The Affordable Care Act’s Section 2703 Health Home Option
The ACA Heath Home Option

- 90% FMAP for care coordination provided in conjunction with a health home
- States determine which chronic condition(s) population to include
- Can be limited to certain acuity levels and by geography
Population Selection

- **Must** have:
  - Two chronic conditions
  - One chronic condition and “at risk” for another
  - Only one chronic condition if it is a “Serious Mental Illness”

- **May** include the ACA Medicaid expansion population

- **Must** include Dual eligibles and 1915(c) populations that meet the State’s condition criteria

- The State **may** set acuity level eligibility requirements and geographic limits.
Covered Services

• Care coordination services provided in conjunction with a Health Home = 90% FMAP

• Direct medical services, such as in-depth assessments and prevention services are not eligible for 90% FMAP.
Assessment of Options

• Over the next few months DHCS will assess these options:
  – Conditions to be included and acuity level
  – Geographic area and systems of care: managed care, FFS, LIHPs
  – What applicable care coordination services are currently being provided vs. new services
  – Fiscal effects of implementation in near term for State General Fund.
Timeline

• Within the next month DHCS will contact CMS:
  – Availability of planning grant funds
  – Submit clarifying questions about the option

• Over the next few months - conduct an assessment of options and fiscal effects

• No CMS time limit/due date for planning grant or program implementation

• 90% FMAP is available for eight quarters
QUESTIONS

Email: brian.hansen@dhcs.ca.gov