

### **Building State Capacity** Findings from the Medicaid IAP Evaluation

Medicaid and CHIP Payment and Access Commission

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## **Overview**

- Background on the Medicaid Innovation Accelerator Program (IAP) and the Center for Medicare and Medicaid Innovation (CMMI)
- Evaluation findings
  - State interest and engagement
  - Barriers to implementing IAP projects
- Policy questions and implications for future efforts to support state capacity



### **Center for Medicare and Medicaid Innovation**

- Created in 2010 to test innovations to improve quality and reduce costs
- Appropriated \$15 billion in FYs 2010–2019 and \$10 billion every ten years thereafter
- So far, about 10 CMMI models have focused on Medicaid beneficiaries, totaling about \$2 billion



# **Innovation Accelerator Program**

- Launched in 2014 to provide technical assistance (TA) to help states implement Medicaid payment and delivery system reforms
- \$100 million initially allocated over five years
  - Approximately 14 percent increase in funding for administering Medicaid at the federal level
  - Less than 0.1 percent of state Medicaid administrative funding
- Funding expired in September 2020



### **IAP Structure**

- IAP offered several TA opportunities that were structured around four program areas
  - Reducing substance use disorder (SUD)
  - Beneficiaries with complex care needs and high costs
  - Long-term services and supports (LTSS)
  - Physical and mental health integration
- States could also receive support in functional areas, such as data analytics and value-based payment
- IAP offered a variety of TA modalities, ranging from webinars and more intensive coaching



# **Findings: State Engagement**

- Widespread state interest in IAP
  - SUD and LTSS tracks were particularly popular
  - Many states used IAP to help take advantage of new CMS opportunities for SUD waivers and LTSS housing supports
- Coaching was particularly helpful for states further along in their implementation process
- States appreciated the opportunity to learn from other states participating in the same program area



#### **Geographic Reach of IAP, September 2019**



**Source:** Abt Associates, 2020, Medicaid Innovation Accelerator Program (IAP): Final evaluation report, <a href="https://innovation.cms.gov/data-and-reports/2020/miap-finalevalrpt">https://innovation.cms.gov/data-and-reports/2020/miap-finalevalrpt</a>.

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## **Findings: Barriers**

- State staffing challenges
  - State staff assigned to IAP had many competing priorities
  - Limited data analysis skills to fully use IAP simulations
- Changes in state priorities
  - Projects initiated by Medicaid agency did not always get support from state legislatures or other state agencies
- State budget constraints
  - IAP did not provide any state funding



## **Future of IAP**

- It is too early to know where the Biden administration will focus its CMMI efforts
  - CMMI could continue IAP or create new TA models
  - CMMI could also increase investments in other Medicaid-specific models
- The IAP evaluation findings can help inform future efforts to support state capacity



# **Policy Questions**

- What is the value of federal investments in state TA?
- Where should CMS focus its TA efforts?
- How can federal TA be better coordinated with the tools and authorities that states are using to pursue Medicaid program innovations?





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