

# Integrated Health Partnerships



## Goals

- To reduce the Total Cost of Care (TCOC) for Medicaid patients while maintaining or improving the quality of care.
- To assess whether an alternative care model will result in improvements to quality, cost and experience of care.

## Overview

### What is the Integrated Health Partnerships (IHP) demonstration?

- An accountable care model that incentivizes health care providers to take on greater financial accountability for the cost of care for Medicaid patients.
- In the IHP demonstration, DHS contracts directly with providers in a new way that **allows them to share in savings for reducing the cost of care for enrollees while maintaining or improving quality of care and patient experience.**
- IHP gives providers flexibility to develop innovative methods for coordinating and delivering care, to improve patient health and experience, and reduce costs with few new requirements.

### What are key design features of the model?

- Flexible risk models for large integrated systems, smaller or independent providers, and other partner organizations to ensure the broadest participation possible.
- Builds off of current payment and care delivery reform efforts and structures to work within existing fee-for-service and managed care structures to allow faster implementation timelines and minimize enrollee disruption.
- Aligns with payment models in the commercial market and other emerging national models (i.e. Medicare Pioneer ACO and Shared Savings) to drive delivery system transformation where possible.

### What are the provider requirements of the model?

To participate, a provider must:

- Deliver the full scope of primary care services and directly deliver or demonstrate the ability to coordinate with specialty providers and hospitals.
- Demonstrate, through the care delivery model, how the IHP will affect the total cost of care of its Medicaid participants regardless of whether the services are delivered by the IHP.
- Demonstrate how formal and informal partnerships with community organizations, social services agencies, counties, etc. are included in the care delivery model.
- Demonstrate how the IHP will meaningfully engage patients and families as partners in the care they receive and in quality improvement activities and leadership roles.

### MINNESOTA ACCOUNTABLE HEALTH MODEL – SIM

*In 2013 the Center for Medicare and Medicaid Innovation (CMMI) awarded Minnesota a State Innovation Model (SIM) grant to test new ways of delivering and paying for health care. One goal of this model is to improve health, provide better care, and lower health care costs by expanding patient-centered, team-based care through payment models that support integration of medical care, behavioral health, long-term care and community prevention services.*

***Integrated Health Partnerships** are an example of an accountable care payment model being tested and advanced under SIM.*

### Request for Proposals

Participants are selected through an annual Request for Proposal (RFP) process for a three-year demonstration period. The RFP for the next round of IHPs beginning in January 2017 was published on April 25, 2016. **Responses to this RFP are due August 19, 2016.**

A copy of a sample IHP contract can be found as an appendix to the latest RFP on the [DHS website](http://dhs.state.mn.us/dhs16_161441#) at [www.dhs.state.mn.us/dhs16\\_161441#](http://www.dhs.state.mn.us/dhs16_161441#).

## Timeline of Activities

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- January 2013: DHS contracted with **6 Round One IHPs**.
  - 1) Children’s Hospitals and Clinics of Minnesota
  - 2) CentraCare Health System
  - 3) Essentia Health
  - 4) Federally Qualified Health Center Urban Health Network (FUHN)
  - 5) North Memorial Health Care
  - 6) Northwest Metro Alliance (a partnership between Allina Health and HealthPartners)
- January 2014: DHS contracted with **3 Round Two IHPs**.
  - 1) Hennepin Healthcare System (Hennepin County Medical Center Hospital and Clinics)
  - 2) Mayo Clinic
  - 3) Southern Prairie Community Care
- May 2014: Round One IHPs demonstrated a **\$14.8 million savings** in health care costs for 2013 compared to their projected targets. Individual provider payments ranged from \$570,000 to \$2.4 million.
- January 2015: DHS contracted with **7 Round Three IHPs**.
  - 1) Bluestone Physician Services
  - 2) Lake Region Healthcare
  - 3) Lakewood Health Systems
  - 4) Mankato Clinic
  - 5) Wilderness Health
  - 6) Winona Health
  - 7) Courage Kenny Rehabilitation Institute, part of Allina Health
- May 2015: Round One & Two IHPs demonstrated a combined **\$61.5 million savings** in health care costs for 2014 compared to projected targets. Individual provider payments ranged from \$790,000 to \$4.5 million.
- January 2016: DHS contracted with **3 Round Four IHPs**, bringing the total number of IHPs to 19 entities providing services to **over 340,000 Medicaid patients**.
  - 1) Allina Health
  - 2) Gillette Children's Specialty Healthcare
  - 3) Integrity Health Network, LLC

About \$9 million of Minnesota’s SIM funds are dedicated to data analytics. These funds have been used to support IHPs in the following ways:

### 1. Enhancement of Reports/Data Sent to IHPs

IHP Portal Analytical Reports (SAS BI Reports):

- Utilization – Rx, ED & Inpatient Trends
- Quality – HEDIS measures, SQRMS measures
- Care Coordination – member – level predictive risk information, risk stratification and chronic condition indices, IHP changes in attribution
- Total Cost of Care – aggregated costs by category of service, comparison to interim targets

Monthly Data Files:

- Inpatient, Outpatient, Professional Services and Pharmacy Claim files – line level detail (1 yr. of history) for attributed recipients
- Recipient Demographic file

### 2. Data Analytics Vendor Contract with 3M

3M provides consultative services to DHS related to ongoing improvements in the provision of information to IHPs and provides technical assistance as needed by IHP providers in their efforts to identify opportunities for cost and care transformation.

### 3. Data Analytics Provider Grants

SIM grants support IHP efforts to implement or expand data analytic projects, infrastructure, or tools that advance their ability to manage cost and quality. Eleven IHPs applied and were granted funds for the grant period July 2015 – December 2016, including:

- 1) North Memorial Health Care
- 2) Wilderness Health
- 3) Essentia Health
- 4) Winona Health
- 5) Children’s Hospitals and Clinics of Minnesota
- 6) Hennepin County Medical Center
- 7) Mankato Clinic
- 8) Federally Qualified Urban Health Network (FUHN)
- 9) Allina Health: Courage Kenny Rehabilitation Institute
- 10) Lakewood Health System
- 11) Southern Prairie Community Care

## Data Analytics Support

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All IHPs are provided with information to support their care coordination efforts and manage the cost and quality of care for their attributed population.

## Resources

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Additional information about the IHP demonstration can be found on the [DHS website](http://www.dhs.state.mn.us/dhs16_161441#) at [www.dhs.state.mn.us/dhs16\\_161441#](http://www.dhs.state.mn.us/dhs16_161441#)

## Contact

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