

Meeting Minutes June 14, 2022 – One Care Implementation Council Meeting

Meeting Location: Zoom

Date: June 14, 2022 10:00 AM – 12:00 PM

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

Unable to attend: David Matteodo, Suzann Bedrosian

Key Stakeholders and Presenters: Corri Altman Moore (MassHealth), Leslie Diaz (My Ombudsman), Tony Dodek (United), Lisa Fulchino (Tufts), Henri McGill (MassHealth), Ken Preede (CCA), Mark Waggoner (CCA), Anna Williams (CMS).

Meeting Support from UMass Chan Medical School: Rebecca Elliott, Catie Geary, Olivia O'Brien, Maddy Vinton.

Presentations/Discussions: Agenda; May 10, 2022 Implementation Council (IC) meeting minutes; MassHealth presentation *One Care: Implementation Council Meeting June 14, 2022*; and My Ombudsman presentation *My Ombudsman MassHealth Health Plans*.

[Documents available online](#)

Executive Summary and Action Items:

Welcome/review May 10, 2022 meeting minutes

Crystal Evans, IC Vice Chair, opened the meeting and confirmed that the May 10th IC meeting minutes were approved as written.

MassHealth Updates

Corri Altman Moore, Director of Integrated Care presented *One Care: Implementation Council Meeting June 14, 2022*, providing information on voluntary disenrollment data from 2018-2021 by rating category, enrollment length, and county.

My Ombudsman Quarterly Report

Leslie Diaz, Director of My Ombudsman (MYO), presented *My Ombudsman MassHealth Health Plans*, which provided an overview of MYO and the 2022 quarter one report.

Meeting Minutes:

Welcome/review May 10, 2022 meeting minutes

Crystal Evans, IC Vice Chair, opened the meeting and confirmed that the May 10th IC meeting minutes were approved as written.

Questions/Comments

- CCA introduced their general manager, Mark Waggoner, to the IC.

MassHealth Updates

Corri Altman Moore, Director of Integrated Care presented *One Care: Implementation Council Meeting June 14, 2022*, providing information on voluntary disenrollment data from 2018-2021 by rating category, enrollment length, and county.

Questions/Comments

- IC member stated that in 2021 the majority of members who voluntarily disenroll switched from members who were in One Care for **less than six months** to members that had been in One Care for **more than six months**. IC member stated that increased disenrollment from long term One Care members is a trend to watch.
 - MassHealth commented that it shows that something different is happening in 2021 compared to prior years and confirmed that in 2021 longer term members were more likely to disenroll than shorter-term members.
 - Tufts stated that this change in disenrollment could be impacted by the fact that there were only two passive enrollment waves in 2021 because of the waiver renewal.
- IC member stated that the pattern of disenrollment is the same over time and asked if there is anything that can be done to reduce disenrollment.
 - MassHealth responded that they would like to group the percentage of average members that voluntarily disenroll by rating category into months because they think most disenrollment happens within the member's first 1-3 months in One Care. MassHealth added that they think disenrollment is often caused by a key provider not being available in the One Care plan's network.
 - MassHealth commented that the F1 rating category¹ probably has the issue of a key provider being out of network more than other rating categories.
- IC member asked if members that go into a skilled nursing facility are eventually automatically disenrolled from One Care.
 - MassHealth answered that One Care members and Senior Care Options (SCO) members that go into a skilled nursing facility are not automatically disenrolled. The incentives are structured for plans to invest in community-based organizations (CBOs) because the plans will be responsible for long-term facility-based care. MassHealth added that automatic disenrollment does happen in Accountable Care Organizations (ACOs) and Managed Care Organizations (MCOs) when those members go into a skilled nursing facility.

¹ F1, Facility-based Care – is a One Care rating category that includes members identified as having a long-term facility stay of more than 90 days.

- IC member asked for MassHealth to present numbers of members, in addition to the percentage of members, in future presentations.
 - MassHealth answered that they are trying to show the distribution of the data and that people can calculate the number of members using the data provided.
- IC member stated that it would be helpful to see the reasons why people are voluntarily disenrolling and if that data is not collected that it should be collected. IC member further stated that if the data on why members disenroll was shared there could be conversations around what MassHealth and the plans are doing to address the reasons why members are leaving One Care.
- IC member asked if there is an exit survey that members take when they voluntarily disenroll.
 - MassHealth stated that members need to call customer service to disenroll and customer service asks the member why they are disenrolling and the customer service representative enters a service code for the reason. MassHealth further stated that UMass Chan Medical School has conducted disenrollment surveys to understand the factors that led to a sample of people to disenroll and that the results were presented on previously by Linda Long.
- Tufts stated that voluntary disenrollment within the first six months in One Care is often associated with passive enrollment waves and members not having their full care team in network. Tufts stated that they see very low voluntary disenrollment among self-selected One Care members.
- IC member asked if anyone has looked to see if there is a connection between utilization management (UM) and people enrolling or disenrolling.
 - MassHealth stated that this is a question for the plans because they have had UM policy changes at different times.

My Ombudsman Quarterly Report

Leslie Diaz, Director of My Ombudsman (MYO), presented *My Ombudsman MassHealth Health Plans*, which provided an overview of MYO and the 2022 quarter one report.

Questions/Comments

- IC member stated that they were happy to hear that MYO is getting the word out about their services.
- IC member stated that they use the MYO service for themselves and in their job. IC member further stated that the most helpful thing about MYO is that they will explain complicated policies and procedures in a way that makes sense and that they work with people from start to finish.
- IC member stated that MYO understands and appreciates where members are coming from and how delicate their situations are and that MYO helps keep everything in place.
- IC member asked MYO if they have recommendations on areas where the IC, MassHealth, or the plans could work on and asked what else can the IC do to get the word out about MYO.
 - MYO stated that they can look into the most common issues to help make recommendations to the IC, MassHealth, and the plans. MYO further stated that they are working with the Care Model Focus Initiative (CMFI) on the role of the care coordinator. MYO stated that they would be interested in knowing how many

One Care members know about the IC and its role. MYO stated that when they do get questions about how members can get more involved they send them to the [Implementation Council](#) webpage on Mass.gov.

- MYO stated that the best way for organizations to build relationships with MYO is to get connected through someone that they know and the best way for people to learn about MYO is to keep talking about the service and to keep making the materials available.
- IC member asked what the greatest barriers are to assisting members with their complaints and denials?
 - MYO stated that working with plan liaisons is helpful, but that they cannot always get all of a case's information from them. MYO stated that they do ask the member for as much information as possible when they first reach out to MYO. MYO stated that the first thing they do is call the member service's line and ask for the member's care plan and denial information to be sent over. MYO stated that sometimes they are referred to the care coordinator, which is helpful but adds more time to understanding the denial and to helping the member file an appeal.
- IC member asked if there is a set of documents that could be standardized for plans to provide to MYO when they call, for example the care plan and a denial.
 - MYO stated that when information comes from different sources it creates a problem. For example, when there is a reduction in PCA hours it is helpful to know what the reassessment was and the breakdown of hours. MYO stated they find that care coordinators can be helpful but they do not always have easy access to this information and MYO often has to reach out to the agencies that evaluated the member to get it.
- IC member asked if MYO is able to track which appeals are successful/unsuccessful?
 - MYO stated that they are trying to track if appeals were successful or unsuccessful more closely. MYO stated that in the past they would close the case and ask members to let them know the decision from the plan but now MYO calls members to learn the outcome of their appeal.
- IC member wondered if MassHealth would be able to help ensure MYO is notified by the plans on the outcomes of appeals that MYO assisted with to help MYO keep track of outcomes as a data point. IC member stated that having this data will be helpful for understanding how successful MYO is and what happens next.
 - MYO stated that they started looking at the outcomes of all of their cases, not only appeals, this quarter. MYO stated that their satisfaction surveys ask members how satisfied they were with the plan and how satisfied they were with MYO's services. MYO further stated that MYO explains the appeals process but they do not represent the member in an appeal so they may not have an impact on the appeal.
- IC member asked what makes an inquiry become a complaint or an appeal.
 - MYO stated that the community liaison decides whether to log a member's call as a complaint or an inquiry and it is based on whether the question is applicable to the person that is calling. MYO stated that they sometimes get questions that apply to all members, other questions are specific to the member. MYO stated

- that inquires are a general question and a complaint is specific to the member and services that a member was not able to get.
- IC member asked who determines when a complaint is closed.
 - MYO stated that it depends on what the member is looking for, if the member's priority was to establish a connection with their care team, once that happens MYO might close the case. MYO stated that in other cases, if a member wants to make sure they get a scooter after being connected to their care team, MYO will stick with the member until they get their scooter. If there is an appeal, MYO stated that they will keep track of the case to inform the member of what their rights are if the case is denied. MYO further stated that if a case doesn't require MYO's direct involvement, MYO will direct the member to another organization like Health Law Advocates and will close the case once they know the connection has been established.
 - IC member stated that they would like to see a table on the number of complaints and appeals and the type of complaints or inquiries for the years 2018 - 2021.
 - MYO stated that they would be able to present that information at a future meeting.
 - IC member asked what percentage of the calls MYO receives are administrative denials rather than a denial of service.
 - MYO responded that they still see some service denials with administrative issues as the barrier, but most denials they see are not due to administrative issues. MYO stated that they will look into this more offline and will get back with an answer.
 - IC member asked to see how One Care compares to the fee-for-service system and ACOs in terms of the number of complaints and denials. IC member stated that it would be helpful to see this data in a year.
 - MassHealth stated that the comparison is something that they would also be interested in seeing. MYO stated that to provide a fair comparison they would need to allow time for MYO to become as well-known and utilized in the ACO and fee for service MassHealth programs as they are for One Care members.

Round Robin Questions / Comments

[Did you learn anything new from the presentation?](#)

- IC member stated that they learned about MYO expanding their services to everyone in MassHealth.
- IC member stated that MYO gave more information about their services in this presentation than in past presentations.
- IC member stated that they were interested that MYO is getting involved with non-profit groups.

[Based on what you learned, is there other information that you would like to see in the future?](#)

- IC member stated that they would like to see something that is the equivalent of the MYO magnet for people with visual issues.
- IC member stated the MYO magnet could be in braille or have raised print.
- IC member stated that more should be done to outreach those who are Deaf, hard of hearing, or other populations that cannot easily pick up the phone.

What can you do as Council members to increase the number of people that call My Ombudsman?

- IC member stated that the recording of the presentation should be accessible the website so they can refer people to it.
- IC member stated that anytime they encounter an individual or a client with a problem they will call MYO to start the conversation or they will share the phone number with the individual so they can follow up themselves.
- IC member stated that they could post as a guest member on relevant social media sites.
- IC member stated that they are already getting the word about MYO out through trade agencies and that they will continue to do this.
- IC member stated that they post about MYO on social media websites, and they will refer people that come to them with issues to MYO. IC member stated that they will continue to do these things to spread the work about MYO.

Meeting was adjourned.