



Targeted Investments (TI) Program Exploratory Discussion with IHS & 638 Leaders

June 1, 2021

Targeted Investments (TI) 1.0 Program

- \$300 million authorized by CMS in January 2017 as a part of 1115 waiver renewal
- Five year project providing resources to providers to support integration of behavioral and physical health care at the point of service
- Incentive payments based on meeting milestones that support integration and whole person care

TI 1.0 Program Provider Participation

- Providers eligible to participate include:
 - Adult and pediatric primary care practices
 - Adult and pediatric behavioral health organizations
 - Acute and psychiatric hospitals
 - Justice co-located clinics
- Approximately 500 sites participating across state

TI 1.0 Program Participant Requirements

Second & Third Years

Program participants establish protocols and systems of care that support person centered integrated care such as:

- Primary care screening for behavioral health
- Behavioral health providers identify physical health concerns
- Use of trauma-informed care protocols
- Protocols to send and receive core Electronic Health Record (EHR) data with the state's Health Information Exchange
- Screening for social determinants of health (SDOH)

TI 1.0 Program Participant Requirements

Fourth & Fifth Years

Providers' incentive payments based on select Healthcare Effectiveness Data and Information Set (HEDIS) measures such as:

- Well-child visits in the third, fourth, fifth, and sixth years of life for children with a behavioral health diagnosis
- Follow-up after hospitalization for mental illness
- Access to preventive/ambulatory health services

TI Participant Incentives

- The Targeted Investments Program is not a grant
- Program participants attest to completion of milestone requirements and submit supporting documents
- Incentive payments are made retrospectively based on the participant's meeting milestones for their provider group
- Payment amounts are tied to AHCCCS members' utilization of the participant organization
- Performance measure milestones in Years 4 & 5

Targeted Investments- AIMH

TI requirements compared to American Indian Medical Home requirements

- The AIMH is approved under a SPA and is not time limited
- TI is a five year program under the 1115 waiver
- Both programs support improved care coordination
- TI focus on physical and behavioral health integration

Does TI participation support AIMH participation?

TI 2.0 Program

- AHCCCS seeks waiver authority to extend the TI Program from 2021 through 2026, known as the TI Program 2.0
- This extension request was submitted to CMS in December 2020 with Arizona's Waiver renewal packet
- AHCCCS developed a concept paper to supplement the waiver renewal request to provide further details on the structure and requirements of the TI Program 2.0

TI 2.0 Program Goals

Sustain the integration efforts of current TI participants

Expand integration opportunities to new providers

Improve the program requirements to provide whole person

Align and support the AHCCCS 2021 Strategic Plan

TI 2.0 Program Structure

TI Program 2.0 will include two distinct cohorts:

- **Extension cohort** will include TI Program providers that completed participation in the current TI Program
- **Expansion cohort** will include primary care practices and behavioral health providers, integrated clinics with no prior TI participation

Expansion Cohort

- Program structure for this cohort will be modeled on the current TI Program including milestones such as:
 - Establishment of high risk registries
 - Implementation of behavioral health screening
 - Active HIE utilization
- Updated milestones such as adverse childhood event screening and intervention, telehealth, data sharing, and cultural competency requirements will be incorporated into the program.

Expansion Cohort Strategies

- Improve health outcomes for high risk AHCCCS members with physical and behavioral health needs
- Expand AHCCCS members' accessibility to more fully integrated, whole person care
- Establish integrated point of care systems that improve care coordination and drive better health and financial outcomes for high risk AHCCCS members
- Support strategies for effective and efficient use of health information technology

TI 2.0 Annual Requirements

Program Year	Extension Participants	Expansion Participants
Year 1	Re-establish TI 1.0 Systems and Processes. Establish New Systems and Processes that support Whole Person Care	Application and Onboarding
Year 2	Establish New Systems and Processes	Establishment of Systems & Processes similar to TI 1.0
Year 3	Implementation and Evaluation of Systems and Processes	Implementation and Evaluation of Systems & Processes similar to TI 1.0
Year 4	Performance/Outcome Measures	Performance/Outcome Measures
Year 5	Performance/Outcome Measures	Performance/Outcome Measures

TI 2.0 Participants and Stakeholders

- Similar to the original program, participation will be limited to specific provider types:
 - Primary Care
 - Behavioral Health
 - Integrated Clinics
 - Co-located Justice Clinics
 - IHS and Tribal 638 Facilities (Outpatient)*
 - Community Based Organizations (CBOs)*
 - Peer Run Organizations*

*AHCCCS is exploring options for including this participant category.

IHS and Tribal 638 Facilities

- The American Indian Medical Home (AIMH)- est. 2017- SPA
- Shared goal of integrating health
- Continue to pursue AIMH status?
- Evolution of the AIMH?
- Promote participation in TI 2.0 (expansion cohort)

TI 2.0 Program Funding

- AHCCCS proposes that the maximum total funding for the program not exceed **\$250 million over five years** including state and federal match contributions
- AHCCCS anticipates funding TI 2.0 through a combination of state and federal sources
- Funding will direct incentive payments to participating providers to meet program milestones and goals

Questions?