The Delaware Health Care Commission awarded the first value-based payment reform mini-grant to Christiana Care Health System to test a new reimbursement model that will also improve the coordination of patient care, as part of the State Innovation Model initiative.

Christiana Care Health System’s CareLink Behavioral Health Medical Home Pilot was awarded $62,168 to test a reimbursement model to foster behavioral health integration within primary care practices focusing on a subset of AmeriHealth Medicaid members with chronic behavioral health conditions as a primary diagnosis.

The Health Care Commission is prepared to award up to multiple applicants in amounts ranging from $25,000 to $250,000 through the Value-Based Payment Reform Fund for work that must be completed by Jan. 31, 2019. The commission received 45 applications from primary care providers, behavioral health providers, hospitals, Accountable Care Organizations, Federally Qualified Health Centers and clinically integrated networks, all of which must be licensed in Delaware. The commission expects to award grants for small projects, up to $50,000; and large projects, up to $250,000, based on the scope of the project.

Applications, which were received during the summer, fell into one of three areas:

— Data integration: Project must enhance the applicant’s data integration, clinical informatics or population-based analytics capabilities. Examples include data exchange infrastructure and analytics projects or support; data warehousing and reporting capacity; and development of data-sharing agreements.

— Improve the coordination of patient care: Project must enhance the applicant’s clinical integration. Examples include conducting data analytics and developing care guidelines for a primary care-based system of complex care management for high-risk population(s); implementing improvements in care transitions such as new business processes or mutual agreements with partner providers; and implementing a practice support call center.
— Increase readiness to integrate into an Accountable Care Organization or operate through an Alternative Payment Method: The project must develop, expand or enhance the applicant’s shared governance structures and organizational integration strategies, linking the applicant with ACO leadership and across the continuum of care with providers already contracted with an ACO. An example would be support to model costs of care in preparation for participation in value-based payment arrangements with multiple payers.