**EVALUATING DC'S MEDICAID PROVIDER ECOSYSTEM FOR** PARTNERSHIP **OPPORTUNITIES TO STRENGTHEN YOUR CLINIC'S NEGOTIATING** POSITION

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## GOALS



To help providers better understand how to evaluate the legal risks and benefits associated with different provider networks (i.e., Clinically Integrated Network (CIN), Independent Practice Association (IPA) and Accountable Care Organizations (ACO)



To make discussion less abstract, we are going to use a hypothetical clinic and evaluate risks and benefits of the different provider entities relative to our hypothetical clinic, "Neighborhood Behavioral Clinic".



To introduce the Neighborhood Behavioral Clinic and its patients' needs



## **NEIGHBORHOOD BEHAVIORAL HEALTH CLINIC**

Offers outpatient BH & SUD

**Offers Medication Assisted Treatment** 

*Informal care coordination* - CHW and Peer Support Specialist help clients with public benefit application and understanding resources available to address economic needs on ad hoc basis.

Co-located with a non-profit organization that provides a food pantry and shelter for homeless families.



## **PATIENT DEMOGRAPHICS**

## 85% Medicaid eligible / 55% Medicaid enrolled

- 50% Children and youth under age 22
- 10% Older adults age 55 and over
- 40% adults
  - 25% speak a language other than English as their primary language
    - 15% Spanish is primary language
    - 10% Amharic

50% of clients have moved more than once in the past year, 30% of moves were due to eviction.

30% of clients have a felony record.



