

# Innovations in Payment and Financing for IDD Services

*Prepared for Institute for Exceptional Care*

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**Aurrera**  
HealthGroup >>>

*Mission driven. Forward thinking.*

# Our Charge



## What

Institute for Exceptional Care (IEC) charged Aurrera Health Group with interviewing organizations that have **innovative payment or financing mechanisms** for services to people with intellectual and developmental disabilities (IDD).



## Why

To learn about the **current state** of innovation in this space, highlight **promising models**, and identify **what is missing**.



## How

After researching relevant organizations, we conducted **11 detailed interviews** and identified **3 organizations to highlight in case studies**.

# What we mean by payment and financing

- Budget or appropriation of a total amount of money available to compensate providers
- **“Where the money comes from”**

**Financing**



- Compensation made to a person or entity for providing a service
- **“How a provider is paid”**

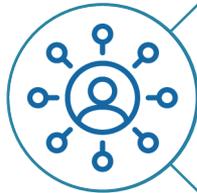
**Payment**



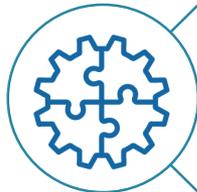
# What we mean by “innovative”



Paying for services a different way



Paying for different services



Restructuring financing or payment across silos

***...in a way that improves quality of care and quality of life***

# Case Study 1:

## Lee Specialty Clinic

### Background

Lee Specialty Clinic, located in Louisville, KY, provides **multispecialty care** (including primary care, dental, podiatry, ophthalmology, physical therapy, nutrition, audiology, crisis intervention, and other services) to patients with intellectual and development disabilities ages 13 and up.

Payment 

Financing 



### Payment/Financing Innovation

The Kentucky state legislature annually appropriates a **budget to cover the cost** of running the clinic. The clinic passes any claims reimbursement received back to the state (which offsets about 1/4 - 1/3 of the budget for the clinic, indicating that the clinic could not operate its care model on traditional claims reimbursement alone).

# Case Study 2:

## Utah Neurobehavior HOME Program

### Background

The Utah Neurobehavior HOME Program, located in Salt Lake City, is a clinic that provides **medical, psychiatric, and chronic care management services** to children and adults with both an intellectual or development disability and a mental health or behavioral health diagnosis.

Payment 

Financing 



### Payment/Financing Innovation

The University of Utah functions as **both a payer and a provider**: they run a Medicaid managed care plan that receives a capitated payment from the state of Utah, and the provider network for that plan consists of University of Utah employed providers.

# Case Study 3:

## Penn Autism Clinic

### Background

Penn Autism Clinic conducts **intake and assessment** for children and young adults who have autism spectrum disorder (or are suspected to have autism spectrum disorder) and are covered by the employer-sponsored plan. The clinic develops **care plans** for other providers, tracks progress on those plans quarterly, and helps families with individualized education program (**IEP**) meetings with schools.

Payment  Financing 



### Payment/Financing Innovation

The employer-sponsored health plan that covers University of Pennsylvania and University of Pennsylvania Health System employees provides Penn Autism Clinic with a **total budget** to cover its services to plan members.

# Promising themes

Opportunity  
for true  
creativity



Care model first,  
money second

Early evidence  
for reduced  
hospital costs

Drive and  
willpower

# Still Missing

Scalability  
beyond the  
committed  
core

Data across  
systems



Innovations in  
Home and  
Community Based  
Services (HCBS)

Variety in the  
alternative  
payment models  
tested