

# Minnesota Health Care Home (HCH) Program

2008 Enabling legislation

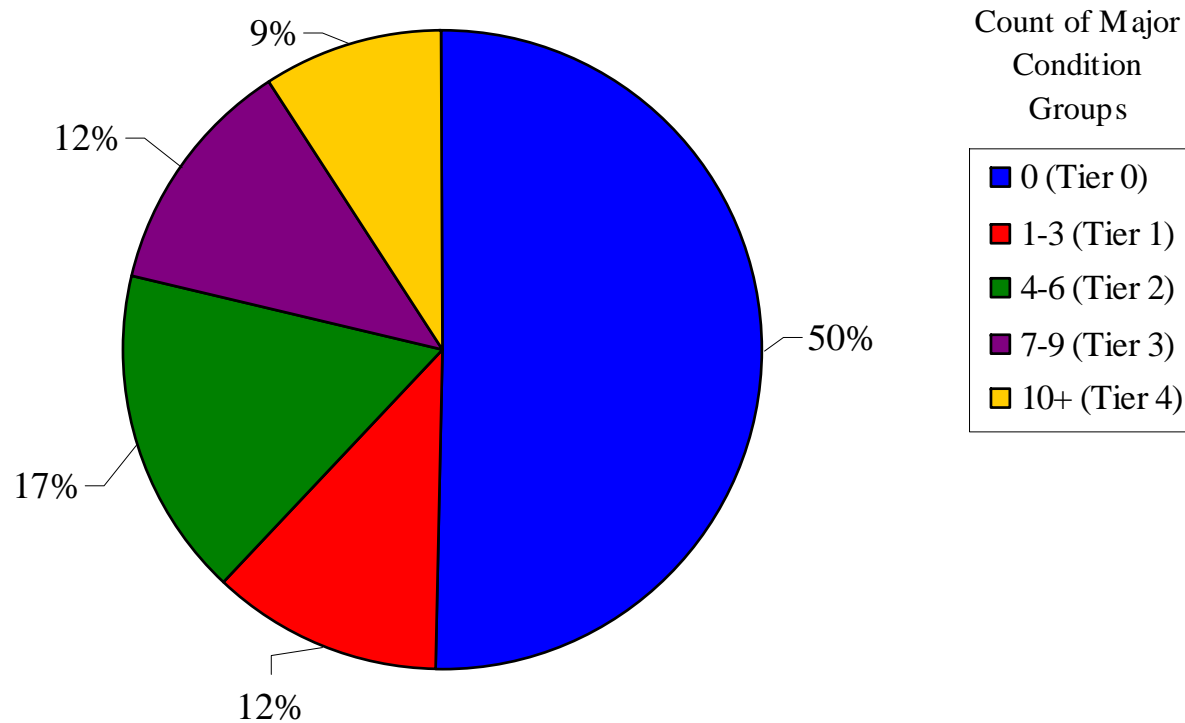
- Designation criteria in state rule
- Active clinic certification process
- Complexity adjusted payment methodology
- Learning collaborative
- Outcomes reporting and results required for recertification

# Complexity Adjusted Payment Methodology

- Provider determined tier assignment
- Based on the number of conditions groups (e.g. endocrine, cardiovascular) that are chronic, severe, and requiring a care team for optimal management
- Two supplemental complexity factors added (non English as primary language and significant mental illness)
- Work of providing a HCH (and payment rate) estimated based on this complexity
- Modeling estimation of provider tier assignment derived from claims based risk adjustment software (also to be used to audit provider tier assignment)

# Estimated Distribution: Minnesota Health Care Programs (MHCP) Fee-for-Service

**Figure 2: Distribution of Member Months by Count of Major Condition Groups - Fee-for-Service MHCP Population**  
State Fiscal Year 2008



# Services Required of Certified Health Care Homes

- Access and communication standards
  - Availability of patient registry information
  - Appointment availability/ triage capacity
- Registry functionality
- Care coordination
  - Transition coordination
  - Coordination with community agencies
  - Dedicated care coordination capacity
- Practice based quality improvement