

Health Home Update June 2015

Background:

- The Health Homes program was implemented July 1, 2013.
- Health Homes is optional for states through the Affordable Care Act (ACA).
- All Medicaid recipients who have either 2 chronic conditions or one chronic condition and one at-risk condition or a severe mental illness or emotional disturbance are eligible for the program.
- Program is voluntary.
- Recipients are provided six core services not reimbursed through Medicaid fee-for-service.

Participation:

- As of May 26, 2015, 6,014 Medicaid recipients are participating in Health Homes.

Type HH	Tier 1	Tier 2	Tier 3	Tier 4	Total
Community Mental Health Center	12	239	400	107	758
Indian Health Service	8	1,127	648	286	2,069
Other Clinics	76	1,849	874	388	3,187
Total	96	3,215	1,922	781	6,014

May 2015 – 6,014 participating

- **Tier 1: 15,603 eligible (not priority high cost/high need claimants).**
 - 96 enrolled
- **Tiers 2 – 4 – high cost/high need target population**
 - 12,108 eligible
 - 5,918 actively enrolled
 - 2,140 individuals have opted out because there is no PCP Health Home in the area or their provider was not a health Home.
 - Additional recipients have opted-out for other reasons
 - 75-80% of the highest cost/highest need recipients who have a Health Home in their area are participating in the program.

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Provider Capacity:

- Current number of Health Homes- 111 serving 121 locations
 - Federally Qualified Health Centers = 24
 - Indian Health Service Units = 11
 - Community Mental Health Centers = 11
 - Private Clinics = 65
- Current number of designated providers - 553 unduplicated, 596 duplicated.
- Focus on increasing provider capacity in the following counties: Yankton, Davison, Pennington, Brown, Roberts, Faulk, Custer, Fall River, Butte, Lawrence, Lake and Meade.

Other Updates:

1. Request for Proposal

- Health Management Associates was recently selected to conduct a Health Home Performance Analysis.

2. Quality Assurance Review II

356 medical records were reviewed. Review looked at care plans, documentation of the mental health and substance abuse screenings and integration into the care plan if positive, and follow-up after ER visits.