State Innovation Models (SIM) Initiative

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CMS Innovations Portfolio

Accountable Care Organizations (ACOs)
- Medicare Shared Savings Program (Center for Medicare)
- Pioneer ACO Model
- Advance Payment ACO Model
- Comprehensive End-Stage Renal Disease (ERSD) Care Initiative

Primary Care Transformation
- Comprehensive Primary Care Initiative (CPC)
- Multi-Payer Advanced Primary Care Practice (MAPCP) Demonstration
- Federally Qualified Health Center (FQHC) Advanced Primary Care Practice Demonstration
- Independence at Home Demonstration
- Graduate Nurse Education Demonstration

Bundled Payment for Care Improvement
- Model 1: Retrospective Acute Care
- Model 2: Retrospective Acute Care Episode & Post Acute
- Model 3: Retrospective Post Acute Care
- Model 4: Prospective Acute Care

Capacity to Spread Innovation
- Partnership for Patients
- Community-Based Care Transitions Program
- Million Hearts

Health Care Innovation Awards (Rounds 1 & 2)

State Innovation Models (Rounds 1 & 2)
- Model Design
- Model Test
- Maryland All Payer Model

Initiatives Focused on the Medicaid Population
- Medicaid Emergency Psychiatric Demonstration
- Medicaid Incentives for Prevention of Chronic Diseases
- Strong Start Initiative

Medicare-Medicaid Enrollees
- Financial Alignment Initiative
- Initiative to Reduce Avoidable Hospitalizations of Nursing Facility Residents
CMS is testing the ability of state governments to utilize policy and regulatory levers to accelerate health transformation resulting in improved health, improved care and lower cost of care through a sustainable model of multi-payer payment and delivery reform.
SIM Focus Areas

- IMPROVE POPULATION HEALTH
- TRANSFORM HEALTHCARE DELIVERY
- EXPAND VALUE BASED PAYMENT MODELS
The mission of the State Innovation Models Initiative (SIM) is to support states in designing and testing innovative care and payment models that will result in improved health, improved quality of care and lower costs

- Governor-led transformation initiative
- Based on a comprehensive State Health Care Innovation Plan
- Multi-payer commitment to value-based payment
- Provider engagement in health care transformation
- Population health improvement
- Designed to reach the preponderance of care
- Leverage federal resources, national experts and technical assistance contractors
- Ability to produce quantifiable results in improvements in quality, health and cost
In Round 1 (began April 2012), CMS supported:

- **6 Model Test states**
  - Up to $45M over 3.5 years
  - Implementing innovative approaches to statewide multi-payer payment and service delivery transformation

- **19 Model Design and Pre-Test States**
  - Up to $3 million over 6-12 months
  - Developed State Healthcare Innovation Plans
Round 1 Model Design/Pre-Test

States

- California
- Colorado
- Connecticut
- Delaware
- Hawaii
- Idaho
- Illinois
- Iowa
- Maryland
- Michigan
- New Hampshire
- New York
- Ohio
- Pennsylvania
- Rhode Island
- Tennessee
- Texas
- Utah
- Washington
## State Health Care Innovation Plans

<table>
<thead>
<tr>
<th>State</th>
<th>Plan Reference</th>
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<tbody>
<tr>
<td>OH</td>
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Round 1 Model Test States

- Arkansas
- Maine
- Massachusetts
- Minnesota
- Oregon
- Vermont
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<thead>
<tr>
<th>What is the State testing?</th>
<th>What is CMMI funding?</th>
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<tr>
<td>• Engaging primary care providers in patient-centered medical homes</td>
<td>• Provider/payer infrastructure and operational support for new care models</td>
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<tr>
<td>• Bundle payments for acute conditions</td>
<td>• Payment model design (episodes and Patient-Centered Medical Home (PCMH))</td>
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<tr>
<td>• Support providers with data, technical assistance and learning system</td>
<td>• Funding for provider engagement</td>
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<td>• Program management, governance, and technical support</td>
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Arkansas Health Information Technology (HIT)

State HIT Plans and Existing Infrastructures:
- **Medicaid Management Information System (MMIS):** Core claims processing and payment system for Medicaid.
- **Enterprise Data Warehouse (EDW):**
  - Storing data in a centralized location bring Department of Human Services (DHS) closer to the goal of full data integration.

Arkansas Payment Improvement Initative (APII) Investments in existing and new HIT & Analytics infrastructures:
- **SHARE (State HIE):**
  - Connecting large practices and hospitals serves as a key accelerant to HIT adoption and transformation in Arkansas.
- **Episode Analytics Engine**
- **All Payer Claims Database Plus (APCD+)**
- **Broadband Technology Opportunities Program (BTOP):**
  - Provider Portal based data collection
  - PCMH Analytics Engine
### What is the State testing?

- Expanding PCMH, ACO’s and Health Homes
- Operate a public-private partnership to accelerate delivery system reform
- Align PCMH model with behavioral health and long term delivery
- Providing data/analytics

### What is CMMI funding?

- Initiative support/governance Structure (including personnel)
- Incentives for HIT adoption for behavioral health providers
- Quality measurement and advanced data sharing, and enhanced analytics
- Learning collaborative for providers
Maine HIT Examples

Existing Infrastructure:

- **Maine Health Data Organization (MHDO)** maintains health care utilization data on all patients in an inpatient, outpatient, and ER setting.
- The **Maine Health Management Coalition (MHMC)** will enable the development of data analytics capability for population health management.
- **HealthInfoNet (HIN)**

Ongoing SIM Investments:

- Clinical “dashboard”
- Statewide HIE

Future Investments:

- Maine is promoting efforts to encourage HIT among Behavioral Health (BH) providers.
### What is the State testing?
- Expand Primary Care Payment Reform Initiative (MassHealth)
- Data Infrastructure for LTSS
- Establish a statewide patient experiences of care measurement strategy

### What is CMMI funding?
- Design assistance and project management
- Infrastructure support
- Technical assistance to providers
Ongoing investments in existing and new HIT & Analytics infrastructure:

- **Quality Data Repository/Clinical Data Repository (QDR/CDR)**
  - *Goal is to receive Quality Reporting Document Architecture (QRDA) data from provider EHRs via HIE, use quality data for payment reform, research and reporting, and make MMIS more “quality aware.”*

- **HIE Technical Assistance to Behavioral Health and Long Term Services and Support providers**

- **Electronic Referrals:**
  - *Goal is to enable providers to provide electronic referrals to community resources.*

- **All Payer Claims Database (APCD) Provider Portal**
  - *Mass will utilize their APCD to enable providers to access claims-based reports for their entire patient panels with standard formats and timeframes.*
### What is the State testing?

- Broaden Medicaid ACOs to include behavioral health, long-term support services, and social services
- Planning Accountable Communities for Health
- Transformation Center for rural primary care practices

### What is CMMI funding?

- Support for data analytics and exchange
- Direct support to providers for transformation
- Design Accountable Communities for Health
- Technical assistance to standardize ACO metrics, payment methodologies
Minnesota HIT Examples

Ongoing HIT Investments
• Direct Gateway
• Community Collaboratives e-health Grant Program
• E-health Roadmaps
• Privacy and Security

Ongoing Data Analytics Investments
• Integrated Health Partnership Program (IHP): expansion of Data analytics reporting and support for partners participating.
• Analytic Infrastructure Enhancements
• Technical Assistance on development and use of customized reports
### What is the State testing?

- Expand coordinated care organization model to cover state employees
- Enhancements to the state Transformation Center that will disseminate best practices among Coordinated Care Organizations (CCOs) and other health plans
- PCMH initiative

### What is CMMI funding?

- Design assistance and project management
- Infrastructure support
- Technical assistance to providers
- Advance analytics
- Support staff for Transformation Center
Oregon HIT Examples

Ongoing HIT & Analytics Investments

• **First Quarterly multi-payer dashboard**
  – *Goal is to provide a transparent view of Oregon’s health system from multiple payers, including commercial and public payers*

• **Emergency Department Information Exchange (EDIE)**

Future Investments

• **Accountable Care Data System (ACDS)**
• **Telehealth Pilots**
### Vermont

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Ongoing HIT & Analytics Investments

- **All Payer Claims Database (VHCURES)**
  - *Goal is to expand the scope of VHCURES to support the integration of both claims and clinical data.*

- **Incorporate long term care, mental health, home care and specialist providers into the HIE infrastructure**

- **Clinical Registry:** Design and enhancements to clinical registry and reporting systems.
CMS is launching Round Two of the State Innovation Models initiative to provide up to $730 million for continued support to existing Model Design states and partner with additional states to accelerate health transformation

- Up to $30 million to fund up to 15 Model Design cooperative agreements
- Up to $700 million to fund up to 12 Model Test cooperative agreements
- Applications were due July 21, 2014
- Expect to announce selected states for Model Design and Model Test cooperative agreement awards Fall 2014
Questions & Discussion

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