Charter Overview

Workgroup: Integrated and Coordinated Care
Date of Charter: 3/30/2015
Deliverable: Health delivery system transformation plan, payment and/or service delivery reform plan, alignment with state and federal innovation plan

Background

The Center for Medicare and Medicaid Innovation (CMMI) established the SIM initiative to help drive improvements in the health care service delivery system. To deliver upon these improvements, Kentucky will leverage the ongoing integrated and coordinated care work it is involved in, such as health homes, accountable care organizations (ACOs), patient centered medical homes (PCMHs), and bundled payment initiatives to develop a vision for improved integrated and coordinated care across the Commonwealth.

Mission Statement

The Integrated and Coordinated Care Workgroup has been formed to develop a plan to increase the percent of the population whose care is delivered through integrated and coordinated care models. In doing so, the workgroup will develop plans for health delivery system transformation and payment and/or service delivery reform. These plans will be constructed by leveraging current state and federal initiatives and will incorporate themes from the Population Health Improvement Plan (PHIP). The output of this workgroup will be included in the Commonwealth's State Health System Innovation Plan (SHSIP).

Approach

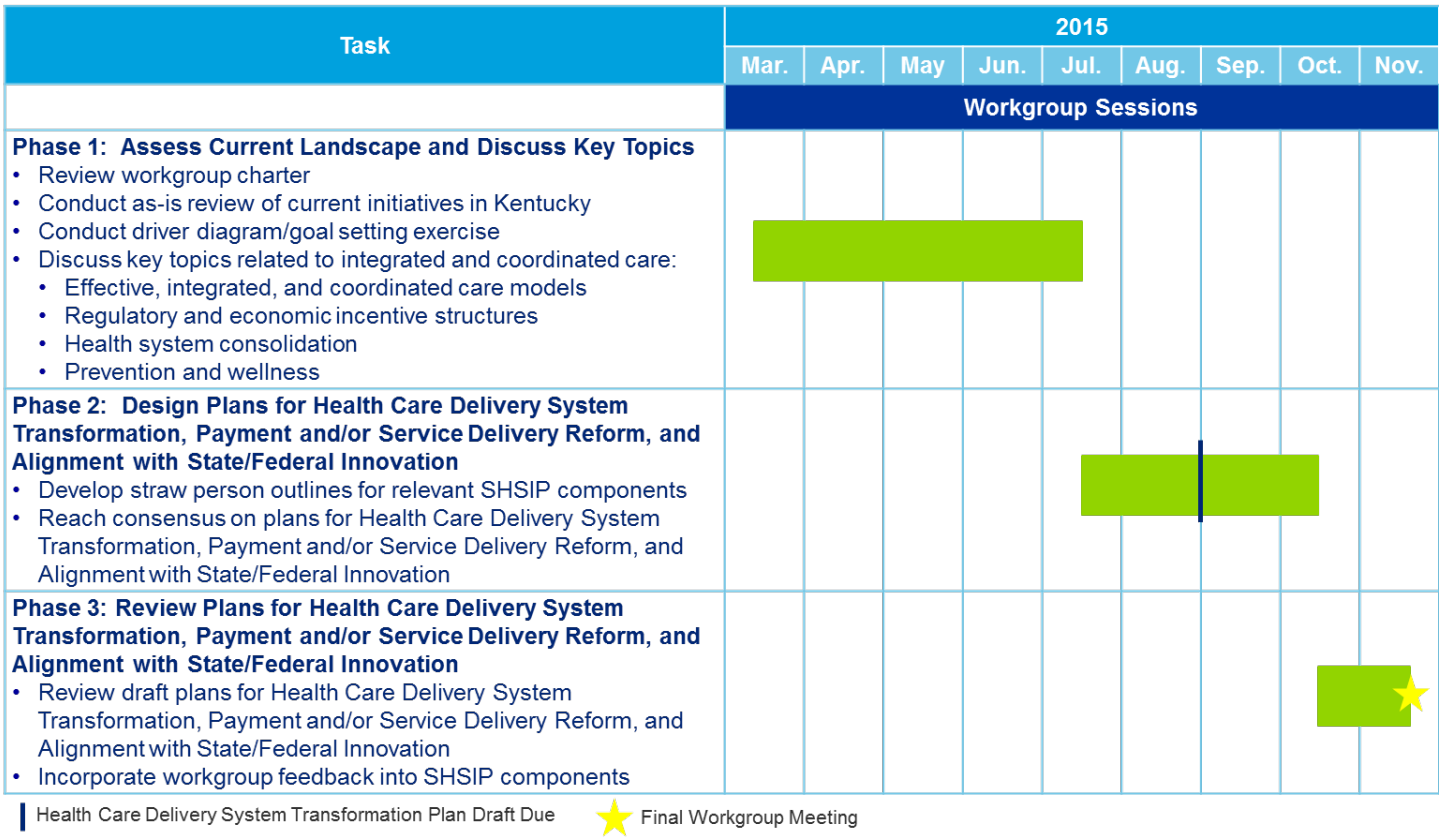
The Integrated and Coordinated Care Workgroup will take a consensus-based approach to make recommendations for improving integrated and coordinated care in Kentucky. The workgroup will begin by assessing current initiatives underway in Kentucky and reaching consensus on how the vision for the future can build upon work that has already been done. The workgroup will then identify barriers to improved care coordination, particularly in rural and other underserved areas. Finally, the workgroup will help to develop plans for delivery system transformation and payment and/or service delivery reform.

Taking a consensus-based approach to developing components of the SIM SHSIP will promote broad stakeholder input and inclusion, and allow for an iterative review and comment process. This approach will also contain a continuous feedback loop between the workgroup, the full stakeholder group, and the State. Specifically, as the above-mentioned plans are developed and refined, each point of consensus reached by the workgroup will be presented to the full stakeholder group on a monthly basis and reviewed by the State's Core SIM Team for inclusion in the final SHSIP.

Proposed Workgroup Topics

The Integrated and Coordinated Care Workgroup will cover a variety of different topics during its assessment and design of the SIM plans for delivery system transformation, payment and/or service delivery and alignment with state and federal innovation, including but not limited to:

1. Effective Integrated and Coordinated Care Models
    a. How can current integrated and coordinated care models in Kentucky, such as health homes, ACOs, PCMHs and bundled payment initiatives be leveraged in the development of the SHSIP?
    b. How can the coordination between physical and behavioral health (mental health and substance use disorder (SUD)) be improved?
    c. How can the coordination between physical and behavioral health systems with public health initiatives be improved?
    d. How can the coordination between physical and behavioral health systems with oral health care be improved?
    e. How can the coordination of care for individuals exiting the corrections system be improved?

   f. How can we address the transition from pediatric to adult medicine, especially as it relates to children with special needs that move from the education system into the adult system?
   g. What is the role of schools and how this system is better coordinated with health service delivery?
   h. What is the best way for the Commonwealth to promote multi-payer support of new care models?
2. Regulatory and Economic Incentive Structures
   a. What regulatory and economic incentive structures are available to drive payers and providers into more proven integrated and coordinated care models?
3. Health System Consolidation
   a. How does the health system consolidation trend in Kentucky impact the development of new care models for improved care coordination?
   b. How can the Commonwealth develop effective models that engage small and individual practices?
4. Prevention and Wellness
   a. What approaches can be developed to support models that pay providers more for prevention and improved population health outcomes?

Timeline