# Meeting Minutes February 14, 2023 – One Care Implementation Council Meeting

Meeting Location:Zoom

Date:February 14, 2023, 10:00 AM – 12:00 PM

Council Member attendees: Crystal Evans (Vice Chair), Dennis Heaphy (Chair), Jeff Keilson, David Matteodo, Dan McHale, Kestrell Verlager, Chris White, Sara Willig.

Council Members not in attendance: Suzann Bedrosian, Darrell Wright.

Key Stakeholders and Presenters: Corri Altman Moore (MassHealth), Joe Baker (Mathematica), Diane Beaver (Mathematica), Leslie Darcy (OLTTS), Leslie Diaz (My Ombudsman), Tony Dodek (UHC), Elizabeth LaMontagne (MassHealth), Henri McGill (MassHealth), Deanna Simonds (UHC), Lisa Fulchino (THU), Mark Waggoner (CCA), Anna Williams (CMS).

Meeting Support from UMass Chan Medical School: Hilary Deignan, Kasey Delgado, Cassidy DiRamio, Maddy Vinton.

Presentations

* Presentation to One Care Implementation Council on behalf of the Medicare-Medicaid Coordination Office (MMCO), *Preparing for MassHealth Renewals*
* *My Ombudsman Review of Quarter 4 2022 Data for One Care Plans*

## Additional Meeting Materials

* Agenda
* December and January Meeting Minutes

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

# Meeting Minutes:

## Chief of OLTSS Introduction

Leslie Darcy, Chief of the Office of Long Term Services and Supports (OLTSS), introduced herself to the Implementation Council.

### Questions/Comments

* What will your role be during the One Care transition phase from Medicare Medicaid Plan (MMP) to Dual Eligible Special Need Plan (D-SNP)?
  + During the transition from MMP to D-SNP, Darcy will support Corri Altman Moore, Director of Medicare-Medicaid Integration Policy, and ensure that the integration of One Care is preserved.

## MassHealth Staffing Update

Henri McGill presented One Care Program Leadership updates.

## Mathematica

Joe Baker and Diane Beaver from Mathematica, and independent research company, presented *Presentation to One Care Implementation Council on behalf of the Medicare-Medicaid Coordination Office (MMCO)* on the Massachusetts One Care Demonstration Beneficiary Experience Research.

### Main Points for Discussion

* Research Goals
* Methodology
* Key Findings
  + Cross cutting findings and findings for key subgroups
* Special Considerations
* Possible Next Steps

### Questions/Comments

* Did Mathematica see any differences in the data when broken down by race?
  + Mathematica found that members reported different experiences based on their primary language but not based on race.
* IC member commended Mathematica on their research concerning visually impaired members.
* Did the results regarding people who moved include those who moved very significantly from urban to rural areas, or did it include those who moved within the same urban setting?
  + From Mathematica’s understanding, the criteria for member’s who moved was that the member moved outside of their previous service area requiring a switch to a new care coordinator.
* How does a person who has low vision go a year without a white cane?
  + This was one extreme example of barriers to getting Durable Medical Equipment (DME). Mathematica does not have the details of this member’s experience.
* Were you able to draw any conclusions about behavioral health?
  + Most members surveyed had behavioral health needs and did not report any issues accessing behavioral health.
* Will Mathematica continue these surveys on a regular basis or do follow up surveys?
  + Mathematica has no plans to do follow up surveys at this time.
* Vendors should be held responsible for violating Americans with Disabilities Act (ADA) communication requirements.
* Members’ lack of being able to recall that they have a care plan is an important finding that seems to get lost in the way that it is presented. The care plan is supposed to be the centerpiece of the member’s relationship with their care coordinator and the One Care plan.
* Making sure the One Care provider network continues to grow is essential for One Care to grow as a program.
* How much time does a care coordinator spend with a member discussing how to access community services? How do we stimulate members to broadly think about what might be possible for them?
  + Mathematica asked members who participated in the survey what community resources they are asking for. They also asked members what unmet needs they may have and found that the most common unmet need is housing.

## MassHealth Updates

Elizabeth LaMontagne, Acting Chief of Staff at MassHealth, presented *Preparing for MassHealth Renewals*.

### Main Points for Discussion

* Explain what a MassHealth renewal is
* Discuss why renewals are especially important this upcoming year (2023-2024)
* Share how you can prepare right now for upcoming MassHealth renewals
* Prepare you for what you need to do if you get your renewal form in the mail
* Tell you about resources available to you to help you complete your renewal

### Questions/Comments

* What can council members do to educate people about the renewal process and how important it is for everyone to take the necessary steps to ensure they maintain their MassHealth?
  + MassHealth is asking that partners to use the sample language in the toolkit to email contacts and post on social media. The toolkit also has flyers that can be printed and hung up in physical locations.
  + MassHealth also wants to make sure that all members are aware that this renewals process is coming.
* If a person has Social Security Disability Insurance (SSDI), do they still need to renew MassHealth?
  + All MassHealth members will go through the renewal process. When possible, MassHealth will try to do an automated renewal.
  + There will be an FAQ answering these and other questions.
* For visually impaired MassHealth members, there should be a way to receive communications over email in digital formats.
  + In addition to paper mail, MassHealth will be sending emails and text messages to those members with emails and phone numbers on file to notify them of the upcoming renewal process.
* Have you considered how to reach members who are at a long-term care facility other than a residential nursing homes?
  + MassHealth is working with providers and sister agencies include the Department of Mental Health to think through the best way to coordinate with facilities.
  + MassHealth is taking reasonable accommodations into consideration and are doing what they can to get the information to members.
* Would it be possible for plans to inform providers when their members are up for renewal so that the provider can assist in the renewal process – in facilities and the community.
  + MassHealth has encouraged plans to work closely with providers.
* Two populations that may need assistance with the renewal process are disabled parents who have children on their coverage, as well as people with physical disabilities who aren’t able to do paperwork without assistance.
  + MassHealth considers renewals at a household or family level. For those with disabilities that make it difficult to do paperwork, there are online options to submit the full application online or to get support over the phone.
* Is any of this information going out on a postcard so that those with physical disabilities do not have to open an envelope?
  + MassHealth will take this back and see what is possible.

## My Ombudsman Review of Quarter 4 2022 Data for One Care Plans

### Main Points for Discussion

* Review Quarter 4 2022 data for One Care plans
  + The number of individuals assisted in quarter 4
  + Inquiries and complaints opened in quarter 4
  + The themes that emerged from analysis of complaints that were closed in quarter 4
  + Summary

### Questions/Comments

* Can My Ombudsman (MYO) share more information on the twelve members who had denials that were not overturned and/or not further appealed?
  + In those twelve cases, most members were those who did not want to move on to the next level of appeals. The members were denied the benefit and going through the appeals process seemed to be a burden for them.
* Is there a way to track why members do not want to continue with the appeals process?
  + MYO can go back and look at what some of the comments captured when closing the case. Sometimes the call logs from the conversations with the member will also include information from the member about why they would not like to go through the appeals process.
* How can care coordinators reduce administrative denials?
  + MYO will reach out to care coordinators when an issue comes about that they feel the care coordinator could resolve. Oftentimes, the care coordinator is aware of the denial or the issue and has tried to reach a solution themselves unsuccessfully. If the care coordinator has already tried to get in touch with the providers, then MYO will reach out to the plans to see if they can do anything more to intervene.
* Does MYO see a difference in utilization of MYO services of those members who do get issues resolved in a positive way and those who do not?
  + Anecdotally, MYO has found that members continue to reach out to MYO for assistance if they have had a positive outcome working with them in the past. This is something that MYO could potentially look into further.
  + MYO is also looking at member satisfaction rates and trying to better understand that connection to the resolution.
* A council member shared that it can take a lot of energy to take a complaint to resolution due to barriers in the system.
* How long does it generally take to resolve cases brought to MYO?
  + MYO could look at how long it takes to resolve a case by theme for future presentations.
* Can the plans inform MYO on the outcome of appeals and other issues so that the member is not responsible for circling back to MYO?
  + It would be helpful for MYO if plans could share that information with them.
* It would be helpful for the council to know what themes are being left out of presentations because there are only eight or nine complaints.
  + MYO is limited in what they can share to maintain member privacy, but MYO can look into whether this could be shared on an annual reporting basis – with bigger numbers.
* MassHealth is looking at the care planning pieces and should be including them in the next phase of technical assistance to plans.

The meeting was adjourned.