



One Care: Implementation Council Meeting

Executive Office of Health & Human Services

MassHealth Demonstration
to Integrate Care for Dual Eligibles

June 17, 2016, 1:00 PM – 3:00 PM
250 Washington Street, 2nd Floor
Public Health Conference Room
Boston, MA

One Care Enrollment Update



- We are very pleased to announce that Commonwealth Care Alliance (CCA) is accepting new One Care enrollments in **all of their covered counties**.
- This is a great sign that the package of financial adjustments made by MassHealth and CMS last fall is helping to bring stability to the One Care program.
- Eligible members in Suffolk and Worcester counties can now choose to enroll in One Care through either CCA or Tufts Health Unify.
- Eligible members in the following additional counties can now enroll in One Care through CCA: Essex, Franklin, Hampden, Hampshire, Middlesex, Norfolk, and Plymouth*
- To enroll in One Care, contact MassHealth Customer Service (Monday–Friday, 8:00 a.m. – 5:00 p.m.) at 1-800-841-2900 or TTY: 1-800-497-4648 (for people who are deaf, hard of hearing, or speech disabled). The call is free. For more information about One Care, please visit: www.mass.gov/masshealth/onecare.

**Commonwealth Care Alliance's service area includes all of Plymouth County except for the towns of East Wareham, Lakeville, Marion, Mattapoisett, Wareham, and West Wareham.*

Overview of Quality and Financial Data Presented at the May 24th Open Meeting



- At the May 24th Open Meeting, MassHealth presented One Care quality performance and financial data
 - Information on quality performance included data from the following sources:
 - Quality Withhold Performance
 - Consumer Assessment of Healthcare Providers and Systems Survey (CAHPS)
 - Healthcare Effectiveness Data and Information Set (HEDIS)
 - Grievance Reporting (previously presented to the Council on April 14th)
 - Financial data included:
 - Plan financial overviews
 - Per Member Per Month (PMPM) spending (by plan and by rating category)
- The next few slides are intended to provide a brief summary of some of the data presented at the Open Meeting; Council members are strongly encouraged to view the full deck on the website at: <http://www.mass.gov/masshealth/duals>
- MassHealth will be meeting with Council members on the quality workgroup to discuss additional quality metrics the Council is interested in reviewing

Brief Summary of Quality and Financial Data Presented at May 24th Open Meeting



- **Consumer Assessment of Healthcare Providers and Systems Survey (CAHPS) data** (Jul 2014-Dec. 2014):
 - CCA and Tufts consistently performed better than the Medicare Advantage Average and the Medicare-Medicaid Plan (MMP) Average (capitated model duals demonstrations)
 - CCA out-performed the national averages for Medicare Advantage plans and MMPs on all composite scores and all individual scores for CAHPS patient experience measures
 - In each measure, CCA members reported highest satisfaction, followed closely by Tufts members on 3 of their 4 measures

- **Healthcare Effectiveness Data and Information Set (HEDIS) data** (Jan. 2014-Dec. 2014):
 - All three plans participating in Demonstration Year 1 (DY1) scored above the 90th percentile for national Medicaid managed care plans for Adults' Access to Preventative/Ambulatory Health Services.
 - All three plans had scores more than twice as high as the 90th percentile for the Identification of Alcohol and Other Drug Services, meaning that One Care members with documented substance use issues were more likely to get into treatment services than individuals in the Medicaid managed care population.

Brief Summary of Quality and Financial Data Presented at May 24th Open Meeting (cont.)



- **Plan Performance on Quality Withhold Measures for Demonstration Year (DY) 1:**
 - All three plans passed each measure (Core 2.1, 5.3 and MA 5.1) in 2013 and earned back 100% of their quality payments.
 - In 2014, CCA earned 50% back; Fallon earned 100% back, and Tufts earned 75% back; see table below for more details:

2014 WITHHOLD MEASURES							
	Core 2.1* Completed Assessments	Core 5.3* Consumer Advisory Board	MA 5.1* Centralized Enrollee Record	Encounter Data	MA 1.2 Documented Discussion of care goals	MA 1.3 Access to LTS Coordinators	# Measures Passed
Benchmark	78.2%	100% compliance	71.7%	Successful submission	90.0%	90.0%	
CCA	64.4%	Pass	59.2%	Pass	90.0%	69.9%	3 out of 6
FTC	45.3%	Pass	81.7%	Pass	100.0%	100.0%	5 out of 6
Tufts	88.2%	Pass	65.4%	Pass	91.9%	81.2%	4 out of 6

*Denotes that the measure was also a 2013 quality withhold measure

- **One Care Financials:** CCA and Tufts saw significant improvements in their financials for DY2 (2015) compared to DY1 (2013/2014). This is a great sign that financial adjustments are helping to bring stability to the One Care program:
 - CCA's performance improved from a projected net loss of -6.7% in DY1 to a projected net loss of -0.1% in DY2.
 - Tufts' performance improved from a projected net loss of -1.5% in DY1 to a projected net gain of 5.5% in DY2.

Process for Amending the Three-Way Contract



MassHealth and CMS are splitting the current amendment to the Three-Way Contract into two separate amendments:

■ Extension Amendment

- To ensure no interruptions to enrollment or operations, MassHealth and CMS are working on an amendment to extend the Demonstration through December 2018.
 - Amendment to the Three-Way Contract
 - Extension to the Memorandum of Understanding
- If selected in the reprocurement, current plans would be able to continue in the Demonstration
- MassHealth anticipates that this addendum will be fully executed by the end of June 2016.

■ Policy Amendment

- Is expected to include technical fixes and policy/program updates, including input from the Implementation Council and the One Care Ombudsman (OCO)
- MassHealth plans to convene 1-2 working sessions with members of the Implementation Council (and the OCO as applicable) to discuss the Council's recommendations to the Contract
- MassHealth anticipates that the first meeting will be held in early July 2016



Visit us at: www.mass.gov/masshealth/onecare

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