2014 Gage Awards

Reference #	7492526
Status	Complete
Name of hospital or health system	The MetroHealth System
Name of project	MetroHealth Care Plus
CEO name	Akram Boutros, MD
CEO approval	Check here to confirm that your CEO approves of this project being submitted for a 2014 Gage Award
Submitter name (first and last)	James Misak, MD
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Within which of the two categories does your application best align?	Population Health

1. Provide a brief description of the project. (This section should resemble an abstract for a poster presentation or an abstract for a peer reviewed journal. Include an objective, data sources, study design, findings, and conclusions.)

Working with the MetroHealth System, the State of Ohio's request for a Medicaid section 1115(a) demonstration entitled "MetroHealth Care Plus" was approved by the Centers for Medicare and Medicaid Services (CMS) for the period February 5, 2013 through December 31, 2013 as a safetynet institution based coverage expansion.

MetroHealth Care Plus provides coverage to uninsured adults who have family income at or below 133 percent of the Federal Poverty Level, meet U.S. citizenship or legal immigrant requirements, reside in Cuyahoga County, and are not otherwise eligible for benefits under the Ohio Medicaid state plan.

The demonstration population of eligible individuals receives health care benefits through a defined provider network comprised of The MetroHealth System and its community provider partners and accesses care coordination through primary care patient-centered medical homes.

The demonstration's goals are to:

- •Substantially reduce the uninsured rate in Cuyahoga County
- •Improve the health status and quality of care for thousands of county residents
- •Study the behavior of a segment of Ohio's uninsured population as they obtain additional health benefits
- Expand the scope of health care services available to uninsured Cuyahoga County residents
- Increase the number of Cuyahoga County residents who will receive benefits from a regular source
- •Invest resources to further develop and expand medical home models and care coordination.

As of September 30, 2013, 25,758 individuals are enrolled in MetroHealth Care Plus.

The demographic breakdown of the membership shows that the enrolled demonstration population:

- •Is split almost evenly between males and females, with females representing 49% of the total enrolled population and males representing 51% of the total enrolled population.
- •Has 63% of enrollees over the age of 40 with the average enrollee age of 44 and the median enrollee age of 47
- •Is 48.9% Black, 38.7% White, and 8.1% Hispanic based on race information provided by only 61% of the population
- •Has 29% of enrollees reporting that they are employed, while 71% of the enrolled population reports no employment

Enrollees receive access to full spectrum health care from the MetroHealth System and community partners, including primary care, specialty care, medications and pharmaceuticals, mental health and substance abuse treatment, emergency care, inpatient care, and durable medical equipment.

MetroHealth Care Plus has reduced the uninsured population in Cuyahoga County by 18

percent and has provided cost-effective care at a per-member-per month cost of \$417.50 to date, well below the actuarial benchmark established for this population of \$582.41.

2. Describe the methods use in this project. Include where, why, and how the project was accomplished.

MetroHealth Care Plus was established to reduce the uninsured rate in Cuyahoga County, Ohio by providing Medicaid coverage and access to health care to a currently uninsured population. Care Plus enrollees receive access to high-quality, comprehensive care from the MetroHealth System and community partners, including primary care, specialty care, medications and pharmaceuticals, mental health and substance abuse treatment, emergency care, inpatient care, and durable medical equipment.

Care Plus patients are encouraged to begin their care with primary care at one of MetroHealth's 19 primary care sites or at one of the community partner Federally Qualified Health Centers. This care is provided in patient-centered medical homes that are recognized at the highest level (level 3) by the National Committee for Quality Assurance. Patients choose a primary care provider who provides accessible, continuous care and who arranges for referrals, specialty care, and mental health and substance abuse treatment as needed.

Patients also have access to nurse care coordinators based at every primary care site. These care coordinators use patient registries based in the electronic health record to identify patients who might benefit from their services due to uncontrolled chronic illness, recent hospitalization or emergency department use, or direct provider referral. The care coordinators then make proactive contact with the identified patients and offer care navigation, disease management and case management services as appropriate. These services and relationships have been described by Care Plus enrollees as one of the most beneficial aspects of the program.

The medical care that Care Plus enrollees receive is supported by and documented in the Epic electronic health record system, which allows for information sharing and timely communication among all health care professionals caring for an individual. The access to this information at the point of care assists in coordinating care and delivering clinically effective and cost effective care.

3. Describe the results of the project. What data was used to support improvement results?	As of September 30, 2013, 25,758 formerly uninsured individuals are enrolled in MetroHealth Care Plus, reducing Cuyahoga County's uninsured rate by 18 percent. The coordinated care provided by the MetroHealth System and community partners allowed the care to be delivered at a per-member-per-month cost of \$417.50 to date, well below the actuarial benchmark established for this population of \$582.41. A preliminary analysis of selected health process and outcome data for Care Plus enrollees is shown in the attachment. The data for diabetes and hypertension are compared to the data compiled by Better Health Greater Cleveland, a regional health improvement collaborative based in Northeast Ohio. The preventive measure data is compared to the Center for Disease Control database for Ohio.
3A. Attachment, if applicable (Only graphically	MetroHealthCarePlusResults.xls (29k)
displayed data such as charts will be accepted. Data should include baseline and improvement data)	The street of th
4. Describe what happened as a result of the project. Was the improvement related to the intervention? Can the project be duplicated by other organizations?	MetroHealth Care Plus demonstrates how expanded Medicaid coverage, allowing access to coordinated, comprehensive health care, can reduce the number of uninsured in a population and improve their health status in a cost-effective manner. Care Plus also demonstrates how population health strategies and interventions, such as expanded primary care, care coordination, the use of electronic health record-based registries, and community partnerships, can be used on a large scale to improve the health status of a community. The MetroHealth System presented testimony to the Ohio state legislature on multiple occasions regarding the Care Plus program, describing it as an example of how statewide Medicaid expansion could serve to improve the health of state residents by encouraging the delivery of coordinated, comprehensive health care to currently uninsured Ohioans.
5. Describe how patients, families, and if appropriate, community was included in the work.	The MetroHealth System partnered with a variety of care providers in Cuyahoga County in the Care Plus Program. These partnerships included Federally Qualified Health Centers, community-based mental health and substance abuse treatment providers, a local pharmacy chain, and providers of durable medical equipment. Additionally, MetroHealth conducted an array of community outreach activities to inform uninsured Cuyahoga County residents of the Care Plus program. In addition to extensive media coverage, informational materials were distributed to community groups, social service agencies, housing service providers and other public forums. Enrollment was facilitated by telephone, internet and paper-based applications available in both English and Spanish.
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