Ohio Medicaid
Managed Care Procurement Update

Medical Care Advisory Committee (MCAC)

Thursday, February 20, 2020

Managed Care Mission Statement

Focus on the **INDIVIDUAL** rather than the business of managed care

We want to do better for the people we serve

Medicaid Managed Care Procurement Project Phases

Current Phase

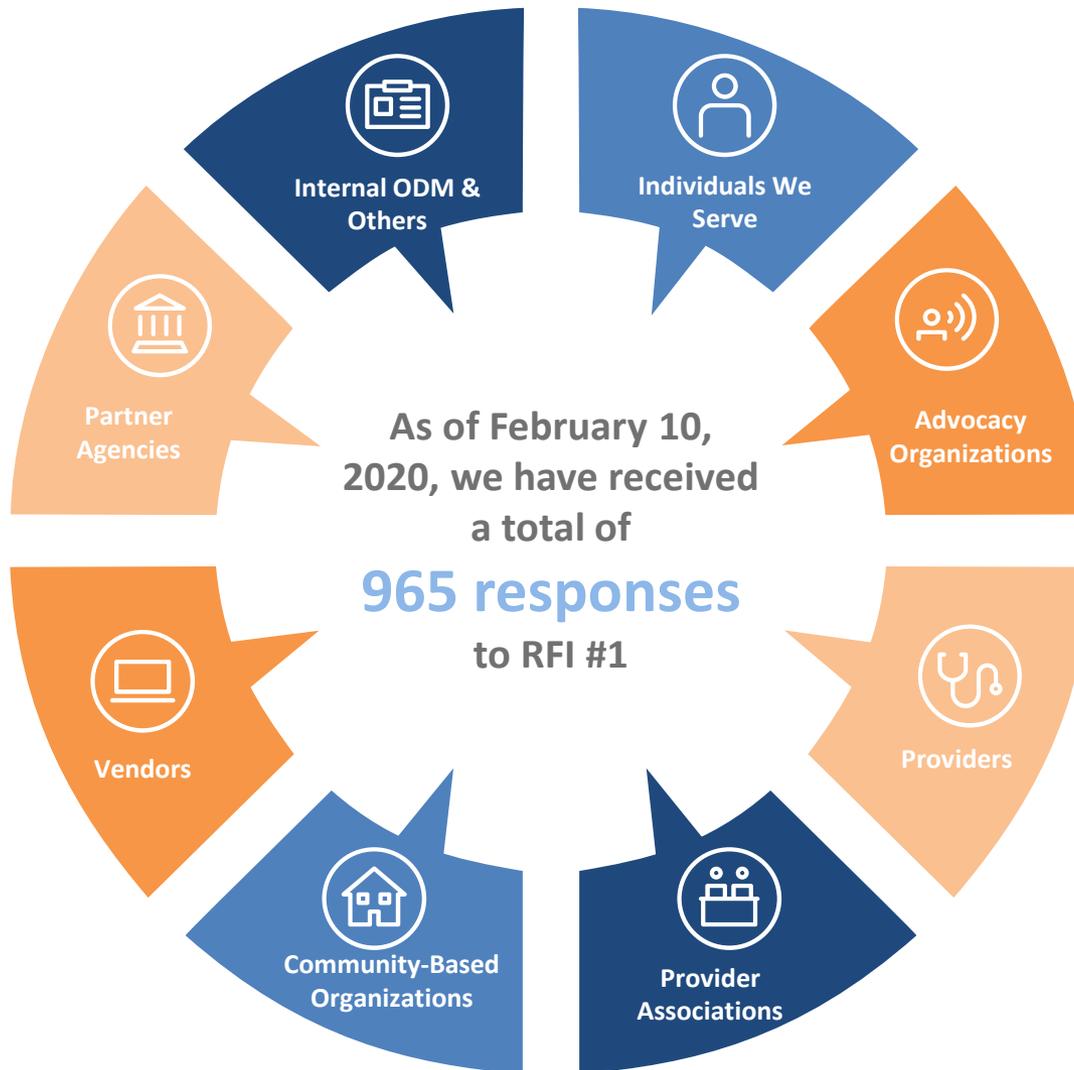| RFI #1 Feedback from Individuals & Providers	RFI #2 Feedback from Potential Bidders	RFA and Award	Implementation, Readiness & Post Implementation
Gather input and feedback from individuals and providers first	Gather input on capacity to address potential changes, based on feedback from individuals and providers	Communicate major milestones related to RFA release, response evaluation & contract award	Collaborate to ensure a smooth implementation and understand experience post-implementation

**The current focus of the managed care procurement is on gathering feedback to inform future design decisions.**

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RFI #1 Feedback Snapshot

A look at who has been providing input through RFI #1

As of February 10, 2020, we have received a total of **965 responses** to RFI #1

- Internal ODM & Others
- Individuals We Serve
- Advocacy Organizations
- Providers
- Provider Associations
- Community-Based Organizations
- Vendors
- Partner Agencies

Listening Sessions with Individuals

ODM traveled across the state to meet directly with managed care members

**149 Individuals – 42 Partner Organizations – 19 Sessions**
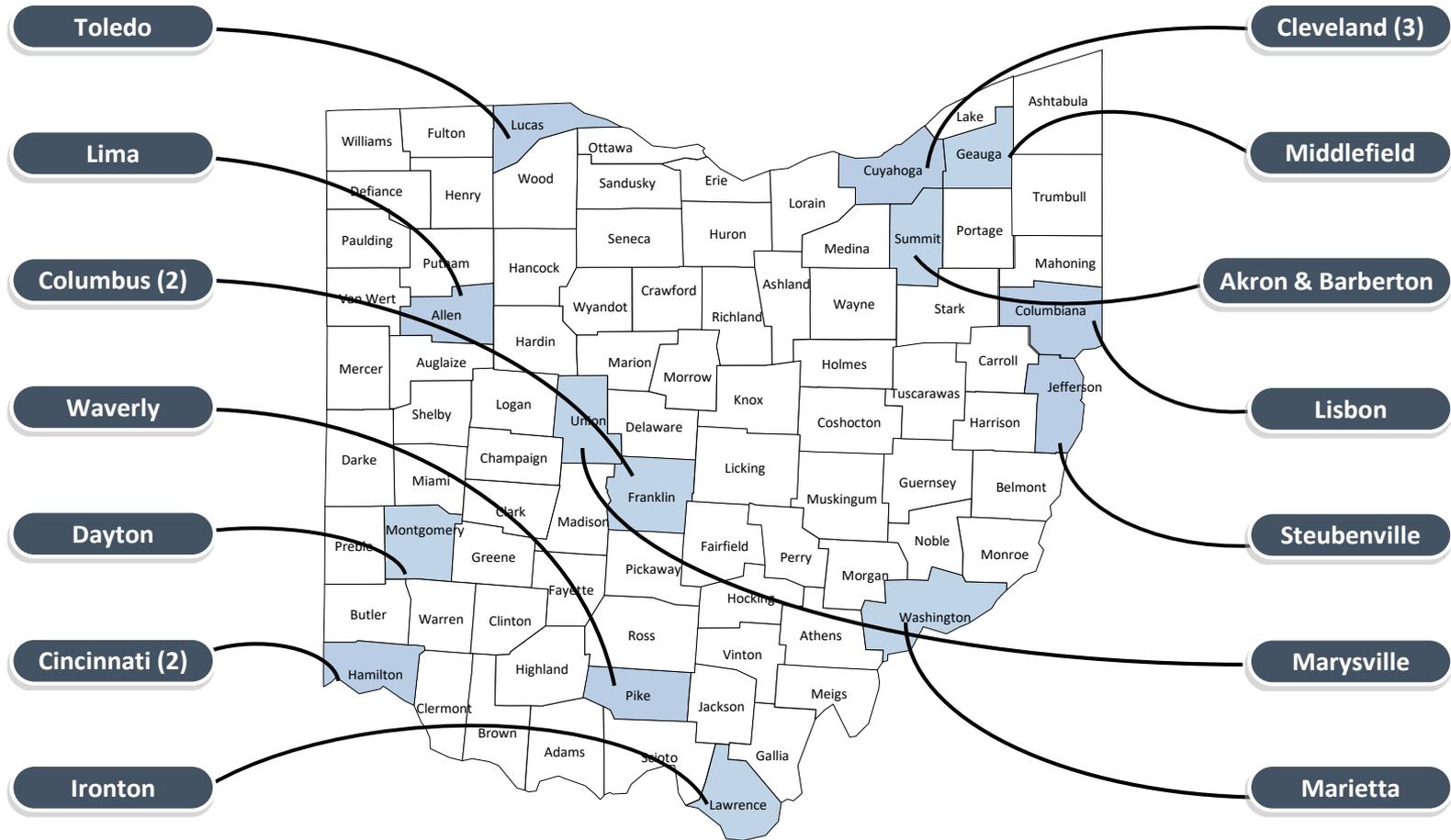
RFI #1 Feedback from Individuals

What we heard from individuals, caregivers and advocates

Access to Services

- Access to specialty, vision, and dental services
- Community organization partnerships
- Discrepancy between prior authorization processes
- Transportation availability and cost
- Enhanced access to care coordination
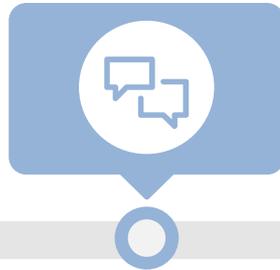
Member Experience

- Plan comparison
- Personalized care
- Up-to-date provider rosters
- Targeted and clearer communications
- Robust care coordination for individuals with complex needs
- Appreciation for conducting meetings outside Columbus

Benefits Administration

- Benefits are viewed as a lifeline
- Denials cause fear and uncertainty
- Perceptions about benefit limits
- Resources for understanding benefits
- Differences between managed care plan benefits administration
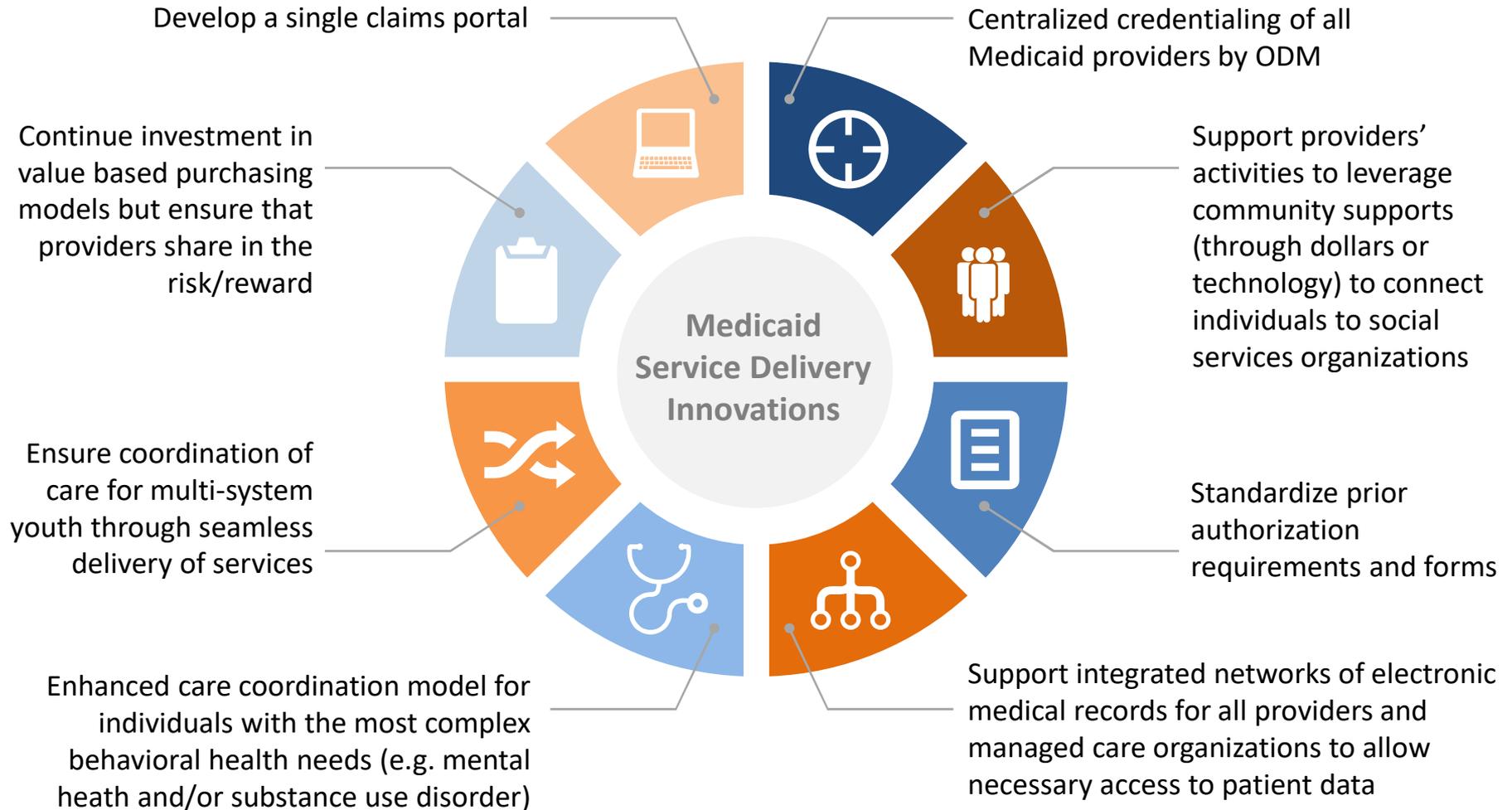- Confusion around Medicaid vs. Medicare coverage

Providers & Treatment

- FQHCs are a critical source of health care
- Access to out-of-state providers

RFI #1 Feedback from Providers & Associations

What we heard from providers and associations

Develop a single claims portal

Continue investment in value based purchasing models but ensure that providers share in the risk/reward

Ensure coordination of care for multi-system youth through seamless delivery of services

Enhanced care coordination model for individuals with the most complex behavioral health needs (e.g. mental heath and/or substance use disorder)

Medicaid Service Delivery Innovations

Centralized credentialing of all Medicaid providers by ODM

Support providers' activities to leverage community supports (through dollars or technology) to connect individuals to social services organizations

Standardize prior authorization requirements and forms

Support integrated networks of electronic medical records for all providers and managed care organizations to allow necessary access to patient data

RFI #2 Overview

Outlining our vision to implement some of the most innovative health care reforms in the country

Goals for a Reimagined Medicaid System in Ohio

Improve Wellness and Health Outcomes

Emphasize a Personalized Care Experience

Support Providers in Better Patient Care

Improve Care for Children and Adults with Complex Needs

Increase Program Transparency and Accountability

RFI #2 Input Requested

Improve Wellness and Health Outcomes

Improve Wellness and Health Outcomes

To improve health outcomes and support individual wellness, ODM invites input on ways to formalize coordinated care partnerships between community-based organizations and managed care organizations that will reduce infant mortality and preterm births, increase healthy behaviors, promote tobacco cessation, and address health care inequities.

RFI #2 Input Requested

Emphasize a Personalized Care Experience

Emphasize a Personalized Care Experience

The RFI invites ideas that strengthen the managed care organization and provider capabilities to deliver more personalized care. It seeks feedback on improving member-provider communications, technologies to increase consumer engagement and programs to enhance wellness behaviors and outcomes for individuals and their families as they access a continuum of care tailored to their unique needs.

RFI #2 Input Requested

Support Providers in Better Patient Care

Support Providers in Better Patient Care

In order to better support providers, ODM requests ideas and best practices to reduce administrative burdens such as centralized credentialing, standardized authorizations, and simplified medication management.

RFI #2 Input Requested

Improve Care for Children and Adults with Complex Needs

Improve Care for Children and Adults with Complex Needs

To strengthen care for children and adults with complex medical and behavioral health needs, ODM plans to develop a formalized model of care coordination, to tailor behavioral health services to meet the unique needs of children served by multiple state systems and children with other complex behavioral health needs, and to create robust partnerships between community-based organizations and managed care organizations.

RFI #2 Input Requested

Increase Program Transparency and Accountability

Increase Program Transparency and Accountability

Program transparency through the use and analysis of real-time, reliable data can dramatically strengthen care oversight and outcomes. ODM seeks input to enhance data analytics and consumer health care dashboards, such as its newly introduced unified prescription drug list, to streamline support and drive accountability across the continuum of care.

RFI #2 Milestones & Considerations

Key things to know about the RFI #2 phase of the managed care procurement

RFI #2 Timeline

February 4, 2020
RFI #2 released

February 12, 2020
Question & Answer (Q&A) period closes at 8:00 a.m. EST

March 3, 2020
RFI #2 responses due at 4:00 p.m. EST

March 16 - 27, 2020
ODM interview period and request for clarifications

April 3, 2020
Request for clarification closes at 8:00 a.m. EDT

Additional Resources

We are committed to ongoing, two-way communication between stakeholders and ODM

Managed Care Procurement Website
managedcare.medicaid.ohio.gov

Managed Care Procurement Mailbox
MCProcurement@medicaid.ohio.gov

Questions?

Ohio Medicaid managed care procurement