Meeting Minutes September 14, 2021 – One Care Implementation Council Meeting

Meeting Location: Zoom

Date: September 14, 2021 10:00 AM – 12:00 PM

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

Unable to attend: Suzann Bedrosian

Key Stakeholders and Presenters: Corri Altman Moore (MassHealth), Steve Belec (CCA), Maggie Carey (UMass), Amanda Cassel Kraft (MassHealth), Daniel Cohen (MassHealth), Hilary Deignan (UMass), Leslie Diaz (My Ombudsman), Lisa Fulchino (Tufts), Sophie Hansen (CCA), Linda Long-Bellil (UMMS), Henri McGill (MassHealth), Anna Williams (CMS).

Presentations/Discussions: Agenda; July 13th IC meeting minutes; UMMS Presentation titled *Findings* from One Care Quality of Life Surveys 2017-2019; Implementation Council Presentation titled Questions and Comments on One Care Quality of Life Survey Results 2017 – 2019, One Care Implementation Council September 14, 2021; My Ombudsman Presentation titled MassHealth Health Plans, Quarter 2 Data Report, September 14, 2021.

Documents available online

Executive Summary and Action Items:

Welcome/Review July 13th Meeting Minutes

Paul Styczko, Implementation Council (IC) Co-Vice Chair, opened the meeting and asked for a motion to approve the minutes from the July 2021 meeting. The motion was seconded and carried.

Discussion with Amanda Cassel Kraft, Assistant Secretary for MassHealth

Amanda Cassel Kraft, acting Assistant Secretary for MassHealth, lead a discussion with IC Members and invited members to share experiences and ask questions.

Quality of Life Survey results/discussion

Linda Long-Bellil, Assistant Professor of Family Medicine and Community Health at Commonwealth Medicine, UMass Medical School (UMMS), presented *Findings from One Care Quality of Life Surveys 2017-2019*. The survey results include information on One Care members physical, mental and emotional health; life satisfaction; experience with specific aspects of life (such as outlook on life; mood and concentration; loneliness and social relationships); and needs for assistance.

My Ombudsman quarterly updates

Leslie Diaz, Director of My Ombudsman, presented *MassHealth Plans, Quarter 2 Data Report*, September 14, 2021. The presentation provided a review of the Quarter 2 data on inquiries, complaints and outreach; member feedback; comments and questions.

Meeting Minutes:

Welcome/Review July 13th Meeting Minutes

Paul Styczko, Implementation Council (IC) Co-Vice Chair, opened the meeting and asked for a motion to approve the minutes from the July 2021 meeting. The motion was seconded and carried.

Discussion with Amanda Cassel Kraft, Assistant Secretary for MassHealth

Amanda Cassel Kraft, *acting* Assistant Secretary for MassHealth, lead a discussion with IC Members and invited members to share experiences and ask questions.

Questions/Comments

- IC member stated that the level of support for the One Care model seems to be changing and that there is concern that One Care is becoming a medical model of care. IC member asked what can be done to ensure One Care does not lose what makes it a unique care model and differentiates it from other Managed Care Organization (MCO) plans. IC member added that to date there has not been a reduction in emergency department (ED) visits or in-patient hospitalizations.
 - Assistant Secretary Cassel Kraft responded that she would be interested to see the data on ED and inpatient hospital visits and suggested that there are opportunities to make improvements in One Care now with the new Duals 2.0 demonstration starting soon and through contract management mechanisms.
- IC member stressed that the Council wants to partner with MassHealth to ensure One Care remains a transformative care model and recognized the significant work accomplished by the MassHealth integrated care team to support One Care.
 - MassHealth integrated care team (MassHealth) confirmed that the new contract and Duals 2.0 demonstration provide an opportunity to ensure that the One Care model remains responsive to members' needs and to better manage outcomes such as a reduction in avoidable ED visits and hospitalizations. MassHealth added that they are working internally to be able to access and share data points with the Council more readily and that they will be continuing to provide the plans the intensive technical assistance (TA) and training that is currently being provided as part of the One Care / Duals 2.0 Demonstration Readiness Review to ensure the integrity of the One Care model of care is upheld.
- IC member stated that discharging members with behavioral health (BH) conditions from the hospital to the streets needs to cease. IC member wondered if the flexible dollars in One Care could be used more flexibly than they have been to help people with BH conditions as well as to reduce loneliness among One Care members.
- IC member stated that there needs to be more assistance from One Care plans supporting members in their role as parents and suggested flexible dollars should be used for those purposes as well.
 - Assistant Secretary Cassel Kraft stated that MassHealth remains committed to working with members and plans to ensure One Care is successful.
- IC member urged MassHealth to continue to consider using the <u>NCI-AD</u> measurement tool to better capture One Care plan metrics and ensure the plans are meeting member needs.

Quality of Life Survey results/discussion

Linda Long-Bellil, Assistant Professor of Family Medicine and Community Health at Commonwealth Medicine, UMass Medical School (UMMS), presented *Findings from One Care Quality of Life Surveys 2017-2019*. The survey results include information on One Care members physical, mental and emotional health; life satisfaction; experience with specific aspects of life (such as outlook on life; mood and concentration; loneliness and social relationships); and needs for assistance.

Questions/Comments

- IC member asked if there was a comparison group that could be used to help put the Quality of Life survey results into context.
 - UMMS stated that the survey results for 2020 and 2021 will be compared to data about dual eligible populations who receive fee for service (FFS) benefits.
- IC member asked how the Council can use data that is from 2017 2019 to hold plans accountable now.
 - UMMS stated that looking at trends over time can be beneficial for understanding plan performance.
- IC member noted that the number of One Care members responding to the survey declined over the years even though enrollment in One Care increased.
 - UMMS stated that a response rates to surveys generally (outside of One Care members) have been declining and wondered if it is due to fewer people using landlines. UMMS stated that the current survey method is sending the survey by mail two times and then up to five follow up calls.
- IC member asked what conclusions can be drawn about the quality of care provided by One Care plans given the static Quality of Life survey results.
 - UMMS stated that One Care is an important part of maintaining a member's quality of life, but that many factors contribute to a respondent's overall quality of life. UMMS stated that breaking the data down by One Care rating categories or other demographic categories might be one way to get more information about how One Care is impacting member quality of life.
- IC member noted that more than half of the survey respondents said that their physical, mental and emotional health had not improved.
 - UMMS stated that it will be helpful when the 2020 and 2021 data comes out to see if this trend persists. UMMS added that the current survey does not ask about access to behavioral health providers.
- IC member commented that a large number of respondents reported satisfaction with life and had a good outlook on life. IC member added that people in dire circumstances can report high quality of life but that doesn't necessarily mean they have good living circumstances.
 - UMMS agreed that many people report high quality of life regardless of health status and said that is in line with other studies on people with disabilities.
- IC member expressed concern that there was no increase in respondent's reporting around their capabilities of employment.

- UMMS stated that there is a perception that you will lose your benefits if you return to work even though there are ways to work and maintain partial benefits. UMMS suggested One Care plans could educate members on employment and volunteer options.
- IC member asked if it was possible to track what plans pay for through flexible One Care funds.
 - UMMS stated that the plans would have to answer those questions on how they track that spending.
- IC member asked how to best get an idea of what plans are spending flexible dollars on to support members.
 - UMMS stated that MassHealth might have data and that future surveys might ask members what services they are getting that might be supplemental to Medicaid / Medicare services.
- IC member noted that 30% of respondents stated they do not get adequate nutrition.
 - UMMS stated that many people cannot afford or cannot access nutritious food for a variety of reasons.
- IC member stated that in the future the Council would like to better understand the context of the survey responses to better understand the survey responses.
 - MassHealth agreed that the current Quality of Life survey responses show what is happening but don't explain why they are happening. MassHealth suggested that in the future it might be useful to have Focus Groups to get more information and context from members.
 - UMMS added that looking at five years of data (once 2020 and 2021 data is gathered and analyzed) might give a fuller picture of what is going on.

My Ombudsman quarterly updates

Leslie Diaz, Director of My Ombudsman (MYO), presented *MassHealth Health Plans, Quarter 2 Data Report*, September 14, 2021. The presentation provided a review of the Quarter 2 data on inquiries, complaints and outreach; member feedback; comments and questions.

Questions/Comments

- IC member asked if MYO shares complaints with MassHealth.
 - MYO stated that some cases are escalated to MassHealth.
 - MassHealth stated that escalated cases and other trends in complaints are an opportunity for MassHealth to address plan issues separate from the MYO complaint.
- IC member stated that it would be helpful to share with the Council 1) system wide issues identified through MYO complaints and calls and 2) how plans and MassHealth resolved the issues.
 - MYO stated that they have hired a data analyst to look at trends in MYO calls and to identify potential system wide One Care plan issues.
- IC member stated that members need energy to advocate for themselves and utilize MYO and suggested this could be a barrier to using MYO services.

The meeting was adjourned.