

MaineCare Accountable Communities 2016 Request for Applications

This document serves as MaineCare's Request for Applications a new round of its Accountable Communities (AC) initiative. The first performance year of the three-year AC performance period will start on August 1, 2016.

Applications are due no later than January 15, 2016, and must be filled out at www.surveymonkey.com/r/2016-AC-Application. All applicants that meet requirements are permitted to participate in the program, but submitting an application does not obligate the applicant to participate.

Basic information is below. Additional detail can be obtained at www.maine.gov/dhhs/oms/vbp/accountable.html and/or by contacting Peter Kraut at Peter.Kraut@maine.gov or 207.624.4041. Peter is available to meet with interested parties at their request.

Background

The AC program is MaineCare's version of Accountable Care Organizations (ACOs), under which groups of providers can share in savings for an assigned population, with the exact amount of any shared savings payments tied to the ACs score on a range of quality measures.

Under the program, DHHS enters a three-year AC contract with the AC "Lead Entity." The Lead Entity – which does not need to be a provider -- represents the providers that comprise the AC. The AC must include providers that directly deliver primary care services, as primary care practices are the main basis for assigning MaineCare members to the AC, but beyond that and several other requirements, the program offers broad flexibility as far as what types of providers may be part of the AC and how the AC is structured and operates.

Choice of Two Payment Models

The program offers a choice of two models (in both models, Fee for Service continues unchanged).

1. Model I - requires minimum of 1,000 members
 1. Share in a maximum of 50% of savings, based on quality performance, with cap at 10% of benchmark TCOC
 2. No downside risk in any of the three performance years
2. Model II - requires minimum of 2,000 members
 1. Share in a maximum of 60% of savings, based on quality performance, with cap at 15% of benchmark TCOC
 2. No downside risk in first performance year
 3. Liable for 40-60% of losses, based on quality performance, in years two and three, with cap at 5% of benchmark TCOC in Year 2 and 10% of benchmark TCOC in Year 3

Shared savings (or loss) payments are paid to (or paid by) the Lead Entity, which in turn can distribute the payment or costs to AC Providers however the Lead Entity and AC Providers decide.

Data Feedback to Providers

To assist the AC in managing members, MaineCare provides ACs with a range of data reports. MaineCare has received extremely positive feedback regarding these reports from the four ACs participating in Round 1 (which started August 1, 2014). The reports are:

1. Dashboard utilization report (updated monthly; available at MaineCare's Value-Based-Purchasing Management System (VMS) Portal (the same portal used in the Health Home and Behavioral Health Home programs)).
2. Attributed member roster (updated quarterly; available at VMS Portal).
3. Total Cost of Care (quarterly) broken out by practice and service category.
4. Performance on quality measures (quarterly), including list of which members are in numerator and denominator of each measure.

Further Detail

Further detail – including further AC requirements; the list of quality measures and how quality scoring works; how members are attributed; core and optional services that are counted in Total Cost of Care (TCOC); how the benchmark TCOC from which savings are measured are calculated; and more – can be viewed in a presentation summarizing details of the program at www.maine.gov/dhhs/oms/vbp/accountable.html.

A version of the AC contract template is also available upon request.

Timeline

Applications are due no later than January 15, 2016, and must be filled out at www.surveymonkey.com/r/2016-AC-Application. Applicants must demonstrate through their responses that they currently meet, or commit to meet, all requirements of the AC contract.

Prospective applicants who wish to view the survey questions prior to going through the survey process can view a PDF of the application at www.maine.gov/dhhs/oms/vbp/accountable.html. However, this version of the application may not be used as a substitute for the application itself, as it does not reflect or incorporate question skip logic (skipping questions that are not applicable based on the answer to a previous question), and does not show the contents of drop-down menus.

All applicants that meet requirements are permitted to participate in the program, but submitting an application does not obligate the applicant to participate.

Primary care practices, behavioral health organizations, or any other entities interested in participation or in learning more information should contact Peter Kraut at Peter.Kraut@maine.gov or 207.624.4041.