



Mental Health & Substance Abuse Advisory Committee

Blueprint for Health

March 21, 2017





Agenda March 21, 2017

- Updates & Welcome
- Developing Guiding Principles of a Shared Interest Payment
 Model Primary Care, Home Health, DA
- Initiation & Engagement in Drug Alcohol Treatment (14 days after diagnosis) current status & quality improvement
- Hub & Spoke Data Profiles
- Women's Health Initiative Screening Package



Access



Smart choices. Powerful tools.

The Big Goal:

Integrated health system able to achieve the Triple Aim

- ✓ Improve patient experience of care
- ✓ Improve the health of populations
- ✓ Reduce per capita cost growth

VT All-Payer Model Agreement

Vermont's contract with CMS to enable ACO Based Reform

CMS provides payment flexibility and local control in exchange for meeting quality, financial, and scale targets and alignment across payers

Sets forth planning milestones for future integration

Global Commitment Medicaid Waiver

Vermont's contract for how Medicaid will be administered

Allows Medicaid to participate in APM and pursue delivery system reform

Investments to support innovation and integration under the APM Agreement





Shared Interest Payment Complex Care Coordination (potential innovation)

- Design Work Led by One Care and Members & Partners
- Builds from Integrated Communities Care Management Learning Collaborative
- Team Blueprint Support
- Catalyze Action & Collaboration between Primary Care and Community Partners (Home Health, Designated Agencies, Area Agencies on Aging)

Discussion & Design Principles





Initiation & Engagement in Substance Abuse Treatment

All Payers, CY 2015

Initiation of Alcohol/Drug Treatment (Core-5a)

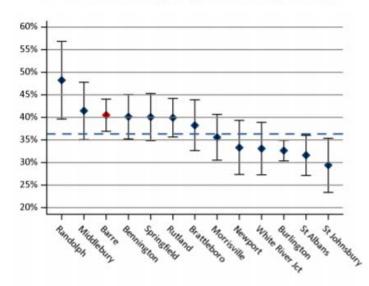


Figure 23: Presents the proportion, including 95% confidence intervals, of continuously enrolled members, ages 18 years and older, that had their initial treatment through an inpatient alcohol or other drug (AOD) admission, outpatient visit, intensive outpatient encounter, or partial hospitalization within 14 days of the diagnosis. The blue dashed line indicates the statewide

Engagement of Alcohol/Drug Treatment (Core-5b)

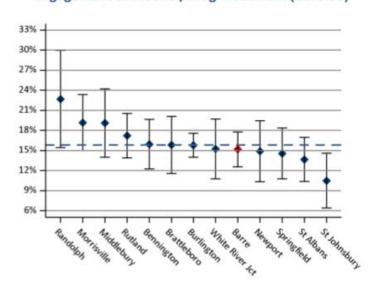


Figure 24: Presents the proportion, including 95% confidence intervals, of continuously enrolled members, ages 18 years and older, that had their initial treatment and then had two or more additional services with a diagnosis of AOD within 30 days of the initiation visit. The blue dashed line indicates the statewide average.





IET Initiation by County, VT Medicaid During CY2009-2015 Initiation & Engagement of Alcohol & other Drug Dependence Treatment

(Rates Adjusted for Medication Assisted Therapy and Behavioral Health Residential Treatment)

IET Initiation %	CY2009	2010	2011	2012	2013	2014	2015
ADDISON	47.9%	42.5%	40.3%	37.8%	47.7%	45.9%	40.3%
BENNINGTON	38.6%	41.2%	41.9%	41.7%	45.9%	47.0%	39.1%
CALEDONIA	46.6%	46.2%	39.2%	39.8%	40.0%	44.6%	45.2%
CHITTENDEN	41.6%	43.7%	39.6%	42.2%	40.6%	43.5%	40.6%
ESSEX	48.4%	27.0%	28.6%	23.1%	39.5%	29.3%	42.9%
FRANKLIN	46.4%	43.9%	38.7%	39.5%	41.6%	36.5%	34.7%
GRAND ISLE	43.8%	42.2%	30.4%	31.5%	31.0%	41.2%	33.8%
LAMOILLE	42.9%	43.9%	42.3%	41.0%	40.5%	41.9%	43.1%
ORANGE	42.3%	43.0%	44.2%	44.9%	37.9%	38.0%	48.0%
ORLEANS	37.8%	42.4%	44.0%	42.7%	41.4%	43.2%	48.3%
RUTLAND	58.5%	53.2%	50.7%	51.1%	52.5%	51.8%	50.2%
WASHINGTON	41.9%	44.4%	48.0%	43.0%	39.3%	42.3%	43.9%
WINDHAM	38.5%	38.2%	38.2%	38.7%	45.7%	42.3%	48.4%
WINDSOR	38.1%	41.7%	41.1%	39.6%	41.4%	46.8%	48.2%
Out of State/Unknown	43.0%	41.6%	46.5%	46.2%	42.0%	46.5%	45.9%
Total	43.7%	43.8%	42.5%	42.4%	42.8%	44.2%	44.0%





IET Engagement by County, VT Medicaid During CY2009-2015 Initiation & Engagement of Alcohol & other Drug Dependence Treatment

(Rates Adjusted for Medication Assisted Therapy and Behavioral Health Residential Treatment)

IET Engagement %	CY2009	2010	2011	2012	2013	2014	2015
ADDISON	13.6%	14.2%	11.6%	16.9%	18.4%	18.6%	17.7%
BENNINGTON	14.6%	15.0%	13.7%	13.6%	17.5%	21.8%	15.6%
CALEDONIA	19.9%	24.9%	18.0%	24.9%	17.1%	13.6%	17.2%
CHITTENDEN	20.9%	23.0%	16.0%	17.0%	15.8%	14.6%	16.8%
ESSEX	19.4%	8.1%	7.1%	15.4%	20.9%	8.6%	14.3%
FRANKLIN	23.6%	20.1%	13.4%	17.5%	17.2%	15.8%	16.2%
GRAND ISLE	15.6%	24.4%	10.9%	16.7%	15.5%	20.6%	8.1%
LAMOILLE	22.1%	27.7%	23.2%	20.5%	20.0%	21.6%	20.1%
ORANGE	16.2%	24.4%	18.8%	13.3%	16.8%	14.5%	20.0%
ORLEANS	18.4%	19.7%	16.7%	17.1%	15.2%	10.3%	13.0%
RUTLAND	24.9%	22.5%	20.3%	25.5%	20.6%	18.7%	19.4%
WASHINGTON	20.1%	18.9%	19.9%	19.7%	15.7%	13.8%	16.5%
WINDHAM	16.8%	16.0%	11.0%	16.4%	22.4%	18.5%	17.2%
WINDSOR	13.4%	17.7%	15.0%	15.8%	16.3%	18.1%	16.2%
Out of State/Unknown	14.0%	15.9%	20.1%	21.1%	14.8%	16.8%	16.4%
Total	19.0%	20.1%	16.6%	18.6%	17.4%	16.4%	17.0%

Medicaid Only, Draft Repot 1/30/17 Walter Ochs





2015 - Location of Initiation Events

County of Residence	PCP	ADAP OP/Res	ED	MH Pract	Inputient	HUB	Other
ADDISON	31%	27%	14%	13%	13%	3%	0%
BENNINGTON	24%	24%	19%	16%	13%	2%	2%
CALEDONIA	23%	33%	16%	9%	10%	10%	1%
CHITTENDEN	29%	29%	16%	16%	6%	3%	0%
ESSEX	27%	28%	16%	11%	3%	16%	0%
FRANKLIN	28%	29%	25%	5%	7%	2%	3%
GRAND ISLE	38%	18%	25%	7%	8%	1%	3%
LAMOILLE	24%	31%	17%	17%	6%	3%	1%
ORANGE	25%	32%	13%	10%	16%	4%	1%
ORLEANS	27%	24%	19%	8%	9%	13%	0%
RUTLAND	19%	21%	22%	16%	15%	6%	0%
WASHINGTON	34%	21%	14%	10%	11%	8%	1%
WINDHAM	25%	11%	23%	15%	15%	10%	0%
WINDSOR	25%	23%	16%	13%	18%	4%	1%
OUT OF STATE/Unknov	18%	28%	21%	13%	14%	5%	2%
Total/Statewide	26%	25%	18%	13%	11%	5%	1%

Initiation Rate	ment Rate		
2015	2015		
40.3%	17.7%		
39.1%	15.6%		
45.2%	17.2%		
40.6%	16.8%		
42.9%	14.3%		
34.7%	16.2%		
33.8%	8.1%		
43.1%	20.1%		
48.0%	20.0%		

13.0%

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48.3%

50.2%

43.9%

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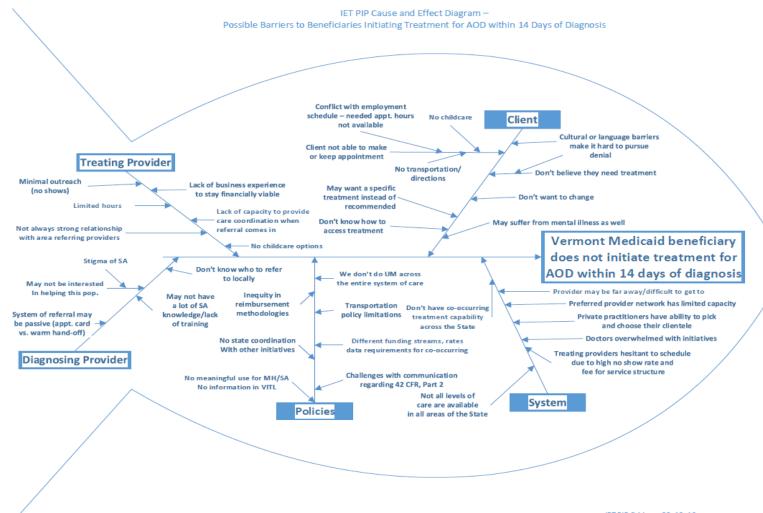
44.0%

Engage-





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Hub & Spoke Data Profiles CY 2015

Demographics & Health Status

	HUB	SPOKE	MAT Combined
Average Members	2,164	2,670	4,834
Average Age	33.8	33.2	33.5
% Female	53.8	53.6	53.7
% Maternity	5.9	8.9	7.6
% with Selected Chronic Conditions	45.8	51.0	48.7
% CRG Minor Chronic	59.1	54.9	56.8
% CRG Significant Chronic	40.9	45.1	43.2
% Depression	32.0	36.5	34.5
% Hepatitis C	20.2	13.0	16.2
% ADD	17.8	16.5	17.1
% Asthma	18.0	18.5	18.3
% Mental Health (Non-Substance Use)	68.8	74.4	71.9
% Other Substance Use	48.6	61.4	55.7
% Tobacco Dependence	58.5	62.3	60.6





Spoke Regional Profile

Period: Jan 2015 - Dec 2015 Profile Type: Adults (18+ Years)

Demographics & Health Status

	Spoke	Non-MAT Opioid Addicted	Medicaid Statewide
Average Members	2,600	1,379	72,874
Average Age	33.2	35.5	38.1
% Female	53.5	49.3	56.7
% Maternity	8.4	3.2	3.6
% with Selected Chronic Conditions	51.5	59.2	35.2
% CRG Significant Chronic	46.1	47.3	21.8
% Depression	37.6	43.9	16.9
% Hepatitis C	13.2	12.0	2.3
% ADD	17.6	15.3	5.5
% Asthma	18.4	20.2	12.0
% Tobacco Dependence	63.9	64.3	23.1
% Other Substance Use	62.7	66.3	12.5
% Mental Health (Non-Substance Use)	75.2	81.4	40.7

Table 1: This table provides comparative information on the demographics and health status of all Medicaid members of the Spoke program. For comparison, it also includes demographic and health status information for Medicaid beneficiaries with opioid addiction who did not receive treatment in either a Hub or Spoke in 2015. For context, the table provides like information for the general Medicaid population.





Total MAT and Non-MAT Expenditures

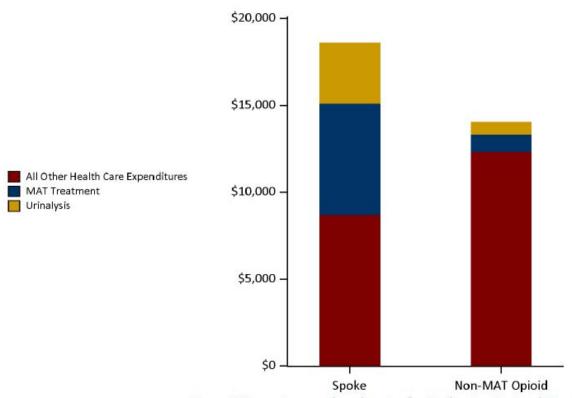


Figure 3: Presents annual crude rates for Medication Assisted Treatment (MAT) expenditures, Non-MAT expenditures, and urinalysis expenditures with expenditures capped statewide for outlier patients.





SCREENING PACKET

VERMONT BLUEPRINT FOR HEALTH | JANUARY 2017

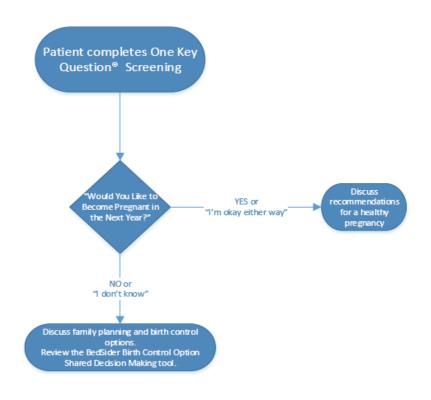
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WOMEN'S HEALTH INITIATIVE ONE KEY QUESTION® SCREENING WORKFLOW



3/20/2017

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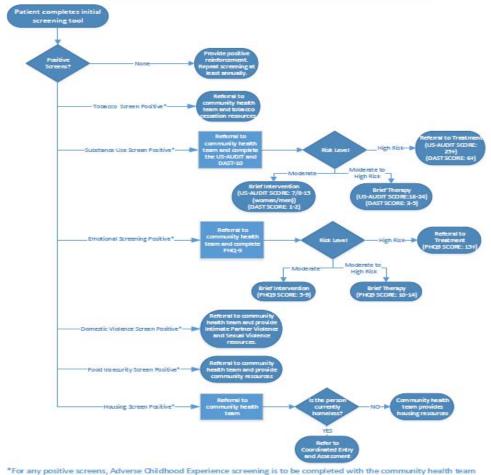


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WOMEN'S HEALTH INITIATIVE PYSCHOCIAL SCREENING WORKFLOW



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