

Managed Long-Term Services and Supports Stakeholder Meeting

March 31, 2017



Department of
Medicaid



Department of
Aging

Welcome

Barbara R. Sears, Director
Ohio Department of Medicaid

Medicaid Enrollment

- Over three million very low-income Ohioans receive health coverage through Medicaid.
 - » covers more than half of all the births in the state, almost half of all children, many low income working families and the oldest, sickest, frailest and most medically complex patients in Ohio.
- 86 percent of Medicaid enrollees receive health care benefits through one of six private managed care plans.
 - » Ohio Medicaid paid those plans \$13.7 billion in 2016 to coordinate care and provide access to a comprehensive set of medically necessary services.
 - » Ohio Medicaid pays the health plans monthly, per person, using capitation rates.

Long-Term Services and Supports Transition to Managed Care

Patrick Stephan, Director of Managed Care
Ohio Department of Medicaid

MyCare Ohio

- Ohio was the third state in the nation to earn federal approval for its Duals Demonstration, and is considered a national leader for its efforts.
- *MyCare Ohio* is a five-year demonstration program launched in 2014 and ending in 2019
 - » Approximately 108,000 individuals in 29 counties are enrolled
 - » Opt in rate of nearly 70%
 - » Transition of Care Requirements
 - » Care Managers to coordinate all care
 - » Member success stories & some improving trends
 - » Role of AAAs

Goal: Move 100% to Managed Care

- Six years ago, Ohio repealed its fee-for-service Medicaid program and replaced it with private sector health plans.
- This was the first step in moving all Medicaid enrollees to managed care.
- Children in Custody, Adopted Children, BCCP Individuals, Medicaid eligible individuals enrolled in BCMH Program are now served by a managed care plan.
- Optional enrollment for individuals with developmental disabilities on a HCBS Waiver administered by DODD.

Benefits of Managed Care

- Care management → Better health outcomes
- Expanded access to care and provider networks; plans must have enough providers on panel
- Dedicated points of contact for members
 - » Toll-free member services call center
 - » Toll-free nurse advice line, available 24/7
- Health and wellness programs
- Enhanced accountability through monitoring by Ohio Medicaid to ensure plans are meeting their obligations
- Priorities of MCPs linked to state's key health care improvement efforts

Next Steps To Improve Care Coordination

- Extend the benefits of care coordination to all remaining populations
- Ohio Medicaid, in partnership with the Ohio Department of Aging, will implement the new Managed Medicaid Long-Term Services and Supports (MLTSS) program on July 1, 2018 to include:
 - » individuals receiving community and facility based long term services and supports; and
 - » individuals dually eligible for Medicaid and Medicare who are not participating in the My Care Ohio program.
- Participants in the Medicaid Buy-in Program for workers with disabilities will no longer be excluded

MLTSS Program Goals

- Promote the health, safety, and well-being of Medicaid recipients – through *care management*
- Expand community LTSS options, and streamline and standardize the way people *access* them
- Create a system where health care providers are *incentivized* to keep patients healthy and eliminate gaps in service;
- Strengthen the focus on *quality measurement*, including both quality of life and quality of care, in order to achieve better outcomes;
- Strengthen health care and LTSS delivery systems;
- Ensure transparency, accountability, effectiveness and efficiency of the program; and
- Ensure *long-term sustainability* of the system as demand for LTSS grows by controlling costs.

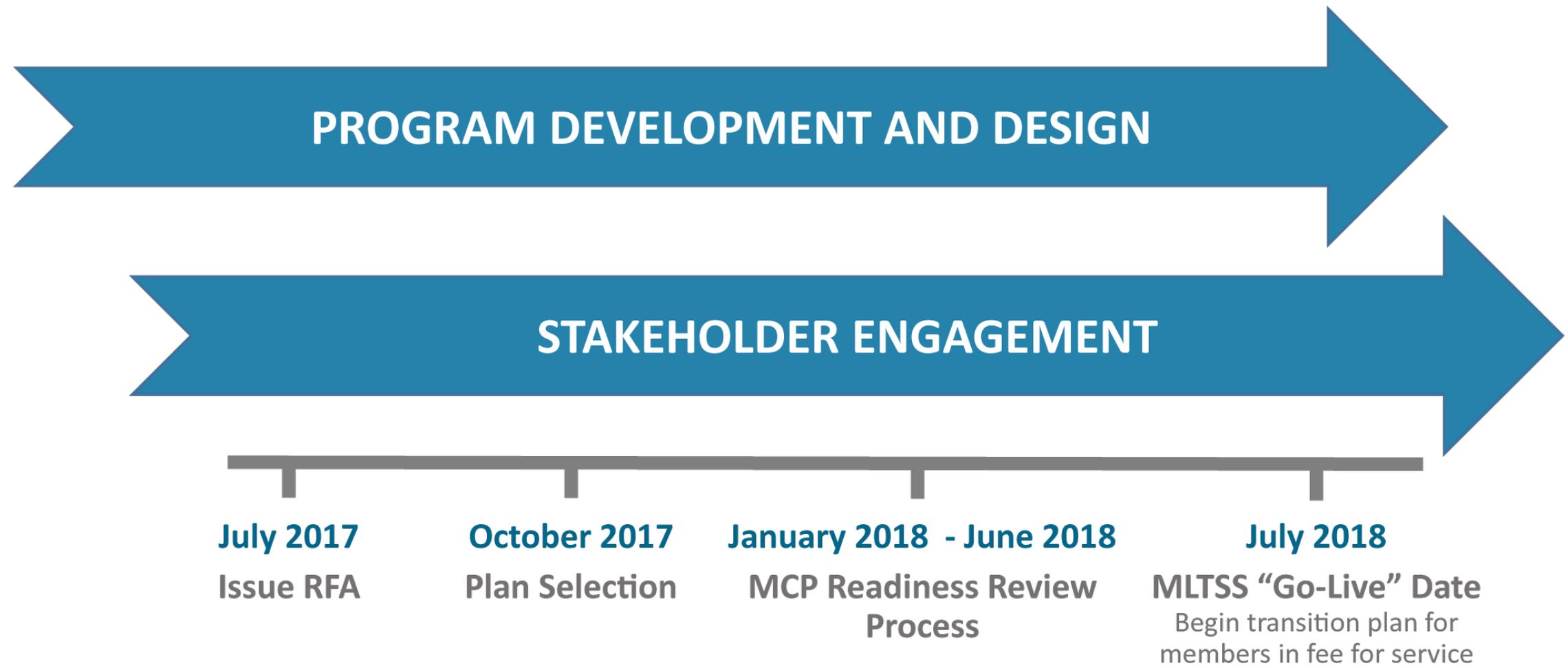
Covered Benefits

- Benefit package includes all benefits available through the traditional Medicaid program
- Physical Health Care Benefits
- Behavioral Health Services
- Long-Term Services and Supports
 - » Waiver services (including a self-direction option and independent providers as a provider type)
 - » Nursing facility services
- MCPs may elect to include additional “value-added” benefits in their health care packages (i.e. additional dental and vision benefits, access to transportation, etc.)

Quality and Performance Improvement Strategy

- Pay-for-Performance
- HEDIS / CAHPS
- External Quality Review
- NCQA Accreditation
- Waiver Assurances
- Quality Assurance and Performance Improvement Structure
- Ohio Department of Medicaid Monitoring and Oversight

DRAFT Timeline



Managed Care Plan Selection Process

- Ohio Medicaid will issue a Request for Application (RFA) to competitively procure at least three, statewide managed care plans to participate.
- Selected managed care plans will undergo an extensive readiness review to:
 - » Ensure they are ready to pay claims;
 - » Enroll members;
 - » Provide continuity of care;
 - » Offer an adequate provider network (urban and rural); and
 - » Fully meet the needs of members.

Initial Design Ideas

- Member Transition to MLTSS
 - » Carefully developed materials and resources that are easy to understand
 - » 90 day notification to individuals
 - » Phased in approach over 6 months with transitions occurring every 60 days
 - » Permit care coordination/service authorization and other pre-enrollment activities
 - » Lock in period
- Single Entry Point (SEP)
 - » Utilize SEP for individuals accessing LTSS

Initial Design Ideas

- Transition of Care
 - » Individuals retain like services and providers during transition period
- Waiver Services
 - » Streamline waiver services – one waiver for all members and all ages
 - » Package of services and supports to promote independence in the community that align waiver service definitions and provider qualifications
- Comprehensive Assessments
 - » Standardize comprehensive waiver assessment across all avenues
- Provider Reimbursement
 - » Prompt pay requirements to clarify state expectations by provider type - for timely payment of claims

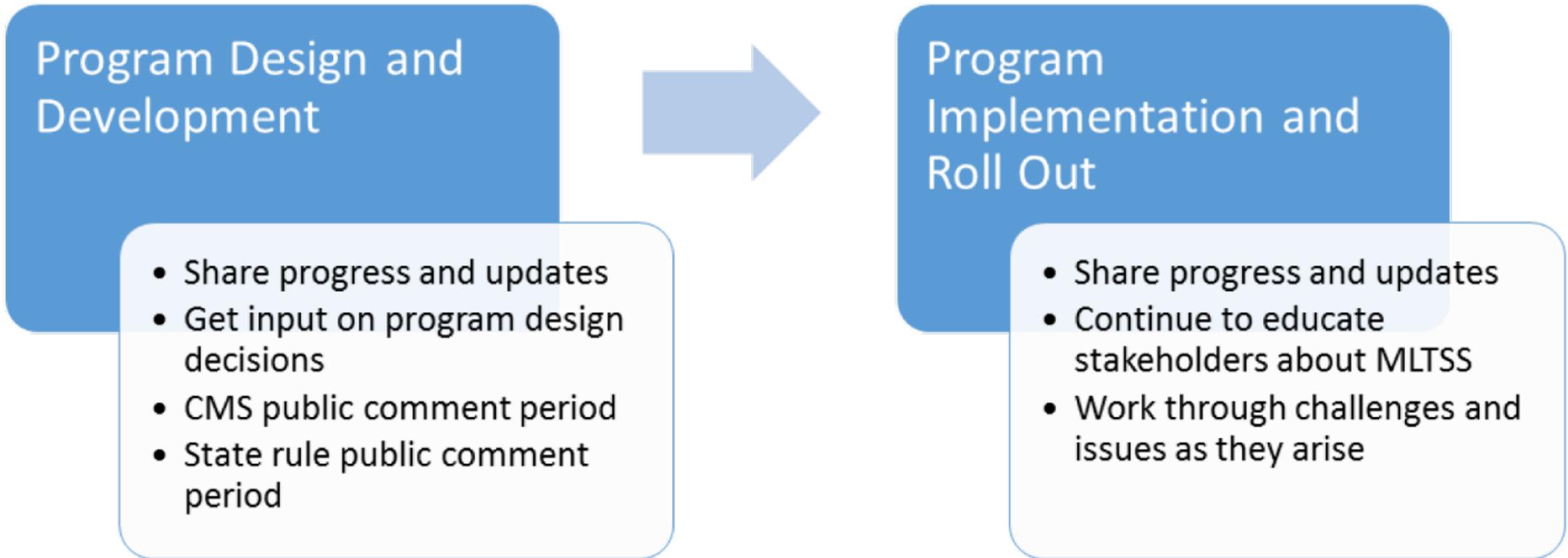
Additional Design Ideas

- Role of the Area Agencies on Aging
 - » Learned through MyCare that AAAs were critical
- How do we secure higher performing providers?
 - » Can we reward higher performing nursing facilities
- Collaboration is critical
 - » MCP engagement and collaboration with stakeholders
- Additional support to enrollees before, during and after transition
 - » Ohio Medicaid Hotline
 - » Ombudsmen
 - » Managed care plans

Stakeholder Engagement

Sherri Warner, Beneficiary Ombudsman
Ohio Department of Medicaid

Stakeholder Engagement Overview



Stakeholder Engagement Overview

- Initial Stakeholder Meeting – Friday, March 31, 2017
 - » Monthly stakeholder meetings will start in May 2017
- Stakeholder Work Groups
 - » Engage existing work groups and create new work group to help with development of MLTSS program
 - » Membership is open
- There will be other opportunities for public feedback, including a formal public comment period for the waivers and OAC rule changes

Stakeholder Work Group Description

Workgroup	Meeting Frequency	Topics
State Plan Work Group	Monthly	State plan home health, PDN and hospice policy
Self-Direction Workgroup	Monthly	Self direction options
HCBS Waiver Rules Work Group	Monthly	HCBS waivers rules
Front Door Work Group	Monthly	Level of Care, PASRR, Screening and Assessment, Front Door Activities including implementation of Single Entry Point system
MLTSS Work Group	TBD	Update on progress of plan designs and implementation rollout

Sherri Warner, Beneficiary Ombudsman

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Your contact for...

- » interest in joining a the MLTSS Stakeholder group or other work group;
- » questions or concerns about the MLTSS program; and
- » any other feedback!

Panel Discussion

Barbara Sears	Director, Ohio Department of Medicaid
Jennifer Davis	Assistant Director, Ohio Department of Aging
Patrick Stephan	Director of Managed Care
Matt Hobbs	Chief, Division for Community Living
Kim Donica	Chief, Long-Term Services and Supports
Roxanne Richardson	Chief, Managed Care Policy
Karla Warren	Managed Care Compliance Manager
Sherri Warner	Beneficiary Ombudsman

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