

# **MCM Commission**

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**NH Department of Health  
and Human Services**



**April 9, 2015**

**New Hampshire Hospital**

# Agenda

- Monthly Enrollment Update
  - MCM Step 1
  - NH HPP
- Third MCO- RFA
- MCM Step 2 Status Update
- Summary of Public Forums
- Developmental Services Quality Council Letter and Report to Governor
- County/DHHS Collaboration on Long Term Care
- Q&A from Commission and Public

# Setting the Context

## Care Management Program

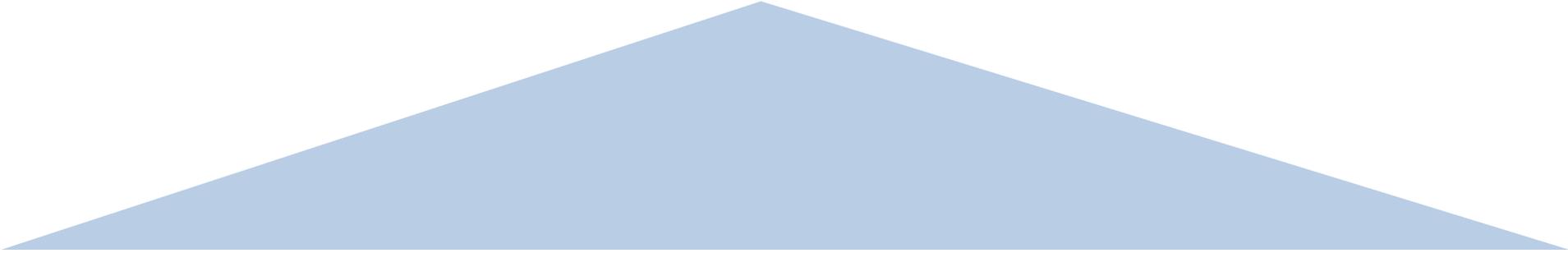
December 1, 2013 –April 1, 2015

@ 16 Months



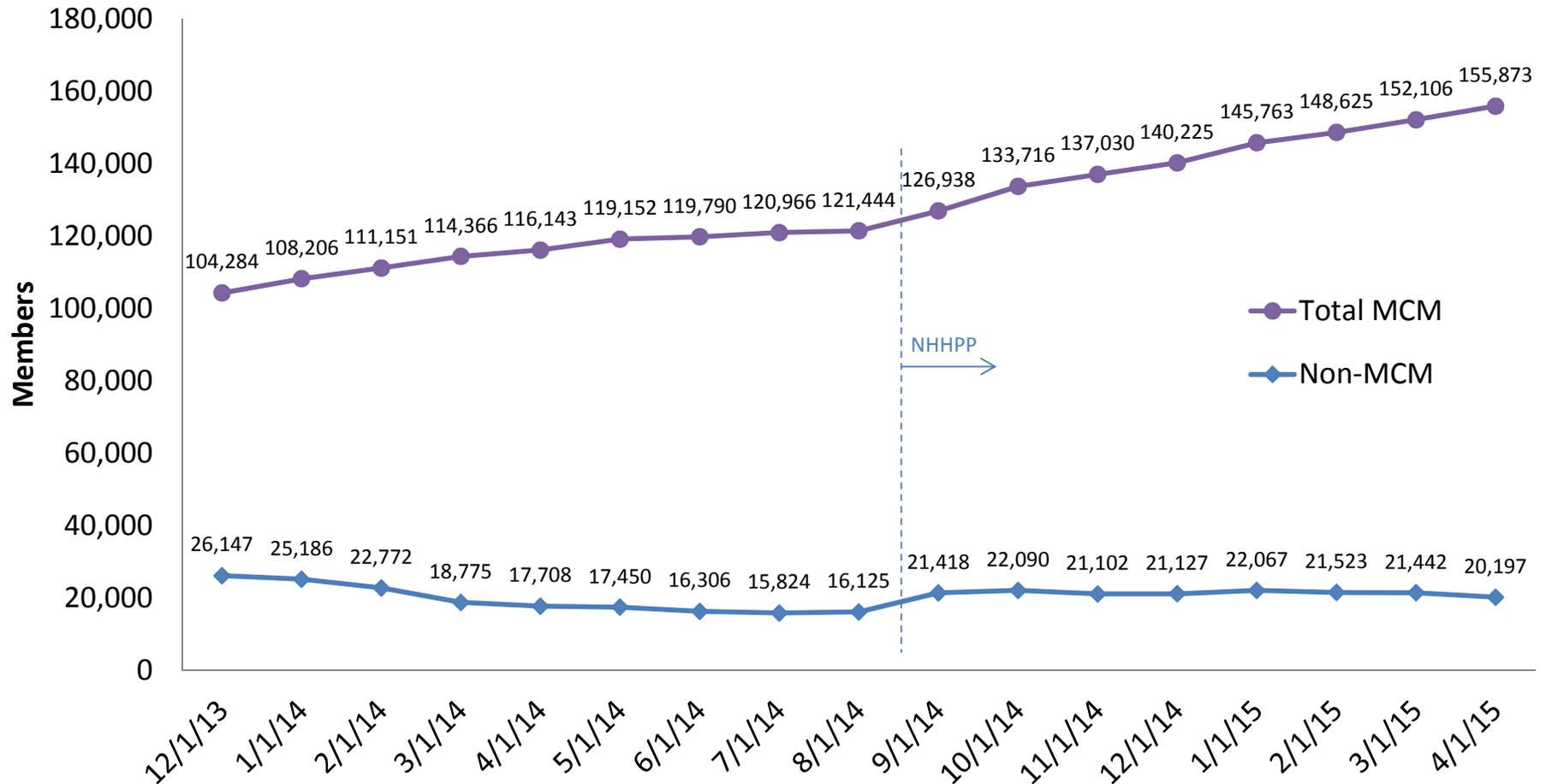
# Guiding Principles of NH MCM

- Whole person management and care coordination
  - Foundation for Medicaid transformation
- Increase quality of care – right care, at the right time, in the right place to improve beneficiary health and quality of life
- Payment reform opportunities
- Budget predictability
- Purchasing for results and delivery system integration



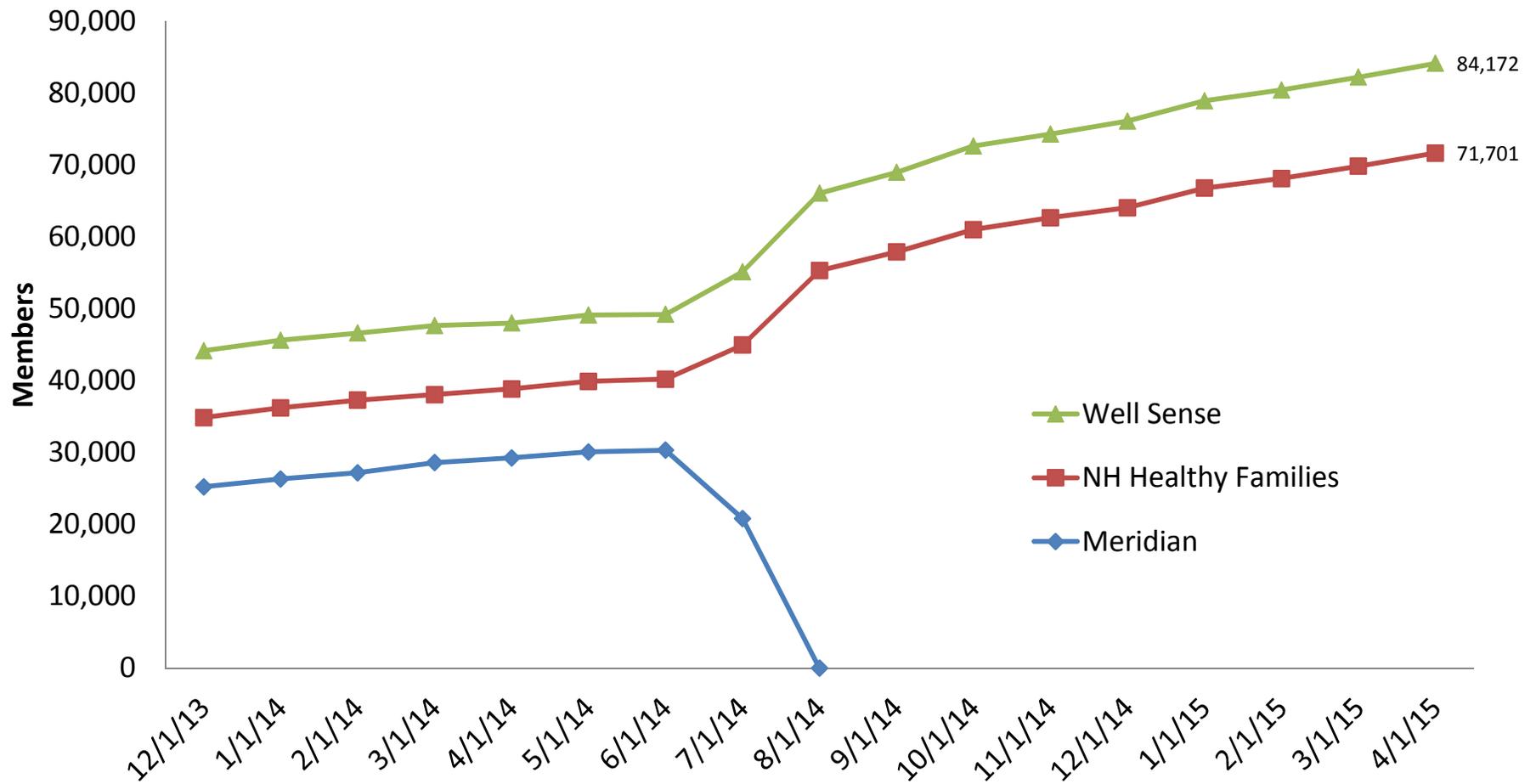
# MCM Monthly Enrollment Update

# NH Medicaid Care Management Enrollment, 12/1/13 – 4/1/15

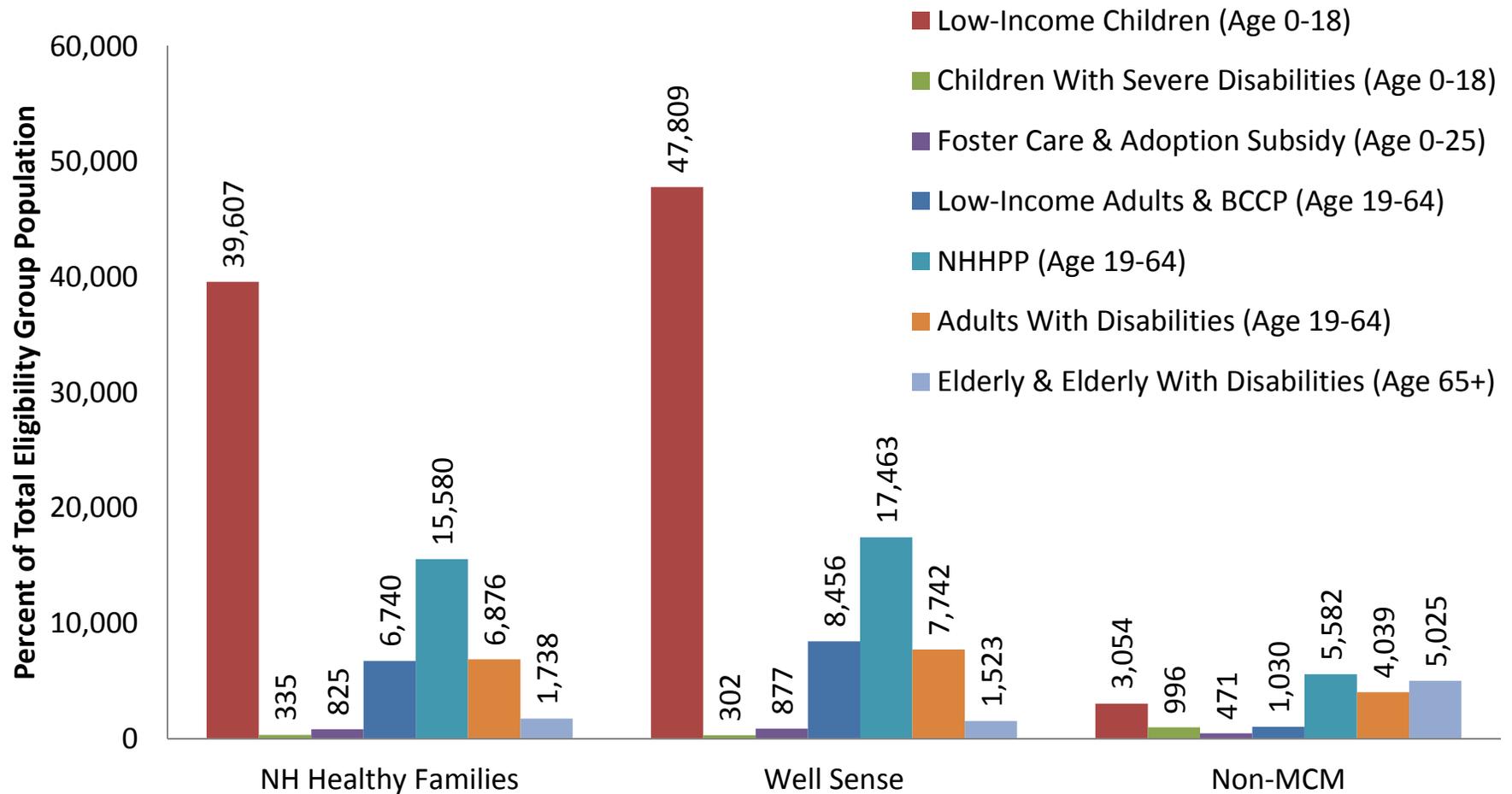


Note: Excludes members without full Medicaid benefits (Family Planning Only & Medicare Savings Plans)

# NH Medicaid Care Management Enrollment by Plan, 12/1/13 – 4/1/15

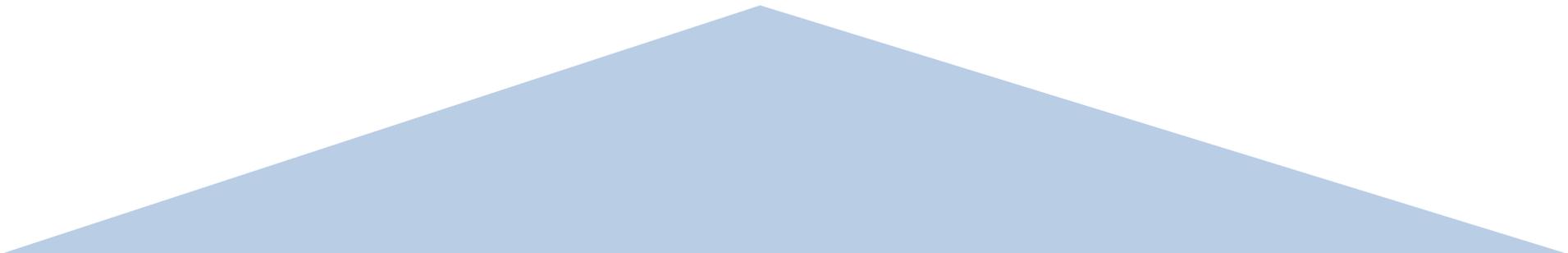


# NH Medicaid Care Management by Eligibility Group, 4/1/15



Note: Excludes members without full Medicaid benefits (Family Planning Only & Medicare Savings Plans). Non-MCM includes members transitioning into MCM.

Source: NH MMIS as of 4/2/15; Data subject to revision.



# NH Health Protection Program & Other Updates

# NH HPP Update

## As of 4/7/2015

- Total Recipients
  - 38,217
  - 18,861 are new to DHHS
    - 10,034 are new to NH HPP but have been clients in the past
- Benefit Plans
  - 35,777 are in the ABP (Alternative Benefit Plan)
  - 2,039 of Medically Frail are in the ABP
  - 401 of Medically Frail in standard Medicaid
- Care Management / HIPP
  - 229 Enrolled in HIPP
  - 263 are Potential HIPP
- Bridge
  - 17,654 are enrolled in WSHP
  - 15,690 are enrolled in NHHF
  - 4,381 are in Fee For Service/not yet enrolled in a plan

# Request for Application (RFA) Third MCO

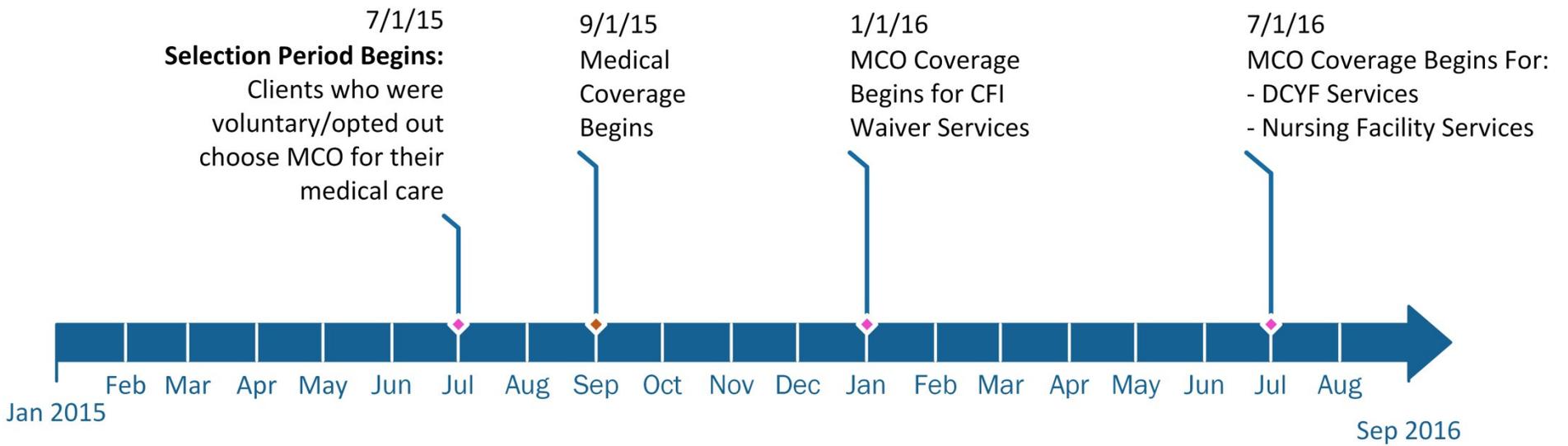
- Request for applications (RFA) for a healthcare company to become part of the Medicaid Care Management (MCM) program released on April 1, 2015
- The RFA, which is posted on the DHHS website at <http://www.dhhs.nh.gov/business/rfp/index.htm#15-dhhs-cm-01>, is seeking applications from vendors to provide managed care services to New Hampshire Medicaid clients. Currently, two managed care organizations are participating in the program.
- We are issuing this RFA to ensure that we maintain the value of the Medicaid Care Management program through strong partnerships with the organizations providing services to our clients.

# RFA Timeline

- Release RFA- April 1, 2015
- Mandatory Letter of Intent- April 20, 2015
- RFA Questions due- April 29, 2015
- RFA Vendors Conference- May 7, 2015
- DHHS answers RFA questions- May 15, 2015
- Application submission – June 1, 2015

# MCM Step 2 Status Update

- Summary of Stakeholder/Public Forums have been updated.
- “Cross Walk” document to principles has been updated.
- 1915 (b) waiver is being readied for submission to CMS, gives the state authority to mandate enrollment in managed care for the currently voluntary populations.
- 1915 (c) waiver (CFI only) is also in the process of being developed for submission, public hearing will be scheduled. This waiver is to bring the CFI waiver services into the managed care delivery system.
- Transition Plan Framework submitted to CMS in advance of March 17<sup>th</sup> deadline.



Dates To Be Determined:  
MCO Coverage for remaining waiver services:

- Development Disabilities
- Acquired Brain Disorder
- In Home Supports

# Step 2 Round 2 Forums

- There were five stakeholder sessions held in December
- DHHS or Health Plan staff not included in numbers

Round Two Stakeholder Forums and Attendance Mandatory Enrollment and the Integration of Choices for Independence Waiver and Nursing Facility Services	
Date and Location	Approximate Stakeholder Attendance
<ul style="list-style-type: none"> <li>• DHHS Brown Building Auditorium – Concord, Monday, December 1<sup>st</sup></li> <li>• Keene Public Library – Keene, Tuesday, December 2<sup>nd</sup></li> <li>• Genesis Healthcare – Lebanon, Monday, December 8<sup>th</sup></li> <li>• Littleton Area Senior Center – Littleton, Wednesday, December 10<sup>th</sup></li> <li>• DHHS Brown Building Auditorium – Concord, Tuesday, December 16<sup>th</sup></li> </ul>	<ul style="list-style-type: none"> <li>• 82</li> <li>• 21</li> <li>• 22</li> <li>• 11</li> <li>• 51</li> </ul>

# Themes from Round Two Stakeholder Forums for Phase I of Step 2 MCM

Common themes heard from stakeholders during the sessions in December include questions about:

- Many stakeholders that attended the forums/meetings had strong opposition to the MCM program and the movement of Long Term Care supports and services into managed care
- How DHHS and the managed care organizations (MCOs) will ensure conflict-free case management
- The Nursing Facility reimbursement rate setting process and the blending of supplemental payments (MQIP and ProShare)
- Applicable and/or relevant National Committee for Quality Assurance (NCQA) requirements
- The rate negotiation process between providers and MCOs
- Contracting requirements between the MCOs and current case management agencies operating in the State
- Resolving critical Step 1 MCM issues prior to further Step 2 MCM planning implementation
- How Medicaid impacts primary and secondary insurances and Third Party Liability
- Information technology and MMIS needs as it relates to sharing patient information with the MCOs
- DHHS approval of MCOs' utilization management policies and authorization criteria
- Changes and/or improvements to the grievance and appeals processes
- The need to maintain continuity of care and services, specifically within the CFI Waiver
- Lack of confidence in the MCOs' experience with long term services and supports (LTSS)
- Research and lessons learned from other states implementing managed long term services and supports (MLTSS) programs

# Step 2 Round 3

- There were five stakeholder sessions held in March
- DHHS or Health Plan staff not included in numbers

Round Three Stakeholder Forums and Attendance Mandatory Enrollment and the Integration of Choices for Independence Waiver Services	
Date and Location	Approximate Stakeholder Attendance
<ul style="list-style-type: none"> <li>• DHHS Brown Building Auditorium, Concord: Tuesday, March 3rd</li> <li>• Public Hearing - DHHS Brown Building Auditorium: Tuesday, March 10<sup>th</sup></li> <li>• Plymouth State University, Plymouth: Monday, March 16th</li> <li>• Community Campus, Portsmouth: Wednesday, March 18th</li> <li>• DHHS Brown Building Auditorium, Concord: Tuesday, March 31st</li> </ul>	<ul style="list-style-type: none"> <li>• 0</li> <li>• 31</li> <li>• 1</li> <li>• 6</li> <li>• 25</li> </ul>

# Themes from Round 3 Stakeholder Forums for Phase I of Step 2 MCM

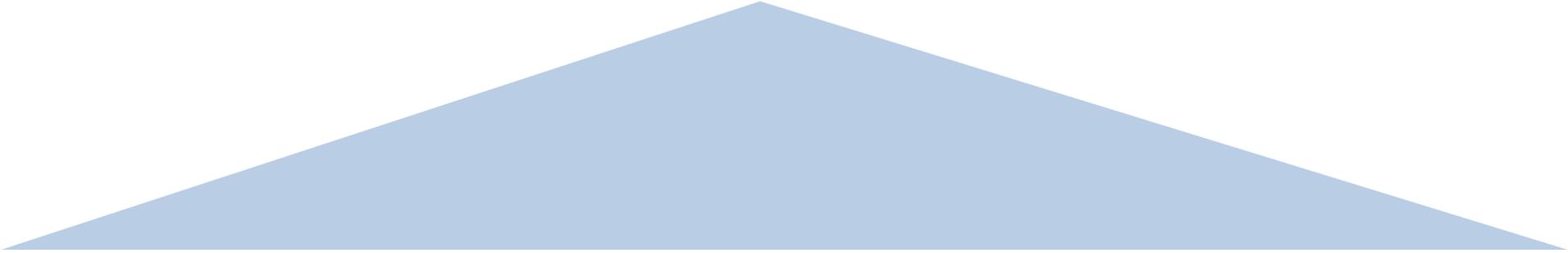
- Concerns about MCO network adequacy.
- The rate negotiation process between providers and MCOs
- Concern about if the decision to separate the integration of CFI services and the integration of nursing facility services will cause a disincentive to support community care.
- Contracting requirements between the MCOs and providers
- The importance of conflict free case management
- The need to maintain continuity of care and services for children with special health care needs and participants in the CFI Waiver program
- Concern about the documentation burden for providers.

# Developmental Services Quality Council

- Developmental Services Quality Council completed and forwarded it's Annual Report to Governor Hassan on February 6, 2015
- This report fulfilled their requirement which was outlined in the law that established the Council
- Several recommendations were made to DHHS during this period
- The Quality Council Annual Report along with all the current activity of the Council can be found at
- <http://www.dhhs.nh.gov/dcbcs/bds/qualitycouncil/index.htm>

# County/DHHS Collaboration on Long Term Care

- The counties play an important role in the state's health delivery system, particularly around long term care
- The counties recognize the so called "silver Tsunami" that is emerging in NH with the aging of the population
- DHHS and the counties are meeting this month to discuss the imperative of long term care planning in NH
- DHHS and the counties recognize the need to collaborate on the future of long term care in NH as well as on how step 2 of MCM is implemented
- All levels of county leadership will be engaged in these efforts including county commissioners, finance staff and nursing home administrators



# Questions?