## Alaska Medicaid Redesign: Approaches to Coordinated Care and Value-based Purchasing

**MODELS OF CARE** 

**FEATURES** 

Current State

No performance- or

value-based payment

or quality metrics

**Primary Care** Case Management

Primary care

and monitors

patient care

provider coordinates

**Patient** Centered Medical Homes

• Provider teams deliver whole person, integrated care

**Health Homes** 

 Serves patients with complex needs: behavioral health and chronic conditions Provider teams deliver whole person, integrated care and coordinate community supports

Pre-paid Inpatient or **Ambulatory Health Plans** 

 Risk-based contracts to provide a set of services to enrollees

Accountable Care **Organizations** 

 Providers share accountability for care, health outcomes and costs for defined group of enrollees

**Full-risk Managed Care** 

 State contracts with health plans for the delivery of services to Medicaid beneficiaries

→ HIGH

## **PAYMENT MECHANISMS**

LOW · Level of financial risk assumed by providers + quality monitoring and reporting

Fee For Service

Care Coordination (Per Member Per Month Fees)

Shared Savings

Shared Losses

**Bundled Payments** (Specific Épisodes)

Partial or Global Capitated Payments



































**ADDITIONAL PROGRAM** FEATURES + **OPTIONS** 

- Private Coverage Option
- Enrollee Contributions + Premiums
- · Waivers of Required Benefits
- Wellness + Healthy Behavior Incentives

**GOALS FOR ALASKA MEDICAID REDESIGN** 







