Update on Federal Community Health Access and Rural Transformation Model (CHART) Model Funding Opportunity and Washington's Application Approach

February 9, 2021





Provide update on CHART planning updates and timeline

Questions and next steps



Spotlight on Rural Health

- Increasing interest in improving population health and sustaining access to care in rural communities, nationally and in Washington State
 - Critical Access Hospital closures nationally
 - Smaller rural hospitals paid on volume, and face different financial challenges than urban counterparts
- Rural communities face older populations, greater health disparities, health inequities and social challenges
- Health care utilization patterns changing, varies by community



Overview Community Health Access & Transformation (CHART) Model

Centers for Medicare and Medicaid Innovation (CMMI) funding opportunity to assist rural providers transform care on a broad scale to achieve the following goals:

- Improve access to care in rural areas
- Improve quality of care and health outcomes for rural beneficiaries
- Increase adoption of alternative payment models (APMs) among rural providers
- Improve rural provider financial sustainability



Who are the CHART Participants?

- Lead organization
 - State Medicaid Agency, Office of Rural Health, other eligible entities
 - Oversee population health redesign, design and implementation of Medicaid model, recruitment of other health plans, hospitals and Advisory Council
- A defined community
 - Encompass either (1) a single county or census tract; or(2) a set of contiguous or non-contiguous counties or census tracts. Each county or census tract must be classified as rural, as defined by the Federal Office of Rural Health Policy's grant program eligibility criterion.
 - Include at least 10,000 Medicare Fee-for-Service (FFS) beneficiaries with a primary residence located within the Community.
- An Advisory Council to develop a population health plan for the defined community
- Participating rural hospitals (Critical Access Hospitals and other acute care hospitals in rural areas)
 - Agree to new Medicare Fee-For-Service capitated model
 - Agree to new Medicaid payment model
 - Agree to commercial health plan model



Key Facts and Dates

- I5 Lead Organizations will be selected and receive up to \$5 million
- 7 years (pre-implementation period starts 6/2021, plus 6 performance periods)
- Medicare payment model starts 7/2022, Medicaid payment model not required to start until 6/2023
- Optional Letter of Intent due February 16, 2021 (optional)
- Applications due March 16, 2021



Why CHART

- Builds on existing work and hospital interest in prospective payment models
- Build on existing Medicaid Transformation Project strategies and foundation
- Opportunity to work with Medicare and \$
 - Medicare participation essential to rural transformation
 - Operational flexibilities
- Opportunity to innovate on Medicaid and other payers
 - Streamline existing Medicaid incentives and provide new incentives
- Targeted data and analytic TA from state
- Exciting opportunity to test a new innovative model



Proposed Approach

- North Central, Greater Columbia, Cascade Pacific and Better Health Together regional areas of interest for defined community or communities
- Medicare and Medicaid lives and spend, ACH interest, hospital interest in innovation, transformation, prospective and predictable payment models
- Continue working with stakeholders and key partners
 - DOH Office of Rural Health, DSHS, hospitals, associations
- Tribal participation in CHART
 - Serve on Advisory Council
 - Participate in planning process
 - What else?



Next steps: Required Application Elements (due mid-March)

- Community defined (2 or 3 ACH regions)
- Participating hospitals have 10k Medicare lives
- Advisory Council named
- Care Transformation approach
- Medicaid payment model construct
- Letter of interest (LOI) from at least ONE participating hospital
- Letters of Support



For additional information:

Rachel Quinn (<u>rachel.quinn@hca.wa.gov</u>)

Mark Dansby(Mark.Dansby@hca.wa.gov)

CMMI CHART https://innovation.cms.gov/innovation-models/chartmodel

