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About the Initiative

In 2015, the Centers for Medicare and Medicaid Services (CMS) awarded the State of Michigan \$70 million over four years to test and implement an innovative model for delivering and paying for healthcare in the state. The state has focused its efforts on developing and strengthening connections among providers of clinical care and community-based organizations that address social determinants of health.

Contact Us

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Links

[SIM initiative website](#)

Welcome to the ninth edition of the State Innovation Model (SIM) Initiative Newsletter. This newsletter is intended to provide updates on the activities taking place across the initiative. It will also be used to make stakeholders aware of any SIM-related events that may be of interest to a general audience.

Previous editions of the newsletter can be found on the [SIM website](#).

Program News and Updates

New Community Health Innovation Region (CHIR) Video Clips

Last year, the SIM team worked closely with CHIR backbone organizations to develop the ["All Health is Local"](#) video. This communication tool highlights how CHIRs are working to identify and address factors that affect residents' health and can be used as an introduction to the concept of a CHIR. Since the release of that video, the SIM team has developed two shorter video clips that CHIRs can use to highlight and educate potential partners about this model and their work. One clip focuses on [housing as a social determinant of health](#) and the other explains [how powerful partnerships are coordinating care in a community](#). Each of these videos can be accessed on the Michigan Department of Health and Human Services (MDHHS) YouTube channel or Facebook page.

SIM Comprehensive Summary Updates

The SIM comprehensive summary was revised this month to reflect key updates to the initiative components. Some of these changes include the number of participating primary care practices in the patient-centered medical home (PCMH) initiative, updates to the Population Health section to reflect the CHIR messaging guidelines, and more information on Michigan's Plan for Improving Population Health (PIPH), including the anticipated release date. The updated [comprehensive summary](#) can be accessed on the SIM website.

MDHHS Announces New Medicaid Director

Kate Massey joined MDHHS as deputy director for Medical Services Administration and Medicaid director on June 7. Massey most recently was chief executive officer for Magellan Complete Care of Virginia and previously served as vice president for Medicaid and Medicare for Kaiser Permanente of the Mid-Atlantic States. As Michigan's Medicaid director, Massey will oversee several healthcare programs, including MICHild and the Healthy Michigan Plan, and will support the advancement of public health policy efforts for the state.

Please join us in thanking Kathy Stiffler for serving in this role since November 2017. Kathy has been instrumental in advocating for sustaining many of the SIM components. She will resume her previous post as director of the MDHHS Bureau of Medicaid Care Management and Customer Service and deputy Medicaid director.

Population Health

Community Health Innovation Regions

[A CHIR Success Story](#)

A man with depression, anxiety, history of stroke, anemia, and hypertension was connected with a CHIR in September of 2018. Prior to enrollment, he frequently went to the emergency department seeking opiates, sometimes more than 20 times a month, and would not follow up with recommendations in his hospital discharge plan. Through the support of the CHIR, he was connected with a psychiatrist and a specialized neurocognitive program where he has gained insight into his own anxiety and panic attacks. He now calls his primary care physician before visiting the emergency department. He has weaned off opioids, and through an appointment accompaniment volunteer program at one of the participating organizations, he has the social support to follow through with medical recommendations and maintain sobriety.

[Health through Housing Initiative](#)

Michigan's Health through Housing Initiative (described in the [June 2018 SIM newsletter](#)) is making progress. The initiative is designed to improve the state's response to homelessness through four primary activities: a frequent-user pilot, data integration, capacity building, and supporting improvements to homelessness response systems in CHIRs.

Permanent supportive housing (PSH) providers participating in the frequent-user pilot recently began contacting individuals in their service areas who are frequent utilizers of healthcare services and are experiencing chronic homelessness. The PSH providers are delivering care management services to these vulnerable residents as well as helping them obtain stable housing through the Housing Choice Voucher Program from the Michigan State Housing Development Authority. Early data is beginning to tell the story of the impact of housing on pilot participants. The State will be able to report on their findings as this data increases in volume and duration in the coming months.

In addition, MDHHS is hosting a one-day training with the Corporation for Supportive Housing (CSH) on July 11 to enhance provider skills and understanding of working with people experiencing opioid use disorder (OUD). The training will create tools for providers of supportive housing and substance use disorder services to deliver effective case management and supports for people with OUD. The goal is for attendees to gain a strong understanding of best practices in overdose prevention, harm reduction, stages of change, assertive engagement, and recovery support.

[Plan for Improving Population Health](#)

MDHHS has continued to make progress on its Plan for Improving Population Health, including convening an internal workgroup, which includes partners from mental health and Medicaid, to guide the development of the PIPH and to support department-wide alignment. The workgroup meets monthly and has achieved several milestones, including identifying metrics to illustrate the impact of the social determinants of health on Michigan residents, expanding stakeholder engagement, and beginning to draft the PIPH.

Michigan's PIPH will target social determinants of health by:

1. Establishing practices within the care delivery system to identify needs and link patients with community services.
2. Creating stronger linkages between clinical and community services and settings.
3. Working to improve community conditions so that the environments in which people live promote health, including the physical, service, social, and economic environment.

Michigan's PIPH work will conclude in 2019 and will build heavily on progress made in previous years. The MDHHS Population Health Administration SIM Workgroup will guide the development of the plan, forming committees to address each of the three items above. The workgroup will identify potential strategies for addressing social determinants of health, identify existing levers that can support moving these strategies into action, and develop a PIPH implementation plan.

Alongside implementation of the plan, a key area of focus will be generating robust stakeholder engagement and ownership for the strategies outlined in the plan. The final draft of the complete PIPH will be available for public comment in fall 2019, with a final plan delivered to CMS in January 2020.

Care Delivery

Patient-centered Medical Home Initiative

[SIM PCMH Team Convenes Stakeholders to Promote Efficient, Effective Care](#)

The SIM Care Delivery team routinely brings stakeholders together to improve service delivery through stronger care coordination and effective partnerships. The Care Coordination Collaborative brings together CHIRs, Medicaid health plans, and PCMHs to support networking and facilitate exercises to align efforts, reduce potential duplication of services, and identify methods of collaboration for shared beneficiaries. The goal is to ensure stronger relationships and clearer lines of communication among these partners, resulting in better outcomes for patients. The collaborative has had strong participation and will be [meeting in July](#) to focus on achieving efficiencies; reducing waste and administrative burden; and reducing unnecessary utilization, including avoidable emergency room and inpatient use. In addition, this year's annual SIM PCMH initiative summit, scheduled for November 12, will focus on transitioning from adverse events to resilience and leveraging social determinants of health information in care delivery.

Alternative Payment Models

[Managed Care Plan Division and Medicaid Health Plans Collaborate on State-preferred PCMH Model](#)

The MDHHS continues to work with Medicaid Health Plans (MHPs) to establish a standard set of PCMH requirements that define the State-preferred PCMH model. The collaborative effort to design these common PCMH requirements is intended to sustain and expand PCMH in the Michigan Medicaid managed care program. The design process began with the SIM PCMH model as its foundation, and MDHHS continues to work with MHPs to clarify requirements and their corresponding compliance and monitoring processes. As the SIM PCMH initiative will conclude at the end of 2019, the goal is to ensure sustainability, effectiveness, and consistent best practices beyond grant-funded initiatives.

Provider Application for State-preferred PCMH Model Draws Significant Response

The MDHHS facilitated an application process in partnership with the MHPs in May to identify provider interest in participating in the state-preferred PCMH model. Participation creates an opportunity for eligible practices and providers to engage in a care delivery model similar to that used within the PCMH Initiative by working closely with MHPs. MDHHS received 73 applications, representing 876 practices and 3,452 providers. The SIM demonstration encompasses approximately 305 practices, so this level of interest and potential participation in the State-preferred PCMH model would represent a significant increase in the pool of practices and providers working under the model. A list of providers who indicate interest and meet baseline criteria for participation will be shared with health plans to support communication about potential new or revised contracts. More information will be shared in future newsletters as it becomes available.

Technology

Creating a Technology Toolkit

The SIM Technology team is creating a toolkit that provides guidance on the use of technology in CHIRs. The work is currently early in development, but will focus on data that should be collected and technology solutions that can support tracking clinical-community linkages and social determinants of health screening implementation. They are basing the technology toolkit on conversations with existing CHIRs so they can both understand lessons that have been learned in early implementation efforts and recommend multiple options based on specific community needs. The toolkit in its entirety is planned to be completed by early 2020.

Aligning Housing Data with National Quality Metrics

The SIM Technology team, the Medicaid Data Warehouse team, and MDHHS staff assigned to the Health through Housing pilot are working together in an effort to compare quality and utilization metrics of people experiencing homelessness to the rest of the state's Medicaid population. In the early phase of this work, the goal will be to streamline the data reporting process and identify baseline metrics that can be used to identify people experiencing homelessness or high utilizers of Medicaid and emergency services.

For More Information

<http://www.michigan.gov/SIM> | MDHHS-SIM@michigan.gov

