Accountable Communities for Health

Goals

- Select, support and evaluate up to 15 Accountable Communities for Health (ACH).
- Encourage clinical and community partnerships that provide patient-centered coordinated care for the whole person.
- Determine whether ACHs in partnership with Account Care Organizations (ACOs) result in improvements to quality, cost and experience of care.

Overview

Communities impact health. Much of what makes a person healthy depends on where they live, work and play. Keeping a person healthy, especially one with complex needs, often requires community support and a team of clinical and community providers to work together. However, there are currently barriers that make it hard for clinical providers and community partners to effectively work together. Minnesota is evaluating ACHs for the ability to remove barriers that prevent coordinated care and services, when included as part of an ACO model.

This uniquely Minnesota approach builds on Minnesota's existing work with ACOs, community care teams, and health care homes. It is expected that Accountable Communities for Health bring together a broad range of community partners, including local public health, behavioral health, social services, long term care, primary care and other organizations that contribute to a person's health.

Simply put, Accountable Communities for Health work to address health problems within communities by coordinating support systems to keep people healthy.

The ACH population can include the people in a county or other geographic area, a patient population, or all or part of a community. The Accountable Community for Health must use innovative strategies for coordinating care across settings.

Timeline of Activities

- 2014, contracted with 3 Community Care Teams.
- Summer 2014 and ongoing, statewide community engagement.
- December, 2014, announced 12 competitive grant awards.
- February, 2015, ACH implementation begins.
- December 31, 2016, ACH grant period ends.

Supporting Accountable Communities for Health

About $5.5 million, or 14 percent, of Minnesota's State Innovation Model (SIM) funds are dedicated to Accountable Communities for Health. The initiative funded 15 ACHs through sole source and competitive processes. Grant awards were made to communities in all regions of the state and at different levels of participation in accountable care models. However, all projects were required to meet basic criteria in order to be awarded SIM funds. The ACH community must:

- Have a community-led leadership team that represents the community and a broad cross-section of providers.
- Develop a community based care coordination service delivery team or system.
- Have a population based prevention plan.
- Participate in measurement, testing and evaluation.
- Include an Accountable Care Organization (ACO) partner.

Grants support:

- Coordination of a leadership team including recruiting members, facilitating and coordinating meetings with community partners, and managing funds.
- Implementation of community-based care coordination systems or teams.
- Development of an infrastructure to support implementation of the ACH.

Funded ACHs

1. Allina/Northwest Metro Healthy Student Partnership, Minneapolis
2. CentraCare Health Foundation, St. Cloud
3. Essentia Health Ely Clinic, Ely
4. Generations Health Care Initiatives, Duluth
5. Hennepin Health, Minneapolis
6. Hennepin County Medical Center, Minneapolis
7. Lutheran Social Service of Minnesota, St. Paul
8. Mayo Clinic, Rochester
9. New Ulm Medical Center, New Ulm
10. North Country Community Health Services, Bagley
11. Otter Tail County Public Health, Fergus Falls
12. Southern Prairie Community Care, Marshall
13. UCare Minnesota, Minneapolis
14. Unity Family Health Care, Little Falls
15. Vail Place, Hopkins

Resources

- Minnesota's State Innovation Model website.
- See the Minnesota Department of Health (MDH) and Department of Human Services (DHS) websites for additional national and state resources.

Contact

For more information, please contact the SIM team at the Minnesota Department of Health at 651-201-3751.

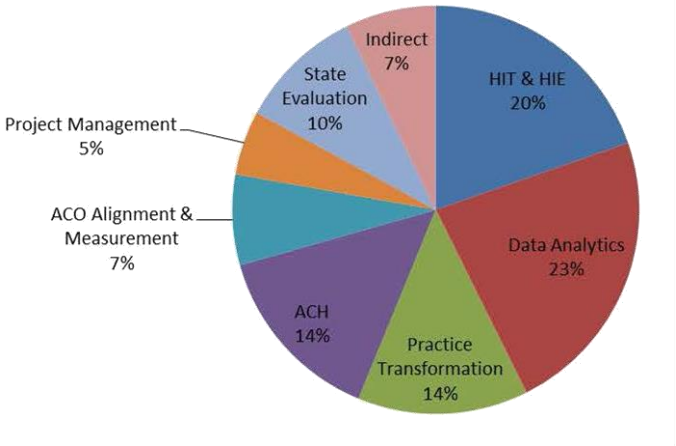
MINNESOTA ACCOUNTABLE HEALTH MODEL – SIM MINNESOTA

In February 2013 the Center for Medicare and Medicaid Innovation (CMMI) awarded Minnesota a State Innovation Model (SIM) testing grant of over $45 million to use across a three-year period. The goal is to help its providers and communities work together to create healthier futures for Minnesotans.

Minnesota's SIM initiative is a joint effort between the Department of Human Services (DHS) and the Department of Health (MDH) with support from Governor Mark Dayton's office.

Minnesota will use the grant money to test new ways of delivering and paying for health care using the Minnesota Accountable Health Model framework.

The goal of this model is to improve health in communities, provide better care, and lower health care costs by expanding patient-centered, team-based care through service delivery and payment models that support integration of medical care, behavioral health, long-term care and community prevention services.

Minnesota Accountable Health Model Budget Project Totals

$45.2 million over 3.5 years.