

MO HealthNet Managed Care Updates

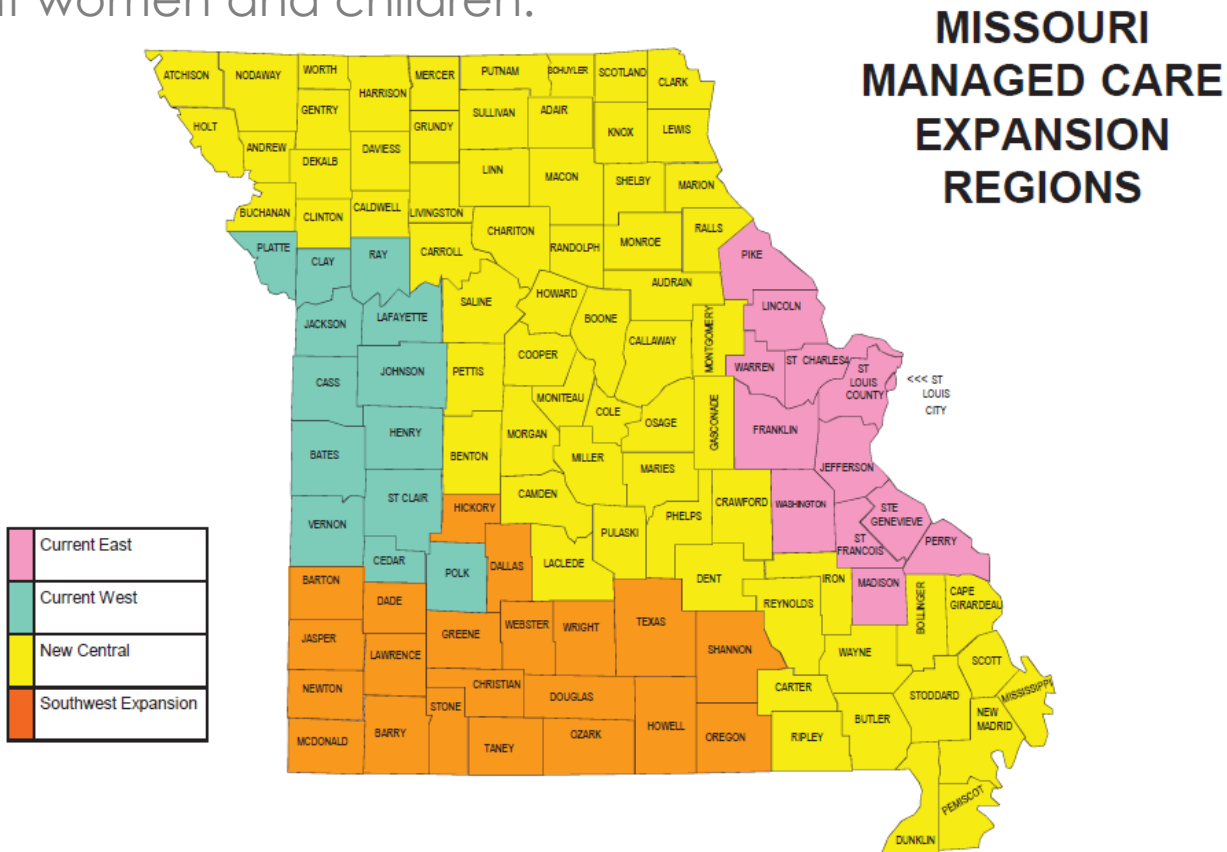
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MO HealthNet Oversight Committee
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Statewide Managed Care

- The State of MO will issue a Request for Proposal (RFP) this spring to begin the process of moving Missouri's Medicaid system to a statewide managed care system for low income custodial parents, pregnant women and children.



Planned Statewide MC Timeline

- April 29, 2016
 - RFP and Data Book prepared by the MO HealthNet Division will be made available by the O/A Division of Purchasing for competitive solicitation
- July 1, 2016
 - Bid/Proposal period closes. Materials due to the Office of Administration, Division of Purchasing.
- July – September 2016
 - Bids will be scored by an evaluation committee made of representatives from applicable state agencies
- October 1, 2016
 - Contracts will be awarded by the Office of Administration
- October 2016 – April 2017
 - The companies awarded the managed care contracts will develop their provider networks and begin pre-enrolling Medicaid participants
- May 1, 2017
 - Medicaid services through the statewide managed care system begin

Provisions of the RFP

- The first two months capitation payment will be delayed
- Three plans awarded statewide
- Contracts renewable annually for up to five years
- Dental benefit will be included in the same manner as the current managed care contracts
- To increase accountability of health plans the performance incentives capitation withhold will increase from 2.5% to 5%.
- Current 60% max market share per plan cap will be lowered to 55% to further right-size market share across plans
- No change in the minimum market share of 20%
- Allowance for Medicaid eligibility expansion, should the General Assembly pass legislation authorizing such expansion

Provisions of the RFP

- Services to remain carved out of the Managed Care Program to include:
 - Pharmacy
 - Services PA'd before the plan enrollment starts
 - Targeted Case Mgmt for Behavioral Health
 - Environmental Lead Assessment
 - Autism Waiver (up to the cap only)
 - Applied Behavior Analysis (ABA) for under 21 y.o.
 - Transplants

RFI Concepts Included in RFP

- Delay the first two months capitation payments over a period of time to manage the one-time costs of converting a FFS population to MC
- Minimize disruptions for participants and maximize efficiencies for care management through extending the contract period from a term of three years to five with optional renewals
 - Improved access
 - Improved quality
 - Improved workflow/relationships
 - Improved cost effectiveness

RFI Concepts Included in RFP

- Increasing Provider Incentive Programs (P4P) opportunities with:
 - Accountable Care Organization (ACO),
 - Health Homes
 - Local Community Care Coordination Programs (LCCCP)
 - Person Centered Medical Homes (PCMH)
 - Other Care Management Organizations

RFI Concepts Included in RFP

- Fully integrated IT and Care Management Systems
 - Allowing access to timely and accurate data to support care
- Universal Prior Authorization Form
 - Across all 3 health plans
- More robust data collection, allowing adjustment to improve quality
- Programmatic innovations, relationships and reimbursement policies, including incentives to risk sharing to improve costs and outcomes



Access

Secret Shopper Survey

- Withhold Program Performance Indicator - Provider Panel Directory Completeness/Accuracy
 - Secret Shopper Surveys
 - Health Plan Website Accuracy
 - New Patient Acceptance Rates
- External Quality Review Organization (EQRO) Behavioral Health Concepts, Inc.
 - 2015 (July-Dec) Secret Shopper Results
 - Provider listing accuracy did not meet 90% requirement
 - PCPs ranged from 44% - 80%
 - Psychiatrists ranged from 43% - 63%
 - 42% of providers were not taking new patients
 - PCPs ranged from 42% - 72%
 - Psychiatrists ranged from 26% - 63%