Community Care Central Colorado: 
A Regional Care Collaborative Organization

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Colorado’s Accountable Care Collaborative

- Serves 958,000 Coloradans
- 22% of the total population
- $29-$33 million net savings in 2014
ACC Goals

• Improve Health
• Pay for Value
• Celebrate Regional Differences
• Integrate Medical, Behavioral, and Social Services at the Local Level
An Organic ACO

Collaboration

- 23-year-old coalition
- Built on a foundation of trust aligned with mutual values and goals
- All major health care providers are members, with executive leadership actively engaged
Based in the Community

Core Tenants

• Keep Health Care Local
• Don’t Build It
• Delegate
Innovation

The box is no longer a box
Working Together for Change

• Distributed $8.5 million to local Medicaid providers
• Established Pay-for-Performance programs
• Innovating in behavioral and medical health care integration
• Supporting providers in medical home & medical neighborhood implementation
Investing in Change

- Delegated care coordination: 20%
- Cooperation agreement: 26%
- Care management software: 15%
- Pilot programs: 4%
- Other program services: 5%
- Contract Services: 1%
- PCMP incentive payments: 4%

Improving the Health of the Community through Collaboration
Rapid Cycle Innovation

- CARES program
- Specialty protocols
Challenges/Opportunities

• Sharing Data
• Coordinating Systems of Care
• Payment
Technology with Purpose

- Health Information Exchange Demonstration Project
  - Bi-directional from ambulatory to acute
  - Working with CORHIO
- Population Health
  - Data analytics using clinical and claims data
To be successful, we must own and mine our data!

- Understand the needs of the community
- Create longitudinal patient medical records
- Providers use records to improve care, communicate care plans, and integrate systems
- Appropriate agencies have access to de-identified population-based data to manage population health
Foster a Culture of Change

Care Coordination/Integration of Care

- What we’re doing
- Where we’re going
  - SIM
  - Beyond integration to interoperability
Care Coordination Model

- Care Managers
- BHO
- Social Service Providers
- Service Center
- Paramedics
- Home Health
- Navigators
- Hospice

Quality
- ER Visits
- Re-Admits
- Radiology Exams
- PCMP Medical Home Audit

Care Management
- Assessment Tools
- Levels IV, V, VI
- Plan of Care
- Behavioral Health
- COUP Program

Safety
- Med Rec
- Environment
- Behavioral
- Social
- Member Activation

Disease Management
- Heart Disease
- COPD
- Asthma
- Diabetes Type II
- Chronic Pain
- Substance Abuse
- Depression
- Tobacco Cessation

RCCO MEMBER
The Way Care is Paid For Determines How Care is Delivered

- Value over Volume
  - Capitation for Behavioral Health
  - Fee-for-Service for Medical
- ACC 2.0 Resolution
Policy Levers

- Continued funding for innovation
- Flexibility in regulation
- Accountability in a learning environment
- Data sharing between behavioral and medical providers, including substance use information
- Continue Medicare payment “bump”
- Incentives for patients to promote engagement