

DRAFT
Exhibit C
Payment Model for Care Coordination Agencies

The North Sound ACH is contracting with selected Care Coordination Agency (CCA) partners to implement a Community HUB. The Community HUB will better align the efforts and ability to track health outcomes of individuals receiving care coordination across the North Sound region. Under the model being implemented, the Community HUB will pay Care Coordination Agencies for the completion of outcome-based interventions. *Exhibit C* explains the approach for the 2019 CCA payment model and partner roles for processing CCA payment.

The 2019 CCA payment model was co-developed with CCAs and community advisors, attempting to represent each CCA’s cost and staffing structures. This informed the development of the CCA payment model, which uses assumptions specific to each individual CCA. An example is illustrated below using the following assumptions:

- An average client episode duration of 9 months.
- A client “ramp up” of 15 additional clients/ month until all care coordinators have full caseloads.
- A steady state caseload = 90 clients (3 FTE/ 30 clients each).
- The OBU rate is modeled to the amount which each CCA needs in order to break-even within their expressed cost structures, and caseload expectations.

| CCA Payment Modeling (Hypothetical CCA) | | | | | | | | | | |
|---|-----------|----|----|------------------------|----------|-----|-----|-----|-----|-------|
| Assumptions: | | | | | | | | | | |
| Episode duration: | 9 months | | | OBU's per case: | 159.5 | | | | | |
| client admissions/month: | 15 /month | | | OBU value: | \$ 14.50 | | | | | |
| Steady state caseload: | 90 | | | Rate per case episode: | \$ 2,313 | | | | | |
| Episode months: | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | Total |
| Percent per month earned per case: | 10% | 5% | 5% | 5% | 10% | 10% | 15% | 15% | 25% | 100% |

This describes a sample CCA scenario; CCA specific assumptions are included in this Exhibit.

Payment Roles and Responsibilities of North Sound Community HUB

- HUB staff will maintain ongoing tracking of initiated and completed Pathways, educational tools, and checklists or other items eligible for outcome-based reimbursement.
- The HUB will train all CHWs in effective completion of Pathways, educational tools, checklists or other items eligible for outcome-based reimbursement. Training will include instructions and timeline expectations for closing an outcome-based tool to advance to a Supervisor for payment processing.
- The HUB staff will develop and distribute policies, procedures, and timing expectations for CCAs to invoice the HUB after the closure of any outcome-based tool.

*For the purposes of this Addendum, the term outcome-based tool refers to the completion of either a Pathway, an educational tool, or a checklist in progress between the CHWs and their HUB enrolled client. Completion of these tools trigger an outcome payment from the HUB to the CCA.

Payment Roles and Responsibilities of the Care Coordination Agency

- Adhering to the HUB policies and procedures manual, the CCA will:
 - have CHWs and other care coordinators track all Pathways, checklists and educational tools currently being worked on with HUB clients in the Care Coordination Systems software.
 - have all CHW Supervisors trained in effective closure of any open Pathway, checklist or educational tool.
 - insure CHWs and Supervisors are adhering to the invoicing timeline and process (**Policies 4.3- 4.4**).

Process for invoicing the HUB:

- When an outcome is achieved and validated, the CCA will invoice the HUB using agreed upon tools and documentation.
- During 2019, CCAs can invoice the HUB for:
 - ?
 - ?
 - ?
 - ?
 - ?
- Payments to CCAs will be made via the Financial Executor Payment Portal within one month after receipt and verification of the invoice.

Amending the payment model: The following circumstances may require amendment of the CCA agreement and payment schedule:

- The HUB requests that the CCA hire and train additional staff.
- The HUB is not providing enough referrals to the CCA to fulfill the projected caseload ramp up rate.
- The HUB and CCA determine a need to train more staff, but training is not currently available.

Changes that **do not** warrant a conversation on rate or payment timeline recalibration.

- If the CCA chooses to increase their salary or benefit structure.
- If the CCA is not able to increase their care coordinators caseloads.

*For the purposes of this Addendum, the term outcome-based tool refers to the completion of either a Pathway, an educational tool, or a checklist in progress between the CHWs and their HUB enrolled client. Completion of these tools trigger an outcome payment from the HUB to the CCA.