HOUSE BILL No. 1572

DIGEST OF INTRODUCED BILL

Citations Affected: IC 12-7-2-0.8; IC 12-15-43.5.

Synopsis: Medicaid accountable care pilot program. Establishes the Medicaid accountable care pilot program (program) to be developed, implemented, and administered by the office of Medicaid policy and planning (office). Sets forth eligibility for participation in the program. Requires implementation of the program not later than April 1, 2018. Requires the office to: (1) include a savings sharing component as part of the program; (2) share certain relevant information with a participating accountable care organization; (3) develop metrics for determining whether the program is successful; and (4) prepare and publish a report concerning the results of providing care under the program. Expires the program December 31, 2021.

Effective: July 1, 2017.

Shackleford

January 23, 2017, read first time and referred to Committee on Public Health.



First Regular Session of the 120th General Assembly (2017)

PRINTING CODE. Amendments: Whenever an existing statute (or a section of the Indiana Constitution) is being amended, the text of the existing provision will appear in this style type, additions will appear in this style type, and deletions will appear in this style type.

Additions: Whenever a new statutory provision is being enacted (or a new constitutional provision adopted), the text of the new provision will appear in **this style type**. Also, the word **NEW** will appear in that style type in the introductory clause of each SECTION that adds a new provision to the Indiana Code or the Indiana Constitution.

Conflict reconciliation: Text in a statute in *this style type* or *this style type* reconciles conflicts between statutes enacted by the 2016 Regular Session of the General Assembly.

HOUSE BILL No. 1572

A BILL FOR AN ACT to amend the Indiana Code concerning Medicaid.

Be it enacted by the General Assembly of the State of Indiana:

) THE INDIANA CODE
2 AS A NEW SECTION TO READ AS FOLLO	WS [EFFECTIVE JULY
3 1, 2017]: Sec. 0.8. "Accountable care organ	nization", for purposes
of IC 12-15-43.5, has the meaning set forth	in IC 12-15-43.5-1.
5 SECTION 2. IC 12-15-43.5 IS ADDED TO	THE INDIANA CODE
6 AS A NEW CHAPTER TO READ AS FO	OLLOWS [EFFECTIVE
7 JULY 1, 2017]:	
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8 Chapter 43.5. Accountable Care Pilot P	rogram
Sec. 1. As used in this chapter, "accountable Care Pilot P	O
	able care organization"
9 Sec. 1. As used in this chapter, "accounta	able care organization" ollowing providers that
Sec. 1. As used in this chapter, "accounta means a group consisting of each of the fo	able care organization" ollowing providers that oordinated health care
Sec. 1. As used in this chapter, "accounta means a group consisting of each of the fo provide a full range of person centered co	able care organization" ollowing providers that oordinated health care to an individual:
Sec. 1. As used in this chapter, "accounta means a group consisting of each of the fo provide a full range of person centered co and are accountable for the care provided	able care organization" ollowing providers that oordinated health care to an individual:
Sec. 1. As used in this chapter, "accounta means a group consisting of each of the form provide a full range of person centered countable for the care provided (1) A health facility licensed under IC	able care organization" ollowing providers that oordinated health care to an individual:
Sec. 1. As used in this chapter, "accounta means a group consisting of each of the form provide a full range of person centered contains and are accountable for the care provided (1) A health facility licensed under IC (2) A provider that provides service	able care organization" ollowing providers that oordinated health care to an individual:



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1	(5) A case management provider.
2	(6) A managed care organization.
3	Sec. 2. (a) The office, in consultation with the division of aging
4	and division of mental health and addiction, shall develop the
5	accountable care pilot program for the purpose of providing
6	coordinated care and provider collaboration for Medicaid
7	recipients. A Medicaid recipient is eligible to participate in the pilot
8	program if the individual:
9	(1) is eligible for Medicaid because the individual is in the
10	aged, blind, and disabled category of Medicaid; and
11	(2) participates in the Medicaid fee for service program.
12	The office shall determine the number of Medicaid recipients
13	described in this subsection who will participate in the pilot
14	program.
15	(b) The following Medicaid recipients are not eligible to
16	participate in the pilot program:
17	(1) Recipients being serviced in an institution through a
18	Medicaid waiver.
19	(2) Recipients who are dually eligible for the Medicare
20	program and the Medicaid program.
21	(3) Recipients participating in a risk based managed care
22	program.
23	(c) The office shall implement the pilot program not later than
24	April 1, 2018.
25	(d) Reimbursement under the pilot program must be on a fee
26	for service basis.
27	Sec. 3. (a) The office shall contract with an accountable care
28	organization to provide care to recipients described in section 2(a)
29	of this chapter under the accountable care pilot program. As a
30	required component of an accountable care organization's
31	participation in the pilot program, an accountable care
32	organization shall do the following:
33	(1) Share health care information concerning a program
34	participant with all of the providers of the accountable care
35	organization that are providing care to the participant.
36	(2) Ensure rapid transition among services and levels of care
37	for a participant.
38	(3) Leverage the existing infrastructure of a managed care
39	organization participating as a provider of the accountable
40	care organization.
41	(b) The office shall provide a participating accountable care

organization with access to historical information, statistics, and



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other financial data maintained by the office that are relevant to
the accountable care organization in providing care under this
chapter.

- (c) The office shall include, as part of the pilot program, development of a shared savings component that provides a participating accountable care organization with a portion of the savings generated by providing coordinated health care to participants in the manner set forth under this chapter.
- Sec. 4. (a) The office, in consultation with a participating accountable care organization, shall develop metrics to measure success of the care provided to a participant under the accountable care pilot program. The metrics must include the following:
 - (1) Whether the overall health of the participant improved.
 - (2) Whether participants in the pilot program were pleased with the care provided.
 - (3) Whether communication among providers of the accountable care organization concerning the care of the participant was improved.
 - (4) Whether cost savings in the provision of care was achieved through efficiencies and a reduction in acute medical intervention needs.
- (b) Not later than December 31, 2020, the office shall prepare and publish a written report concerning the results of providing care under the pilot program and include the report on the office's Internet web site. The report must include the metrics described in subsection (a). The office shall submit the report to the interim study committee on public health, behavioral health, and human services and to the legislative council in an electronic format under IC 5-14-6.
- Sec. 5. The office shall apply to the United States Department of Health and Human Services for any amendment to the state Medicaid plan or demonstration waiver that is necessary to implement this chapter.
 - Sec. 6. This chapter expires December 31, 2021.

