Targeted Investments Program
QIC and Sustainability Discussion

AHCCCS Update
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Targeted Investments Program

- $300 million authorized by CMS in January, 2017 as a part of the 1115 waiver
- A five year project providing resources to participating providers to support the integration of behavioral and physical health care.
- Incentive payments based on meeting milestones that support integration and whole person care.
Provider Participation

• Providers eligible to participate include:
  o Adult and pediatric primary care practices
  o Adult and pediatric behavioral health organizations
  o Acute and psychiatric hospitals
  o Justice Co-located clinics

• Almost 500 sites participating across the state.
TI Program Years Two & Three

- Year Two: Over $66.5 million paid to TI participant providers
- Year Three: $85.5 million to be paid for achieved milestones
- Many milestone requirements support and complement the implementation of AHCCCS Complete Care (ACC)
Targeted Investments Program

• Milestone Examples:
  o Care Management in Primary Care
  o Integrated care planning
  o SDoH screening & intervention
  o MH screening & referral in PCP settings
  o Bi-directional data exchange through the HIE
  o Screening children for ACEs with referral to Trauma-Informed Care
  o Screening for ASD and with appropriate referral
TI Program Years Four & Five

- Participant Incentive Payments based on meeting *performance measures*
- The metrics align with other applications and uses, including required CMS measures, and AHCCCS MCO measures
- Many measures align across TI Program participating provider types-Ex: Identical Adult Primary Care and BH measures
Participant Support-Quality Improvement Collaborative (QIC)

• Provided through the ASU College of Health Solutions and Center for Health Information Research (CHiR)

• The QIC will offer:
  o Interim updates on Quality Measures performance
  o Assistance with quality improvement actions
  o Technical assistance
  o Peer learning opportunities
TI Program Impact

• Point of care integration
• Integration blueprint
• Practice transformation
• Systems & protocols sustainability
• Lessons learned
TI Program Impact Transformation Accomplishments

- Transformation/Accomplishments
  - Primary care practice HIE participation
  - MH Screening for depression, suicide risk
  - Early childhood screening including for ASD
  - SDoH Screening and referral protocols
  - Provider education on ACEs and Trauma-informed care, ASD care
  - Provider & justice partner collaboration
Results & Opportunities

• Behavioral health co-location in primary care
• Payment for BH services in primary care
• Alignment with ACC transformation
• Behavioral health support in chronic disease management
• Effective use of HIE connectivity
Sustainability Strategy-MCOs

• MCO Engagement [dialogue w/ leadership]
• Plan medical directors
• Participation in the QI Collaborative
• Learning laboratory
• Lessons learned from implementation of TI requirements- Determining value
• Impact on providers’ culture
Leverage Opportunities & Challenges

- VBP
- Whole person care-assumption of risk
- Provider rates-Collaborative Care Model, BH collocated in PCP, MH and SDoH screening
- Role for care management in PCP practices
- Capitation rates