



Medicare Advantage SSBCI: The Role of Regional Networks of CBOs

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Expanding Contracting Opportunities for the Aging Network

- Several recent policy changes and industry shifts have provided expanded opportunities for the Aging Network to engage in meaningful contracting opportunities:
 - Chronic Care Act mandating the creation of the Medicare Advantage Plan Special Supplemental Benefits for the Chronically Ill benefit option
 - Recognition of the negative impact of Social Determinants of Health on clinical and health care expenditures
 - Greater adoption of Value-Based Contracting that requires health plans and providers to take on risk-bearing contracts that tie payments to clinical and financial outcome measures



History of the Western New York Integrated Care Collaborative (WNYICC)

- 2014-2015: AAA Leaders in Erie & Niagara Counties: Business Acumen Learning Collaborative through ACL
- 2016: Non-profit, Incorporated, 501(c)3
- 2017 - 2020: 30 month grant from Health Foundation of Western and Central NY
- 10/2017: 1 full-time staff: Director
- 12 network members (2 AAAs and 10 CBOs)
- 6 contracts with health payers to provide community based programs & services to their members: CCM, Healthy IDEAS, DSMT, CDSMP, DPP, Care Transitions
- 2019 - 2022: Sub-Grantee with NYSOFA for 3-year ACL Grant to bring Sustainability to CDSME.



Aging Network Contracting Challenge #1 – Single Source Contracting

- Some MCOs and health systems have expressed a desire to contract with a single entity instead of contracting with numerous CBOs in a region.
 - Did you encounter this issue in Western New York?
 - If so, how did WNYICC address this issue in your market?



Aging Network Contracting Challenge #2 – Service Area Conflicts

- Many CBO Networks have expressed that MCOs have a defined service area that does not align with the historical service areas of the CBO Network partners.
- When this issue arises, the MCO wants services to extend to the full market region where they have members.
- What happens when the contracted region starts at one area and then expands to additional across the State?
 - Did you encounter this issue in Western New York?
 - If so, how did WNYICC address this issue in your market?



Aging Network Contracting Challenge #3 – Contracting with CBO partners

- If a Network Hub/MSO enters into a contract for services that is delivered by multiple CBO partners it will likely require a complex contracting model that must define the services and partners that may change over time.
 - Did you encounter this issue in Western New York?
 - If so, how did WNYICC address this issue in your market?



Aging Network Contracting Challenge #4 – Network Capacity

- In many markets there is varying capacity of CBOs across a region.
- Many contracts require that there be consistent service delivery that is uniform across a defined region.
 - Did you encounter this issue in Western New York?
 - If so, how did WNYICC address this issue in your market?



Aging Network Contracting Challenge #5 - Services

- The Aging Network has invested heavily in the delivery of Evidence-Based Programs.
- Unfortunately, some groups have expressed that they were unable to convince MCOs and health systems to purchase evidence-based programs.
 - Did you encounter this issue in Western New York?
 - If so, how did WNYICC address this issue in your market?



Aging Network Contracting Challenge #6 – Service Pricing

- A major issue is how to price services that incorporates the cost of maintaining the Network Hub/MSO infrastructure and paying the cost of the CBO services – PLUS – a margin to support the entire network infrastructure.
 - Did you encounter this issue in Western New York?
 - If so, how did WNYICC address this issue in your market?



Aging Network Contracting Challenge #7 – MSO Services

- When organizing a MSO to support contracting with a CBO network, it is difficult to define the specific services of the MSO and the services provided by the network.
 - Did you encounter this issue in Western New York?
 - If so, how did WNYICC address this issue in your market?



Aging Network Contracting Challenge #8 – Risk-Bearing Contracts

- Some MCO and Health Systems are requiring CBOs to take on risk-bearing contracts.
- Many CBOs are reluctant to take on risk in a contract.
 - Did you encounter this issue in Western New York?
 - If so, how did WNYICC address this issue in your market?



Aging Network Contracting Challenge #9 – Quality

- When executing single source contracting, everyone in the Network will be held to the same quality measures.
- In order to ensure that the Network meets the outcome measures of the contract, there will need to be a process to monitor and track performance on the contract across all participating Network partners.
 - Did you encounter this issue in Western New York?
 - If so, how did WNYICC address this issue in your market?



Aging Network Contracting Challenge #10 – Revenue Allocation

- If a Network executes a contract for services using a MSO, there must be a process to define the revenue allocation to the MSO versus the revenue to the CBO partners.
- How do you ensure that there is enough revenue to sustain the MSO and adequately fund the CBO partners?
 - Did you encounter this issue in Western New York?
 - If so, how did WNYICC address this issue in your market?



Aging Network Contracting Challenge #11 – Health IT

- The management of protected health information (PHI) and exchanging PHI with MCOs and healthcare providers requires the adoption of HIPAA compliant practices.
- The management of protected health information being managed by numerous CBOs may require a strategy to centralize the Health IT system to support system delivery across the entire Network.
 - Did you encounter this issue in Western New York?
 - If so, how did WNYICC address this issue in your market?



Aging Network Contracting Challenge #12 – Federal Policy Impacting Contracting Opportunities

- The Chronic Care Act requirement to establish Medicare Advantage Special Supplemental Benefits for the Chronically Ill is a recent Federal Policy change that will provide additional contracting opportunities for CBOs to provide non-clinical services to address unmet needs and social determinants of health.
 - Did this change in Federal Policy change how you marketed your Network services to Medicare Advantage Plans in your Market?
 - What was the impact of this Federal Policy change on the ability of your Network to secure contracts?



Aging Network Contracting Challenge #13 – Medicaid Policy Impacting Contracting Opportunities

- States that have adopted Medicaid Managed Care can implement State-level policies that change how Medicaid Managed Care Plans approach contracting with CBOs to provide services to Medicaid beneficiaries.
 - Did you encounter this issue in Western New York?
 - What State Medicaid Policy impacted your contracting strategy?
 - What was the outcome in contracting that resulted from this State Medicaid policy requirement?



Aging Network Contracting Challenge #14 – Role of the State Unit on Aging

- State Units on Aging could play an integral role to supporting Network development and contracting.
- Unfortunately, there have not been many examples of Networks working with their State Unit on Aging to expand services in a Region or across a State.
 - Does your Network work with the State Unit on Aging?
 - How would you suggest that a Network work with their State Unit on Aging to support expanding contracting in a Region or across a State?



WNYICC Current Contracts

- Contract with Medicare Advantage Plan to bill for CCM, Diabetes Prevention Program (MDPP), Diabetes Self-Management Training (DSMT) and Medical Nutrition Therapy (MNT).
- Contract with 3 Medicaid Managed Long-Term Care Plans (MLTC) to provide: Healthy IDEAS, Chronic Disease Self-Management Program (CDSMP) and DSMP.
- Contract with MSO for Care Transitions for Medicaid Plan.
- Upcoming contract with Medicare Plan to provide post-discharge meals throughout 8 county region through Medicare Supplemental Benefit.
- Finalizing a contract with a large Medicare Plan to provide a range of Special Supplemental benefits for the Chronically Ill



Questions



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