Camden Coalition of Healthcare Providers

Core Competencies for Medicaid ACOs

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Agenda

- Background
  - Camden Coalition
  - New Jersey Background
  - Medicaid ACOs
- Common core capabilities
- Policy changes to consider
- Q & A

The Camden Coalition of Healthcare Providers

- Founded to improve the health status of all Camden residents, by increasing the capacity, quality, and access of care in the city
- Grant funded, NJ nonprofit corporation
- 20 member governing board
- 3 core interventions
  - Care management / care transitions
  - Primary care transformation
  - Patient engagement

NJ's Medicaid ACO

- Legislation signed August 19, 2011
- 3-year Demonstration Project
- Goals:
  - Improve healthcare access and quality
  - Reduce unnecessary costs
- Community based, widespread participation is required
- Usual Medicaid payments are made, ACO participants can share savings if goals are met
- Program requires quality and patient satisfaction metrics

Other Medicaid ACOs

- Minnesota
  - Heath care delivery system demonstrations (organizations & systems)
- Oregon
  - Coordinated care organizations (corporate entities or linked provider networks)
- Utah
  - Contracts w/ capitated payments

Colorado

  - 7 regional care collaboratives

Common Core Capabilities

- Coalition building
- Care coordination / Complex care management
- Data!
- Provider transformation
- Partners beyond “health care”

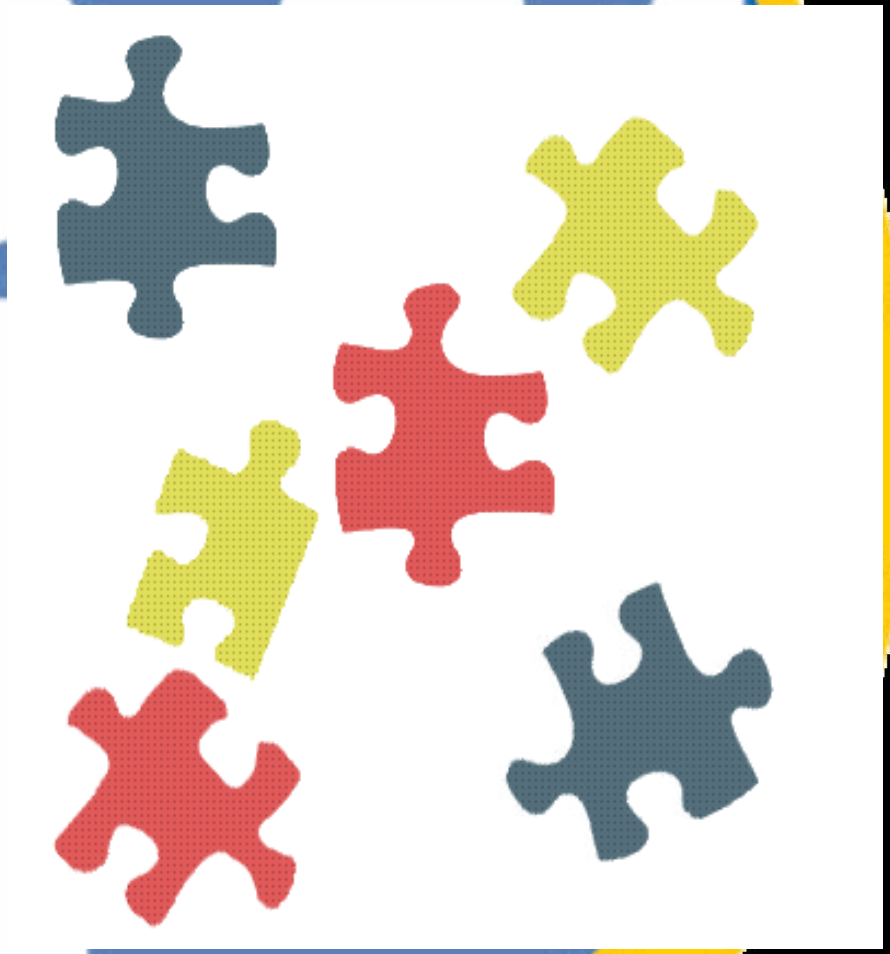
Coalition Building

Care Coordination
Complex Care Management

- High touch interventions
- Recruiting, training, evaluating team members
- Identify ready patients
  - Clinical
  - Behavioral

Data!

- Hospital visits
- Doctor's office visits
- Medications
- Labs
- Behavioral health
- Long-term care / rehab
- Claims – charges v. paid
- Universal patient ID



Practice transformation

"Change is hard enough; **transformation to a patient-centered medical home requires epic whole-practice reimagination and redesign.**"

- Creating patient registries
- Case conferencing
- Adding engagement activities

Beyond “health care”

Policy changes to consider

- Funding case conferencing
- Data transparency across silos
- Requiring in-person case management

Q & A

Thank you!

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