be submitted to HFS for review and responses will be sent to the PQM distribution list prior to the next PQM subcommittee meeting.