



# LEADERS IN INTEGRATED PRIMARY CARE

## Fall 2016 Newsletter

Welcome to our inaugural CHPA member newsletter! We want this newsletter to be a brief, informative vehicle to keep all members up-to-date on our activity and growth. We appreciate any feedback or questions!

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## General Membership Meeting:

Our next CHPA General Membership meeting will be held after the CCHN Board Meeting at the January Triannuals in Denver on January 13<sup>th</sup>, 12 – 1:30pm. We hope you will join us during this time. We will be providing updates and discussing the following:

- ◆ Report out on each line of Business
- ◆ Coverage of various Contract Opportunities
- ◆ 2017 Medicare Shared Savings Program (MSSP)
- ◆ ACO Programs and passive enrollment
- ◆ Interdependencies with CCHN and CCMCN
- ◆ Election of Directors to the Board
- ◆ 2017 Dues

## Election of Directors to the Board:

CMS requires that 75% of the participants are governing the Medicare Shared Savings Program (MSSP) on our board. CHPA will be adding one Director seat in 2017 to meet these requirements. In addition to this Director position, Ross Brooks and Simon Smith's Director positions are both up for re-election. Simon would like to continue on the Board and would like to be considered for re-election. Due to other commitments, Ross has nominated a candidate for consideration for his position. Their current terms expire in January, and will renew for a three year term (January 2017 through January 2020). If you have any interest in a position on the CHPA Board, or would like to make a nomination, please let Kerry Cogan know before December 9, 2016.

## 2017 Medicare Shared Savings Program:

CHPA has completed our 3rd round of Request For Information with CMS for the Medicare Shared Savings Program (MSSP) application for 2017. There were no findings or requests for more information, so we are in good standing to be awarded the CMS designation of ACO and the MSSP. We will receive a final decision in late November.

There will be 11 CHCs participating in the MSSP program. CHPA needed to have a minimum of 5,000 beneficiaries per year for the last 3 years to be awarded the MSSP ACO designation. Based on the most recent CMS' attribution of patient lives to our network, we have the following beneficiary counts:

- ◆ Estimated assigned beneficiaries in 2014: 6,396
- ◆ Estimated assigned beneficiaries in 2015: 7,902
- ◆ Estimated assigned beneficiaries in 2016\*: 7,914

We appreciate your assistance during this process; and we will bring you more information on MSSP at the January General Membership Meeting.

## CHPA's Current Portfolio Offerings:

Since CHPA's inception, there's been several contract opportunities developed for the membership, and we are still building a portfolio of contracts. Our current contract offerings include the following plans:

- ◆ **Denver Health Medical Plan** – exchange product, *finalizing Medicare Advantage product, CHP+*
- ◆ **CO Access** – CHP+ (in transition from CCHN); Medicaid teaming agreement regions 2, 3 and 5 will lead to consolidated delegation ACO agreement.
- ◆ **Anthem** – ACO program: Primary care PMPM and shared savings (upside only)
- ◆ **United Health** – Shared savings program (upside only)
- ◆ **Aetna** – ACO program: Primary care PMPM and shared savings (upside only)
- ◆ **Cigna** – ACO program; Primary care PMPM and shared savings (upside only)
- ◆ **Bright Health** – Fee for service primary care and behavioral health services
- ◆ **Multiplan** – *in final negotiation*

## BrightHealth:

CHPA is participating with BrightHealth on a fee-for-service contract for 2017 through our arrangement with Colorado Health Neighborhood (CHN). A few of our CHCs have received credentialing requests directly from BrightHealth, and this has caused some confusion.

### **Background:**

- ◆ BrightHealth is a new company, comprised of a couple of former United CEOs providing leadership and venture capital, along with leaders from Colorado HealthOp.
- ◆ BrightHealth will be on the exchange for the 2017 coverage year.
- ◆ BrightHealth will be the 2<sup>nd</sup> lowest priced product on the exchange (behind Kaiser); so we are expecting to see several patients choose this option.
  - ◇ We expect many of the same members that had Co-Op will opt for BrightHealth.
  - ◇ BrightHealth anticipates at least 20,000 lives in year one through the exchange, but project it may be higher.
- ◆ Even if you are not part of the covered service area, or don't expect high numbers of patients due to your proximity to a Centura facility, we are encouraging your CHC to participate with BrightHealth. This will ensure that any patients travelling within Colorado can see a provider in the network and not experience higher out-of-network costs.
- ◆ The 2017 covered PCP counties include; Adams, Arapahoe (limited sections), Boulder (limited sections), Broomfield, Clear Creek, Denver (limited sections), Douglas, Elbert, Gilpin, Jefferson, El Paso (limited sections), Fremont, Pueblo
- ◆ For information on the competitive provider reimbursement rates please contact [Erin Rager](#).

## H.R. 5667 Will Improve CHC Participation in ACOs

Before the end of the year, we're making a push to get Congress to pass H.R. 5667, a bill that will make it easier for FQHCs to participate in ACOs. Congresswoman Lynn Jenkins (R-KS) and Congresswoman Linda Sanchez (D-CA) recently introduced the bill, called [The Rural ACO Provider Equity Act](#), which would allow FQHCs and rural health clinics to assign their patients to ACOs under the Medicare Shared Savings Program. The Senate has already passed the bill, but we still need to build support in the House. Congress will be back for a short session after the elections, and if the bill doesn't gain the support needed for passage by then, we'll need to start over next year. Click here for a [one-page overview](#) and then [TAKE ACTION](#) and ask your Representative to cosponsor H.R. 5667. If you have any questions about the bill, please contact [federalaffairs@nachc.org](mailto:federalaffairs@nachc.org).

If you have questions or comments regarding CHPA related contracts please contact Erin Rager, Director, Payment Reform and Health Economics, at [erager@cchn.org](mailto:erager@cchn.org).

If you would like to be added to the newsletter e-mail distribution list, or if you have comments about this newsletter, please contact Jake Rosse, CCHN executive assistant, at [jake@cchn.org](mailto:jake@cchn.org) or (303) 861-5165, ext. 135.

### **About CHPA**

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*Community Health Provider Alliance (CHPA) is an accountable care organization formed around a statewide integrated system of federally-qualified Community Health Centers (CHCs) offering comprehensive care coordination and primary care services to patients, particularly in the safety net. Our CHCs unified mission is to provide access to cost-effective high-quality primary and preventative care to Colorado's low-income working families and individuals. CHPA was formed to improve care transitions and implement best practices in patient-centered medical home care coordination, to develop alternative payment methodologies and payment reform to decrease overall healthcare costs, and increase patient satisfaction. For more information about CHPA, please visit [our website](#).*