



**Illinois Health
Practice Alliance**

CBHA Virtual Winter Conference

Driving Success in Integrated Health Homes

December 8, 2020

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IHPA: Driving Success in the Integrated Health Home

- IHPA 2020 Results
- Integrated Health Home Tool Enhancements: HealthEC
- IHPA Integrated Health Home Pilot
 - Target Population
 - Care Model
 - Results
- 2021 Objectives:
 - IHH Contract
 - 1915i Response
 - HFS Transformation of Care Pilot Projects

IHPA 2020 Results

- Retain IlliniCare Payor Agreement
- Sign Meridian Payor Agreement
- Reduce Provider administrative burdens
- Improve Provider incentive opportunities
- Align deliverables in payor and IHH agreements
- Increase IHPA member attribution 50,000+
- Continued investments in a fully integrated IT platform
- Extend IHPA technology to non-IHPA attributed lives
- Continue to exceed financial objectives

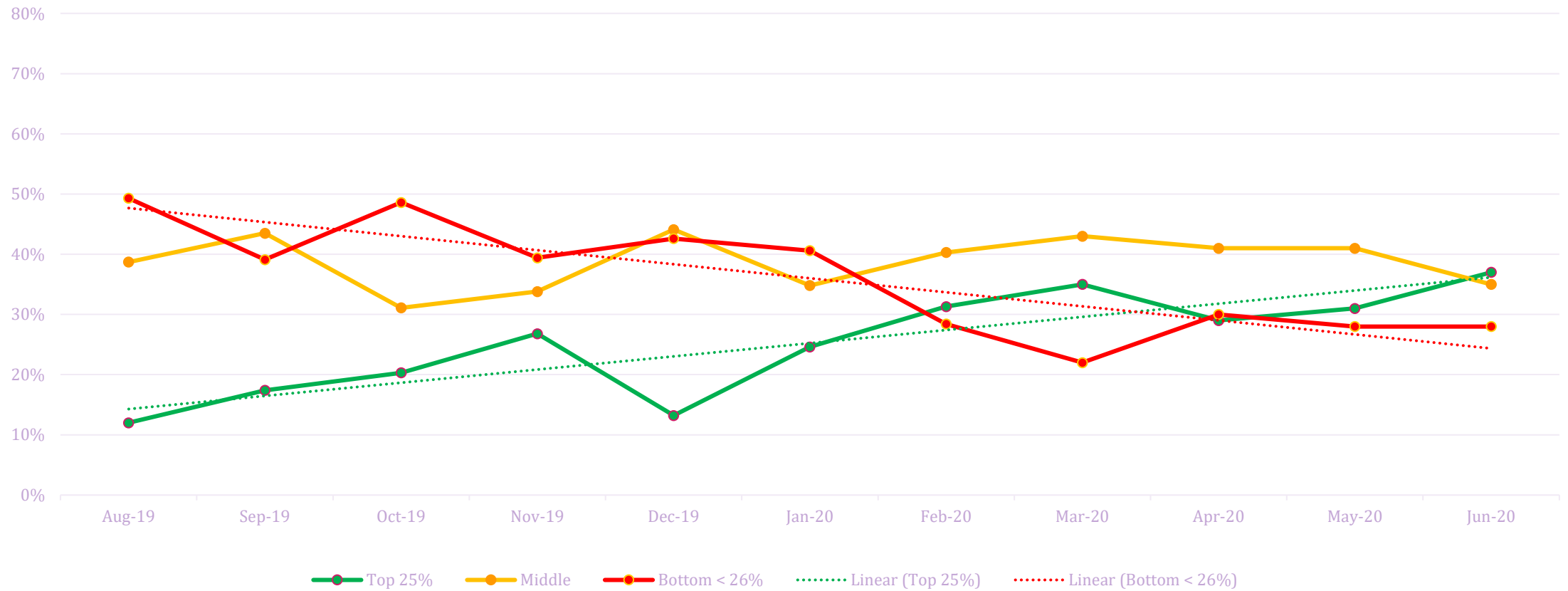
IHPA Performance – First Year Results

IHPA Care Coordination Deliverables

Metric	Month One Results	Month Twelve Results	% Improvement
Care Transitions	68%	100%	32%
Health Risk Screenings	30%*	48%	18%
Health Risk Assessment	44%	89%	45%
Care Plan	36%	75%	39%

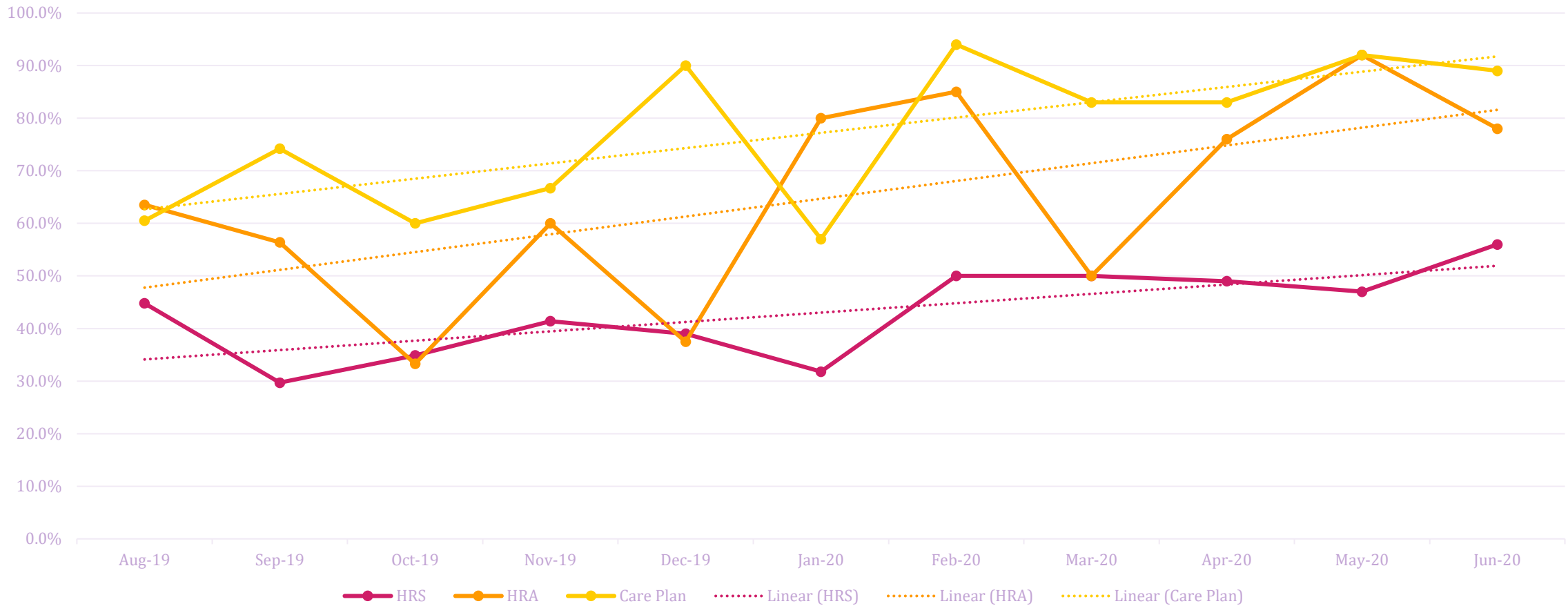
IHPA Network Management Results

Providers Stratified



IHPA Care Coordination Metric Results

% Met Cs Mgmt Metrics



IHPA Provider Reimbursement and Value Added

- 100% FFS
- P4P
 - Percentage of FFS billings
- Shared Savings
 - All Providers eligible to participate and earn from MCO pool
- Additional billing opportunities for Outreach and Engagement
- No Prior Authorizations required for IHPA scope of service codes
- Access to facility Admit, Discharge, and Transfer information (ADT)
- Access to Social Determinates of Health (SDOH) platform through NowPow.

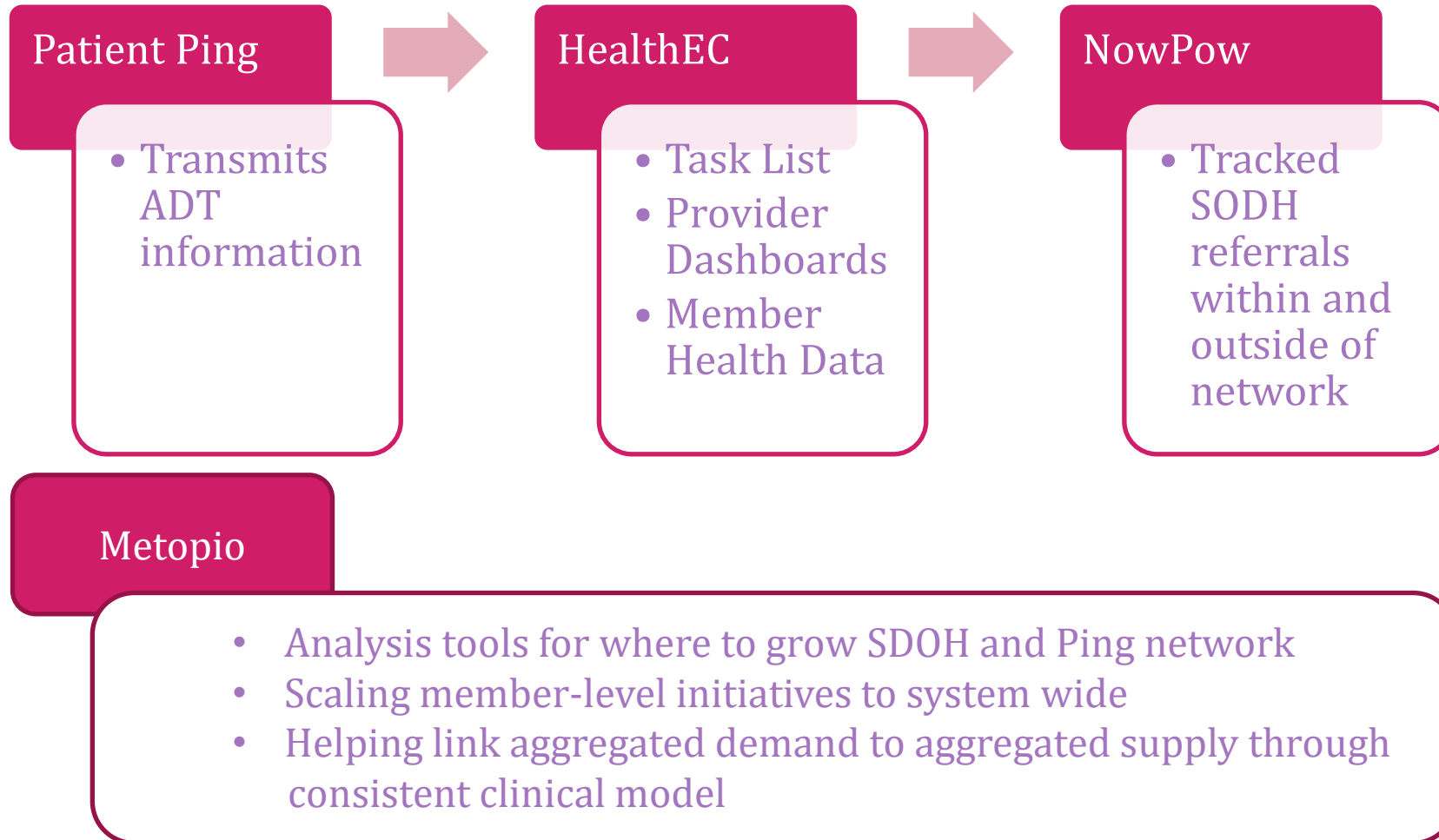
MCO Care Coordination and P4P Metrics

Metric	Benchmark	Additional FFS Reimbursement
<ul style="list-style-type: none"> • 7-day FUH • 30-day FUH • FUA • FUM 	70 th percentile NCQA for each measure	P4P Eligible
<ul style="list-style-type: none"> • IET Initiation Phase • IET Engagement Phase 	70 th percentile NCQA for each measure	P4P Eligible

Care Coordination Platform Improvements

- IHPA has enhanced its care management platform, HealthEC by integrating the system with:
 - Patient Ping: Admission, Discharge, Transfer (ADT) Feeds
 - NowPow Social Determinant of Health Platform which includes first Universal Client Consent Form
- A single HealthEC sign on gives our providers full access to the combined benefits of three powerful platforms
- IHPA Providers are notified of client ED visits, admissions and discharges in real time
- IHPA Providers can make, manage and track compliance with fulfillment of social needs for our clients.

IHPA Data Systems



Care Task List – Driving Network Activities

☰

Search Health Topic... 🔍

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▼ Care Tasks Search/Add

Patient Name

From 04/23/2019

Beneficiary Status
Active

To 06/23/2019

Assigned Provider

Domain Select

- Select
- Case Management
- P4P
- P4R

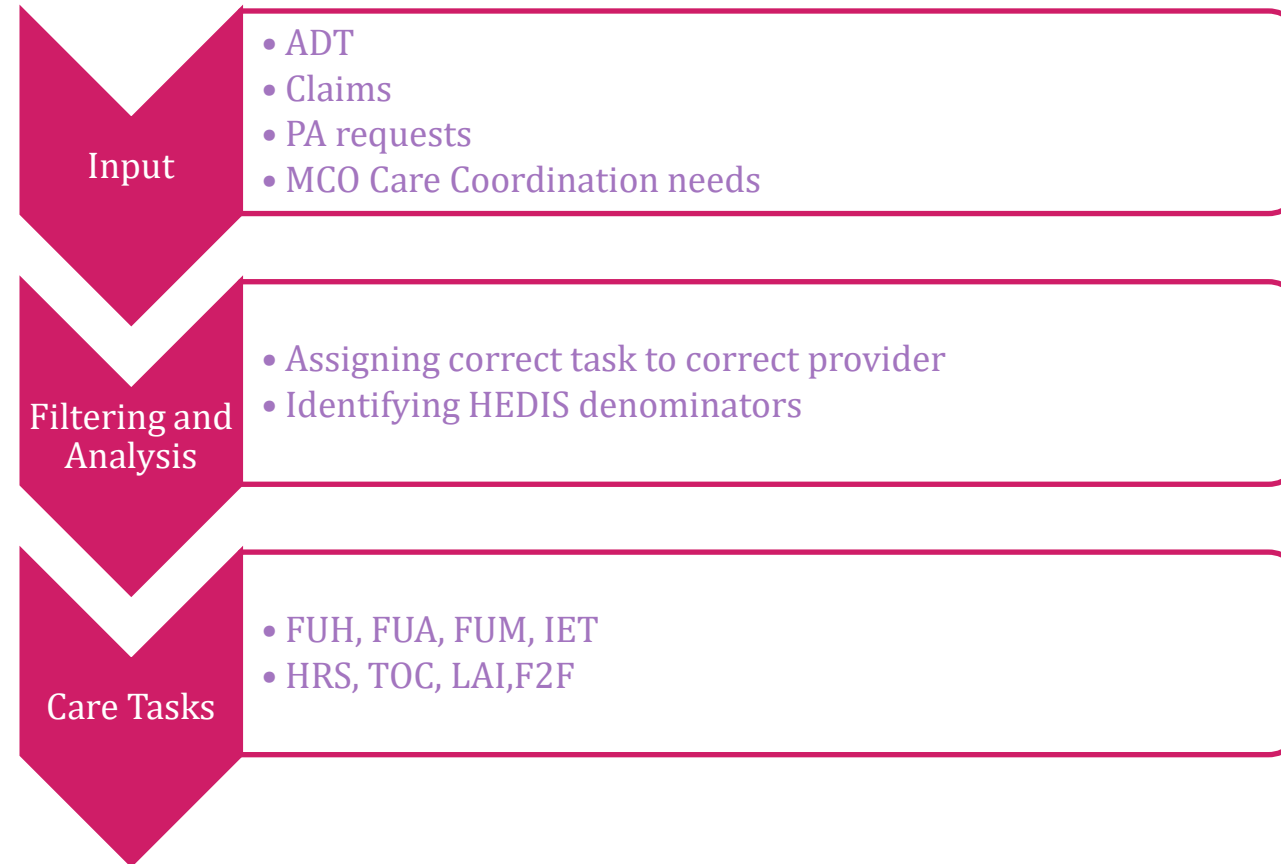
4 Due Now
0 Complete - Met
1 Complete - Not Met

Care Tasks List

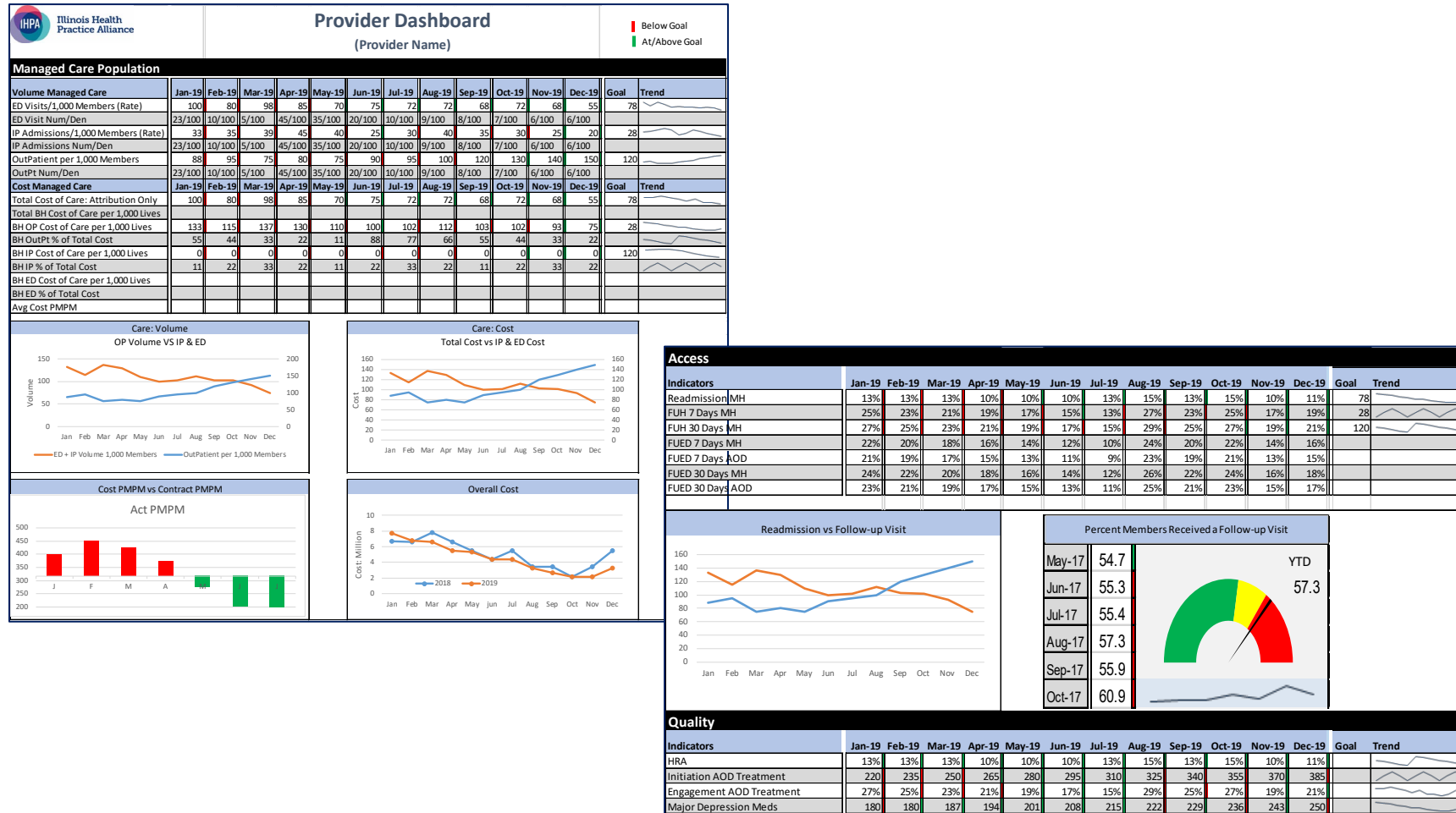
				Patient Name	Medicaid ID	Event / Care Plan Goal	Care Task	Triggered On	Goal Due	Goal Type	Care Manager	Hospital/Facility	Assigned Provider	Last Updated On	Last Updated By
👍	✎	⚠️	✅	██████████	██████████	P4P-FUH 30 Days - Follow-Up After Hospitalization for Mental Illness	Complete the Follow-up	05/17/2019	06/16/2019	Short Term		Memorial Medical Center	Gateway Foundation Inc 84425		
👍	✎	⚠️	✅	██████████	██████████	CM-HRS Assessment	Upload / complete the assessment	05/01/2019	06/29/2019	Long Term			Gateway Foundation Inc 84425		
👍	✎	⚠️	✅	██████████	██████████	P4R-FUM - 7 Days Follow-Up After ED Visit for Mental Illness	Complete the Follow-up	05/24/2019	06/01/2020	Long Term		St. Mary's Hospital	Gateway Foundation Inc 84425		
👍	✎	⚠️	✅	██████████	██████████	P4R-FUM - 30 Days Follow-Up After ED Visit for Mental Illness	Complete the Follow-up	05/24/2019	06/01/2020	Long Term		St. Mary's Hospital	Gateway Foundation Inc 84425		

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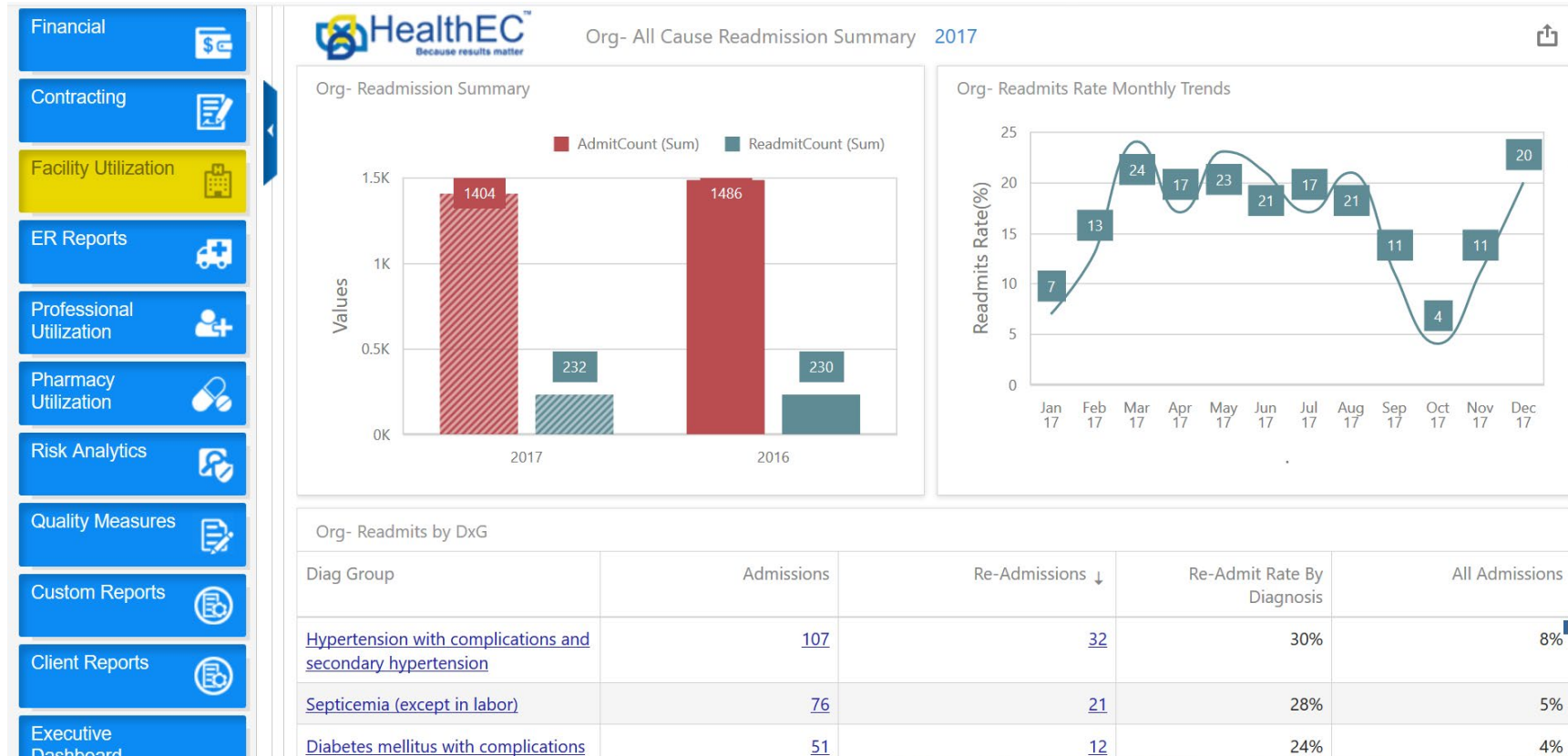
Care Task List Creation



Provider Dashboards Drive Performance



Admission/ Readmission Tracking



IHH Pilot

- About 10% of IHPA members entered the attribution through crisis services only
- The total cost of care for these members averaged 300% of the TCOC for the rest of IHPA attribution
- These members experienced poorer health outcomes and poorer quality of life due to lack of engagement with outpatient care
- Social determinants of health played an important role

IHH Pilot

- The IHPA IHH pilot attempted to improve the circumstances of up to 50 of these members who appear to be in a preparation or action stage of change, and appear ready to engage with providers
- IHPA providers nominated members for inclusion in the pilot
- The pilot ran June 1, 2020-August 31, 2020, and has been extended for an additional 6 more
- The pilot is based on the proposed HFS adult IHH model

IHH Pilot Reimbursement

- The providers received a one-time \$3,000 case rate to cover the cost of wraparound care coordination services not covered by the 132/140 taxonomy, and to serve as a discretionary stipend to help address the member's needs
- Providers were still able to bill TCM
- \$500 of the case rate is at risk if the member experiences a BH hospitalization or nursing home placement in month 3
- The Pilot has been renewed for an additional 6 months at a 50% rate to consolidate gains and transition members

IHH Pilot Inclusion Criteria

- Member is on the list of members who receive only crisis services
- An IHPA provider encounters member in crisis situation
- An IHPA provider identifies preparation or action stage of change
- No geographic limits
- Enrollment capped at 50

IHH Pilot Deliverables

- HRA
- Care Plan
- Minimum monthly contact with member
- Monthly written summary of activities and breakdown of stipend spending

IHPA IHH Pilot Outcome Measures/Deliverables

Cohort Analysis From Claims

- Change in BH-related ER visits
- Change in BH-related inpatient visits
- Change in BH-related inpatient costs
- Change in medical cost

From provider reporting

- HRA
 - Care Plan
 - Summary of care activities
 - SDOH spend per member
-

Participating Providers-Share Experiences and Best Practices

- Chestnut
- Egyptian
- Family Guidance Center
- LSSI
- Thresholds
- Memorial Health
- MFS
- Sinnissippi
- Human Service Center - Peoria

Preliminary IHH Pilot Numbers

2019 IHH Pilot Members					
	ER Visits	ER PMPM	IP Visits	IP PMPM	Total PMPM
June	1.33	\$322.73	1.33	\$191.65	\$514.38
July	0.80	\$114.94	1.20	\$337.44	\$452.38
Sept.	1.50	\$378.65	2.25	\$3,482.29	\$3,860.93
Oct.	0.70	\$117.01	0.60	\$51.55	\$168.56
Nov.	0.54	\$122.33	0.77	\$456.81	\$579.15
Dec.	0.35	\$91.31	0.47	\$573.30	\$664.60
AVG	0.61	\$131.61	0.77	\$578.42	\$710.03

2020 IHH Pilot Members					
	ER Visits	ER PMPM	IP Visits	IP PMPM	Total PMPM
June	0.22	\$17.14	0.39	\$166.97	\$184.11
July	0.32	\$33.10	0.45	\$651.75	\$684.85
August	0.00	\$0.00	0.04	\$1.58	\$0.04
AVG	0.17	\$16.27	0.29	\$264.01	\$280.28

2019 Non-IHH Pilot Members					
	ER Visits	ER PMPM	IP Visits	IP PMPM	Total PMPM
June	0.15	\$31.89	0.20	\$351.98	\$383.87
July	0.16	\$30.90	0.21	\$351.84	\$382.74
Sept.	0.25	\$36.14	0.32	\$564.03	\$600.17
Oct.	0.21	\$33.65	0.27	\$470.18	\$503.84
Nov.	0.17	\$27.74	0.22	\$362.69	\$390.44
Dec.	0.16	\$27.00	0.21	\$331.37	\$358.36
AVG	0.16	\$26.97	0.21	\$351.09	\$378.06

2020 Non-IHH Pilot Members					
	ER Visits	ER PMPM	IP Visits	IP PMPM	Total PMPM
June	0.11	\$42.00	0.20	\$314.74	\$356.73
July	0.11	\$45.78	0.20	\$318.41	\$364.19
August	0.10	\$34.71	0.18	\$216.42	\$0.28
AVG	0.11	\$40.83	0.19	\$283.26	\$324.10

IHH Pilot Implications

- IHH model centered around behavioral health providers and behavioral health conditions obtains significant gains across health domains
- Providers are able to guide model and tailor it to member needs and geography
- Providers welcome the opportunity to help members address SDOH needs

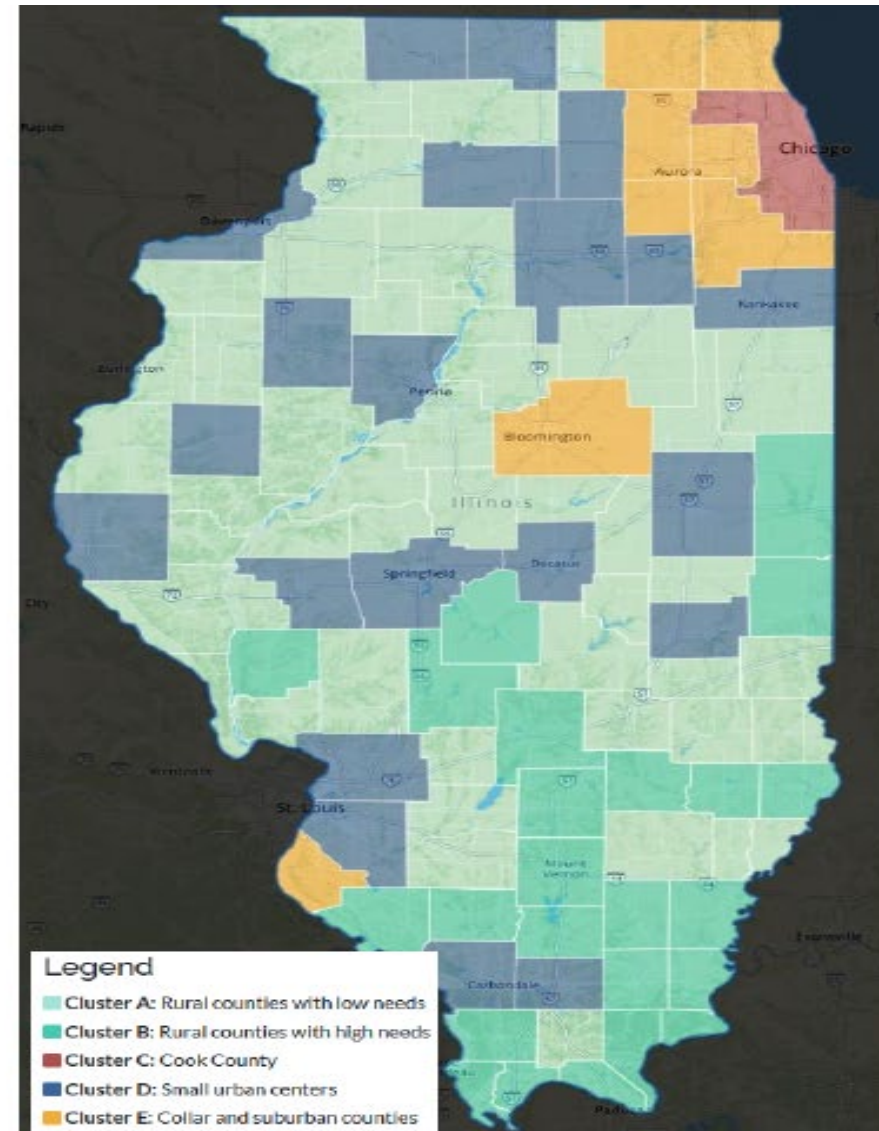
Addressing Social Determinant Needs

- NowPow is the tool providers can use to identify partners and make referrals to help address social determinant needs
- Sharing best practices throughout the network to elevate the prevalence of assessment and referral for social determinant issues
- Track response to referrals, both within, and outside the network to encourage prompt follow up and communication
- Use Metopio k-means analysis to group providers with similar social determinant profiles

K-means analysis

IHPA County Clusters

- ✦ County clusters were formed by grouping counties in Illinois with similar socioeconomic factors and needs.
- ✦ A k -means analysis determined the best way to make five clusters, so that the clusters were as different as possible, but the counties within each cluster were as similar as possible.
- ✦ Cluster definitions are available as a list of counties and/or a list of ZIP codes (based on the county to which each ZIP code primarily belongs).



NowPow Integration with HealthEC

Patient 1 Now Pow Consented Nudge
 Updated: 12/02/2020 at 10:56 AM

Overview Referrals Documents

HealthRx Build New eRx

View eRx: #PPMD4I57UG CREATED 09/25/2020 AT 11:21 AM

Partner Referral Consent Update Consent

CONSENT DOCUMENT: Consent Form (2).pdf EXPIRES ON: 12/02/2021 (Expires in 345 days) OBTAINED ON: 12/02/2020 CARE PROVIDER: NOWPOW - HealthEC Production Testing Org 1

Conditions

There are no current conditions diagnosed for this person. Create an eRx based on service categories by clicking the "Build New eRx" button above.

Self Management Goals See more

Member Engagement + Add Interaction

Show me: All Interactions +

INTERACTION	USER	NOTES	
Left Message 09/25/2020 + 11:37 AM	CARE PROVIDER NOWPOW HEALTHEC PRODUCTION TESTING ORG 1	test	View
Referral Closed 09/25/2020 + 11:06 AM			View

Contact Consent

MOBILE NUMBER: (715) 305-8939 TEXT CONSENT: NO YES

EMAIL ADDRESS: patient1.nowpow@gm... EMAIL SUBSCRIPTION: NO YES

Overview

MRN/OTHER ID: 29599

TAXID: 111111111

MEDICAID ID: CDR29599

DOB: 01/01/2000 AGE (CALCULATED): 20

HEALTH RISK SCREENING: 2020-09-17 91

RACE: White ETHNICITY:

GENDER: Male PREFERRED LANGUAGE: English

- Access to Member record in NowPow directly from Member record in HealthEC
 - Demographic information synced & updated from HealthEC
- Generate and view HealthRx (list of resources) for member
- View Patient engagement timeline
 - Referral history
 - Nudge (text/email) history
- Nudge (text/email) member
- Upload & manage Universal Consent for closed-loop Referrals
- Send new closed-loop Referral for member from Referral subtab