

**One Care Implementation Council Meeting**

**June 17, 2016 1:00 PM – 3:00PM**

**250 Washington St. 2<sup>nd</sup> Floor Conference Room**

**Boston, MA**

**Attendees:** Suzann Bedrosian, Bruce Bird, Joe Finn, Dennis Heaphy (Chair), Jeff Keilson, Marc (Moses) Mallard, David Matteodo, Dale Mitchell, Olivia Richard, Paul Styczko, Howard Trachtman (Co-Chair), Sara Willig, Florette Willis (Co-Chair)

**Unable to Attend:** Lydia Brown, Rebecca Gutman, Denise Karuth, Dan McHale, Vivian Nunez, Remon Jourdan, Bob Rousseau

Guests: Marylou Sudders, Secretary of the Executive Office of Health and Human Services and Daniel Tsai, Assistant Secretary for MassHealth

**Handouts:** Agenda, Meeting Minutes from 5-13-16 (Draft), One Care Update, LTSS Subcommittee Meeting Summary from 4/29, Behavioral Health Subcommittee Meeting Summary from 5/26, One Care Ombudsman Presentation. Documents will be available online at [www.mass.gov/masshealth/onecare](http://www.mass.gov/masshealth/onecare).

**Next Open Council Meeting:** July 22, 2016  
1:00-3:00 PM  
1 Ashburton Place, 21<sup>st</sup> Floor  
Boston, MA

## **1) Welcome, Review of Agenda, and Approval of Meeting Minutes**

*Howard Trachtman, co-chair welcomed attendees and opened with meeting announcements.*

- An announcement was made that the Council will not meet as a full Council in August.
- The co-chair noted that first half of the Council meeting would be dedicated to regular Council business and that the Secretary of the Executive Office of Health and Human Services (EOHHS), Marylou Sudders, would be joining for the second half of the meeting which will focus on Council achievements and areas for improvement.

A motion was made to approve the meeting minutes from the May 13th, 2016 Implementation Council meeting.

The motion passed unanimously.

## **2) One Care Update**

*Corri Altman Moore, Roseanne Mitrano and Jennifer Maynard provided an update on One Care.*

### *Overview of Quality and Financial Data Reviewed at the May One Care Open Meeting*

- In response to sharing an overview of quality measurement results, a question was asked regarding how long it takes for MassHealth to receive quality measurement results from One Care plans.
  - It was noted that some quality results such HEDIS (Healthcare Effectiveness Information Data Set) results are received approximately one year after the measurement period. For example, if measures fielded from July to December 2014, the results were received during the summer of 2015.
  - It was noted that CAHPs (Consumer Assessment of Healthcare Providers and Systems) quality measures take longer to report.
  - A Council member noted that it would be helpful to identify when MassHealth receives quality data so that the Council has a better idea of the reporting timeline.
- A question was asked regarding whether the quality withhold measure about assessment completion rates included the LTSS assessment.
  - It was noted that the withhold measure referred to the comprehensive assessment. It was noted that MassHealth uses another measure to track the completion of LTSS assessments.

- A question was asked regarding how MassHealth responds to quality data such as the assessment completion rate.
  - It was noted that the MassHealth team meets with One Care plans on a monthly basis. MassHealth discusses with each plan what factors may be impacting their quality measure results and what the plans are doing to address issues that are reflected in the results.
- It was noted that quality results shared are from Year 1 of the demonstration. A comment was made that it would be useful to have a comparative analysis to compare Year 1 to Year 2 results.
- A question was asked regarding the projected losses of the One Care plan noted on slide 5 and whether the amount of loss was known to MassHealth.
  - Demonstration Year 2 revenue statistics were shared however it was noted these figures are not final as the plans are still waiting on reconciliation payments for risk corridors.
  - It was noted that Commonwealth Care Alliance (CCA) is nearly breakeven and Tufts Health Plan – Unify (Tufts) is showing a small gain for Year 2 of the demonstration.
- A question was asked regarding how much was withheld as part of the quality withhold measures.
  - In 2013, Year 1, MassHealth withheld a total of \$73,000. All plans passed the quality withhold measures and this amount was repaid to the plans.
  - In 2014, Year 2, MassHealth withheld approximately \$1.3 million and paid back a total of about \$810,000, which was distributed based on quality measure results.
- A Council member noted that the data could be reviewed in a smaller group setting such as the quality workgroup to synthesize the data to bring back to the Council.
- A question was asked regarding whether there are items that come up in the analysis that MassHealth thinks the Council should be engaged in to help assist MassHealth and the plans.
  - MassHealth noted that there is interest in hearing feedback from the Council on the data presented during the Council meeting and the more detailed data shared at the One Care open meeting held in May.
- It was suggested that the detailed data provided during the open meeting be shared for review by the Quality Workgroup.
  - It was noted that the Quality Workgroup would review the data provided at the open meeting and the full set of quality measures.

- A question was asked regarding whether only the two original One Care plans would be participating in One Care through 2018 with the demonstration extension.
  - It was noted that with the extension, MassHealth has the opportunity to re-procure plans to begin coverage in 2018.
- A question was asked regarding amendments to the three-way contract and whether these amendments would include changes to the passive enrollment process.
  - It was noted that there was nothing in the contract that changes passive enrollment.
- A question was asked regarding whether the inclusion of CSPECH (Community Support Program for People Experiencing Chronic Homelessness) in One Care should be articulated in the contract or another mechanism. CSPECH helps support individual experiencing chronic homelessness but does not provide housing.
  - MassHealth noted that contract language would likely be needed around CSPECH, however it is among the list of issues that should be included in the policy amendment or a standalone document.
- A question was asked regarding whether with Money Follows the Person (MFP) ending, there would be an additional transition support built into One Care.
  - It was noted that One Care includes a service called “Care transitions assistance” however the service is not comparable to MFP services offered for transition assistance.
  - MassHealth noted that they will follow up with their team about the question.

### **3) Workgroup Updates**

*Dennis Heaphy presented on the LTSS Subcommittee held in April, Howard Trachtman presented on the Behavioral Health Subcommittee held in May and Jeff Keilson presented on planning for the One Care plans’ presentation to the Council next month.*

#### *LTSS Subcommittee*

- One of the recommendations of the LTSS Subcommittee was to reconvene the Long Term Services and Supports Coordinator (LTS-C) Workgroup established in 2014 to assess and improve the implementation of the LTS-C role. A question was asked regarding whether a meeting of the LTS-C Workgroup had been scheduled yet by MassHealth.
  - MassHealth noted that before the workgroup is reconvened, the team would like to focus on changes to the three-way contract to determine what next steps would be needed from there.

### *Behavioral Health Subcommittee*

- The Behavioral Health subcommittee sought preliminary feedback on a draft Enrollee Information template. The goal of the template would be to provide a way to update members every six months about the members of their care team and their care plan information.
  - A comment was made that the contact MassRelay for individuals who are Deaf or hard of hearing should be moved so it is not beside the 911 emergency number.
  - MassHealth noted that they would be interested in providing comment on the template.

### *One Care Plan Presentation Planning*

- The topic of the One Care plan presentation to the Council in July will be member education, empowerment and care planning which was informed by the Early Indicators Project and discussions with the One Care plans.
- A comment was made about the importance of member understanding of the assessment and care planning process in One Care.

## **4) Council Achievements and Areas for Improvement**

*Howard Trachtman introduced Secretary Sudders. Council members led discussions on Council achievements and areas for improvement.*

### *Achieved Program Sustainability*

- Noted program sustainability achievements through collaboration with MassHealth included:
  - Improving the outreach process and member notices;
  - Improving access for members by identifying alternatives to the FFS system (ie. SCO, Home Care program);
  - Identifying challenges and issues by engaging with the One Care plans;
  - Informing methodology for studying encounter data; and
  - Improving the rates to One Care plans through national advocacy efforts.
- Noted areas for improvement included:
  - The need for more timely and actionable data in order for the Council to fulfill its role to assess and monitor One Care, and
  - User-friendly information to assist enrollees in making informed decisions about One Care and between plans.
- Suggested solutions included:
  - A reconvening of the LTS-C Workgroup to review goals from 2014 meetings and determine the effectiveness of materials produced as a result of those meetings; and

- The convening of a collaborative workgroup to assess One Care financial sustainability and the capacity and quality of One Care plans.

*Strengthened Council Role and Capacity to Support One Care*

- Noted enhancements to the Council role and capacity included:
  - The collaborative development of the 2015-2016 Implementation Council work plan that reflect the goals and priorities of MassHealth and the Council; and
  - The more dynamic and diverse state of the Council which is better able to implement the work plan due to the addition of five new Council members.
- Noted areas for improvement included:
  - Flexibility to compensate consumer members of the Council to participate in One Care activities outside of traditional meeting formats.
- Suggested Solutions:
  - Build in greater flexibility to compensate consumer Council members for activities such as serving as One Care ambassadors, educating potential enrollees about One Care, and connecting potential enrollees with resources for additional information; and
  - Provide training to enrollees about One Care benefits and care model during a mechanism such as the Ombudsman.

*Results from Collaboration*

- Noted results from collaboration included:
  - The convening of and results of the Behavioral Health privacy workgroup and the Early Indicators Project;
  - Improved relationships between the One Care plans and LTSS providers;
  - Exploration of attribution strategies for passive enrollment;
  - Improved outreach efforts with increased opportunities for enrollees to learn more about One Care; and
  - Increased plan and provider knowledge through Council informed training opportunities.
- Noted areas for improvement included:
  - Continued Council concern around passive enrollment and MassHealth staff capacity due to limited resources.
- Suggested solutions:
  - The development of two dashboards to promote transparency and build an objective process to determine One Care plan capacity to take on new enrollees. The two recommended dashboards are:

- A management dashboard for monitoring the program that includes objective measures to support sustainability and to plan for program growth, and
  - A consumer-friendly dashboard to inform potential Enrollees about their options across the healthcare system, including One Care, SCO, PACE, FFS and, eventually, ACOs.
- Secretary Sudders provided the following remarks:
    - The Secretary acknowledged her commitment to a sustainable MassHealth program. She noted that the 1115 waiver provides an opportunity for a different structure to support members on MassHealth.
    - She noted that One Care has been an incubator of change and has led to positive results for a number of people and that she is dedicated to learning from the One Care model.
    - The Secretary acknowledged data challenges experienced by the Council and acknowledged that data challenges are not unique to One Care.
    - She noted the importance and priority of hearing from MassHealth consumers about their experiences to better the program.
    - The Secretary recognized the importance of the Council's ongoing engagement with MassHealth on One Care and noted her commitment to the Council and having all voices at the table.
  - Representative of the Council expressed appreciation for the dedication of the MassHealth team.
    - A comment was made that Robin Callahan, Deputy Medicaid Director, was greatly missed by the Council.
  - A Council member commented that his participation in the Council has been a great learning opportunity for him. He noted that several months ago One Care plan representatives noted that the biggest challenge their staff is facing in providing care for members is the issue of housing.

## 5) One Care Ombudsman Presentation

*Burt Pusch, One Care Ombudsman Director, provided an overview and update on the One Care Ombudsman (OCO).*

- The OCO noted that the OCO Office's recent accomplishments included:
  - 92% resolution rate among complaints or issue brought to the OCO;
  - The development of a ten video series on basic health care rights for people with disabilities available in six languages; and
  - Positive relationships with both One Care plans and MassHealth counterparts.
- The OCO also noted areas of improvement for the office including:

- Promotion of awareness among One Care enrollees of the OCO and the services it provides; and
- Greater involvement in the identification and resolution of systematic issues as they arise.
- The OCO noted that to promote awareness about the OCO and services available the office would like to include informational material on the OCO in future mailings to enrollees.
- The OCO also noted funding limitations to conducting more robust outreach efforts.
- A question was asked about the process the OCO goes through when a member contacts the OCO with an issue.
  - It was noted that the OCO would gather information from the enrollee by phone and then follow up with the plan, providers and other relevant parties for additional information.
- It was noted that the OCO has experienced an increase in contacts related to transportation issues.

**Next Council Meetings:**

**Implementation Council**

July, 22, 2016

1:00-3:00 PM

1 Ashburton Place, 21<sup>st</sup> Floor

Boston, MA

**Implementation Council**

September 16, 2016

1:00-3:00 PM

1 Ashburton Place, 21<sup>st</sup> Floor

Boston, MA