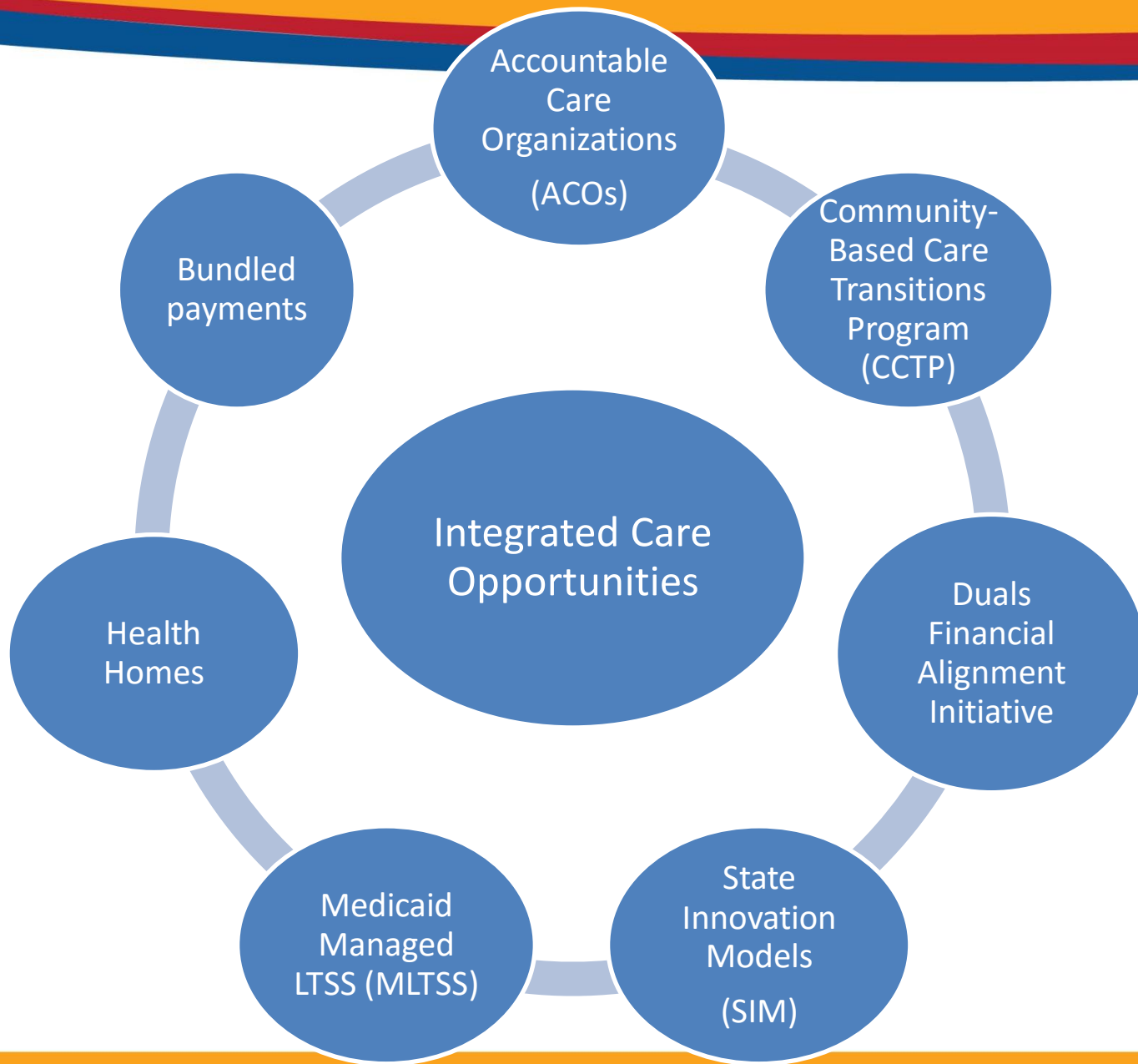




Integrated Care and CBO Business Acumen: Where Are We Now?

Marisa Scala-Foley

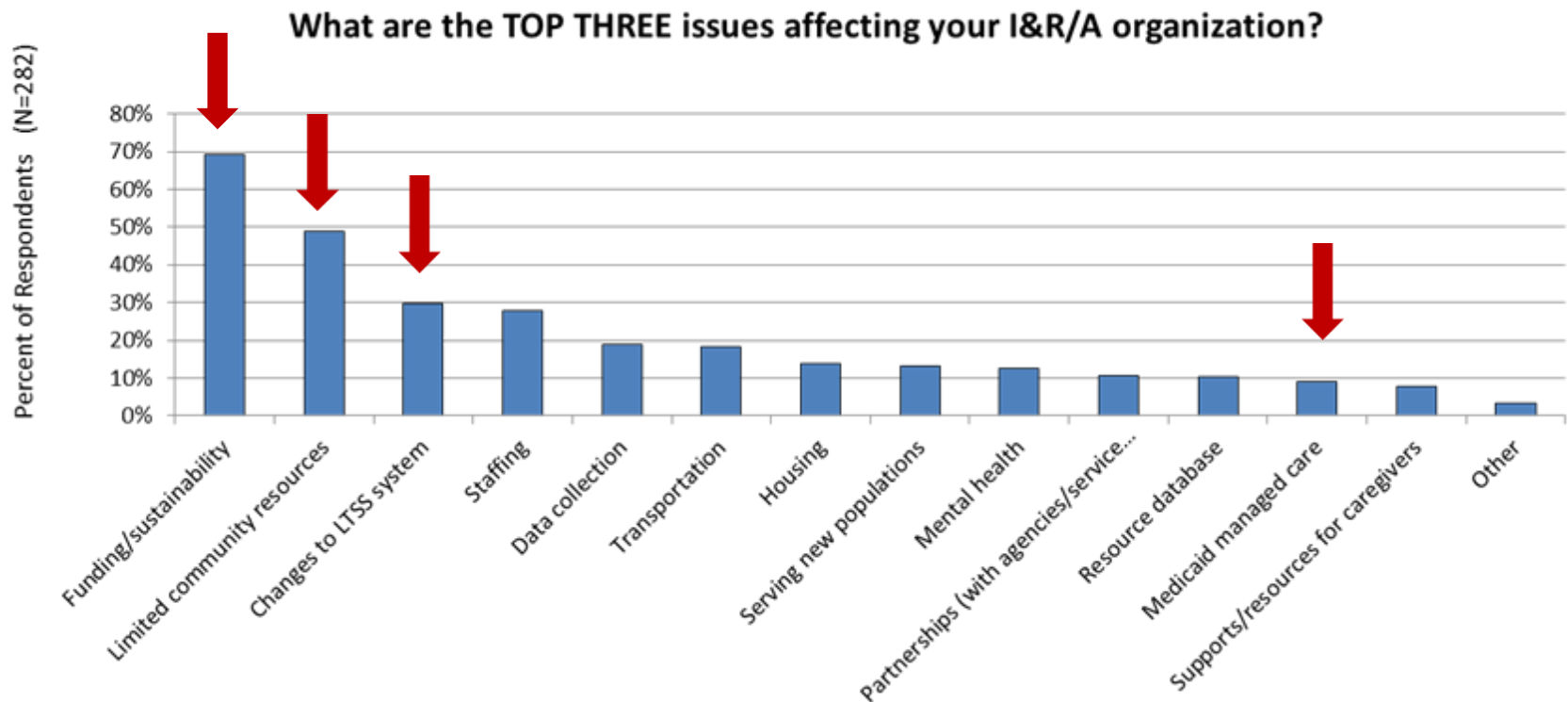






**Why does this business acumen work matter
to aging and disability organizations?**

Concerns about sustainability & systems changes



Source: Aging and Disability 2015 Information & Referral/Assistance National Survey, National Association of States United for Aging and Disabilities (NASUAD) in partnership with the National Council on Independent Living (NCIL)

Why else?

Bottom-line:

If we don't do this, someone else will.

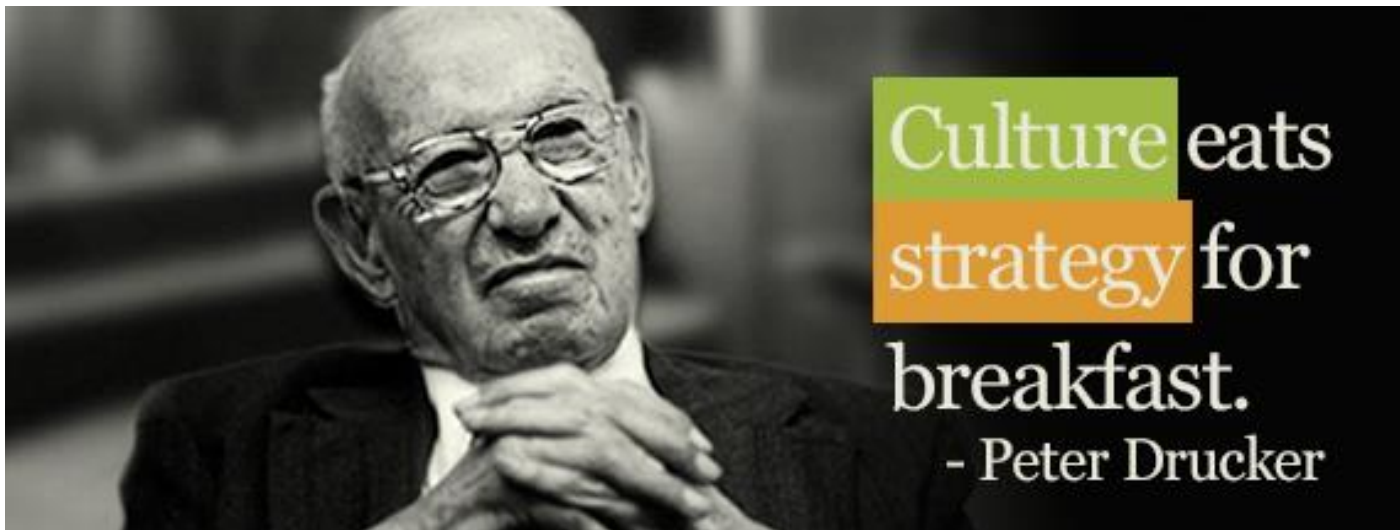
But in a lot of ways, this shift can feel like...



**One of our most important lessons from our work
related to building business capacity...**

Culture matters

It involves commitment at all levels...
Staff, Managerial, Executive, Board, Partners



Because there are very real tensions here...

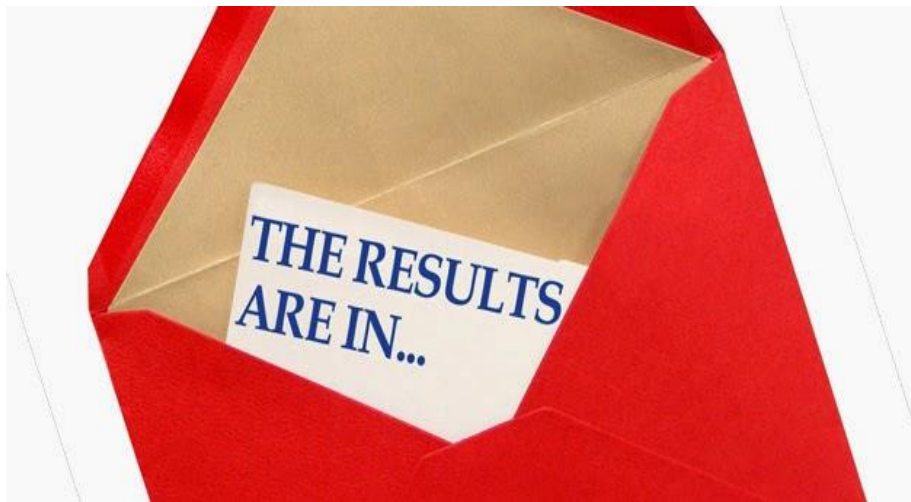
- Margin and mission
- Accreditation and overmedicalization
- Traditional partnerships and MOUs
- Aging and disability



What kind of culture are we talking about?

- An expanded view of who your customers are: Clients & payers
 - Also who your competitors and partners are
- Sales and customer service focus
- Data-driven decision making
- Flexibility
- Understanding your *real* costs
- Emphases on speed and volume
- Focus on outcomes, quality, performance and results
- Having the systems in place to support the strategy
- Vision, innovation, and excitement

ACL Business Acumen Learning Collaboratives



- *2013-14*: 9 CBO networks, 17 signed contracts, 1 MSO formed, 1 network LLC under formation, 1 organization accredited by NCQA for care management
- *2015*: 11 networks, 2 signed contracts (thus far), 2 under negotiation, 1 network LLC under formation

About the contracts

- *Most common services:* Care transitions*, in-home assessment and medication reconciliation, care coordination & navigation, evidence-based programs (EBP)
- *Most common contracting organizations:* duals plans*, Accountable Care Organizations, Medicaid health plan, physician group, state healthcare exchange



What (else) we've learned

- Relationships (and champions) are critical to the process
- Contracts take TIME
- CBOs need to match their strengths with payers' needs
- Infrastructure to deal with “back office” functions (e.g., billing, tracking outcomes, information technology) is as important – if not more important – as pricing
- Still many issues that need more work: Network service quality, performance measurement, information technology, accreditation, finding more champions within the health care sector, and more

What's next?

- New HHS delivery system reform goals:
 - Alternative Payment Models (e.g., ACOs, bundled payment arrangements):
 - ✓ 30% of Medicare payments are tied to quality or value through alternative payment models by the end of 2016
 - ✓ 50% by the end of 2018
 - Linking FFS Payments to Quality/Value (e.g., Hospital Value Based Purchasing and the Hospital Readmissions Reduction Programs):
 - ✓ 85% of all Medicare fee-for-service payments are tied to quality or value by 2016
 - ✓ 90% by the end of 2018
- “Capture and spread” learnings from business acumen efforts to larger field of aging and disability organizations
- Continue development of public-private partnerships

New opportunities (and challenges)

- Increasing recognition of importance of social determinants of health
 - ✓ Good for our networks...but also brings out competition
- Getting the contracts may just be the easy part
 - ✓ Dealing with conflict of interest, volume/scaling, IT, data access, performance measurement/management
 - ✓ Opportunity to perform and to SHINE
- Increasing number of champions:
 - ✓ Foundations
 - ✓ Health-care sector
- Continuing to increase CBO readiness for delivery system reform



Why (else) does this work matter?

A different way of thinking about this...

Building your business capacity and generating sustainable revenue sources is a form of advocacy.

Ultimately, it's about building the integrated care system that will best serve older adults and people with disabilities – one that is driven by a person's goals, needs and preferences and powered by community-based organizations.

For more information:

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<http://www.acl.gov/Programs/CIP/OICI/BusinessAcumen/index.aspx>