### **EOHHS Accountable Entity Program**

Comprehensive AE Incentive Pool (AEIP) Funding & Structure

January 31, 2017



- Background and Context: HSTP & AE Program Approach
- Establishing the AE Incentive Pool (AEIP)
- Incentive Payment Details
- Questions and Discussion

# Background: Health System Transformation Project

- In October 2016, CMS approved an amendment to RI's Medicaid 1115 Waiver, bringing \$129.8 M in federal financial participation to RI from Nov 2016 Dec 2020\*
- Funding is based on the establishment of a Health Workforce Partnership with RI's three public higher education institutions, as illustrated:



 The majority of the financing from this waiver amendment will be provided to AEs as incentive-based infrastructure funding via the state's managed care contracts

\*The current RI 1115 Waiver expires at the end of CY 2018 – the STCs of the waiver amendment authorize **\$79.9 M** in FFP through the end date of the waiver, with a commitment to extend authority through 2020 upon waiver renewal

# AE Program Approach



### Nationally recognized Medicaid Managed Care program

### Limitations (in RI & nationally)

- Fee based (vs. value based)
- Does not generally focus on health outcomes
- Limited emphasis on Population Health
- Opportunity to better meet the needs of those with complex health needs & exacerbating social determinants

## 1. Certify Accountable Entities

Approach:

**Three Pillars** 

Define expectations for system transformation

### 2. APM Guidance

Require transition from fee based to value based payment model

**3. HSTP Incentive Funds** Support Infrastructure Development Goal: System Transformation

More effectively meet the real life needs of individuals and their families.

- "Break through" the financing and delivery system disconnects
- Build partnerships across payment systems, delivery systems and medical/social support systems
- Align financial incentives

## **Status and Timeline**

- Medicaid Accountable Entity Application Posted: November 15, 2017
- Medicaid Application Due: February 15, 2018
- Certification: April 15, 2018
- MCO-AE contracts: July 1, 2018

## Program Year 1

begins no later than July 1, 2018, ends June 30, 2019.

- Incentive funds are administered through participating MCOs with Total Cost of Care(TCOC) Models that EOHHS has determined to be in compliance with EOHHS requirements.
- Execution of an EOHHC compliant TCOC contract between an MCO and Certified AE prior to July 1, 2018 is a critical milestone tied to incentive funds. As such, EOHHS encourages participating parties to begin these discussions as soon as possible, in anticipation of AE certification.



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- Solve Total Incentive Funds allocated to Program Year 1
- \$21 M
   70% allocated to the Comprehensive AE program: 10% of the Comprehensive AE program funds set aside for MCO Incentive Pool
- => \$18.9 Million Total AE Incentive Pool (AEIP) for Comprehensive AEs in PY 1 = 90% of \$21 M

## **AE-MCO** specific pools

- Each AE-MCO arrangement has a defined AE Incentive Pool (AEIP)
- AEIP is based on PMPM multiplier X estimate # of attributed lives
- Program Year 1: PMPM Multiplier is set at \$7.87 PMPM

Fotal AEIP Pool:	\$18.9 M
Current Pilot Enrollment:	143,000
Estimated # Attributed Lives:	200,200 (Current pilot + 40% growth)
Resulting Member Months:	2,402,400

### Determining the Number of Attributed Members

- The number of attributed members must be based on EOHHS Attribution Methodology.
- □ The number of MCO-AE attributed member months shall be based primarily on the MCO-AE Attributed Lives Report, submitted to EOHHS upon execution of contract.
- □ For the purpose of establishing the AEIP, the number of attributed lives for each AE-MCO relationship shall be fixed by EOHHS at the start of the MCO-AE contract period.

#### **Solution** Fluctuations in the number of attributed members

- Fluctuations in the number of attributed members will not alter the value of the AEIP for the performance period unless there is a material reduction in attributable lives. However, changes in the number of attributed lives will continue to be a factor in calculations in TCOC related contracts with MCOs.
- A material reduction shall be a reduction of 15% or more sustained over two quarters. In such case the AEIP appropriate reductions shall be made to any remaining payments.
- The AEIP will not be increased if there is a growth in the attributed lives so as to not exceed the HSTP funds available to EOHHS for this initiative.
- Funds in the AEIP that are not exhausted within the program year will be retained and applied to next year's AEIP.



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# AEIP Incentive Payment Schedule Requirements

Domain	Performance Milestone	%
1. Fixed Percentage Allocation Based	<ul> <li>AE Certification/Certification w/Conditions &amp; Execution of TCOC Contract *</li> <li>MCO submission of MCO-AE attributed lives report</li> </ul>	15%
on Specific	• Execution of Compliant Agreement for HSTP Project Plan	10%
Achievement (35%)	<ul> <li>Execution of Compliant Agreement w/SDOH, BH, SUD Service Provider</li> </ul>	10%
2. Quarterly Reporting on Outcome Metrics	<ul> <li>Defined outcome measures in accordance with EOHHS measure specifications         <ul> <li>✓ Preventable Admission</li> <li>✓ Avoidable ED use</li> <li>✓ Readmissions</li> </ul> </li> <li>At least 2 MCO-AE outcome metrics</li> </ul>	20%
3. Variable % Allocation Based on HSTP Project Plan	<ul> <li>Specific milestones with each AE HSTP Project Plan</li> <li>Target AE specific opportunities</li> <li>Focus on certification domains</li> <li>No more than 30% of the AEIP can be dedicated to Domains 1-3</li> </ul>	45%

\* If an AE has negotiated and executed such contract with an MCO in anticipation of certification the AE may be immediately eligible for this payment upon certification

## AEIP Incentive Payment: Domain 1 Details

contract.

Note: If an AE has negotiated and

executed such contract with an

MCO in anticipation of

certification the AE may be

immediately eligible for this

payment upon certification.



This milestone shall not be considered complete until the MCO submits a completed MCO-AE Milestones Template to EOHHS These agreement(s) shall minimally include three core components:

- Protocols that enable the identification of social, behavioral and/or SUD service needs;
- Protocols for the referral of attributed members to participating SDOH, BH and/or SUD provider; and
- 3) Reporting requirements that include referral tracking. 13

## Example of Incentive Payments (AE w/ 15,000 Attributed Members)

Example	1	Attributed Members	Annual Member N	r Months PMPM M		lultiplier		AEIP Pool	
AE-MCO #1	L	15,000	180,000	\$7.8		87 :		\$1,416,600	
Milestones					rter of pletion	% Allocati	on	Earned Incentive \$	
1.Fixed Percentage Allocations Based on Specific Achievements					35%		\$495,810		
(required allocation percentage)								\$455,610	
AE Certification + Meet Value Based Metric through Execution of TCOC			Q1		15%		\$212,490		
Contract							<i>\$212,450</i>		
Initiate Performance Based Incentive Arrangement: Execution of EOHHS			01		10%		\$141,660		
Compliant Agreement for HSTP Project Plan				-			+,		
Agreement with SDOH, BH, SUD provider					10%		\$141,660		
2. Quarterly Reporting on Outcome Metrics					20%		\$283,320		
(required allocatio	n percei	ntage)				20%		\$285,520	
Q1				0	21	5%		\$70,830	
Q2				0	22	5%		\$70,830	
Q3				0	23	5%		\$70,830	
Q4				0	24	5%		\$70,830	
3. Variable Percen	ntage All	ocations Based on the H	STP Project Plan			45%		\$637,470	
(percentages shown below are illustrative, not required)			iired)			43%		\$637,470	
Focus Area #1						20%		\$283,320	
Milestone #1						5%		\$70,830	
Milestone #2						5%		\$70,830	
Milestone #3						5%		\$70,830	
Milestone #4						5%		\$70,830	
Focus Area #2						10%		\$141,660	
Milestone #1						2.5%		\$35,415	
Milestone #2						2.5%		\$35,415	
Milestone #3						2.5%		\$35,415	
Milestone #4						2.5%		\$35,415	
Focus Area #3						15%		\$212,490	
Milestone #1						3.75%		\$53,123	
Milestone #2						3.75%		\$53,123	
Milestone #3						3.75%		\$53,123	
Milestone #4						3.75%		\$53,123	



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