

Employing Alternative Payment Methodologies to Support Workforce Development and Retention Efforts

WELCOME AND INTRODUCTIONS

INTRODUCTION

TODAY'S PANELISTS



Moderator: Gary Jessee
Senior Vice President, **Sellers**
Dorsey



Panelist: Jimmy Blanton
Director, Value-Based Initiatives,
Medicaid and CHIP Services, **Texas**
HHSC



Panelist: Angela Hochhalter
Director of Community and
Population Health, **Aetna Better**
Health of Texas



Panelist: Jodee Fitzgerald
Director of Population Health,
Outreach Health



Panelist: Kristen Robison, RN
Chief Government Affairs Officer,
Angels of Care

PANEL DISCUSSION

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What is Texas' approach to APMs and how is it changing? What are the state's priorities?

PANEL DISCUSSION

What was the driver for your organization's APM model? Were there specific pain points you were trying to address?

What kinds of results are you seeing? Have you encountered unexpected findings? What kind of impact is this having on workforce development and retention?

PANEL DISCUSSION

What advice would you give others interested in pursuing a similar strategy? Are there key pieces that must be in place to make this successful?

How is the state supporting providers and health plans as they continue to build out APMs and value-based care initiatives?

What's needed to further support and/or replicate this strategy?

CLOSING REMARKS

Thank you!



2023 Home and Community-Based
Services Conference

APPENDIX

HCBS Workforce Trends

- Nationally, growth in home care workforce slowed between 2013 and 2019 (up ~16% over six years)
 - Grew by 45% between 2008 and 2013.¹
- In contrast, HCBS participation in Medicaid accelerated during this period (ratio of workers per individuals receiving HCBS fell 11.6% between 2013-2019).¹
- In Texas, according to U.S. Bureau of Labor Statistics data, the number of home health and personal care aides increased ~2% between 2019 and 2022.



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¹Source: Kreider & Werner, The Home Care Workforce has not Kept Pace with Growth in Home and Community-Based Services, HEALTH AFFAIRS 42, NO. 5 (May 2023): 650–657: <https://www.healthaffairs.org/doi/pdf/10.1377/hlthaff.2022.01351>.

HCBS Workforce Strategies

Options identified in the literature, including by the Medicaid and CHIP Payment and Access Commission (March 2022), for supporting HCBS workforce:




- Increase wages and benefits
- Improve recruitment of workers
- Provide pathways for career advancement
- Build workforce skills
- Improve the effectiveness of HCBS workforce
 - Efficiency
 - Keeping people healthy or out of crisis
- Invest resources to support self-care
- Engage/support family caregivers



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Alternative Payment Model (APM) Framework

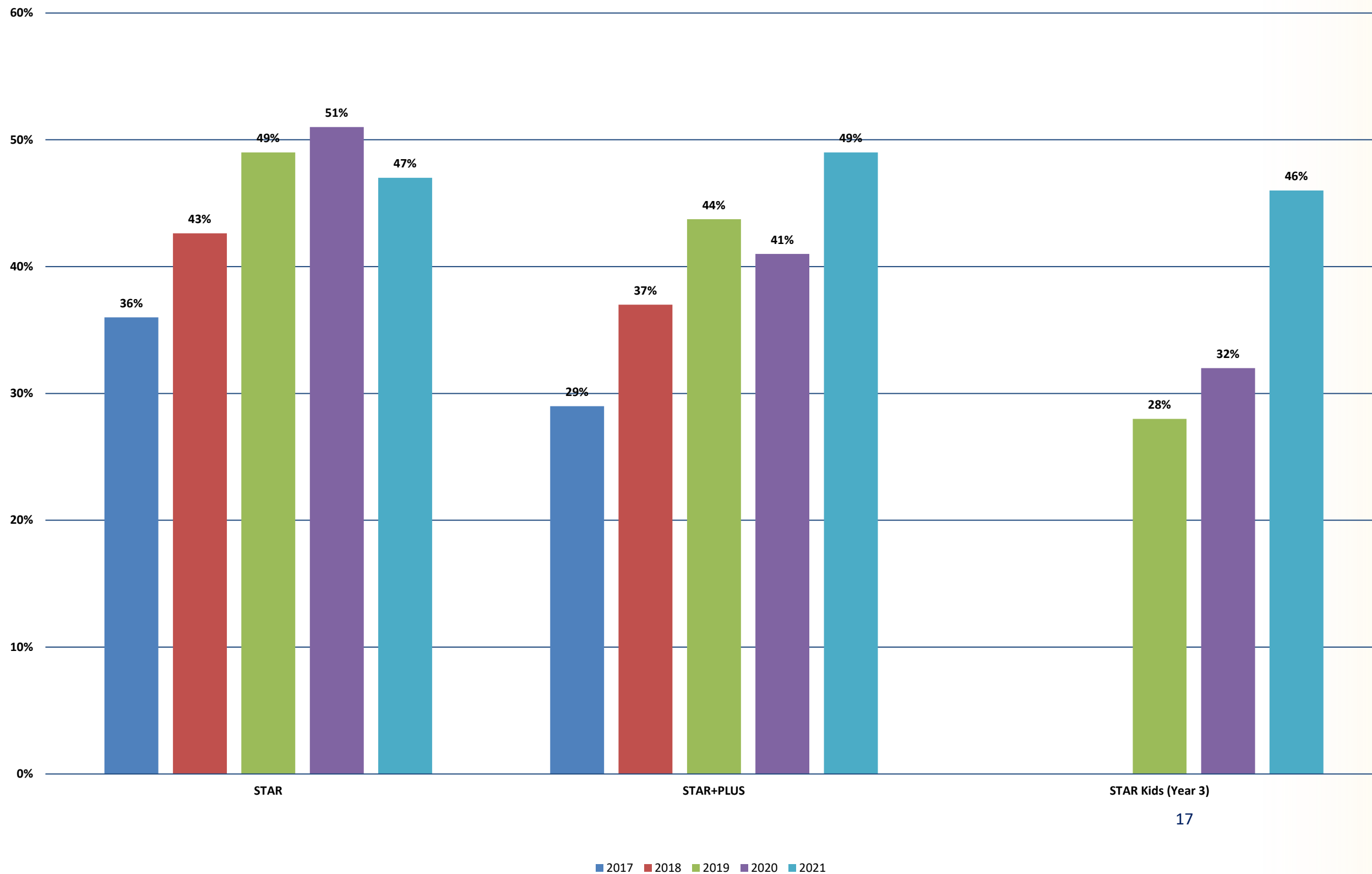
HCP LAN Framework

			
<p>CATEGORY 1 FEE-FOR-SERVICE - NO LINK TO QUALITY AND VALUE</p>	<p>CATEGORY 2 FEE-FOR-SERVICE – LINK TO QUALITY</p> <p>A</p> <p>Foundational Payments for Infrastructure and Operations (e.g., care coordination fees and payments for HIT investments)</p> <p>B</p> <p>Pay-for-Reporting (e.g., bonuses for reporting data or penalties for not reporting data)</p> <p>C</p> <p>Pay-for-Performance (e.g., bonuses for quality performance)</p>	<p>CATEGORY 3 APMS BUILT ON FEE-FOR-SERVICE</p> <p>A</p> <p>APMs with Shared Savings (e.g., shared savings with upside risk only)</p> <p>B</p> <p>APMs with Shared Savings and Downside Risk (e.g., episode-based payment for procedures and comprehensive payment with upside and downside risk)</p>	<p>CATEGORY 4 POPULATION-BASED PAYMENT</p> <p>A</p> <p>Condition-Specific Population-Based Payment (e.g., per member per month payments, payments for specialty services, such as oncology or mental health)</p> <p>B</p> <p>Comprehensive Populations-Based Payment (e.g., global budgets or full/percent of premium payments)</p> <p>C</p> <p>Integrated Finance and Delivery System (e.g., global budgets or full/percent of premium payments in integrated systems)</p>
		<p>3N Risk-Based Payment NOT Linked to Quality</p>	<p>4N Capitated Payments NOT linked to Quality</p>



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Overall APM Achievement Texas, CYs 2017 – 2021



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Total Payments and Incentives in an APM by Provider Type, CYs 2019 and 2021, STAR Kids

Provider Type	Total Payments 2019	Total Payments 2021	Payments Percent Change	Incentives 2019	Incentives 2021	Incentives Percent Change
Primary Care	\$449,783,046	\$548,114,509	22%	\$3,081,485	\$12,766,492	314%
Home Health	\$734,904	\$288,364,206	39,138%	\$19,630	\$1,342,548	6,739%
Specialist	\$3,492,182	\$4,697,777	35%	\$1,802,696	\$1,010,481	-44%
Behavioral Health	\$14,168,572	\$11,640,170	-18%	\$1,692,381	\$1,127,017	-33%
Other	\$77,602,259	\$114,610,486	48%	\$223,421	\$2,419,310	983%
Total	\$545,780,963	\$967,427,149	77%	\$6,819,613	\$18,665,848	174%



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HCBS APMs, Examples

- Currently, most HCBS related APMs focus on increasing use of preventive care services, such as well child visits, immunizations, and screenings.
- Other HCBS APM focus areas include:
 - Reducing potentially preventable events (admissions, readmissions, and emergency department visits)
 - Suicide risk assessment and screening
 - Incentives for workforce training and education



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Overview: Updated APM Framework

- Provides flexibility for MCOs to advance a broader range of value-based strategies and initiatives, while maintaining alignment with the Health Care Payment Learning & Action Network (LAN)

MCOs earn points across five APM Domains over four years

- 1 *Achievement levels*
- 2 *Quality*
- 3 *APM Priorities*
- 4 *APM Pilots/Initiatives*
- 5 *APM Support*



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APM Domains One & Two

1 APM Achievement Level

- Maintain current APM achievement levels
- Increase accountable (including risk-based) APMs
- Increase incentive dollars paid through APMs

2 Quality

- Exceptional or high performance on Quality-of-Care metrics
- MCO Performance Indicator Dashboard on the Texas Healthcare Learning Collaborative Portal:

<https://thlcportal.com/dashboards/hhscperformance>



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APM Domain Three

3 APM Priorities (STAR Kids)

- Home and community-based services (HCBS)
 - For training, development, and retention of HCBS workforce
 - Incentivize agencies to improve health outcomes and patient and family experience and reduce preventable healthcare events
- Primary and behavioral health integration
 - In either primary or mental healthcare setting
 - Uses collaborative care codes or Certified Community Behavioral Health Clinics
- Non-medical drivers of health



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APM Domain Four

4 APM Pilots/Initiatives (STAR Kids)

- Comprehensive Health Homes for Innovative Care (CHIC) Kids Pilot
- Transitions from pediatric to adult services for individuals with complex medical needs
- Other pilot in collaboration with HHSC and providers to test an innovative payment/care model



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APM Domain Five

5 APM Support

- Strategic Plan/Roadmap and annual updates
- Evaluations
- Learning and awareness with providers
- Performance reports to providers
- Data sharing with providers



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APM Opportunities to Improve HCBS and Promote Workforce Development

- Foster engagement between MCOs, home health agencies, HCBS workers, and HHSC (and Medicaid members, families, and stakeholders)
- Leverage flexibility of managed care model
- Evaluate HCBS APMs to identify effective approaches, including for incorporating workforce training and career development
- Expand the range of meaningful measures available for HCBS APMs
 - Quality and outcomes
 - Patient/family experience
 - Efficiency
 - Workforce
- Improve analytics, reporting, and data exchange to support HCBS APMs



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