Egyptian Public & Mental Health Department Integrated Care for Kids (InCK) Model Illinois

Lead Organization: Egyptian Public & Mental Health Department (Egyptian Health Department) (Award Recipient)

Maximum Award Amount Over 7 Years: \$15,666,736

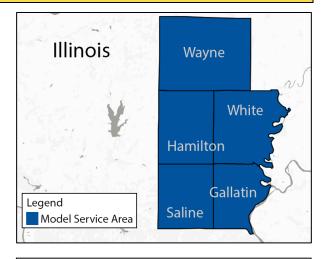
State Medicaid/CHIP Agency: Illinois Department of Healthcare and Family Services

Model Goals: Egyptian Health Department (EHD), an integrated local public health department and behavioral health agency, leads IL-Village InCK. IL-Village InCK aims to increase early identification services to 80 percent (80%) of the Medicaid population, focusing on integrating behavioral and physical health care.

IL-Village InCK serves children and youth in five (5) contiguous rural counties with higher rates of poverty than state and national averages. In addition, IL-Village InCK is designed to reduce costs for emergency department visits, inpatient psychiatric care, and substance use disorder (SUD) services.

To achieve these goals, IL-Village InCK uses an integrated services team called "i-Hub" as a central access point for care coordination.

Additionally, it will work to reduce expenditures through heightened education, mobile crisis response services, and increased engagement in SUD prevention, treatment, and recovery services, respectively.



Model Service Area & Population

Target Population: ~11,300 Medicaid & Children's Health Insurance Program (CHIP) Beneficiaries from birth to age 21 across five adjacent rural counties.

Highlights: Key services for the target population include: mobile crisis response, wellness coaches (for those with medically complex or chronic health conditions), community health workers, medical telehealth specialty services, integrated case management with mobile crisis response, peer support, respite, in-home community support team services follow up, and a family support program.

Implementation Strategy: IL-Village InCK uses routine physical and behavioral health assessments and screenings across the attributed population to support timely and appropriate referrals. Mobile assessment teams administer comprehensive needs assessments in homes, schools, and in the community. A Resources Coordinator, Service Integration Coordinators, and members of the Partnership Council make up the i-Hub. They review screening results and stratifies children into service integration levels according to individual need using a comprehensive needs assessment.

The i-Hub provides children and youth and/or caregivers with information and referrals to core community services. HealthEC, a care management platform, supports children and youth, caregivers, and providers in coordinating care for individuals demonstrating higher levels of need.

Alternative Payment Model (APM): Key components of the IL-Village InCK APM include a per-member-per-month (PMPM) payment, an incentive pool, and shared savings components. The PMPM payment is available for care coordination activities performed by providers within the HealthEC Platform, with half of the payment being withheld to fund the incentive pool.

Payments from the incentive pool are intended to cover additional integrated services and support specific value-added services, including shared plans of care and Healthcare Effectiveness Data and Information Set (HEDIS) measures (both reporting and performance measures).

Community Partners: The members of the IL-Village InCK Partnership Council represent local core child services providers; Illinois Department of Healthcare and Family Services; Illinois Chapter of American Academy of Pediatrics; local school systems, and the Office of Medicaid Innovation at the University of Illinois.

This model is supported by the Centers for Medicare & Medicaid Services of the U.S. Department of Health and Human Services.