

THE KING COUNTY ACCOUNTABLE COMMUNITY OF HEALTH

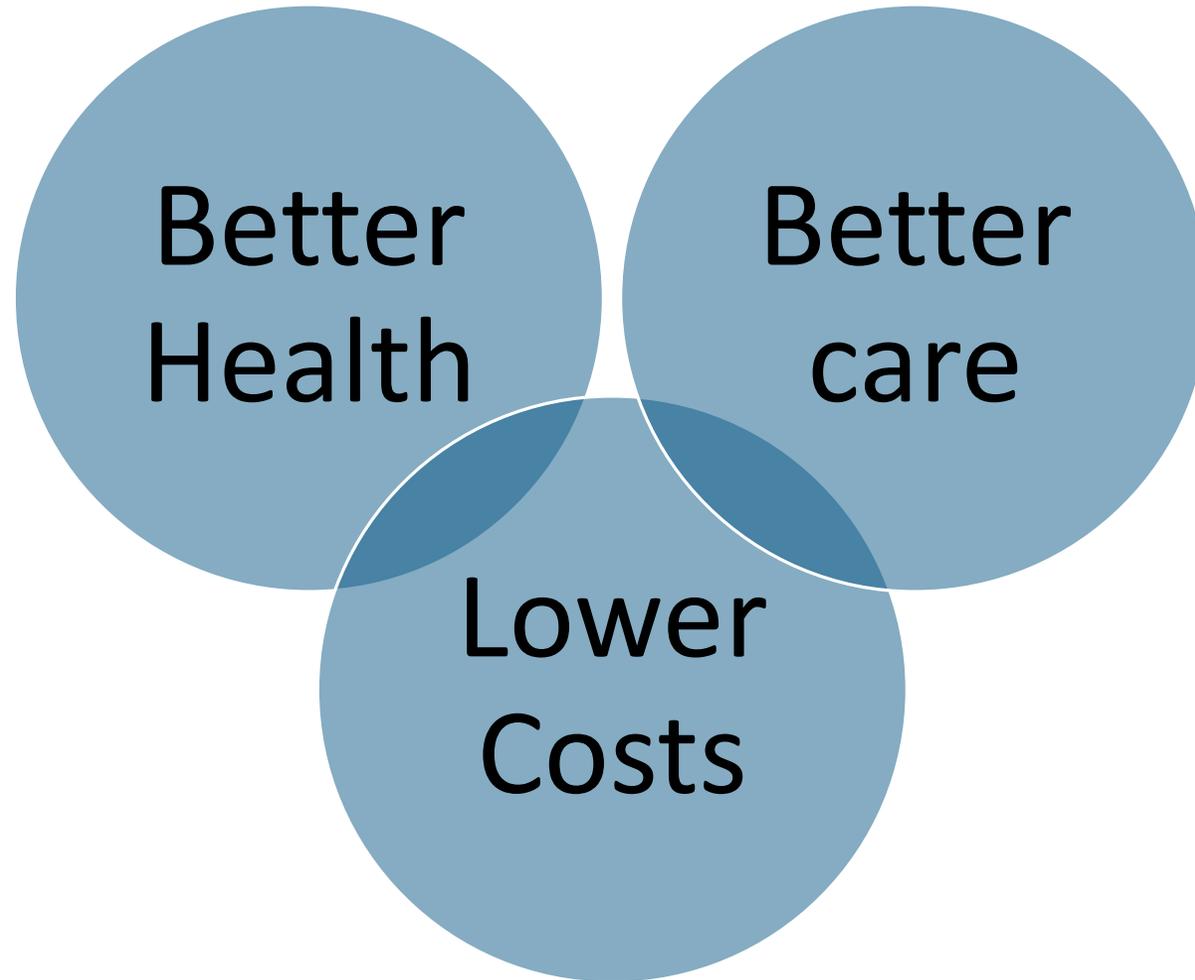
APRIL 26, 2017 – SEATTLE CITY COUNCIL HUMAN SERVICES AND PUBLIC HEALTH
COMMITTEE

Patty Hayes
Director
Public Health-Seattle & King County

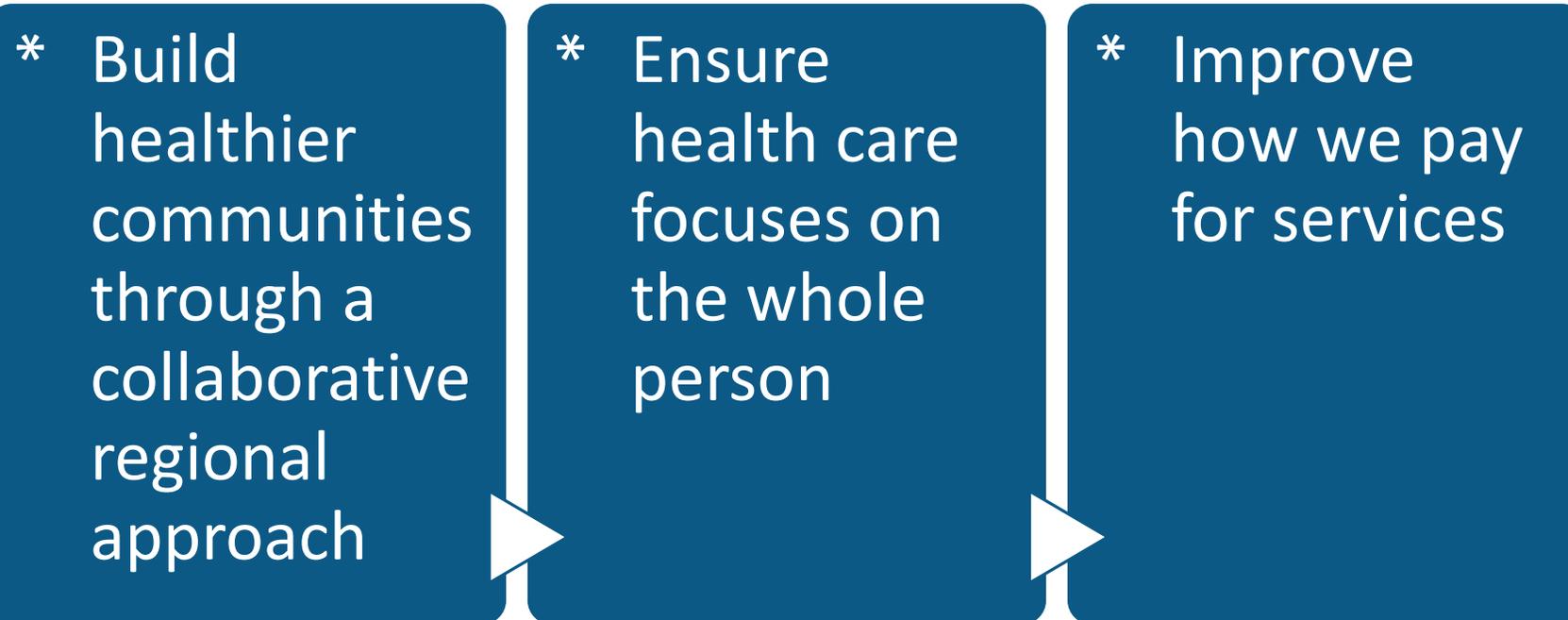
Jeff Sakuma,
Health Integration Strategist
Human Services Department
City of Seattle

Maureen Linehan
Director, Aging and Disability Services
Human Services Department
City of Seattle

The Triple AIM



Healthier Washington Initiative

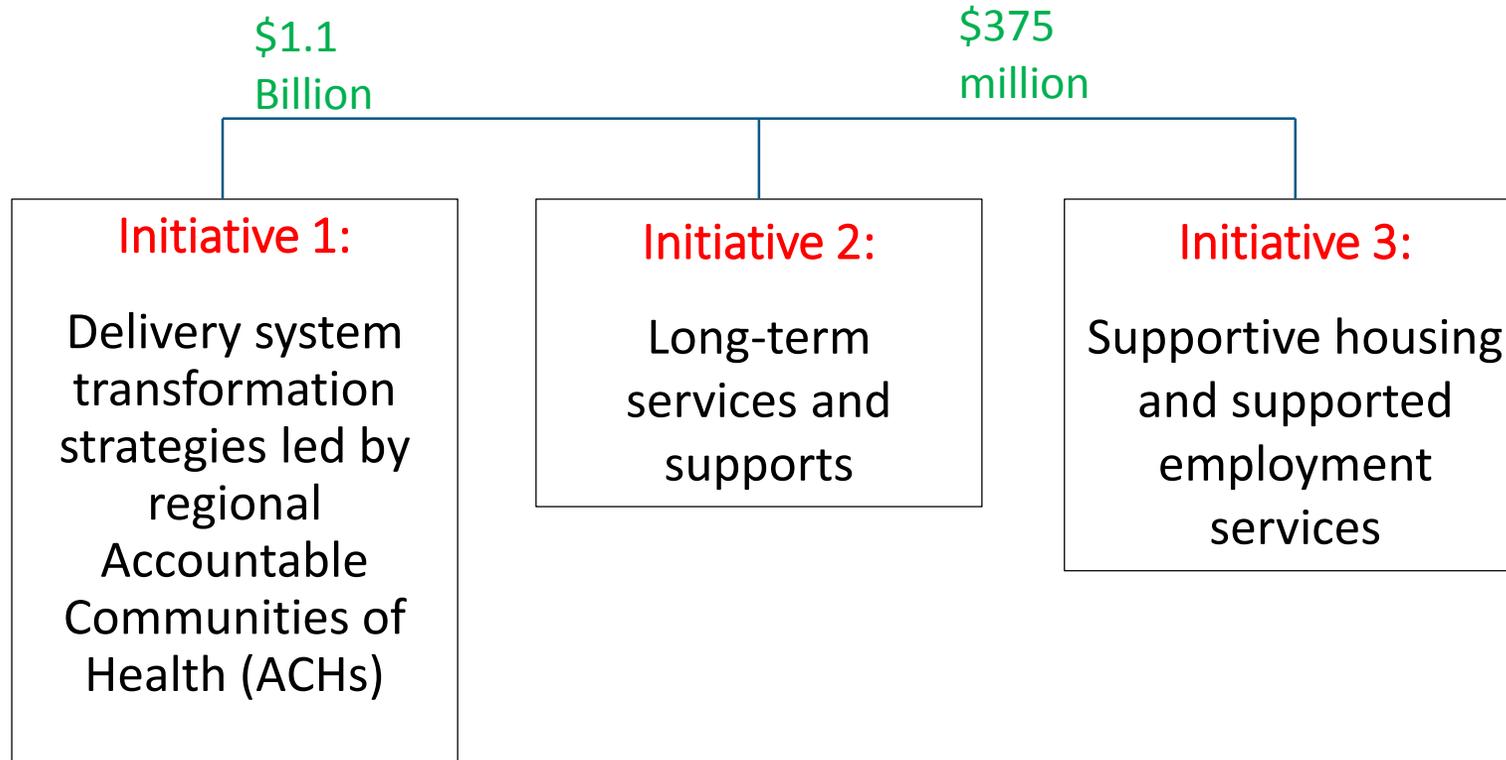


What is the Medicaid Demonstration Project?

- A contract between the federal government (Centers for Medicare and Medicaid Services) and the state (Health Care Authority) to allow for innovation to improve health outcomes for Medicaid beneficiaries.
- A five-year demonstration program (2017-2021) funded by up to \$1.5 billion in new investment.
- Demonstration goals are to:
 - ❖ Integrate physical and behavioral health purchasing and service delivery
 - ❖ Convert 90% of Medicaid provider payments to reward outcomes
 - ❖ Implement population health strategies that improve health equity
 - ❖ Provide targeted services that address the needs of our aging populations and address the key determinants of health



Medicaid Demonstration Project: Three High-Level Initiatives



Initiative 1: Transformation through Accountable Communities of Health (ACH's)

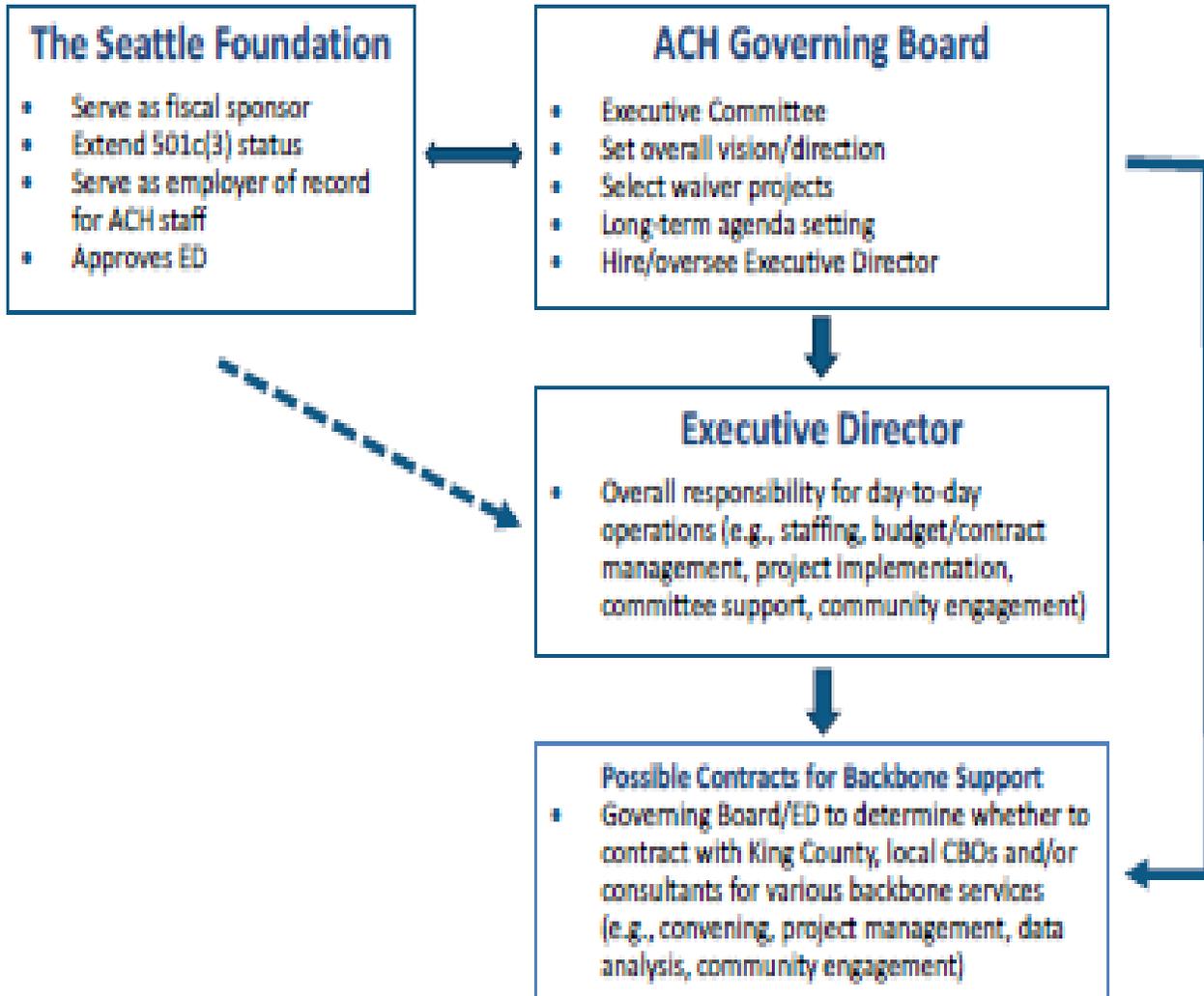
- ACH's are a cross-sector regional collaboration with the goal of improving health at the local level.
- Regional ACHs will pursue projects aimed at transforming Medicaid and accelerate the move toward value based purchasing.
- Transformation Projects will:
 - Be systems based
 - Address social determinants of health
 - Increase efficiency & effectiveness



Medicaid in King County

- Approximately 23% of Medicaid recipients in the State reside in King County
- Approximately 21% of King County residents are covered under Medicaid
 - 427,914 individuals
 - 58% adults and 42% children (under the age of 18)
- Approximately 200,000 residents in King County are covered under Medicaid Expansion
- Approximately 26% of the Medicaid population in King County have an identified mental health treatment need
- Approximately 9% of the Medicaid population in King County have an identified substance use disorder treatment need

King County Accountable Community of Health (ACH)



King County ACH Governing Board

Name	Title	Organization
Adrienne Quinn	Director	King County DCHS
Amina Suchoski	VP Business Development	United Healthcare Community Plan
Betsy Lieberman	Consultant	Affordable and Public Housing Group
Ceil Erickson	Director of Community Programs	The Seattle Foundation
Daniel Malone	Executive Director	Downtown Emergency Service Center
David Johnson	CEO	Navos Mental Health Solutions
Elise Chayet	Associate Administrator	Harborview Medical Center
Erin Sitterley	Councilmember, City of SeaTac	Sound Cities Association
Esther Lucero	CEO	Seattle Indian Health Board
Jeff Sakuma	Health Integration Strategist	City of Seattle HSD
Jihan Rashid	Program Staff	Somali Health Board
Marya Gingrey	Strategic Advisor	Regional Equity Network
Maureen Linehan	Director	Seattle Aging & Disability Services
Molly Carney	Executive Director	Evergreen Treatment
Patty Hayes	Director	PHSKC
Preston Simmons	Chief Operating and Administrative Officer	Swedish Health System, Providence
Roi-Martin Brown	Consumer/Community Member	Washington Community Action Network
Sarah Rafton		WA - American Academy of Pediatrics
Shelley Cooper-Ashford	Executive Director	Center for MultiCultural Health
Steve Daschle	Executive Director	Southwest Youth and Family Services
Steve Kutz	Executive Director	Cowlitz Indian Tribe
Teresita Batayola	CEO	International Community Health Services
Tizzy Bennett	Director	Seattle Children's Hospital

Transformation Projects Tool Kit



REQUIRED CAPACITY BUILDING

- Regional Health Needs Inventory
- Value-based purchasing task force
- Workforce development task force

REQUIRED PROJECTS

- Physical/ behavioral health integration
- Opioid use as a public health crisis

OPTIONAL PROJECTS

(must choose at least one from each category)

Care Delivery Redesign

- Care Coordination
- Transitional Care
- Diversion Interventions

Prevention and Health Promotion

- Chronic Disease Prevention/Control
- Maternal and Child Health
- Oral Health Services

Fund Flow



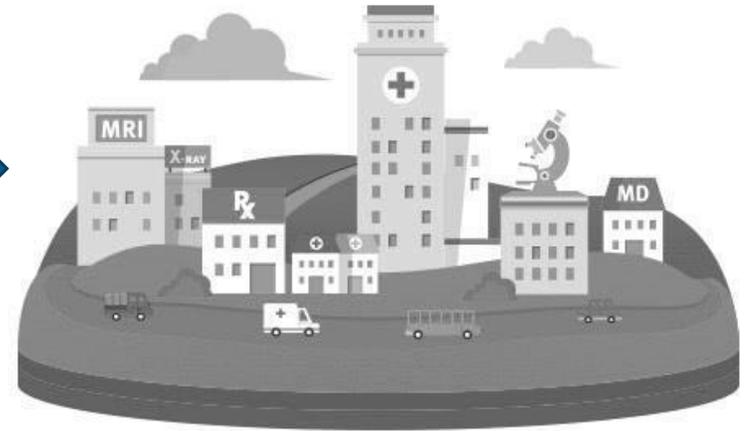
Funds flow from
Federal Government
to State Government
up to \$1.1 billion



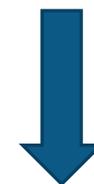
To a fiscal
intermediary



ACH determines if
project milestones
have been met



Project partners earn incentive
payments



Pay for planning
Pay for reporting
Pay for outcomes

Required Project #1:

Physical and Behavioral Health Integration

Focus	Target Groups	Outcome Metrics	Evidence Based Approaches
<ul style="list-style-type: none">• Address physical and behavioral health needs through an integrated network, better coordination, seamless access.	<ul style="list-style-type: none">• Medicaid clients with or at risk for:• Behavioral health conditions• Mental illness• Substance use disorders	<ul style="list-style-type: none">• Overuse measures (emergency department visits, readmissions)• Behavioral health measures• Physical health measures	<ul style="list-style-type: none">• Two approaches for integrating behavioral > primary (Bree Collaborative, Collaborative Care Model)• Cited approaches for integrating primary > behavioral

Required Project #2:

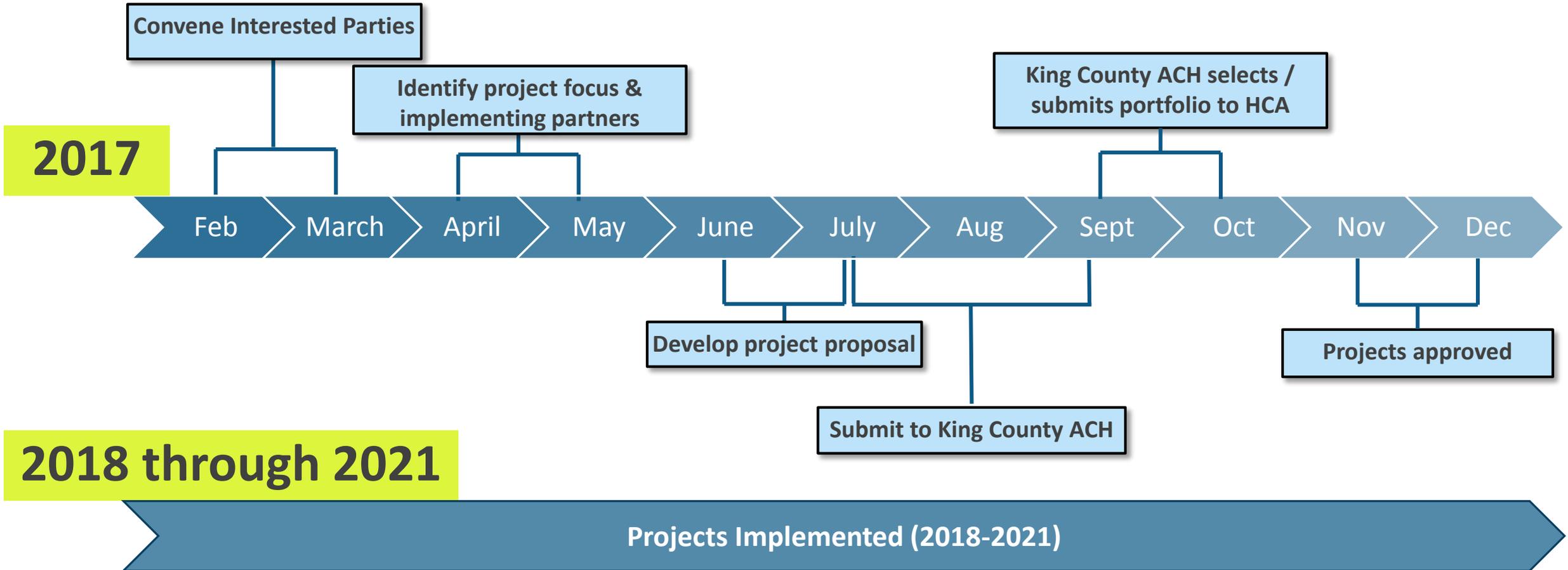
Opioid Use as Public Health Crisis

Focus	Target Groups	Outcome Metrics	Evidence Based Approaches
<ul style="list-style-type: none">• Reduce opioid related morbidity and mortality through:• Prevention• Treatment• Recovery supports	<ul style="list-style-type: none">• Medicaid Clients• Focus on youth who use prescription opioids and/or heroin.	<ul style="list-style-type: none">• Systems wide Opioid• Treatment penetration• Overdoses per 100,000• Deaths per 100,000 • Project Outcomes• Treatment indicators• MAT with Bupe• MAT with Methadone	<ul style="list-style-type: none">• Clinical Guidelines: AMDC interagency guidelines• CDC Guidelines • Substance abuse during pregnancy guidelines

Optional Projects Must-Do Check List

- ✓ Projects must be consistent with the objectives, evidence based approaches & metrics outlined in the Tool Kit.
- ✓ Projects must reflect need (RHNI), address relevant workforce challenges & support / accelerate value based purchasing.
- ✓ Projects may not duplicate existing programs, must be feasible with funds available and in alignment with strategic goals of the demonstration.
- ✓ Projects must impact a significant number of Medicaid lives and result in region-wide impact on prescribed outcome measures. (Think large cross-sector collaborations vs. 1,000 points of light).

Process and Time-line for Projects



Questions & Discussion