State Innovation Models (SIM) Initiative

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CMS Innovation Center
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Source: Centers for Medicare & Medicaid Services
CMS is testing the ability of state governments to utilize policy and regulatory levers to accelerate health care transformation resulting in improved health, improved care, and lower cost of care through a sustainable model of multi-payer payment and delivery reform.
• Performance in quality and cost measures is consistently high;
• Population health measures are integrated into the delivery and payment system; and
• Data is used to drive health system processes and improvement
SIM Focus Areas

- Improve Population Health
- Transform Healthcare Delivery
- Expand Value Based Payment Models
SIM Expectations

- Governor-led transformation initiative
- Based on a comprehensive State Health Care Innovation Plan
- Multi-payer commitment to value-based payment
- Provider engagement in health care transformation
- Population health improvement
- Designed to reach the preponderance of care
- Leverage federal resources, national experts and technical assistance contractors
- Ability to produce quantifiable results in improvements in quality, health and cost
CMS currently supports:
- **6 Model Test states up to $45 million over 3 years**
  - Implementing innovative approaches to statewide multipayer payment and service delivery transformation
- **19 Model Design and Pre-Test states up to $3 million over 6-12 months**
  - Working on developing State Healthcare Innovation Plans

Over 70 individuals from CMS and HHS Operating Divisions actively engaged
- CDC leading population health initiatives
- ONC supporting HIE/HIT alignment
- HRSA developing workforce development plans
- SAMHSA working with states on behavioral health integration
- ACL providing feedback on long-term care/services and supports

National experts and organizations engaged

CMS Leadership Group formed with senior leaders from across CMS to guide work and break down barriers
Model Test States

• Arkansas
• Maine
• Massachusetts
• Minnesota
• Oregon
• Vermont
Model Design/Pre-Test States

- California
- Colorado
- Connecticut
- Delaware
- Hawaii
- Idaho
- Illinois
- Iowa
- Maryland
- Michigan
- New Hampshire
- New York
- Ohio
- Pennsylvania
- Rhode Island
- Tennessee
- Texas
- Utah
- Washington
<table>
<thead>
<tr>
<th>Arkansas</th>
<th>Maine</th>
<th>Vermont</th>
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<tbody>
<tr>
<td>What is the state doing?</td>
<td>What is the state doing?</td>
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<tr>
<td>▪ Engaging primary care providers in patient-centered medical homes</td>
<td>▪ Expanding PCMH, ACO’s and Health Homes</td>
<td>▪ Align Medicaid and commercial ACOs, episode payments, and PCMH models</td>
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<td>▪ Bundle payments for acute conditions</td>
<td>▪ Operate a public-private partnership to accelerate delivery system reform</td>
<td>▪ Expand HIT connectivity among provider organizations and state agencies</td>
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<td>▪ Support providers with data, technical assistance and learning system</td>
<td>▪ Align PCMH model with behavioral health and long term delivery</td>
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<td>▪ Providing data/analytics</td>
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<td>What is HHS funding?</td>
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<tr>
<td>▪ Provider/payer infrastructure and operational support for new care models</td>
<td>▪ Initiative support/governance Structure (including personnel)</td>
<td>▪ Funding for evaluation and advanced analytics</td>
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<td>▪ Payment model design (episodes and PCMH)</td>
<td>▪ Incentives for HIT adoption for behavioral health providers</td>
<td>▪ Technical assistance to providers</td>
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<td>▪ Funding for provider engagement</td>
<td>▪ Quality measurement and advanced data sharing, and enhanced analytics</td>
<td>▪ Assistance with payment model design</td>
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<td>▪ Program management, governance, and technical support</td>
<td>▪ Learning collaborative for providers</td>
<td>▪ Infrastructure and operational support</td>
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### SIM Model Test transformation activities (2/2)

<table>
<thead>
<tr>
<th>Minnesota</th>
<th>What is the state doing?</th>
<th>What is HHS funding?</th>
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<tbody>
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<td></td>
<td>▪ Broaden Medicaid ACOs to include behavioral health, long-term support services, and social services</td>
<td>▪ Support for data analytics and exchange</td>
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<td></td>
<td>▪ Planning Accountable Communities for Health</td>
<td>▪ Direct support to providers for transformation</td>
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<td></td>
<td>▪ Transformation Center for rural primary care practices</td>
<td>▪ Design Accountable Communities for Health</td>
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<td>▪ Technical assistance to standardize ACO metrics, payment methodologies</td>
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<td>Oregon</td>
<td>▪ Expand coordinated care organization model to cover state employees</td>
<td>▪ Design assistance and project management</td>
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<td>▪ Enhancements to the state Transformation Center that will disseminate best practices among CCOs and other health plans</td>
<td>▪ Infrastructure support</td>
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<td>▪ PCMH initiative</td>
<td>▪ Technical assistance to providers</td>
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<td>Massachusetts</td>
<td>▪ Expand Primary Care Payment Reform Initiative (MassHealth)</td>
<td>▪ Advance analytics</td>
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<td>▪ Data Infrastructure for LTSS</td>
<td>▪ Support staff for Transformation Center</td>
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<td>▪ Establish a statewide patient experiences of care measurement strategy</td>
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**What is HHS funding?**

- Support for data analytics and exchange
- Direct support to providers for transformation
- Design Accountable Communities for Health
- Technical assistance to standardize ACO metrics, payment methodologies
- Design assistance and project management
- Infrastructure support
- Technical assistance to providers
Take away messages

• SIM engaged 25 states in transformation efforts in 2013
• Plans for expansion in 2014
• States have the ability to develop and execute transformation plans
• Leveraging federal resources
• Long journey; this is just beginning
Questions?
Contact Clare.Wrobel@cms.hhs.gov or StatelInnovations@cms.hhs.gov