Millennium

COLLABORATIVE CARE

Igniting Healthcare Change in WNY

“In other words, we’re not trying to reinvent the wheel, we’re just trying to connect the dots so the system operates better.”

- Al Hammonds, CSSBB
Executive Director

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Igniting Healthcare Change

There is a plan to create a better healthcare system in Western New York.

A collaborative of healthcare providers, physicians and community organizations across 8 Western New York counties are actively engaged in transforming the delivery of healthcare to the Medicaid community.

A dedicated, inclusive governance structure
Robust Governance and advisory established including a 16-member Community-Based Provider Board of Managers; Community Based Task Force; DSRIP Project Advisory Council; six Committees (Clinical Quality, Compliance, Finance, Governance, IT Data, Physician Steering); a Workforce Development Work Group; two Geographic Councils (Niagara Orleans Healthcare Organization and Southern Tier Council); and MAX Series Team.

The focus is on connecting each patient to the quality healthcare that is needed at the right time.

Millennium Collaborative Care, a Performing Provider System (PPS), is igniting healthcare change by partnering with physicians, healthcare providers and community-based organizations to improve the delivery of healthcare for Medicaid patients across the eight counties of Western New York. We are teaming up in five areas to create a better healthcare system for all: Acute Care, Ambulatory Services, Behavioral Health, Community Engagement and Post-Acute Care.

Why Healthcare Change?

All patients deserve quality healthcare

For a number of years there has been a movement to encourage patient-centered medical care in which patients develop a relationship with their physicians that includes quality communication and a focus on coordinating their total healthcare.

Research has shown that patients would like to be heard and that their healthcare concerns are taken seriously. So... change is needed.

There is a need to reinvest in healthcare spending

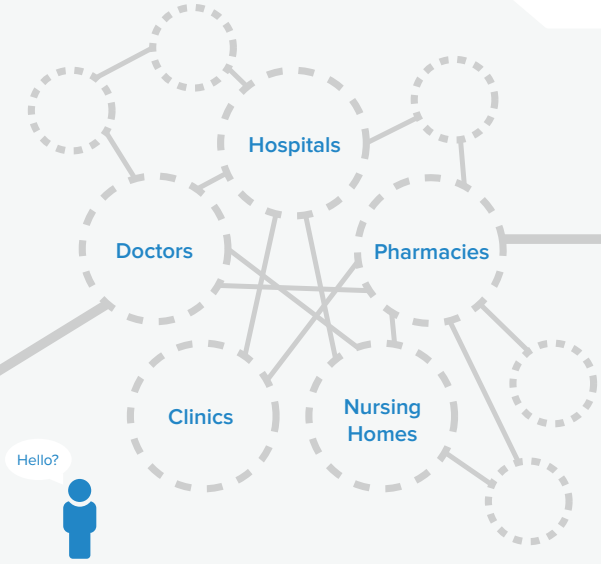
The first step is to reduce avoidable hospital use by 25 percent over five years. We can do this by reducing hospital re-admissions and the use of hospitals as the first choice for medical care. By saving costs we can reinvest in providing each patient with quality health care.

There is value in focusing on quality care

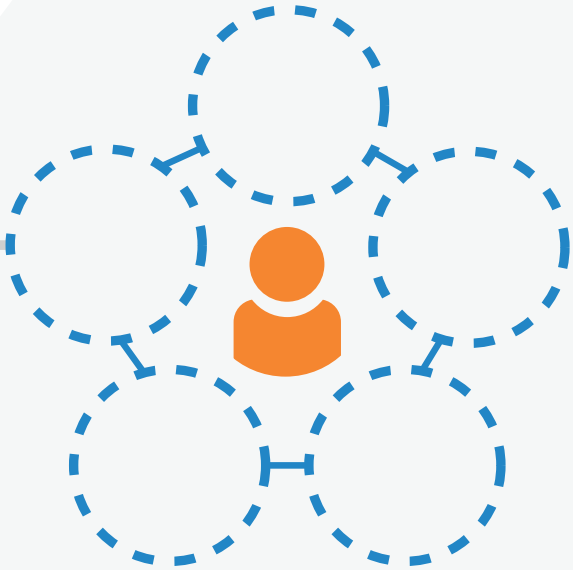
More services are not always better. Healthcare change means payments for services will be based on the quality and the value of the healthcare patients receive instead of the amount of services rendered. This Value Based Payments (VBP) system requires providers to work together to improve patient care.

Medicaid benefits **6** million in NY every year

Medicaid Costs NY **6** billion each year



The Value Based Payments system requires providers to work together to improve patient care.



Value Based Payments will place patients in the center of healthcare.

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A brief overview of Medicaid history

1965

Medicaid gave millions access to healthcare

Medicaid became law under President Lyndon Johnson. Millions of Americans gained clinical access to healthcare, regardless of economic status.

2010

President Barack Obama signed the Patient Protection and Affordable Care Act

Medicaid expanded when President Barack Obama signed the Patient Protection and Affordable Care Act, providing Medicaid coverage for all non-Medicare eligible individuals under age 65.

2014

Governor Andrew Cuomo introduced groundbreaking healthcare waiver in New York State

On April 14, 2014, Governor Andrew M. Cuomo announced that New York has finalized terms and conditions with the federal government for a groundbreaking waiver that will allow the state to reinvest $8 billion in federal savings generated by Medicaid Redesign Team (MRT) reforms. The MRT waiver amendment will transform the state's health care system, bend the Medicaid cost curve, and ensure access to quality care for all Medicaid members.

2014

Millennium Collaborative Care was founded

In order to implement necessary changes Governor Cuomo established Performing Provider Systems across New York State. Millennium Collaborative Care was identified as one of the Performing Provider Systems in Western New York. Millennium launched with over 230,000 attributed lives and today has over 258,000 across eight counties.

2015

Medicaid Turns 50

The Medicaid system had become less efficient and more complex. There was a need to lower system costs and improve patient satisfaction.

Healthcare Change that will impact generations

The Work Begins

Governor Cuomo announced that the Delivery System Reform Incentive Payment (DSRIP) program, which enables New York to invest $7.3 billion of Medicaid savings over the next five years into transforming its health care system, has now made specific funding allocations to 25 provider networks across New York state. DSRIP is a statewide initiative to fundamentally restructure the health care delivery system by reinvesting in the Medicaid program, with the primary goal of reducing avoidable hospital use by 25 percent over five years.

Recognized as a Community Engagement Leader

Millennium has been recognized by New York State as the #1 leader in Community-based Engagement and Collaboration

Value Based Payments - A Focus on Quality Care

Healthcare change means payments for services will be based on the quality and the value of the healthcare patients recieve instead of the amount of services rendered. This system requires providers to work together to improve patient care.

How Are We Creating Change?

It starts with talking with each other; to share the good parts of what is working in our current healthcare system and then developing a plan to implement the best health care practices.

Millennium Collaborative Care is collaborating with physicians, healthcare providers and community-based organizations over eight counties to improve the delivery of health care for medicaid patients.

The focus is for each patient to receive quality healthcare from the right provider at the right time.

1. Allegany
2. Cattaraugus
3. Chautauqua
4. Erie
5. Genesee
6. Niagara
7. Orleans
8. Wyoming

“Research has shown that opportunities exist system-wide to improve patient care through increased collaboration, clinical integration, and implementation of new ways of coaching and treating patients.”

- Juan Santiago
Administrative Director

“It starts with a common belief – All patients deserve quality healthcare.”

- Dr. Anthony J. Billittier IV, MD, FACEP
Chief Medical Officer

We are teaming up in five areas to create a better healthcare system for all:

Acute Care
Ambulatory Services
Behavioral Health
Community Engagement
Post-Acute Care

“We are observing and sharing information about what parts of our current healthcare system work and implementing a plan based on best practices.”

- Michele Mercer, RN
Chief Clinical Integration Officer

1 Acute Care

The Acute Care Team is creating a medical patient care plan beyond the emergency room

The Millennium Acute Care Team is working in the hospital environment as a caring partner to assist hospital teams with connecting patients with the best healthcare provider.

Together we will be able to achieve 25 percent reduction in avoidable emergency room visits and hospitalizations.

Emergency Department Triage

The Acute Care Team is working to develop an evidence-based care coordination and transitional care program that will assist patients to link with a primary care physician/practitioner, and support patient confidence in understanding and self-management of personal health conditions.

2 Ambulatory Services

Improving care coordination for each patient

Millennium's Ambulatory Services Team is focused on primary care practice transformation, with a strong emphasis on creating Patient Centered Medical Home for primary care practices. The Team is improving the coordination of care for each patient by working with Primary Care Practices along with key clinical partners and community-based organizations across Western New York.

Primary Care Transformation/ Patient Centered Medical Homes

The Patient-Centered Medical Home (PCMH) is a patient primary care office that facilitates partnerships between individual patients, and their personal physicians, and when appropriate, the patient's family. The patient-centered medical home is a way of organizing primary care that emphasizes care coordination and communication to transform primary care into "what patients want it to be."

Medical Homes work because:

They lead to higher quality and lower costs, and can improve patients' and providers' experience of care.

PCMH
The PCMH model can create greater value for patients, providers and payers. Patients are given better access to care that is coordinated.

Because of this, many factors that drive up costs such as emergency department visits and in-patient hospitalizations are reduced.

The National Committee for Quality Assurance (NCQA) has recognized Patient-Centered Medical Home (PCMH) as the most widely-used way to transform primary care practices into Medical Homes.

Health Homes
Health Homes provide Free community care management services to Medicaid recipients to help ensure their medical, mental health, and substance abuse treatment needs are being met.

Health Home enrollees received a dedicated Care Manager who oversees and provides access to all services an individual needs to stay healthy, out of the emergency room and out of the hospital.

3 Behavioral Health

Improving behavioral healthcare delivery to high risk patients

The Behavioral Health Team, working in partnership with behavioral health and community-based organizations across Western New York's eight counties; is focused on the integration of primary care and behavioral health services, community crisis stabilization; and on the advancement of mental and emotional behavioral well-being.

Behavioral Health Crisis Response

Millennium's Behavioral Health Team is striving to collaborate with our partners to provide readily accessible behavioral health crisis services across WNY's eight counties that will allow patients access to an appropriate level of service and providers.

Primary Care and Behavioral Health Integration

Millennium's Behavioral Health Team is working with our partners to integrate mental health and substance abuse with primary care services to ensure coordination of care within the population requiring these services. This integration effort includes assessments by Millennium Transformation Specialists and the implementation of integration training plans.

Promote Mental, Emotional, and Behavioral Well-being

The overall objective is to expand evidence-based programs and practices in the schools and communities to help prevent substance abuse and promote positive mental health. In addition, a comprehensive public awareness campaign is in development that aims to deter negativity towards those with mental health and/or substance abuse issues.

4 Community Engagement

We empower diverse communities

Millennium Collaborative Care is dedicated to promoting and empowering the Western New York community by engaging local, state, regional, and community partners through activities, resources, and linkages to improve health and promote wellness behaviors.

Maternal and Child Health/Premature Births

The Millennium Team's objectives are to reduce avoidable poor pregnancy outcomes and subsequent hospitalization as well as reduce premature births and improve maternal and child health through the first two years of a child's life.

Patient Activation Measure®

The Millennium Team's objective is to utilize the Patient Activation Measure® (PAM®) to identify the motivations of recipients (uninsured, non and under-utilizing populations) to seek healthcare. The Team is also identifying Medicaid consumers who are either uninsured and/or have not seen a doctor in two years, and helping them get connected with a Primary Care Physician.

Million Hearts® Cardio Vascular Disease Project

The Millennium Team is actively working in our communities to support implementation of evidence-based best practices for disease management in medical practices for adults with cardiovascular conditions.

Learn more about project updates @ millenniumcc.org

5 Post-Acute Care

Working together to prevent patient decline, ensure positive care transitions, and provide quality, evidence-based care to all patients

The Millennium Post-Acute Care Team is working in the Skilled Nursing and Home Care Settings to help lower the rates of hospital readmissions of patients and residents. Together we will be able to achieve 25 percent reduction in avoidable emergency room visits and hospitalizations.

INTERACT Hospital Homecare Collaborative Solutions

The INTERACT Program seeks to decrease rates of hospitalization among Post-Acute patients.

Advanced Care Planning and Palliative Care Committee

The objective of the Advanced Care Planning and Palliative Care Committee is to identify the issues of End-of-Life planning such as patient and provider engagement, and Advanced Directive completion for the patients. Another focus is increasing staff, patient, and family knowledge about End-of-Life issues encouraging conversations to coordinate better care for their loved ones.

Learn more about project updates @ millenniumcc.org

We are creating change...

- Millennium has engaged healthcare partner organizations, community-based organizations, and voice of customer groups representing Western New York's eight counties.
- On track to distribute: $10.1 MM – Master Participation Agreements (Contracts to Safety Net Providers)
- Over 140 Leadership staff, 800 Direct Care Staff, and 400 RNs and LPNs have been trained in the core INTERACT principles and care.
- The Emergency Department Care Triage (EDCT) project is being implemented at Olean General Hospital, the Erie County Medical Center, Kaleida Health hospitals, Eastern Niagara Hospital, and other facilities across Western New York. Each site has patient navigators dedicated to the project's goals of reducing avoidable Emergency Department utilization by 25 percent over the next four years.
- Since November of 2015, we have enrolled more than 500 mothers or expectant mothers into the Community Health Worker Home Visiting Program.
- Since August 2015, over 15,000 recipients have participated in the Millennium Patient Activation Measure® (PAM®) process to identify the motivations of recipients (uninsured, non and under-utilizing populations) to seek healthcare.
- Millennium is delivering national best practice programs such as the Million Hearts® cardiovascular disease project in partnership with the University at Buffalo School of Nursing, the Greater Buffalo United Church Ministries, and Kenneth Lee Gayles, M.D., Cardiologist, Gayles Medical; Project Champion, Cardiovascular Disease/Million Hearts®.

*Milestones as of August 2016

- Helping practices across Western New York attain Patient-Centered Medical Home (PCMH) 2014 Level 3. National Committee Quality Assurance (NCQA) Recognition - the Gold Standard for practice transformation.

- Supporting the mission of HEALTHeLink to create and maintain a secure and reliable infrastructure for the timely and accurate electronic exchange of clinical information among health care providers and others involved in the delivery of health care services in Western New York and who are connected via the State Health Information Network of New York (SHIN-NY).

- By advancing Behavioral Health Integration: Primary care settings have become a gateway for many individuals with behavioral health and primary care needs. Our team is assisting practices with Integration of mental health and substance abuse within the primary care practices, and assisting practices with referral agreements with key behavioral health specialists along with implementation of Universal Screening and Intervention tools.

Thank you!

Al Hammonds, CSSBB
Executive Director
Millennium Collaborative Care

We appreciate all whom are helping to ignite healthcare change in Western New York. We are excited for the opportunity to partner with our community to impact healthcare for all generations.

Become a partner today

The Erie County Medical Center (ECMC) is the lead entity in the Millennium Collaborative Care Performing Provider System.

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Learn more @ millenniumcc.org

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