



# Franciscan Alliance ACO

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# What is an Accountable Care Organization (ACO)?

- A provider-led organization whose mission is to manage the full continuum of care and be accountable for the overall cost, quality and outcomes of care for a defined population.
- ACO providers accept joint responsibility.
- Achieving 33 Quality Measures across 4 domains
  - Patient experience
  - Care coordination and patient safety
  - Preventive health
  - At-risk populations

# Medicare ACOs

➤ In 2012, the Centers for Medicare & Medicaid (CMS) began the government-sponsored ACO programs:

- **The Pioneer ACO Program**

January 2012

- **The Medicare Shared-Savings Program (MSSP)**

April 2012

July 2012

January 2013

January 2014

January 2015...

# Becoming an ACO: The Results

## ➤ January 1, 2012

Medicare Pioneer ACO – one of 32 awarded nationally

## ➤ July 1, 2012

Franciscan AHN ACO, LLC – CMS MSSP ACO

## ➤ January 1, 2013

Franciscan Union ACO, LLC – CMS MSSP ACO

# Becoming an ACO: The Results

## ➤ January 1, 2013

Medicare Pioneer ACO Expansion to NIR

## ➤ January 1, 2014

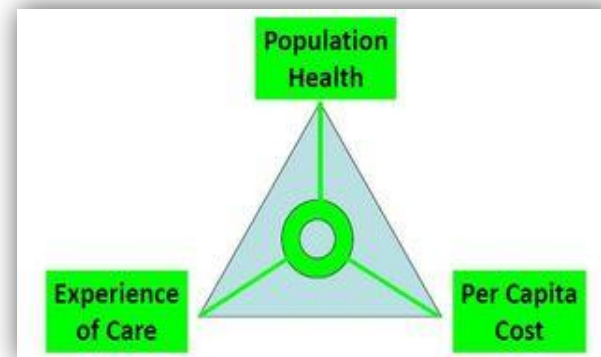
Medicare Pioneer ACO Expansion to WIR

## ➤ January 1, 2014

New MSSP Partnerships

# The ACO Goal & Our Model for Results

- The “Triple Aim” - Goals of Accountable Care:
  1. Better population health
  2. Improved quality/care experience
  3. Lower costs
- Core elements for this model include the following:
  1. Organizational Platform Development: Structure & Function
  2. Care Management
  3. Support Services
  4. Payer Discussions



# Characteristics of ACOs

## What are some features of ACOs that help achieve the stated goals?

- Partnerships among providers
- Coordinated, high-quality care
- Patient-centered
- Data & information-sharing

# Franciscan ACOs

- In 2013, the Franciscan Alliance ACO currently serves more than 60,000 Medicare beneficiaries in Indianapolis and central Indiana.
- Beneficiaries attributed to the ACO maintain the ability to see any doctor or healthcare provider, as well as the full benefits associated with traditional Medicare.



# Franciscan ACOs

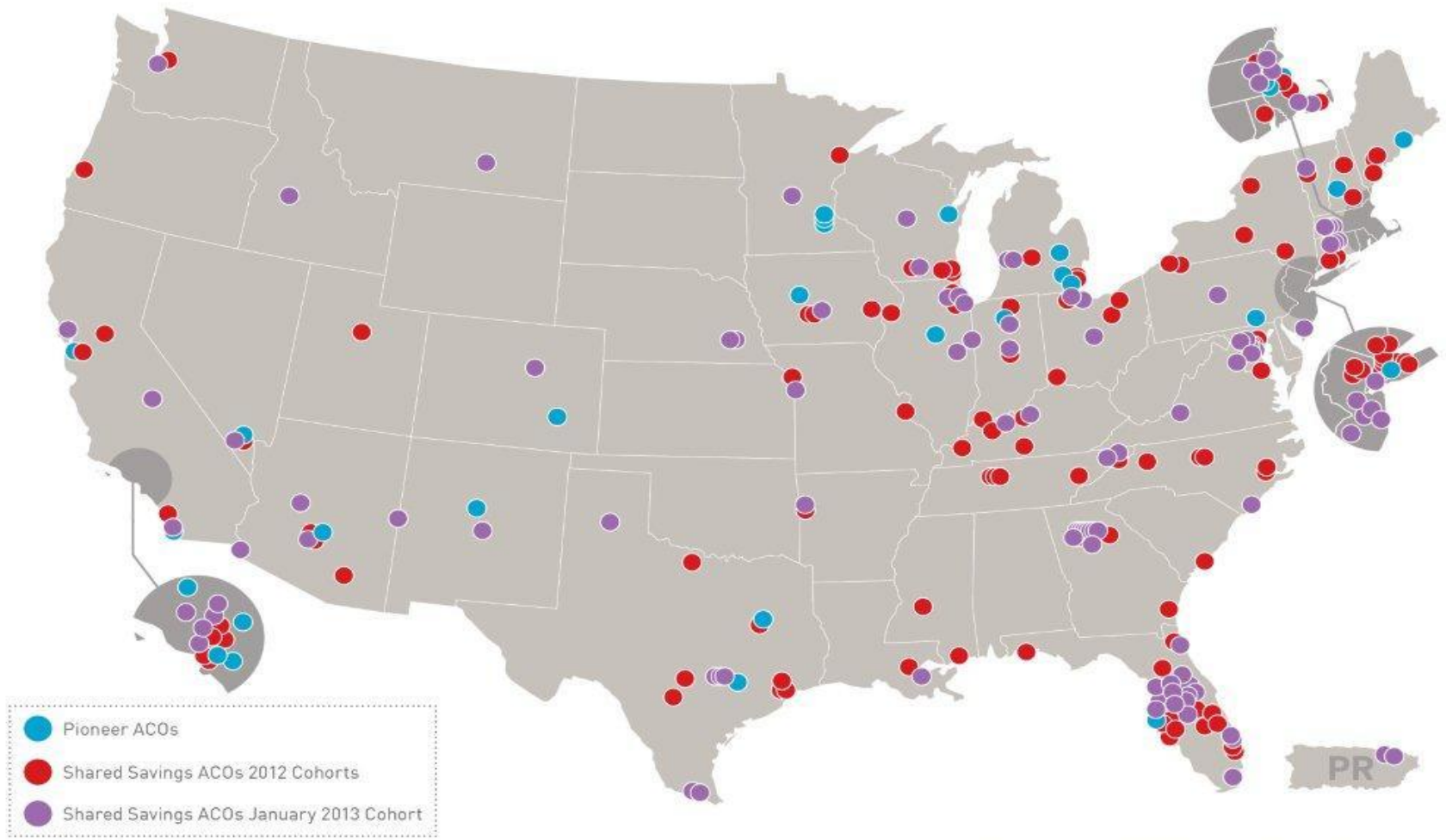
➤ The added benefit of a more coordinated care experience. This includes:

1. Coordination of preventive health services
2. Support for persons with chronic health conditions, such as diabetes, renal disease and congestive heart failure
3. Assistance with social needs, such as transportation and/or nutrition

# How it Works...

- ACO submits list of ACO providers
- Receive “attributable lives”
- Receive “benchmark” for early spend
- Receive claims history on lives
- Data analysis
- Management & Outreach!
- Year-end reconciliation
  1. Current population spend < anticipated spend (benchmark)
  2. ACO reports on 33 Q metrics
- Savings will be shared by Medicare and ACO
- Up to ACO to determine distribution of dollars

# Medicare ACO Initiatives



Source: Centers for Medicare and Medicaid Services; Health Care Advisory Board analysis.

# Questions?





# Behavioral Health Care Management

**Kim Kolthoff, RN, CPUR**

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Central Indiana Region

# Behavioral Health Care Management

- The Pioneer ACO is comprised of a Medicare population of mostly individuals over the age of 65.
- Those in this age category typically are recently retired or widowed so many have limited support systems.
- Loneliness can sometimes lead to unhealthy behaviors being used as a form of comfort.

# Behavioral Health Care Management

- A fair number have been identified having issues with prescription and substance abuse.
- The population is uncomfortable walking into a facility or meeting with a mental health professional due to connotation.

# Behavioral Health Care Management

## Overall findings for the first year in the Pioneer ACO:

- Lack of depression screenings being performed in the primary care physician offices.
- Significant need for education related to depressive signs, symptoms and treatment.



# Behavioral Health Care Management

## Overall findings for the first year in the Pioneer ACO:

- Providers are in need of education on both how to administer the PHQ-9 and what to do with findings.
- Frequent emergency room visits due to fear of being alone or a cry for attention.
- We commonly hear, “the only time my phone rings is when you are calling to check on me.”

# Behavioral Health Care Management



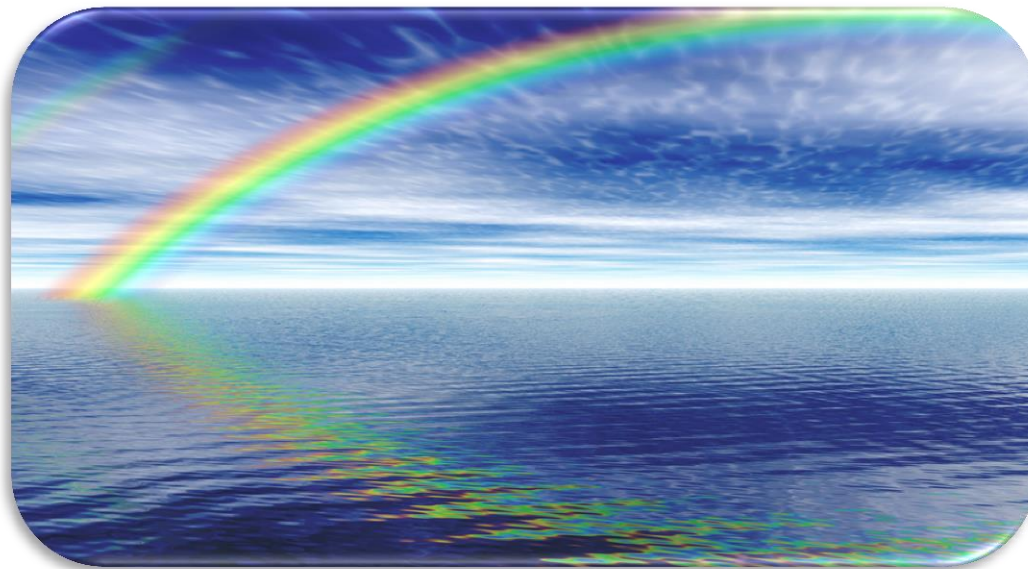
# Behavioral Health Care Management

## Next steps...

- Examples of our current needs
  - Provide access to our physician practices for behavioral health issues.
  - Offer insight to care management team regarding how to deal with difficult behaviors.

# Behavioral Health Care Management

The journey toward geriatric behavioral wellness must begin somewhere but their needs are infinite.....



# Behavioral Health Care Management

- Plan for intensive education for providers and staff in screening for depression and signs that require immediate action.
- Providers must be offered a direct contact that can provide behavioral health counseling whenever it may be needed in the office or after hours.
- The Franciscan Pioneer ACO Care Management team does have Social Workers who have a behavioral health background but the volume is too great in order to accommodate everyone's needs.

# Behavioral Health Care Management

- The BH Social Worker will be referred to as a “Wellness Coach” to our beneficiaries in order to remove reluctance to engage due to the mental health stigma commonly encountered.
- We also have identified a need to have someone available within the physician offices to offer the same support but it is cost and staff prohibitive at this time.

# Behavioral Health Care Management

**This could be a wonderful opportunity for all of you to become more involved in the Accountable Care movement!**



# Questions

