

One Care Implementation Council's
Recommendations to MassHealth
One Care Contract 2.0

March 10, 2020

Outline

- Background
- Context (One Care enrollee experiences)
- Past recommendations
- Priorities in focus
- Next steps

IC MOU/3-way contract recommendations

- Health and Wellness Equity: eliminate disparities in health care quality and access, so that all One Care enrollees can achieve their highest level of health and wellness.
 - Require plans to participate in health equity pilot projects
 - Initial focus on women's health and wellness
- Adherence to Independent Living (IL) and Recovery Models:
 - Require plans to demonstrate care planning, goal setting and authorization processes that align with IL and recovery models
 - Integrate LTS Coordinator, CPS and CRC enrollee engagement in onboarding and care planning

IC MOU/3-way contract recommendations

- Sustainability:
 - Reduce preventable ED visits and hospitalizations
 - Reduce isolation
 - Reduce health and wellness disparities
- Provide evidence of strategy to promote sustainability:
 - Increase investment in person-centered LTSS, behavioral health and social needs
 - Rebalance spending
 - Alternative payment models
 - Evidence-based growth and sustainability

Ongoing areas of focus

- Person centered care:
 - Role of the care coordinator
 - Care planning - include the member and their goals beyond medical *and* include wellness (ex: nonmedical transportation and isolation prevention)
 - Address medical necessity and administrative prior authorization processes that act as barriers to enrollee attainment of identified care goals
 - Care coordination - high touch consistent coordination, education and advocacy to support enrollee goals
- Quality measures and transparency:
 - Increase reporting requirement by plans on percentage of enrollees accessing services, and duration and frequency of those services.

Next steps

- In collaboration with MassHealth hold public meeting to discuss the MOU for DD 2.0
- Continue drilling down contract recommendations by IC to advance increased oversight of plans by MassHealth and CMS
- Advocate for increased plan oversight using best practices from other states
- Respectfully request MassHealth to provide monthly updates to the Council on status of specific contract recommendations by the Council and other advocates, e.g., DEAF communication access and food is medicine