

# Accountable Communities of Health 101

Everything you ever wanted to know about ACHs but were afraid to ask



# Terms you'll hear today

- **ACH:** Accountable Community of Health
- **FIMC:** Acronym for Fully Integrated Managed Care, also referred to as “bi-directional” integration. Means bringing physical & behavioral health under one umbrella
- **Project Plan:** A document that ACHs will submit that describes the Demonstration projects they will undertake in their regions
- **Project Plan Template:** A document that models the format an ACH must use for their Project Plan
- **Project Toolkit:** The metrics and guidelines for ACHs to plan, implement, and monitor their projects
- **Independent assessor:** A state-contracted entity that will review and score Project Plans, as well as assist with ongoing monitoring of projects

# What are ACHs?

Regional organizations that:

- Address health issues through local **collaboration on shared goals.**
- Better align resources and activities that **improve whole person health and wellness.**
- **Support local and statewide initiatives** such as the Medicaid Transformation Demonstration, practice transformation and value-based purchasing.





# What are they focused on right now?

- Integration of physical & behavioral health (aka, FIMC)
  - Incentive \$ for “mid-adoption”
- Community, stakeholder & provider engagement
  - Ensuring participation across care providers, community groups, and members of the public
- Medicaid Transformation Demonstration
  - Planning regional health transformation projects

# Medicaid Transformation Demonstration

- The federal government is investing up to \$1.5 billion for a five-year, statewide effort to show that Washington can deliver better health care for more people, while spending dollars in a smarter way for Apple Health (Medicaid) beneficiaries.
- Three initiatives:

Transformation  
through Accountable  
Communities of  
Health  
*Up to \$1.1B*

Long-term Services  
and Supports  
*\$175M*

Foundational  
Community Support  
Services  
*\$200M*



# ACHs & the Demonstration

Under the work of the Medicaid Transformation Demonstration, Accountable Communities of Health are currently working to:

- **Adopt** transformation projects that target regional health care challenges
- **Solicit** community feedback to develop transformation project plans
- **Apply** to HCA for a “green light” to work on these projects
- **Coordinate & oversee** the work
- **Decide** on distribution of incentive funds to partnering providers for their achievement of defined milestones



# This is not a grant!

- Demonstration payments are based on achievement of milestones

## Pay for planning

- Initial planning activities and partnerships that establish structure and capacity for transformation project goals

## Pay for reporting

- Actions specified in the project's initial planning activities

## Pay for outcomes

- Demonstrable progress toward outcomes due to implementation of the Project Plan



# Where they are now: capacity building

- Phase 1 certification (reached in June 2017)
  - ACHs proved they are building the internal capacity & infrastructure to plan and carry out the work of the Demonstration
  - \$1 million each
- Phase 2 certification (application scoring underway)
  - ACHs prove they are building relationships, getting people involved, have a decision-making structure that involves Apple Health clients, providers, community partners, etc.
  - Up to \$5 million each (based on their overall score)

# What “pay for planning” looks like

ACHs work with community partners to decide on population health improvement projects in their region.

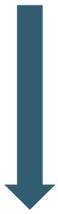


Together, they select projects and develop Project Plans.



# Project Plan approval

Accountable Communities of Health submit the Project Plan application to the Health Care Authority.



Washington State  
Health Care Authority

HCA works with an independent assessor to approve the application...

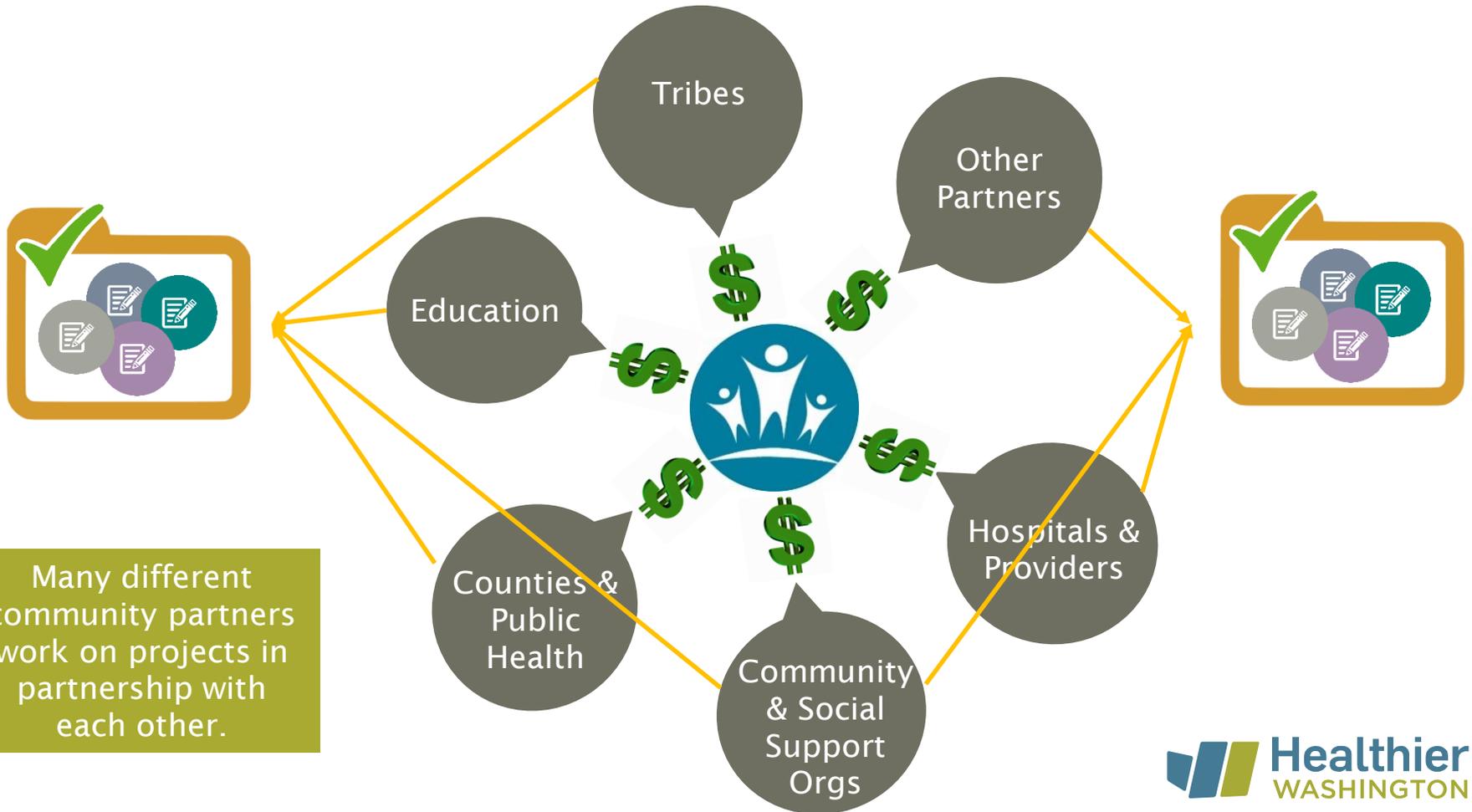


...which triggers payment to ACHs



# How funds flow

Incentive payments are made to community partners to carry out the work of an approved project. Later work ties payment to “Pay for Reporting” and “Pay for Performance.”



Many different community partners work on projects in partnership with each other.



# How many projects in each region?

## Care Delivery Redesign

- Required (1) — { · Bi-directional integration of physical & behavioral health through care transformation
- At least 1 { · Community-based care coordination
- At least 1 { · Transitional care
- At least 1 { · Diversion interventions

## Prevention & Health Promotion

- Required (1) — { · Addressing the opioid use public health crisis
- At least 1 { · Reproductive & maternal/child health
- At least 1 { · Access to oral health services
- At least 1 { · Chronic disease prevention & control

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**Total = at least 4**



# Year 1 (2017) milestones

January

- Demonstration approved

June

- Phase 1 certification: ACHs received \$1 million each in “design” funds

September

- Phase 2 certification: ACHs to receive up to \$5 million each based on readiness

November

- Project Plans due
- Evaluated by Independent Assessor
- Once approved, money flows

# Five years from now



## Current system

- Fragmented care delivery
- Disjointed care transitions
- Disengaged clients
- Capacity limits
- Impoverishment
- Inconsistent measurement
- Volume-based payment



## Transformed System

- Integrated, whole-person care
- Coordinated care
- Activated clients
- Access to appropriate services
- Timely supports
- Standardized measurement
- Value-based payment





# How we interact with ACHs

## ACH meeting attendance and weekly calls

- Provide support and guidance, as appropriate
- Primarily function as a partner within the community
- Support cross-ACH learning and alignment

## ACH Communications Council

- HW Communications team: DOH, DSHS, Manatt Health, and Communications staff members from each ACH
- Meets once a month to discuss communications-related challenges, share ideas and resources, collectively solve problems

## Lots of other ways

- HCA & HW staff: legislative, integrated managed care, Medicaid, CQCT, etc.



# Takeaways

- HCA works with ACHs to carry out the goals of the agency and Healthier Washington
- Although ACHs are focused on the Demonstration, ACHs are bigger than the Demonstration
- No two ACHs are alike
- ACHs learn from each other
- Community & stakeholder engagement continues to be a challenge, but progress is being made

# Take a deeper dive

- Healthier Washington website
  - Story bank, map, video, fact sheets, and more



QUESTIONS?

