



## Ohio Receives CMMI State Innovation Model grant

On February 21, 2013, the Department of Health and Human Services (HHS) Secretary Kathleen Sebelius announced the recipients of the State Innovation Models initiative awards. Twenty-five states will be working to design and implement improvements to their health care systems that will bolster health care quality and decrease costs.

Ohio is one of only 16 states that will receive Model Design funding for the State Innovation Models (SIM) initiative from the Centers for Medicare and Medicaid Innovation (CMMI). Over the next 6 months, the State of Ohio will receive up to \$3,000,000 to develop a State Health Care Innovation Plan. Ohio is one of only two states to receive the maximum award amount for planning. Ohio will use the SIM grant to develop a comprehensive plan to expand the use of patient-centered medical homes and episode-based payments for acute medical events to most Ohioans who receive coverage under Medicaid, Medicare and commercial health plans. The Governor's Office of Health Transformation will lead the design team in partnership with the Governor's Advisory Council on Payment Innovation, which includes representatives from prominent Ohio employers, health plans, health systems and consumer advocates. The Ohio Patient-Centered Primary Care Collaborative (OPCPCC) will play an important role in expanding the use of the PCMH model throughout Ohio.

The State of Ohio issued a [Request for Proposals](#) on February 21 for a State Innovation Model Design and Testing Vendor. The SIM Model Design and Testing Vendor Request for Proposals is available on the Ohio Department of Administrative Services web site. Proposals are due by March 15 at 1:00 PM.

States who received model testing awards are Arkansas, Maine, Massachusetts, Minnesota, Oregon, and Vermont. States receiving pre-testing support are Colorado, New York, and Washington. States receiving model design support are California, Connecticut, Delaware, Hawaii, Idaho, Illinois, Iowa, Maryland, Michigan, New Hampshire, Ohio,

**The Ohio Patient-Centered Primary Care Collaborative (OPCPCC)** is a coalition of primary care providers, insurers, employers, consumer advocates, government officials and public health professionals. They are joining together to create a more effective and efficient model of healthcare delivery in Ohio. That model of care is the Patient-Centered Medical Home (PCMH).

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Pennsylvania, Rhode Island, Tennessee, Texas, and Utah.

More details about Center for Medicare and Medicaid Innovation's SIM grant are available on the [CMMI SIM web site](#). Ohio's [press release](#) announcement the SIM grant award, a [fact sheet](#) detailing all SIM awards to states by the Centers for Medicare and Medicaid, and [Ohio's SIM grant proposal](#) are available on the Governor's Office of Health Transformation web site.

# Ohio Medicaid Health Homes Program: Community Behavioral Health Center Health Homes

by Afet Kilinc, Ph.D., PCC-S, Integrated Clinical Care Director, Ohio Department of Mental Health

Leaders of Ohio's health and human services agencies believe that better care coordination can result in improved health outcomes while spending less of the taxpayer's dollars. Health homes aim to integrate physical and behavioral health care by offering and facilitating access to medical, behavioral, long-term care and social services that are timely, of high quality and coordinated by an individualized care team. The Ohio Department of Mental Health and Ohio Medicaid have jointly developed the health home proposal for individuals with Serious and Persistent Mental Illness (SPMI) through a stakeholder process that began November 3, 2011. A copy of State Plan Amendment (SPA) is available on the web. Implementation began October 1, 2012 in five Phase I Counties; Adams, Butler, Lawrence, Lucas and Scioto. The remaining 83 Counties are scheduled for implementation on July 1, 2013.

A health home is not a building; it is a coordinated, person-centered system of care. Health home is a new benefit and service for Medicaid beneficiaries with chronic conditions. The following health home services are available for individuals with serious and persistent mental illness: Comprehensive Care Management, Care Coordination, Health Promotion, Comprehensive Transitional Care, Individual and Family Support, and Referral to Community and Social Support Services.

Ohio Medicaid health homes for individuals with serious and persistent mental illness are designed to improve care coordination, improve integration of physical and behavioral health care, improve health outcomes, lower rates of hospital emergency department use, reduce hospital admissions and readmissions, decrease reliance on long term care facilities, improve the experience of care and consumer quality of life, and reduce healthcare costs. Adults and children who have Medicaid benefits and meet the State of Ohio definition of SPMI - which includes adults with serious mental illness and children with serious emotional disturbance - will be eligible for health home services in community behavioral health centers.

Community behavioral health centers, who meet state-defined requirements, including integration of primary and behavioral health care services, can qualify as health homes. Sites are selected in targeted geographic areas based on a center's ability to meet defined qualifications. Health home services are provided by a team consisting of the following health care professionals: Health Home Team Leader, Embedded Primary Care Clinician, Care Manager and Qualified Health Home Specialists. Health home providers are required to collect and report outcomes data and be reimbursed based on a monthly case rate methodology.

For more information about health homes for people with mental illness, including information on the stakeholder process and SPA, please visit: <http://mentalhealth.ohio.gov/what-we-do/protect-and-monitor/medicaid/health-home-committees.shtml>

## H.B. 198 Pilot Update

The PCMH Education Pilot Project is well underway and sites are making progress towards transforming to PCMHs. Practices completed the practice and staff assessments, and TransforMED conducted site visits to the pilot sites in October. TransforMED completed assessment calls with each pilot site to reviews assessment results. TransforMED began holding monthly group calls with the sites in December, covering topics related to change management, teamwork and engagement, care teams, and care team efficiencies. Individual calls with each practice began in January.

Pilot practices are in the process of selecting metrics that will be measured beginning July 1, 2013. The PCMH Education Advisory Group (EAG) desires to keep the project metrics in-line with the 21 metrics that will be used for the CPCi (Comprehensive Primary Care initiative) Cincinnati-Dayton region and use metrics that are already being used by PCMHs. The EAG has prescribed a basic set of metrics and then practices have a buffet of other metrics from which they will select additional metrics. All pilot practices will measure patient satisfaction, by asking patients one question about their inclination to refer family and friends to the practice. Different survey tools could be used by different practices, as long as a similar question is used for this metric. Additionally, three prevention and three chronic care metrics will be measured by each practice. From each category, the EAG selected one that will be required and then two additional metrics will be selected by practices from the buffet. The required prevention metric is tobacco screening and cessation, because tobacco use is a common problem and Ohio ranks above the national average for tobacco use. Additionally, tobacco use is part of most EHRs. The required chronic care metric is diabetes HbA1c poor control. This will result in a total of seven metrics for practices.

A statewide collaborative meeting for pilot sites is being planned for April 13, 2013. Agenda topics include patient engagement, payment reform in Ohio, and high-performing clinical teams. The day will also include breakout sessions and networking opportunities.

# Governor's Advisory Council on Health Care Payment Innovation

On January 9, 2013, Governor John Kasich's Advisory Council on Health Care Payment Innovation met for the first time. The Advisory Council includes representatives from prominent Ohio employers, health plans, health systems and consumer advocates, who will partner with the Governor's Office of Health Transformation to lead payment reform efforts in Ohio. The work of the Advisory Council will include the State Innovation Model planning grant and will involve the Ohio Patient-Centered Primary Care Collaborative in strategies to expand the PCMH model in Ohio.

At the January 9 meeting, the Advisory Council recognized the Catalyst for Payment Reform (CPR) Principles as a starting point to prioritize and coordinate multi-payer health care payment innovation activities in Ohio. CPR Principles are:

1. Payment reforms should promote health by rewarding the delivery of quality, cost effective and affordable care that is patient-centered and reduces disparities.
2. Health care payments should encourage and reward patient-centered care that coordinates services across the spectrum of providers and care setting while tailoring health care services to the individual patient's needs.
3. Payment policies should encourage alignment between public and private health care sectors to promote improvement, innovations and meeting national health priorities, and to minimize the impact of payment decisions of one sector on the other.
4. Decisions about payment should be made through Independent processes that are guided by what serves the patient and helps society as a whole, and payment decisions must balance the perspectives of consumers, purchasers, payers, physicians and other health care providers.
5. Payment policies should foster ways to reduce expenditure on administrative processes (e.g., claims payment and adjudication).
6. Reforms to payment should balance the need for urgency against the need to have realistic goals and timelines that take into account the need to change complex systems and geographic and other variations.

The [slides from the January 9 meeting](#) of the Advisory Council are available on the Office of Health Transformation web site.

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## ODH 2013-2014 Strategic Plan

The Ohio Department of Health (ODH) will be using the 2013-2014 Strategic Plan to clearly define its role as one of many vital partners that form an effective public health system for our state, for today and into the future. This plan allows ODH to focus efforts and identify priorities; it is not meant to be an exhaustive list of the work to be done, rather it will reflect priorities in focusing work and developing future budgets. The ODH Strategic Plan has as its foundation the State Health Assessment and the [State Health Improvement Plan](#), as well as the various national guidelines. ODH felt it important to include ongoing stakeholder engagement as an essential component of its planning process. Therefore, extensive focus group conversations with key internal and external stakeholders were conducted to assess perceptions of ODH's strengths and challenges, and to gauge support for potential strategic priorities. Together these sources of information have provided the foundation for ODH strategic priorities for the next 24 months. One of the priorities for improved health that is identified in the Strategic Plan is to expand patient-centered medical homes across Ohio. The full [ODH Strategic Plan](#) may be viewed on the ODH web site.

## NCQA Discount for OPCPCC members

As part of the purchase of monthly data feeds from the National Committee for Quality Assurance (NCQA), which are used to populate the PCMH provider map, the Ohio Department of Health (ODH) has received a sponsor discount code for NCQA fees. Members of the Ohio Patient-Centered Primary Care Collaborative (OPCPCC) can use this discount code to receive a 20% discount on NCQA application fees. The code can be used by OPCPCC members who are not already eligible for other discounts, such as the 50% NCQA multi-site discount given to practices that have 3 or more sites that share the same EMR. To use the ODH sponsor discount code, please first complete the free on-line membership form for OPCPCC and then call Amy Bashforth at 614-644-9756 to receive the code.

## OPCPCC Membership

The Ohio Patient-Centered Primary Care Collaborative (OPCPCC) invites you to formalize your membership in OPCPCC. Check out the OPCPCC website to see the strong list of supporters at <http://www.odh.ohio.gov/landing/medicalhomes/opcpcc.aspx>. **Membership in OPCPCC is free** and benefits include:

- Conferences and networking opportunities
- Quarterly Newsletters
- Ohio PCMH Weekly updates
- Discount code for 20% discount on NCQA application fees

Beginning on January 1, 2013 Ohio PCMH Weekly updates and OPCPCC Quarterly Newsletters will only be sent directly to those who have completed the on-line membership form. Distribution through the prior e-mail list will cease at that time. Please complete the membership form, to ensure that you will continue to receive updates about OPCPCC and PCMH activities in Ohio, at <http://www.odh.ohio.gov/landing/medicalhomes/membership.aspx>. Please call 614-644-9756 with any questions regarding membership in OPCPCC.

## OPCPCC Learning Centers

The six Ohio-Patient Centered Primary Care Collaborative Learning Centers began meeting in January to finalize their Learning Center Action Plans and determine action steps that can be completed by each Learning Center in the coming months. All six Learning Centers welcome more participants. The six Learning Centers are:

- Communications and Marketing
- Education
- Health Information Technology
- Metrics
- Patient Engagement
- Payment Reform

Following are scheduled upcoming conference calls with OPCPCC Learning Centers.

- Patient Engagement Learning Center: Tuesday, March 26 at 11:00 AM
- Education Learning Center: Thursday, April 11 at 9:30 AM

If you are interested in participating in one of these Learning Centers and would like more information, please contact [PCMH@odh.ohio.gov](mailto:PCMH@odh.ohio.gov) or 614-644-9756.

## Announcements and Upcoming Events

<b>March 7th:</b>	<b>9:00 AM</b>	<b>Education Learning Center Conference Call</b>
<b>March 26th:</b>	<b>11:00 AM</b>	<b>Patient Engagement Learning Center Conference Call</b>
<b>May 29th:</b>	<b>10:00 AM</b>	<b>PCMH Education Advisory Group Meeting</b>

If you have ideas or would like to contribute an article for an upcoming newsletter, please send your ideas [PCMH@odh.ohio.gov](mailto:PCMH@odh.ohio.gov) or call Amy Bashforth at (614)644-9756.