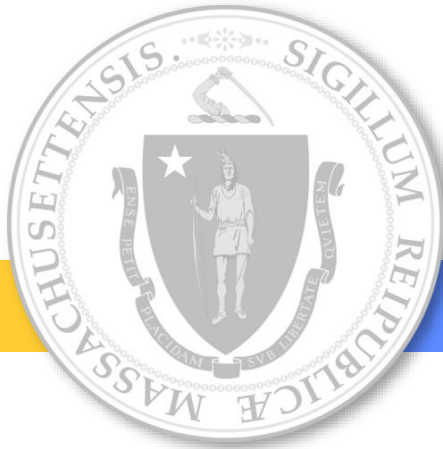


MassHealth Delivery System Restructuring – Overview



Executive Office of Health & Human Services

May 2017



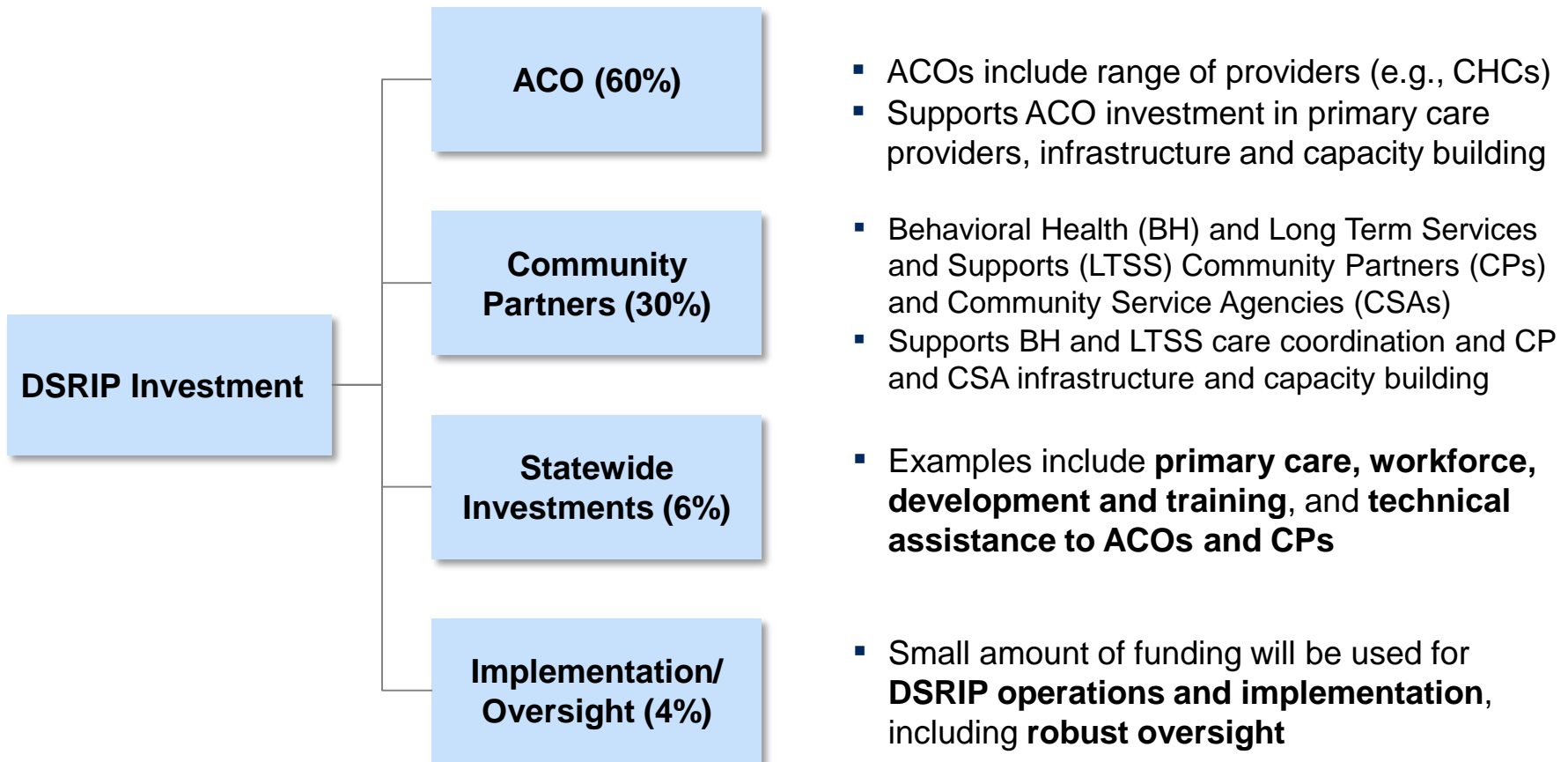
1115 Demonstration Waiver Approvals

- On November 4, 2016, Massachusetts received federal approval of its request for an amendment and extension of the 1115 Demonstration Waiver, providing MassHealth additional flexibility to design and improve programs.
- The Waiver authorizes \$52.4B in spending over five years, including \$1.8B in Delivery System Reform Incentive Payments (DSRIP) to fund MassHealth's restructuring and transition to accountable care.
- In addition to MassHealth's existing Managed Care Organization (MCO) program and the Primary Care Clinician Plan (PCC Plan), the Waiver also recognizes two new types of entities, **Accountable Care Organizations (ACOs) and Community Partners (CPs)**.
- The Waivers also expands the MassHealth benefit to include the full continuum of medically necessary 24-hour community-based rehabilitation services for MassHealth members with substance use disorders, generating \$150 M in federal revenue to further invest in capacity and access to SUD services.



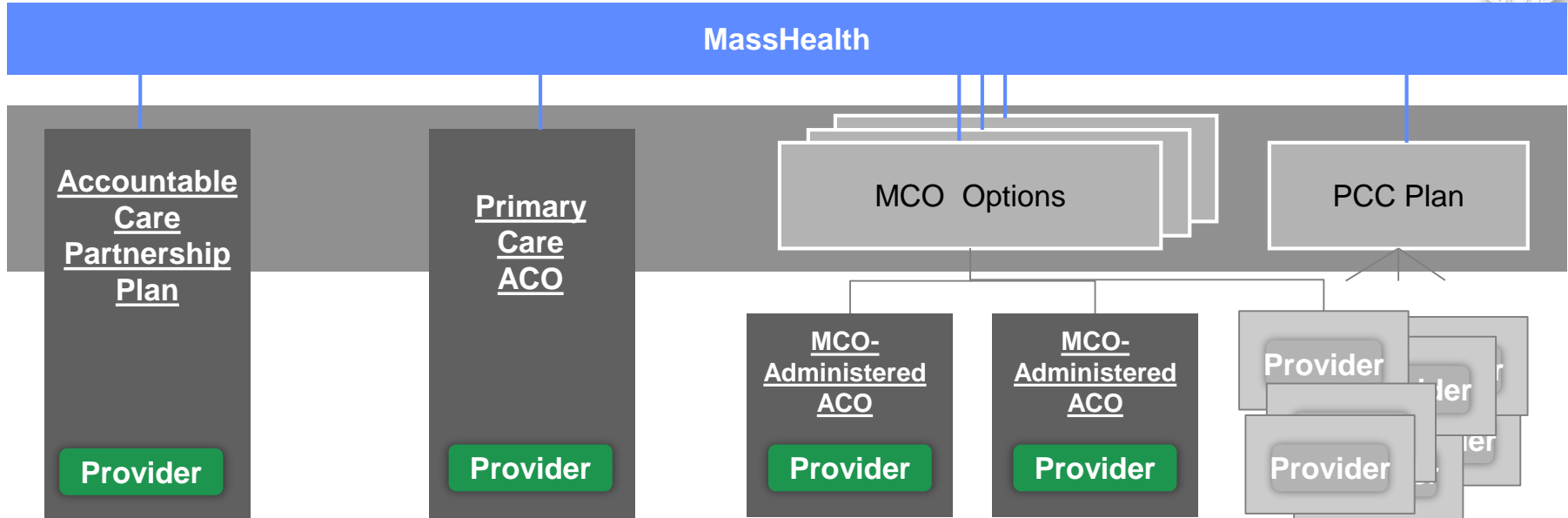
Delivery System Reform Incentive Payment

- DSRIP totals \$1.8B over five years and supports four main funding streams
- **Eligibility for receiving DSRIP funding will be linked explicitly to participation in MassHealth payment reform efforts**



MassHealth Restructuring

Member enrollment



Accountable Care Partnership Plan

- MCO and ACO have significant integration and provide covered services through a provider network
- Risk-adjusted, prospective capitation rate
- Takes on full insurance risk

Primary Care ACO

- ACO contracts directly with MassHealth for overall cost/ quality
- Based on MassHealth provider network/MBHP
- ACO may have referral circles
- Choice of level of risk; both include two-sided performance (not insurance) risk

MCO-Administered ACO

- ACOs contract and work with MCOs
- MCOs play larger role to support population health management
- Various levels of risk; all include two-sided performance (not insurance) risk

PCC Plan

- Primary care Providers based on the PCC Plan network
- Specialists based on MassHealth network
- Behavior Health administered by Massachusetts Behavioral Health Partnership (MBHP)



Community Partners (CPs)

- MassHealth will procure **Community Partners**—entities experienced with Behavioral Health and Long Term Services and Supports to support ACOs and MCOs in providing quality care to certain members.
- **CPs will:**
 - Support members with high BH needs and complex LTSS needs to help them navigate the complex systems of BH services and LTSS in Massachusetts
 - Improve member experience, continuity and quality of care by holistically engaging members
 - Create opportunity for ACOs and MCOs to leverage the expertise and capabilities of existing community-based organizations serving populations with BH and LTSS needs
 - Improve collaboration across ACOs, MCOs, CPs, community organizations addressing the social determinants of health, and BH, LTSS, and health care delivery systems in order to break down existing silos and deliver integrated care.



Flexible Services

- ACOs will be able to invest in certain approved community goods/services that address health-related social needs and are not otherwise covered under Massachusetts' Medicaid benefits.
- These “flexible services” will support innovative approaches to addressing the social determinants of health in the following domains:

<ul style="list-style-type: none">• Transition services for individuals transitioning from institutional settings into community settings	<ul style="list-style-type: none">• Home and Community-Based Services to divert individuals from institutional placements
<ul style="list-style-type: none">• Services to maintain a safe and healthy living environment	<ul style="list-style-type: none">• Physical activity and nutrition
<ul style="list-style-type: none">• Experience of violence support	<ul style="list-style-type: none">• Other individual goods and services

- Flexible services must be:
 - Health-related
 - Not covered benefits under the MassHealth State Plan, 1115 Demonstration Waiver, or a home- and community-based waiver the member is enrolled in.

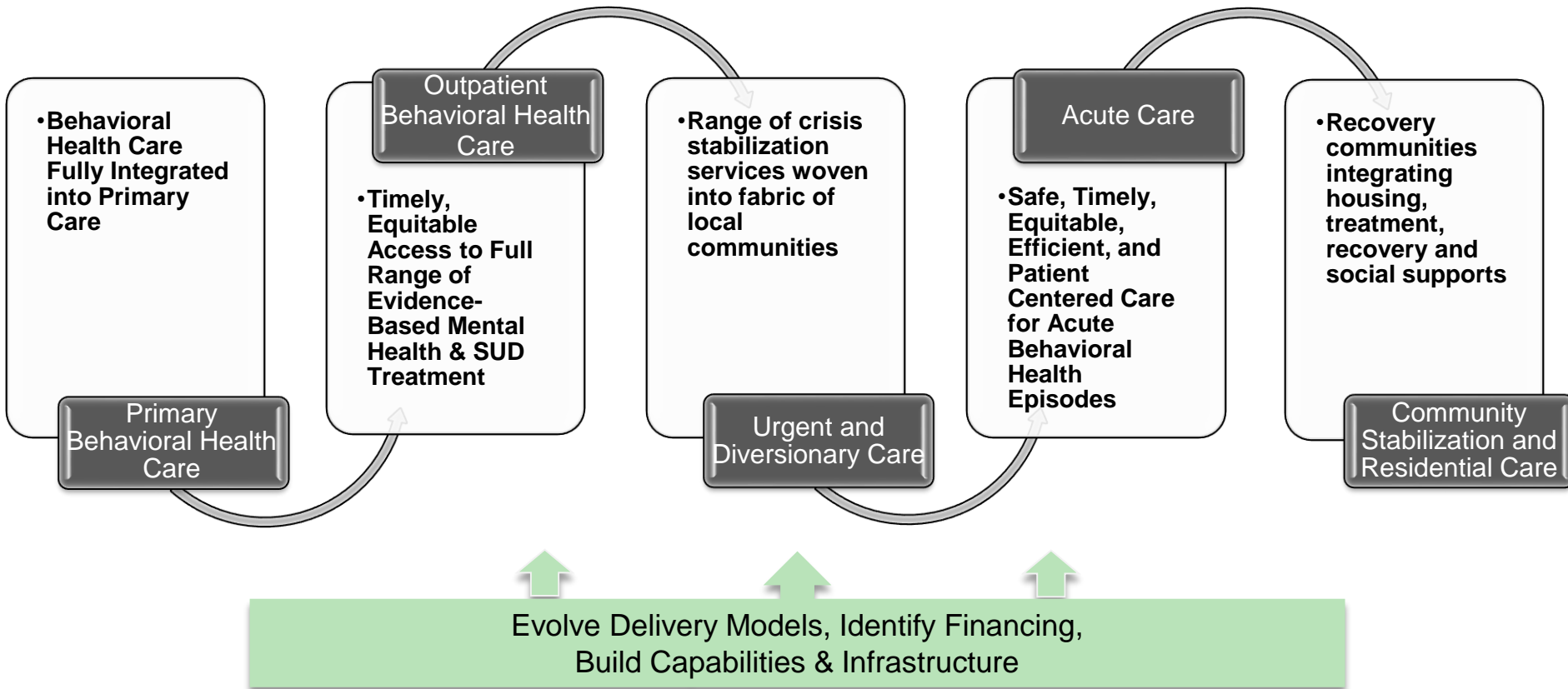


1115 Waiver Provisions for Substance Use Disorder Treatment

- Moves Residential Rehabilitation Services into the MassHealth Benefit
- Generates \$150M in new funding over five years for the expansion of Substance Use Disorder (SUD) treatment to address the opioid crisis
- Additional capacity for 450 residential rehabilitation beds
- Expansion of the MassHealth benefit to cover recovery support navigators, and recovery coaches
- Increased investment in Medication Assisted Treatment and critical time intervention for homeless individuals
- MassHealth and the Department of Public Health will adopt a standardized American Society of Addiction Medicine (ASAM) assessment across all SUD providers



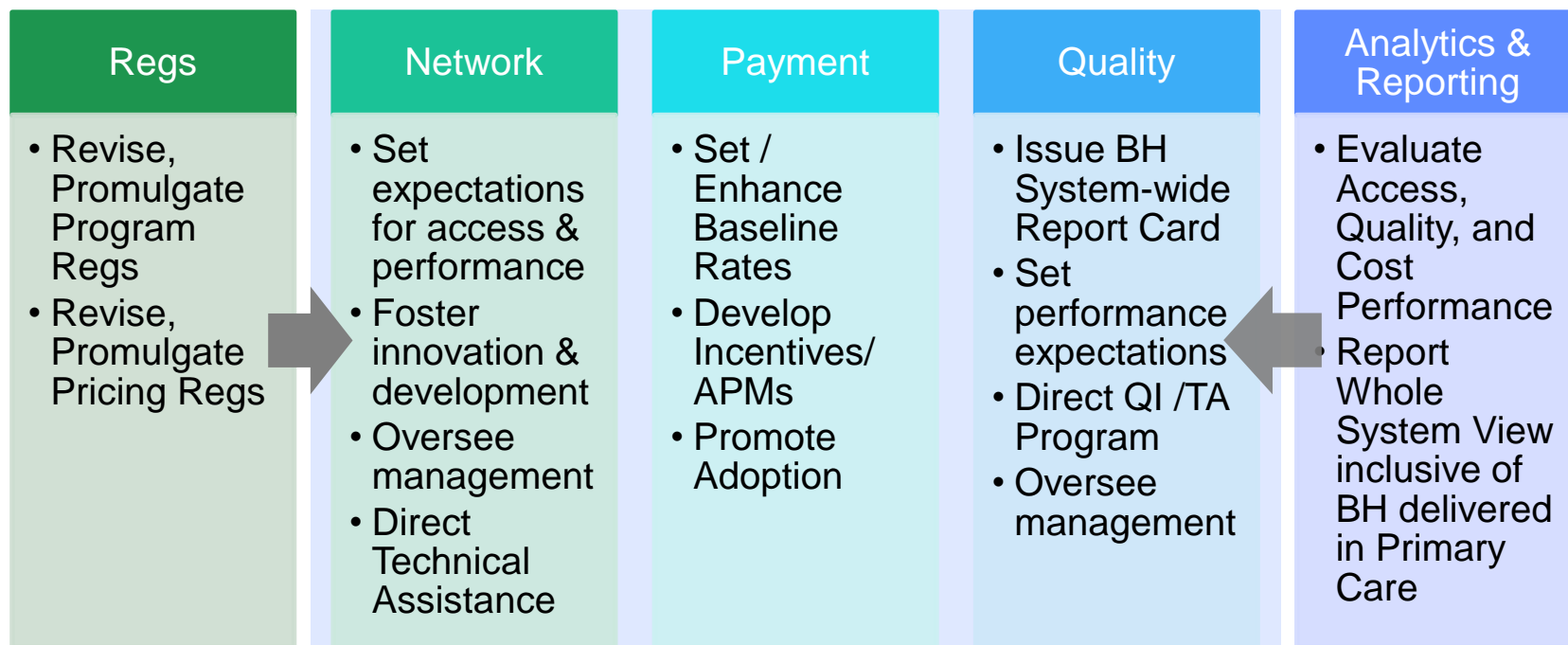
Towards a Strong, Sustainable System of Community-Based Behavioral Health Care: *Improve Access, Coordination, and Continuity of Care Across the Continuum*





MassHealth/OBH “Levers” Available to Advance System Transformation

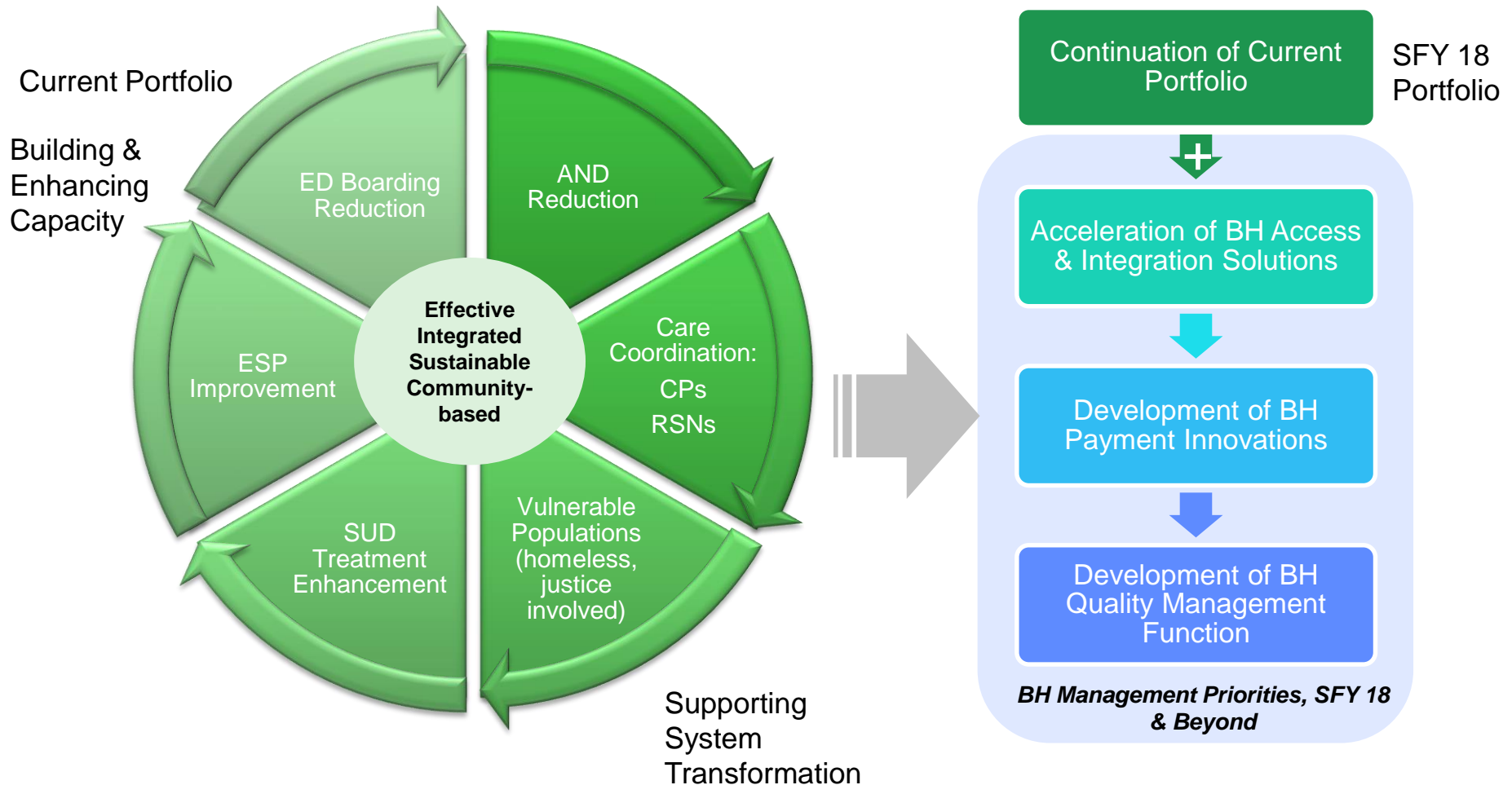
Deploy Data-Driven Regulatory, Network, Payment, and Quality Management Strategies





MassHealth SFY 18: Evolving Portfolio of Behavioral Health Management Initiatives

Advance Current Portfolio Alongside Within the Waiver Strategies for Access, Financing & Quality





Towards a Strong, Sustainable System of Community-Based Behavioral Health Care: *BH Strategic Framework For Advancing Transformation "Within the Waiver"*

Focus Areas for Improvement

Access to Care

- Network Adequacy
- Open Access
- Capacity Growth and Retention



Coordination & Continuity

- Bi-Directional Communication
- Effective Transitions of Care
- Wrap Services & Supports



Quality Management

- Performance Measurement
- Evidence-Based Practices
- Continuous Improvement

1115 Waiver:

- ACOs
- BH/LTSS CPs
- SUD Waiver
- Managed LTSS

Within the Waiver: Strategies to Further Strengthen the System

Network / Service Delivery

Access Solutions

Transitions of Care

Integrated Delivery Models

Payment

Rate Enhancement

Directed Payments for High-Value Services

Nested Payment Innovations to Redistribute/ Reinvest

Quality Management

Quality Monitoring

Network Development

Technical Assistance

Infrastructure within MassHealth & Delivery System