Ann & Robert H. Lurie Children's Hospital of Chicago Integrated Care for Kids (InCK) Model Illinois

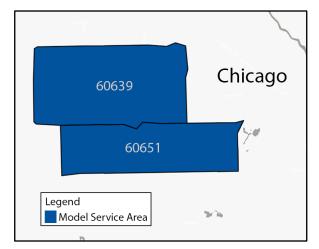
Lead Organization: Ann & Robert H. Lurie Children's Hospital of Chicago (Lurie Children's) (Award Recipient)

Maximum Award Amount Over 7 Years: \$16,000,000

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

Model Goals: IL-All Hands InCK is led by Lurie Children's, a major pediatric hospital with extensive community partnerships throughout Chicago. Lurie Children's aims to expand access to quality primary care, specialty care, and behavioral health services while building care coordination and service integration capacity. IL-All Hands InCK is designed to adapt and synthesize existing resources where possible and improve care coordination for children and youth served by Medicaid managed care organizations (MCOs).

Highlights: Service Integration Coordinators (SICs) work directly with families and children to facilitate assessment screenings, identify children's needs, and connect them to the appropriate services. SICs are assigned to providers based on geography and expected to spend most of their time in schools and health centers.



Model Service Area & Population

Target Population: ~43,000 Medicaid Beneficiaries from birth to age 21, residing in two contiguous zip codes in Chicago's Cook County.

IL-All Hands InCK supports the following: coordination between SICs and MCOs, expansion of Lurie Children's collaborative model of care infusing behavioral health support across community partners, and training and referral assistance for primary care providers.

Implementation Strategy: IL-All Hands InCK partners developed a two-generational needs assessment tool used to assess needs of the child and the parent/family to stratify attributed children and youth into service integration levels and provide appropriate care based on individual needs. This assessment is available at Core Child Service (CCS) provider offices and community partners in the area using a smart device or web-based application. CCS providers, MCOs, youth, parents, and caregivers have role-based access to the application. Schools may choose to incorporate the assessment into the student enrollment process.

Families complete the needs assessment for younger children and youth complete their own assessment. SICs also assist in completing and updating needs assessments through Helpline support. Upon completion, individuals are linked to a community resource database to receive information on appropriate referrals and resources. SICs and providers use the selected Assessment, Referral, and Linkage System and Electronic Medical Record System platforms to communicate and share information with beneficiaries.

Alternative Payment Model (APM): IL-All Hands InCK has developed an APM based on a fee-for-service foundation with a quality payment component. This APM model is focused primarily on providing primary care providers (PCPs) incentive payments for achieving quality and cost-saving metrics. Qualified PCPs serving eligible children and youth residing in two Chicago area zip codes may earn a bonus based on achievement of efficiency standards and three quality metrics (with each metric worth up to 1/3 of the quality linked performance incentive). IL-All Hands InCK has executed contracts with all five Medicaid MCO's in Illinois and is utilizing a 438-preprint to gain APM approval for the upcoming years.

Community Partners: IL-All Hand's Partnership Council consists of 20 organizations and its members are representative of local organizations, health departments, stakeholder representatives, Medicaid payers, and providers responsible for core child services, including physical and behavioral clinical care, schools, housing authorities, food support services, early care and education, child welfare, and mobile crisis response services.

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