Hawaii’s Context & Background

• Medicaid/CHIP 325k enrollees
• 23% of population of 1.4M
• 50% of all children
• Leader in health coverage – over 90% insured for many years
  • Expanded Medicaid pre-ACA
  • Aligned expansion with ACA in October 2013
Hawaii’s Managed Care – 1994 to current

• Delivery System – History of carving in and carving out
  • Current 99.9% managed care including duals in 5 plans
    • 1994 started with moms, kids, adults (3 MCOs)
    • 2009 Aged, Blind, Disabled including Long term care (2 different MCOs)
    • 2015 Combined LTSS in with other plans
  • Carved out Behavioral Health
    • Separate health plan for specialized MH services
    • Carved in specialized MH services into all health plans
    • Carved Out specialized MH services into 1 health plan
Hawaii’s Managed Care contracting

• Performance metrics & reporting
  • Report on HEDIS measures
  • Targeted Pay for performance on 6 measures if reach targeted benchmarks
    • Immunizations, prenatal care, high blood pressure, diabetes, readmissions, getting needed care
    • In process of updating measures and methodology

• Payment reform
  • Require that increasing proportion are value based payments
    • Primary care medical home – tiered payments
    • Hospitals – away from per diems, value based
    • Vertically integrated – shared savings
    • Yr 1 – 50%; Yr 2 65%; Yr 3 80%
## Hawaii’s goals for Health & care: Healthy Families & Healthy Communities

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<thead>
<tr>
<th>Social Determinants of Health</th>
<th>Beyond clinic walls:</th>
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<tbody>
<tr>
<td></td>
<td>1 Where we live and work; our education</td>
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<td></td>
<td>2 Our families and community support</td>
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<td>3 Our zip code</td>
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<tr>
<th>TRIPLE AIM</th>
<th>Better Health</th>
<th>1 Population health</th>
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<tr>
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<td>Better Care</td>
<td>2 Integrated, transformed delivery system</td>
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<td>Lower costs</td>
<td>3 Efficient and safe care</td>
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<th>Health Equity &amp; Health Disparities</th>
<th>People’s needs are met considering:</th>
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<td>1 Racial/ethnic background</td>
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<td>2 Their geography</td>
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<td>3 Economic situation</td>
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Mohr Peterson
Considerations & Questions

• Integration of Behavioral Health
  • What are the best ways to promote integration of behavioral health in medical system
    • Payments (FFS for services trying to promote? Value payments?
    • Coordination (small single provider practices)
    • Provider supports (training, provider to provider consults)
    • Workforce – concentrated & scarce

• Social Determinants: Housing, Jobs, Education, Social Supports
  • How does one value social determinants when “outcomes” years away? Difficult to impact & measure? When service is not “encounterable”? 
  • How does one transform a health care delivery system to a “healthy communities and families system? 
  • Examples: Homelessness – housing supports; Education – Performance metrics for kindergarten readiness(?); Social supports & rates (cat, air conditioners to sneakers; providers – community health workers; delivery system – telehealth)