

A Medicaid Evaluation to Assess Recuperative Care Services

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COLORADO
Department of Health Care
Policy & Financing



Ascending to Health
Respite Care

Presenters



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Recuperative Care Partnerships

- In 2022, Colorado Medicaid partnered with Ascending to Health Respite Care (ATHRC) in Colorado Springs.
 - Collect Medicaid member data and conduct an evaluation on recuperative care outcomes for calendar year 2022.
 - ATHRC to provide quarterly data reports to Medicaid on members that received recuperative care services.



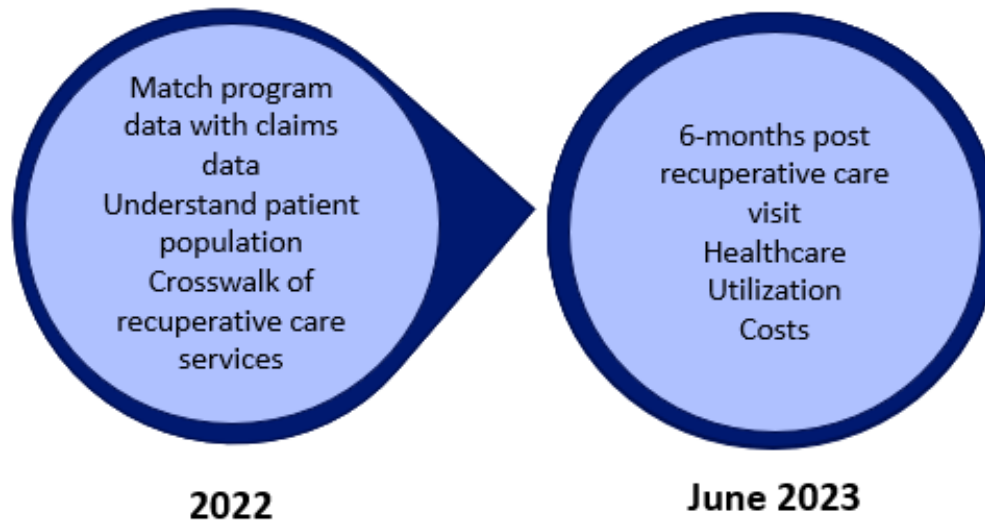
Presentation Goals

- Demonstrate how state Medicaid agencies can establish partnerships with recuperative care facilities.
- Design recuperative care evaluation strategies to integrate healthcare claims and program data to demonstrate Medicaid impact.
- Identify program and policy opportunities for Medicaid support for recuperative care.



Scope of Work

- Understand patient population and reasons for recuperative care
- Identify and classify recuperative care services provided
- Evaluate healthcare utilization pre and post recuperative care encounters



Data Sharing

- Establish meaningful data sharing
 - Development of template for quarterly reporting
 - Identifying data specific to benefit and policy design

Program Data

- Referrals
- Client information
- Length of stay
- First stay indicator
- Reason for hospital visit
- Primary and secondary reason for respite care
- Services provided (medical and social)
- Primary Care visit(s)
- Services billed to Medicaid
- Discharge reason
- ED hospital admit during stay



Medicaid Sample Population

- Program data matched with Medicaid data
 - Demographics
 - Eligibility & Enrollment Spans
 - Healthcare Utilization and Costs
- Medicaid members: 55-member sample

45%
aged 51-60

70% Male

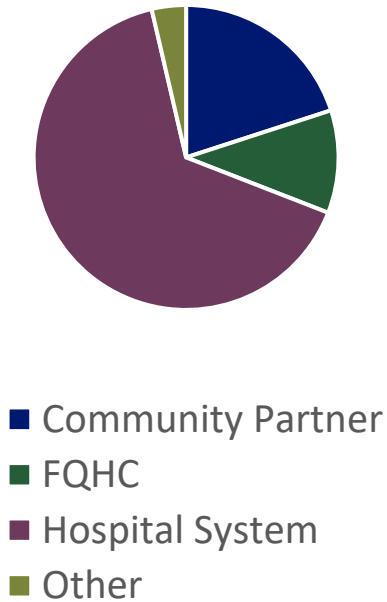
78%
in ACC
region of the
recuperative
care facility

81% in the
county of
the
recuperative
care facility

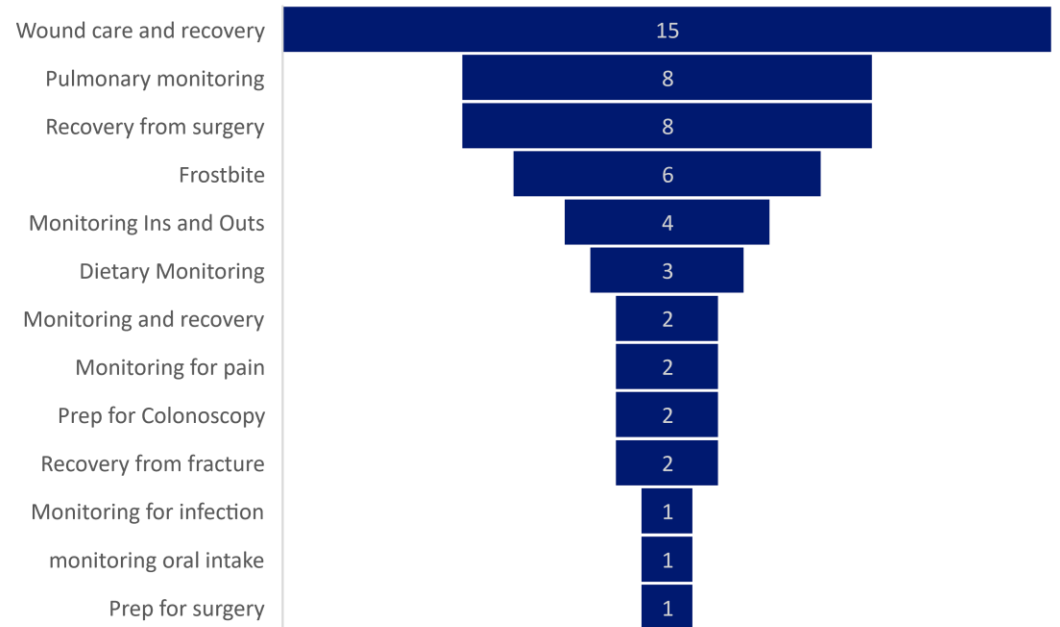


Referrals

Referring Entity

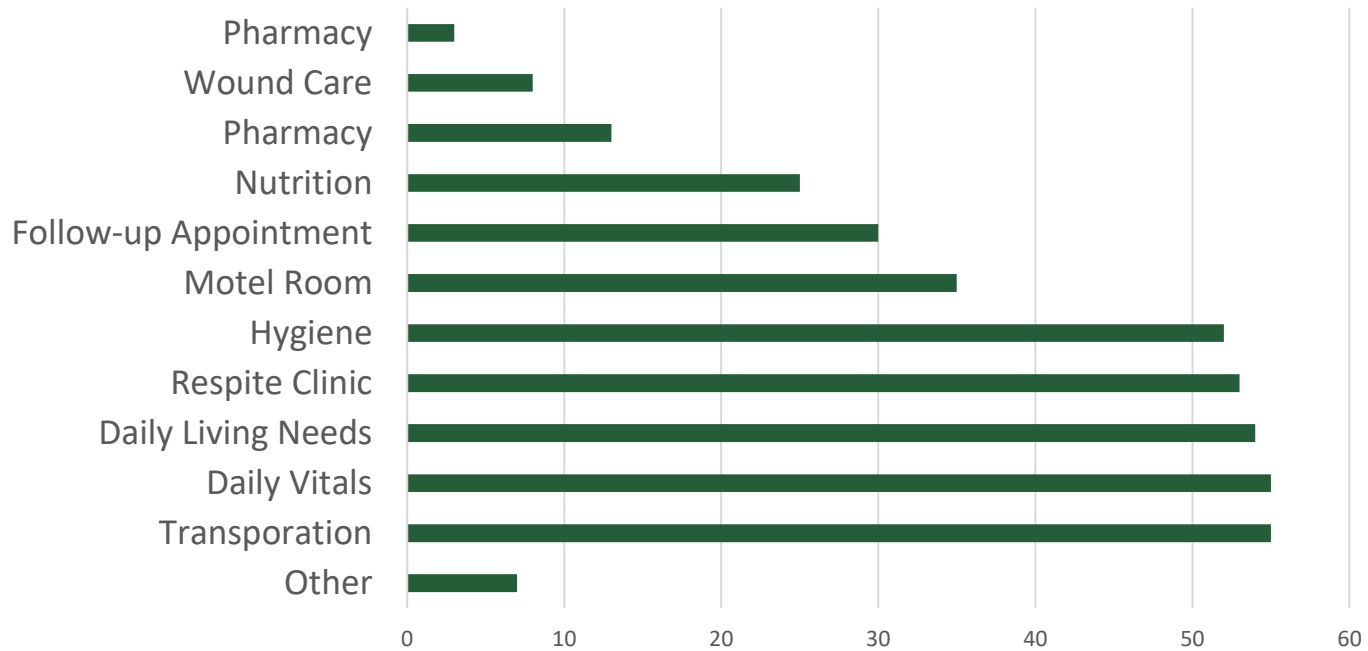


Reason for Respite Care



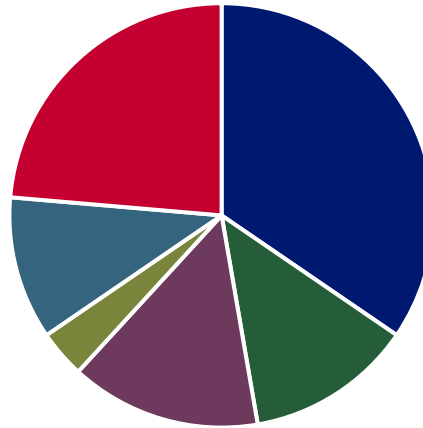
Services Provided

Medical & Social Services Provided



Discharge Status

Discharge Placement



- Shelter
- Hospital
- Permanent Living (housing or apartment)
- Physical rehabilitation -SFMC
- Others
- No information available



Patient Population

Length of Stay	%
10 days or less	33%
11-30 (less than one month)	40%
31-60 (less than two months)	20%
61-90 (less than three months)	4%
More than 3 months	4%



- Reason for hospital visit
- Specialty Care Area
- Reasons for <10 days
- Discharge Data
- Post-Recuperative Care Utilization



Pre-Recup Utilization

- In the last 6 months:
 - Emergency Department Visit: 69% of members (2.7 average visits)
 - Inpatient Visit: 40%
 - Primary Care Visit: 73%
 - Prescription: 98%
 - Dental: 29%
 - Transportation: 96%
- Top reasons for Inpatient (APR DRG):
 - Cellulitis/bacterial skin infections
 - COPD
 - Septicemia/infections
- Identify providers (primary care) and hospitals



Utilization During Recup

- Average LOS: 23.33 days
 - Breakout by specialty care area:
 - Leukemia
 - Gynecology
 - Hepatology
 - Hematology
 - Urology
- ED visits during: 33%
- IP visits during = 1%
- PCP visits during: 42%



Analysis

- Full Evaluation Report Summer 2023
- Utilization and Cost Comparisons (Pre vs Post)
- Between Groups Comparison (Medicaid v. non-Medicaid, Medicaid v. Dual)

Discussion

- First step for Colorado Medicaid to development meaningful data and information sharing.
 - Preliminary data
 - Methodology
- Benefit Design & Program Build
 - Acuity
 - Standards of Care
- Social Determinants of Health and Medicaid

Future Directions

- Medicaid partnership with another 501c3 recuperative care facility in Denver
- Explore FQHC models
- Colorado - Fee for Service State
 - Explore funding opportunities
 - State funding request anticipated Spring 2024
 - Accountable Care Collaborative Support
 - 1115 Waiver
 - Hospital Community Benefit Spending
- Hospital-Recup-Medicaid Partnerships
- Braided funding





Questions?



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Thank you!

