# Meeting Minutes September 8, 2020 – One Care Implementation Council Meeting

Meeting Location:Zoom

Date:September 8, 2020 10:00 AM – 12:00 PM

Council Member attendees:Francesca Abbey, Suzann Bedrosian, Crystal Evans (Co Vice-Chair), Dennis Heaphy (Chair), Jeff Keilson, David Matteodo, Paul Styczko (Co Vice-Chair), Kestrell Verlager, Chris White, Sara Willig, Darrell Wright.

Key Stakeholders and Support Staff attendees: Corri Altman Moore (MassHealth), Leslie Diaz (My Ombudsman), Jennifer Baron (CMS), Maggie Carey (UMMS), Daniel Cohen (MassHealth), Hilary Deignan (UMMS), Sophie Hansen (CCA), Henri McGill (MassHealth), Prakrity Silwal-Karki (MassHealth), Danielle Westermann (Tufts).

Unable to attend: Dan McHale

Presentations/Discussions: Agenda; July 14th IC meeting minutes; *MassHealth Presentation Implementation Council Meeting, September 8;* *My Ombudsman Presentation for the One Care Implementation Council Meeting, September 8.*

[Documents available online](https://www.mass.gov/service-details/one-care-implementation-council)

# Executive Summary and Action Items:

## Welcome / review July 14th meeting minutes

Paul Styczko, Implementation Council (IC) Vice Co-Chair, opened the meeting and asked for a motion to approve the minutes from the July 2020 meeting. The motion was seconded and carried.

Rachel Brill, Senior Policy Analyst at Community Catalyst, invited interested IC members and their networks to consider participating in upcoming focus groups that will be looking at the enrollment experience for individuals who are dually eligible for MassHealth and Medicaid and choose to enroll in One Care versus those who opt out of One Care or choose another plan. Participation will help develop policies to improve the enrollment experience. The focus group will be meeting Thursday, October 29th at 1:00 PM.

### For follow-up: Rachel will send information on the focus group to both plans and IC members to share with their networks.

## MassHealth Updates

Corri Altman Moore, Director of Integrated Care for MassHealth, presented *MassHealth Presentation Implementation Council Meeting, September 8th* updating the Council on plan engagement with My Ombudsman; the contract requirements for the Comprehensive Assessment, MDS-HC Assessment, and Individualized Care Plan; Data on Assessments Completion, Care Plan Completion, and Annual Flu Vaccination Data; and Plan-reported COVID-19 Data for Integrated Care Plans.

## Update from CMS

Jennifer Baron, Senior Advisor, Medicaid Medicare Coordination Office, Centers for Medicare &**Medicaid Services (CMS) stating that CMS is putting an emphasis on promoting flu prevention and education considering COVID-19. CMS, MassHealth and the One Care plans will be partnering to send out postcards to all One Care enrollees with information on flu vaccines. Jennifer Baron invited feedback from IC meeting attendees on ways CMS can amplify the importance of flu vaccines and to support local vaccination initiatives already happening in the community.**

## My Ombudsman

Leslie Diaz, Acting Director of My Ombudsman presented *My Ombudsman Presentation for the One Care Implementation Council Meeting, September 8,* describing My Ombudsman services for One Care members using two scenarios.

# Meeting Minutes:

## Welcome / review July 14th meeting minutes

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## MassHealth Update

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### Questions / Comments:

* IC member suggested providing One Care members education on how to participate fully in all evaluations and assessments that go into care planning and so members are empowered to make their own care plan goals.
* IC member stated surprise that the number of comprehensive assessments completed on time by plans was reduced during the second quarter of 2020.
	+ MassHealth stated that this could be due to an influx of enrollments during that time combined with the fact that these were the first comprehensive assessments done during COVID.
* IC member asked if MassHealth reviewed individual files or some other process to ensure that enrollees are provided with a person-centered MDS evaluation, assessment, and care team meeting?
	+ MassHealth stated that the data in the presentation shows when the assessments were completed but does not provide input on the quality of the assessments that were done. MassHealth stated they reviewed the plan assessments during the recent One Care plan procurement process and will be looking at the quality of the assessment process more closely during the readiness review process. MassHealth further stated they will also be offering technical assistance to plans on the care planning process during the readiness review.
* IC member asked how assessments are evaluated to ensure they are “person-centered” such as how many assessments contain member-identified goals.
	+ MassHealth added that the contract team audited enrollee assessments in the past but that hasn’t been done in the last few years – but MassHealth would like to start doing this more regularly when the new One Care plans start in 2022. MassHealth stated evaluating how many enrollees identified their own goals and objectives in the care planning process was a good framing to consider for measuring how person-centered an assessment has been and welcomed further feedback from the IC members and others on how to measure this.
* IC member stated that they would like more information about My Ombudsman in the future including whether there is a sign in American Sign Language (ASL) for this.
* IC member announced that this is the last meeting they will be attending as they are resigning with the Implementation Council.

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### Questions / Comments:

* IC member asked what other strategies [beyond those shared in the presentation] My Ombudsman (MO) is utilizing to provide information on MO to One Care members.
	+ MO stated that the outreach team is working with plans and care coordinators to get the word out to One Care members.
* IC member suggested that independent living centers (ILC), and the One Care plans could include information about MO in their monthly newsletters.
* IC member asked how MO tracks themes such as a lack of responsiveness by a plan or a care coordinator.
	+ MO stated that they track identified trends and themes in their data base (such as care coordination issue and inappropriate care denials) and they are adding a data analyst role to the MO team to identify trends going forward and do qualitative analysis. MO further stated that when members file grievances that is another important way to track issues with plans.
* IC member asked how MO ensures equity between what the different One Care plans are providing members. IC member suggested an example of this would be if one plan is covering tablets to reduce isolation despite the fact that they have a dual – use, medical and nonmedical, but the second plan will not cover a tablet to address isolation.
	+ MO responded that the data analyst role was created to identify and investigate these kinds of differences. MO added that in every case the specifics are important for determining if there is inequity, but that if MO sees multiple cases establishing a pattern of denials that is helpful. MO stressed that more calls from One Care members will help them to identify these kinds of patterns.
* IC member asked if MO has access to One Care members’ care plan goals.
	+ MO stated that they do not have access to member goals or to member care plans in most cases – though MO will request the care plan if the One Care member consents in specific cases. MO acknowledged that direct access to the care plan would be valuable.
	+ MH stated that for MO to get access to a One Care member care plan the member would have to give permission for that to happen. MH added that if the member gives permission to share the care plan with MO, it should not be a problem for MO to see the care plan.
* IC member asked if there were any contract restrictions that would prevent MO from providing information to the IC.
	+ MO representative stated they are new to the role and will continue to grow relationships with the plans and others.
* IC member shared that in their work as a community partner with consumers receiving medications for addiction treatment (MAT), they have encountered issues with clients who unexpectedly lose their MassHealth benefits and therefore access to their necessary medications. IC member stated that MO helps their consumers get MassHealth reinstated. IC member stated that MO has been a good service for his consumers and that MO should periodically remind MassHealth enrollees about their services, so they remain aware.
	+ MO replied that the hope is that as more enrollees use the MO services, they will become familiar and comfortable contacting MO on their own in the future.
* IC member encouraged MO to continue to get the word out about their services so those who need the service can get it!
* IC member asked if an enrollee would be assigned to the same Ombudsman if they call MO for a second issue, after having resolved an issue with them earlier?
	+ MO stated that they always try to reassign repeat callers to the same Ombudsman unless the member states specifically that they want a new Ombudsman, or a better fit exists.
* IC Chair asked if there is data collected by MO that they cannot share.
* MH stated that they are piloting an email to all MassHealth members to increase awareness about the MO services using a vendor that will report back information on the emailing such as how many people open the email.

The meeting was adjourned.