Alabama Integrated Care Network Community Forum

St. Paul A.M.E. Church, Montgomery

Tuesday, 6/20/16
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<td>Introductions</td>
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<td>Housekeeping</td>
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<td>Current Long Term Care System</td>
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<td>Overview of Legislation and Process</td>
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<td>Goals of the Integrated Care Network</td>
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<td>Stakeholder Input Process &amp; Timeline</td>
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Housekeeping

- Restrooms
- Comment Cards
- Volume & Cell Phones
- Questions
1. Explain the current services and program support for those in or at risk of going in to nursing homes.
2. Describe what the Integrated Care Network (ICN) is intended to provide.
3. Describe the parts of the ICN system and explain how they will work together with or change the current system of services and programs.
4. Describe the ICN implementation steps and time frames.

**Goal of Today’s Forum:**

Obtain your feedback to make sure the Integrated Care System program we design reflects the **needs, wishes** and **goals** of the people it is meant to serve.
<table>
<thead>
<tr>
<th>Acronym</th>
<th>Term</th>
<th>Definition</th>
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<tbody>
<tr>
<td>ICN</td>
<td>Integrated Care Network</td>
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<tr>
<td>RCO</td>
<td>Regional Care Organization</td>
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<tr>
<td>LTC</td>
<td>Long-Term Care</td>
<td>Long-Term Care is a range of services and support for your personal care needs. Most long-term care isn't medical care, but rather help with basic personal tasks of everyday life, sometimes called activities of daily living.</td>
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<tr>
<td>HCBS</td>
<td>Home and Community Based Services</td>
<td>Home and community-based services provide opportunities for Medicaid beneficiaries to receive services in their own home or community, as an alternative to nursing home care and to help those potentially at risk for nursing home placement.</td>
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The Current System
ICN Legislation

- Legislation: May 2015
- Planning & Engagement: 2016
- Procurement & Engagement: 2017
- Readiness and Go-Live: October 2018
Health and Long-Term Care in Alabama

**Medicaid Healthcare**
- Hospitals
- Doctor’s Visits
- Home Health
- Pharmacy
- Behavioral Health

**Medicaid LTC**
- Nursing Homes
- HCBS
- PACE

**GOAL:**
Improved, Quality, Access, Sustainability
How Are Services Currently Paid?

“Fee For Service”

• The medical care and services you need are paid for after the service is provided.

• What are the challenges of this method?
  1. Member experience high risk of emergency room and hospital visits
  2. The system is confusing and requires multiple medical providers, which can be confusing and lead to waste.
  3. It is hard for the State to budget for Medicaid, and predict how expenses might change in future years.
  4. There is little reason for medical providers to work together, and find the best setting for patients.

We are currently paying for quantity, not quality.
The Current Long Term Care System in Alabama
Addressing the Challenge

What are states doing?

Transitioning to *Coordinated Care Models* that organize patient care activities between two or more participants (including the patient) involved in a patient's care to facilitate the appropriate delivery of health care services.
The Coordinated Long Term Care System

Medicaid Payor

- Right Care
- Right Place
- Right Time
- Right Cost
The ICN Program
ICN Approved by Alabama Legislature in 2015

Legislation allows for one or more ICNs

ICNS are providers who assume responsibility for providing care to Older and Disabled Adults

They will be coordinating both nursing home and home and community based care.

Members cannot receive care from the Regional Care Organizations (RCO) and the ICNs
Who will be eligible to participate in the ICN?

1. All Alabama Medicaid members residing in a Nursing Home

2. All Alabama Medicaid members receiving home and community based services under the following waiver programs:
   - Elderly & Disabled Waiver
   - State of Alabama Independent (SAIL) Living Waiver
   - Technology Assisted Waiver
   - HIV/AIDS Waiver
   - Alabama Community Transition (ACT) Waiver

**NOTE:** Being deemed eligible for a Nursing Home does not require an adult to move into a Nursing Home.
Goals of Shifting to Coordinated Long-Term Care/ICN

- Increase Quality of Care
- Improve Access to and Appropriateness of Care
- Control Costs of Care
The Coordinated Long Term Care System

Member

- Nursing Home Care
- Prescription Medicine
- Primary & Specialty Doctors
- Care Coordinator
- Family & Friends
- Home & Community Based Services
- Medical Equipment
- Hospitals and Rehabilitation

Medicaid Payor

- Right Care
- Right Place
- Right Time
- Right Cost

Quality of Care

Cost
How Will a Coordinated Program Work?

A prediction is made of how much it should cost to provide care.

This predicted amount is paid to ICN, who is responsible for delivering care through doctors and other providers.

The ICN is responsible, or “at risk,” for the costs should the care cost more than the predicted amount.
A Month of Care Delivery for Alice and Roy

Alice:
- 62 Years Old
- Lives Alone in a Senior Apartment in Huntsville
- Suffers from:
  - Diabetes
  - Heart Disease
  - GOUT
- Receives Home & Community Based Services

Roy:
- 77 Years Old
- Lives in a Nursing Home in Mobile
- Suffers from:
  - Alzheimer’s Disease
  - History of Stroke
- Requires Nursing Home care

Ben:
- 34 Years Old
- Lives at home with wife in Birmingham
- Suffers from:
  - Paraplegia
  - Epilepsy
- Receives Home & Community Services
### Alice:

**Monthly Budget:** $2500  
- Doctor’s Visit: $500  
- HCBS: $1000  
- Cardiology: $300  
- Medicine: $250  
- Transportation: $200  

**Hospital:** $3000  
**Total:** $5000  
**Difference:** $-2000

No one realizes Alice’s new medicine makes her dizzy – she falls and goes to the hospital.

### Roy:

**Monthly Budget:** $5000  
- Doctor’s Visit: $500  
- Nursing Home: $3000  
- Physical Therapy: $500  
- Medicine: $400  
- New Wheelchair: $250  

**Antibiotic:** $50  
**Total:** $4700  
**Difference:** $300

Roy’s Nurse identifies that he has an infection at an early stage – Roy gets antibiotics and avoids the hospital.

### Ben:

**Monthly Budget:** $3500  
- Doctor’s Visit: $500  
- HCBS: $1500  
- Adaptive Equip: $250  
- Medicine: $400  
- Transportation: $300  

**Home Health:** $500  
**Total:** $3450  
**Difference:** $50

Ben’s care coordinator learns he has a pressure sore, home health starts quickly treat the sore.
What is Important About a Coordinated System?

- The member is the primary focus of the system
- Each member has a Care Coordinator
- The member receives most of his or her healthcare from a Primary Care Doctor
- All members of the care team work together
Feedback, Timeline and Next Steps
## Consumer Input Plan

### Stakeholder Regions

<table>
<thead>
<tr>
<th>Region</th>
<th>Cities</th>
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<tbody>
<tr>
<td>A</td>
<td>Huntsville, Florence</td>
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<tr>
<td>B</td>
<td>Birmingham, Gadsden</td>
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<td>C</td>
<td>Tuscaloosa, Demopolis</td>
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<td>D</td>
<td>Montgomery, Dothan</td>
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<tr>
<td>E</td>
<td>Mobile</td>
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**July to Mid-August:** Compile feedback, identify feedback trends and pinpoint where feedback can guide concept design elements. Findings and modifications based on feedback will be demonstrated in the second round of stakeholder meetings.
<table>
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<tr>
<th>Date</th>
<th>Milestone</th>
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<tr>
<td><strong>Summer 2016</strong></td>
<td>Stakeholder Input Meetings and Identify Quality Assurance Council</td>
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<td><strong>Summer/Fall 2016</strong></td>
<td>Draft Concept Paper</td>
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<td><strong>Fall 2016</strong></td>
<td>Solicit feedback from Stakeholders</td>
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<td><strong>Winter 2017</strong></td>
<td>Finalize and Release Concept Paper</td>
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<td>Draft Waiver Request</td>
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<tr>
<td><strong>Spring 2017</strong></td>
<td>Solicit Feedback on Waiver Request</td>
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<td>Submit Waiver</td>
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<td><strong>Fall 2017</strong></td>
<td>Release RFP</td>
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<tr>
<td><strong>Fall 2017 - Fall 2018</strong></td>
<td>Member outreach, readiness and enrollment and Go-Live</td>
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1. **Comment Cards:** we ask that you take the next five minutes to write your comments on **INDEX CARDS**, located on your table. These cards will be collected and reviewed by the Alabama Medicaid agency.

2. **Send Questions in!** Have a question you would prefer to ask? Don’t like speaking in public? Feel free to email questions to <insert email>

3. **Take the Survey!** Alabama Medicaid will be posting internet surveys on the agency website. Notice that the survey has been posted will be provided to all Area Agencies on Aging, AARP and other organizations to share statewide. Assistance taking the survey will be available to those who may need it by contacting your Area Agency on Aging at <insert contact>

4. **Question and Answer –**
   - What do you think of the program model we have explained today?
   - Do you have questions about how this model might work?
   - What do you like about the model, as it has been explained to you today?
   - What concerns you about the model, as it has been explained to you today?
Finally…

We want to especially thank the following groups for their help in assembling these forums:

- Alabama Department of Senior Services
- St. Paul U.M.E. Church
- AARP of Alabama

Thank You for your participation today, your feedback is important to us.
We hope you’ll join us again during the next round of meetings.