

Improving Patient Care Medical Home Model Initiative: *Affordable Care Act and Medicaid Expansion*



**CAPT SANDRA M. LAHI, MBA, RHIA
CHIEF EXECUTIVE OFFICER
JICARILLA SERVICE UNIT
ALBUQUERQUE AREA INDIAN HEALTH
SERVICE**



Overview

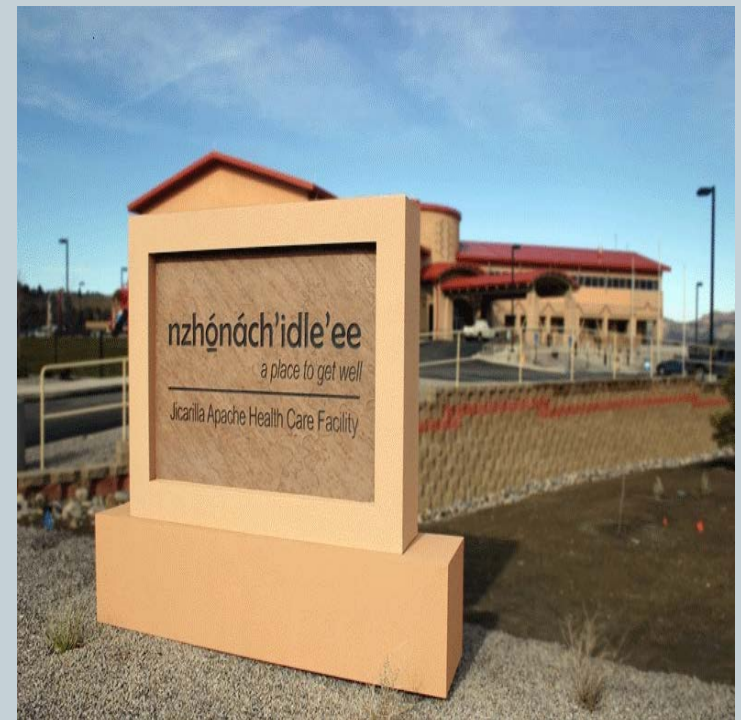


- “The” Jicarilla Service Unit
- Major New Mexico Medicaid changes effective January 1, 2014
- ACA training and Business Plans
- JSU Participation as an Improving Patient Care site
- Defining the Patient Centered Medical Home model
- Aligning ACA implementation by Patient Outreach and Education – *the beginning*
- Maintaining Patient Centered Medical Home certification

“The” Jicarilla Service Unit



New Mexico and Jicarilla Apache Reservation



Defining the Scope of Services



- Jicarilla Service Unit is an ambulatory health care facility accredited by AAAHC
- Scope of services available to patients
 - Direct care services:
 - ✦ Ambulatory patient services
 - ✦ Urgent Care
 - ✦ Preventive and Wellness Services and chronic disease Management
 - ✦ Pediatric services including Oral and Vision care
 - ✦ Adult services including Oral and Vision care
 - ✦ Public Health Nursing Services
 - ✦ Nutrition Counseling services
 - ✦ Laboratory Services
 - ✦ Radiology and Ultrasound
 - ✦ Colposcopy & LEEP (new services)

Defining the Scope of Services



- **Contract Health Services, through referral by IHS providers to non-IHS provider**
 - CHS is currently approving Priority I levels
 - CHEF cases are high in volume
 - Referrals are mostly to Farmington, NM providers
 - Emergency Room services primarily at San Juan Regional Medical Center, Farmington, NM
 - Main reasons for referrals include: Emergency Room Services, Eye complications, Gastroenterology, Orthopedics

Defining the Scope of Services – JAN managed



- **The Jicarilla Apache Nation has contracted to provide the following services:**
 - Behavioral Health Services
 - Social Services
 - Detox Center
 - Community Health Representatives (CHRs)
 - Fitness Center physical fitness programs (Walks/Runs/Zumba)
 - Diabetes Prevention and Management programs including SDPI grant

Remote Location issues



- 100 miles away from main referral center for Inpatient Services and Emergency Room
- Additional services provided at Pagosa Springs, CO – 40 miles away across the state line
- Mode of transports include EMS ambulances or helicopter medi-flights (30 minute turnaround time)
- Collaboration with monthly meetings with referral center to address issues and ongoing communication

After Hour Services



- **After hours and on weekends, the Jicarilla Apache EMS provides emergency coverage**
 - Medical direction from the EMS Medical Director – after hours
 - During clinic hours, on-call physicians at Jicarilla Service Unit with consultation with San Juan Regional Medical Center ER.
- **The Jicarilla EMS also provides emergency coverage through medical direction utilizing NM EMS**

New Mexico Major Medicaid Changes



What's new at HSD

- [New Mexico Streamlined Application](#)
 - [Behavioral Health Provider Audit Results - BACKGROUND - FINAL](#)
 - [Additional Level 1 Grant Application](#)
 - [NM Behavioral Health Collaborative Announces Next Meeting](#)
 - [New Mexico Human Services Department Announces Next Meeting of Exchange Advisory Task Force](#)
 - [First Month of Crisis Hotline Successful](#)
 - [Human Services Department Announces Centennial Care Agreement in Principle](#)
 - [MEDIA ADVISORY Cabinet Secretaries to Speak at Behavioral Health Day at Roundhouse](#)
 - [Human Services Department Announces Select of Centennial Care Managed Care Organizations](#)
 - [MEDIA ADVISORY Cabinet Secretaries to Speak at Behavioral Health Day at Roundhouse](#)
 - [NM Behavioral Health Collaborative Meets Thursday, January 10th in Santa Fe](#)
 - [New Mexico Human Services Department Announces Next Meeting of Exchange Advisory Task Force](#)
 - [Governor Susana Martinez Announces Successful Completion of First Phase of Child Support Felony Prosecution Pilot Project](#)
- [New Mexico Human Services Department Announces Next Meeting of Exchange Advisory Task Force](#)



Retrieved from www.hsd.state.nm.us website,
08/12/2013



New Mexico Medicaid “*Centennial Care*”



- To be implemented January 1, 2014 but Enrollment to begin October 1, 2013
- Downsizing from 7 Managed Care Organizations (MCOs) to 4 MCOs
 - Blue Cross Blue Shield of New Mexico
 - Molina Health Care of New Mexico, Inc
 - Presbyterian Health Plan, Inc
 - United Health Care Community Plan of New Mexico

New Mexico
Centennial Care

New Mexico Medicaid “*Centennial Care*”



- Over 50 tribally located education events scheduled for NM Tribes
- Native American patients are not mandated to enroll except for Long Term care patients
- State established Native American Technical Advisory Committee to coordinate transition.
- State is taking comments on proposed Streamlined application
 - Effective October 1, 2013
 - Single application for Medicaid, CHIP, SNAP, Cash Assistance and LIHEAP benefits

NM Medicaid Expansion Eligibility and Outreach & Enrollment



As Presented at:

**2013 ALBUQUERQUE AREA
TRIBAL CONSULTATION SESSION**

USDA FOREST SERVICE
AUGUST 6, 2013



Who qualifies for Medicaid after 2014?

- On January 1, 2014, Medicaid will be expanded to include over 150,000 more low-income adults in NM.
- Income rules will also be simplified for many people using a new standard called:
 - The Modified Adjusted Gross Income (MAGI)

Adult Eligibility for Health Coverage



Adult Eligibility for Health Coverage⁶

Household Size	<i>Adults ages 19 to 64 may qualify for:</i>		
	MEDICAID <i>free healthcare coverage</i> (for adults under 138% FPL)	EXCHANGE <i>health insurance plans</i>	
		With financial assistance (for 139-400% FPL)	Without financial assistance (for over 400% FPL)
	<i>If their household income is this much each month:</i>		
1 person	Less than \$1,321	\$1,322-\$3,830	More than \$3,830
2 people	Less than \$1,783	\$1,784-\$5,170	More than \$5,170
3 people	Less than \$2,245	\$2,246-\$6,510	More than \$6,510
4 people	Less than \$2,708	\$2,709-\$7,850	More than \$7,850
5 people	Less than \$3,170	\$3,171-\$9,190	More than \$9,190
6 people	Less than \$3,632	\$3,633-\$10,530	More than \$10,530

Child Eligibility for Health Coverage



Child Eligibility for Health Coverage⁷

	<i>Children younger than 19 may qualify for:</i>		
	MEDICAID <i>free healthcare coverage</i> (for children under 300% FPL)	EXCHANGE <i>health insurance plans</i>	
		With financial assistance (for 300-400% FPL)	Without financial assistance (for over 400% FPL)
Household Size	<i>If their household income is this much each month:</i>		
1 person	Less than \$2,872	\$2,873-\$3,830	More than \$3,830
2 people	Less than \$3,877	\$3,878-\$5,170	More than \$5,170
3 people	Less than \$4,882	\$3,883-\$6,510	More than \$6,510
4 people	Less than \$5,887	\$5,888-\$7,850	More than \$7,850
5 people	Less than \$6,892	\$6,893-\$9,190	More than \$9,190
6 people	Less than \$7,897	\$7,898-\$10,530	More than \$10,530

Medicaid Eligibility: Comparison Table



Medicaid Eligibility by Income Level¹⁹

	<i>You may qualify for:</i>			
	Medicaid for Adults 138% FPL	Medicaid for Pregnant Women 235% FPL*	Medicaid for Blind, Disabled or Elderly 250% FPL	Medicaid for Children 300% FPL*
Household Size	<i>If your monthly income is less than:</i>			
1 person	\$1,321	\$1,771	\$2,393	\$2,872
2 people	\$1,783	\$2,391	\$3,231	\$3,877
3 people	\$2,245	\$3,010	\$4,068	\$4,882
4 people	\$2,708	\$3,630	\$4,906	\$5,887
5 people	\$3,170	\$4,250	\$5,743	\$6,892
6 people	\$3,632	\$4,870	\$6,581	\$7,897

* Note that the eligibility levels for **children and pregnant women will change as of January 1, 2014** when the state sets new uniform incomes rules according to the ‘modified adjusted gross income’ or MAGI standard.

Outreach & Enrollment Programs



- **Legal Requirements:** Both the state and federal law require states to do outreach & enrollment assistance for both Medicaid and the Exchange/Marketplace:
 - Medicaid Enrollment & Outreach
 - Simplified Enrollment Process
 - Exchange Outreach & Enrollment
 - Native American Service Center *(still pending)*

Outreach & Enrollment Programs

Program	Description & Activities	Qualified Individuals/ Organizations
Navigators (Exchange)	<ul style="list-style-type: none"> • Provide in person enrollment assistance. • Provide accurate & impartial information about Exchange health plans. • Public education activities to raise awareness about the Exchange. • Trained in & able to provide referrals for Medicaid. • Provide culturally & linguistically appropriate information. • Paid through grant award system funded by Exchange generated assessment revenue. 	<ul style="list-style-type: none"> • Must demonstrate existing relationships or ability to establish relationships with consumers. • Examples: Community or consumer based non-profits, Urban Indian organizations. • Meet conflict of interest standards.
In-Person Assisters (Exchange)	<ul style="list-style-type: none"> • Same duties as Navigators. • Must be trained in Medicaid & other public programs. • Provides information to consumers about Medicaid & other programs. • Created to deal with the surge in applications the 1st year of Exchange operation. • Funded by Section 1311 Exchange Establishment funds via contracts, direct hiring, or grants. 	<ul style="list-style-type: none"> • Same as Navigators.
Certified Application Counselors (CACs) (Exchange & Medicaid)	<ul style="list-style-type: none"> • Provide application & renewal assistance. • Certified through Medicaid agency. • Trained in eligibility & benefits rules for the Exchange & Medicaid. • Paid by employing organization. 	<ul style="list-style-type: none"> • Staff & volunteers in Exchange and Medicaid designated organizations. • Ex: Existing staff at I/T/Us, such as benefits coordinators or case managers. • Exchange CACs are mandatory. • Medicaid CACs are optional (unknown if NM will use Medicaid CACs).
Consumer Assistance Program (Exchange & Medicaid)	<ul style="list-style-type: none"> • Help consumers enroll in coverage, file complaints and appeals against health plans, educate consumers about their rights, and tracks consumer complaints. • Funded through grants. 	<ul style="list-style-type: none"> • Wide variety of organizations & entities might qualify. • Current grantees include SWLC and NMLA. • CAPs may use funds to assist with Medicaid enrollment & problem resolution.

Funding for Assistance Programs



Type of Worker	Who's In Charge?	How Funded?	Program Status in NM
Navigator	Exchange	Cannot be paid with federal funds	Probably not until 2015
Assister	Exchange	Paid exclusively with federal funds	\$6.5 million funding request; RFI out by July
Certified Application Counselor	Employer (i.e. hospital, clinic)	No government funds; paid by employer	Training launches in 2013
Consumer Assistance Program	Office of Superintendent of Insurance	Paid exclusively with federal funds	\$600,000+ already received; operational now

No Wrong Door Policy



Individuals seeking health care coverage, either at via the Exchange/Marketplace or through Medicaid, should be provided information and application resources about program that they qualify for if they approach either Medicaid or the Exchange seeking coverage.

Citation



The material presented here today was provided by the New Mexico Center on Law & Poverty:

“Understanding Healthcare Reform” – A Resource Guide for New Mexico. June 2013. *New Mexico Center on Law & Poverty.*

A copy of the brochure with additional information can be downloaded from the NMCL&P website at:

www.nmpovertylaw.org.

Aligning the Service Unit with ACA



The
Affordable Care Act
will ensure that more
Native Americans
receive the
health care they need

Implementing the Affordable Care Act at JSU



- Albuquerque Area staff provided a Business Plan template – *Assignments to Staff*
 1. Assess Local Environment for Health Insurance Marketplace
 2. Assess Patient Workload and Revenue Impact
 3. Assess Current Staffing; workload levels, facility space, strategies to handle changes in workload
 4. Referrals and Prior Authorizations
 5. Eligibility Process for Medicaid Expansion and Health Insurance Exchanges
 6. Assess Data Reporting Requirements
 7. Marketing
 8. Work with Area Office to Determine How to Locally Implement Contracts or Relationships with QHPs

Implementing the Affordable Care Act at JSU



- **Business Plan template**

1. **Assess Local Environment for Health Insurance Marketplace**

1. Assign SMEs
2. Assess Premium payment possibilities
3. Assess potential competition
4. Assess customer service levels

Implementing the Affordable Care Act at JSU



- **Business Plan template**

- 2. **Assess Patient Workload and Revenue Impact**

- 2. **Determine baseline for:**

- 2. current 3rd party active users
 - 3. Current claims; track monthly
 - 4. Billed to collected
 - 5. Daily visit count, track average daily visit count monthly
 - 6. Denial management workload and track monthly

Implementing the Affordable Care Act at JSU



- **Business Plan template**

- 3. Assess Current Staffing; workload levels, facility space, strategies to handle changes in workload

- ✦ Determine baseline for:

- productivity for Patient Registration
 - Patient Benefits Coordinators
 - Coders
 - Billers
 - Denial Managers
 - Providers/Ancillary staff
 - Referral processor assistance for increased referrals (CHS)
 - Share best practices
 - Electronic process implementation
 - Inventory current services and compare against Essential health Benefits

Implementing the Affordable Care Act at JSU



- **Business Plan template**

- 4. Referrals and Prior Authorizations**

- 1. Assess Prior Authorization/Referral Process**
 - 2. Assess discharge and care coordination process**
 - 3. Assess possible changes to CHS priorities and budget**

Implementing the Affordable Care Act at JSU



- **Business Plan template**

- 5. **Eligibility Process for Medicaid Expansion and Health Insurance Exchanges**

- 5. Daily review of future appointment rosters for 3P status
 - 6. Prepare for electronic application process
 - 7. Ensure patients know that documents bring to appointments
 - 8. Assess RPMS Benefits coordinator note follow-up process

Planning for the Affordable Care Act Implementation



- **Business Plan template**
 - 6. Assess Data Reporting Requirements
 - 6. To be determined

Implementing the Affordable Care Act at JSU



- **Business Plan template**

- 7. **Marketing**

- 7. **Internal Improvements:**

- 7. Educate staff on ADA
 - 8. Provide updates on HQ/Area/SU priorities
 - 9. Ensure I H S is “provider of choice” – Customer service and patient reception
 - 10. Ensuring staffing levels meet increase need
 - 11. Incorporate Patient Care improvement initiatives

Implementing the Affordable Care Act at JSU



- **Business Plan template**

- 7. **Marketing**

- ✦ **External Improvements:**

- **Consumer Education on ACA**
 - **Marketing I H S**
 - **Communications Means – Websites, social media**
 - **Consultation with Tribe and Community Members**
 - **Consult with tribal leadership on business plan**
 - **Determine approach in involving consumers**

Marketing and Implementing SWOTs



- Identifying Strength, Weaknesses, Opportunities and Threats
- Documenting a PR Marketing Plan/Campaign
 - JSU with support of the I H S Dental Support Center invited a Consultant to walk through the SWOT process for Dental
 - Outcomes included:
 - ✦ More Visibility in the Community by community group visits, Media campaigns as radio announcements, radio ads with tidbits of dental prevention information, Send post cards on first birthdays as reminders with JSU logos, Community day participation as local runs, health fairs.....
 - ✦ Getting away from the “masked provider” syndrome....

Marketing and Implementing SWOTs



- Identifying Strength, Weaknesses, Opportunities and Threats
- To expand the SWOT to both the Medical Clinic and the Optometry Clinic
- Implement booklets and handouts to share with JAN tribal programs and patients on “why” JSU should be the Patient Centered Medical Home!

Implementing the Affordable Care Act at JSU



- **Business Plan template**

1. **Work with Area Office to Determine How to Locally Implement Contracts or Relationships with QHPs**

- ✦ **Determine POC for coordination**
- ✦ **Determine which QHPs need to be contracted with**
- ✦ **Determine changes in RPMS that need to allow for 3P billing for QHPs**

Patient Outreach and Education



- JSU staff participated in many Educational conferences held within the Albuquerque Area. Including CHS, Business Office, AO and CEO
- Area CEOs participated in CEO meetings in which ACA was presented and AAO Tribal Consultation Meetings
- JSU Sponsored an ACA conference at Dulce, NM on August 8, 2013....
 - Who Should attend? ***Community Members, Directors of Health Related programs, EMS staff, BH Staff, Insurance Support Staff, Departmental Supervisors, Health Care Providers***

**Medicaid Expansion/Health Insurance Exchange Seminar
Thursday, August 8, 2013, 9:00 am – 12:00 PM
Wild Horse Casino Event Center**

**Conference Agenda
Thursday, August 08, 2013
9:00 am to 9:15 am**

Welcome/Invocation - *Ty Vicenti, President
Jicarilla Apache Nation*

9:15 am to 9:30 am

The Affordable Care Act – Health Care law passed on March 23, 2013 - Brief overview of history – *Sandra Lahi, CEO, JSU*

9:30 am to 10:15 am

Medicaid Expansion – Overview & Key Issues

Who is Eligible and How it will impact Native American Communities? – *Sovereign Hager, Staff Attorney NMCLP*

10:15 am to 11:00 am

Health Insurance Exchange – Overview & Key Issues

What is the Exchange and Special Provisions for Native Americans? – *Sovereign Hager, Staff Attorney NMCLP*

11:00 am to 11:45 am

Enrollment – Maximizing Enrollment

Requirements for Outreach and Enrollment Assistance

Key Issues for Native American Communities- *Sovereign Hager, Staff Attorney NMCLP*

11:45 am to 12:00 pm

Closing Remarks/Next Steps

Improving Patient Care



- **Add picture**

JSU Participation as an IPC site



- **Began October 1, 2010**
- **Successes included:**
 - Improved patient access with Same Day appointments
 - Improved Urgent Care usage
 - Developed Partnership with JAN Community programs
 - Implemented provider empanelment for six teams
 - Improved Access and Continuity
 - Staff involved with PDSAs improving
 - Patient Self Management Support training in place
 - Optimize the use of the Clinical Information Systems

Aligning efforts with Patient Centered Medical Home model



IPC AIM Statement

- The Jicarilla Service Unit would like to be your Medical Home – a place to get well physically, mentally and spiritually.
- As your Medical Home, we will provide caring, professional, competent, confidential and culturally-sensitive service.



Aligning efforts with Patient Centered Medical Home model



- We want to work with you in making decisions about your health and your treatment plan.
- You will have a Health Care Team who knows you and your health history.
- Seeing the same provider and team each time you come in will help you get the care you need and want.



Aligning efforts with Patient Centered Medical Home model



- Remember, the foundation for a Medical Home is the relationship between you, your family and you Health Care Team.



nzhónách'idle'ee
a place to get well

Jicarilla Apache Health Care Facility

Maintaining Patient Centered Medical Home certification



ACCREDITATION
ASSOCIATION
for AMBULATORY HEALTH CARE, INC.

grants this

CERTIFICATE OF MEDICAL HOME ACCREDITATION

to

JICARILLA SERVICE UNIT
D/B/A JICARILLA APACHE HEALTH CARE FACILITY
500 N MUNDO
DULCE, NM 87528

*In recognition of its commitment to high quality of care and substantial compliance
with the Accreditation Association for Ambulatory Health Care standards for medical home organizations.*

20106

Organization Identification Number

Margaret E. Spear, M.D.
MARGARET E. SPEAR, M.D.

Chair of the Board



FEBRUARY 27, 2016

The Award of Accreditation expires on the above date

John E. Burke, Ph.D.
JOHN E. BURKE, PH.D.

President and CEO

ASSOCIATION MEMBERS

*Ambulatory Surgery Foundation • American Academy of Cosmetic Surgery • American Academy of Dental Group Practice • American Academy of Dermatology
American Academy of Facial Plastic and Reconstructive Surgery • American Association of Oral and Maxillofacial Surgeons • American College of Gastroenterology
American College Health Association • American College of Mohs Surgery • American Congress of Obstetricians & Gynecologists • American Dental Association
American Gastroenterological Association • American Society of Anesthesiologists • American Society for Dermatologic Surgery Association
American Society for Gastrointestinal Endoscopy • Association of periOperative Registered Nurses • MGMA/ACMPE • Society for Ambulatory Anesthesia*



5250 OLD ORCHARD ROAD, SUITE 200 • SKOKIE, IL 60077
PHONE: 847/853.6000 • E-MAIL: INFO@AAAHC.ORG • WEB SITE: WWW.AAAHC.ORG



ACCREDITATION
ASSOCIATION
for AMBULATORY HEALTH CARE, INC.

grants this

CERTIFICATE OF ACCREDITATION

to

JICARILLA SERVICE UNIT
D/B/A JICARILLA APACHE HEALTH CARE FACILITY
500 N MUNDO
DULCE, NM 87528

*In recognition of its commitment to high quality of care and substantial compliance
with the Accreditation Association for Ambulatory Health Care standards for ambulatory health care organizations.*

20106

Organization Identification Number

Karen McKellar
KAREN MCKELLAR

Chair of the Board



FEBRUARY 27, 2016

The Award of Accreditation expires on the above date

John E. Burke, Ph.D.
JOHN E. BURKE, PH.D.

President and CEO

ASSOCIATION MEMBERS

*Ambulatory Surgery Foundation • American Academy of Cosmetic Surgery • American Academy of Dental Group Practice • American Academy of Dermatology
American Academy of Facial Plastic and Reconstructive Surgery • American Association of Oral and Maxillofacial Surgeons • American College of Gastroenterology
American College Health Association • American College of Mohs Surgery • American Congress of Obstetricians & Gynecologists • American Dental Association
American Gastroenterological Association • American Society of Anesthesiologists • American Society for Dermatologic Surgery Association
American Society for Gastrointestinal Endoscopy • Association of periOperative Registered Nurses • MGMA/ACMPE • Society for Ambulatory Anesthesia*



5250 OLD ORCHARD ROAD, SUITE 200 • SKOKIE, IL 60077
PHONE: 847/853.6000 • E-MAIL: INFO@AAAHC.ORG • WEB SITE: WWW.AAAHC.ORG

Maintaining Patient Centered Medical Home certification



- Jicarilla Service Unit is implementing an after hours Nursing Triage line in support of EMS after hours services.
- Continue to market services at JSU with focus on quality clinical services, access and customer service
- Staff to participate more in Community healthy initiatives and events
- Implement local radio “health care related” topics
- Develop digital videos to display on the

Questions

