Integrating Medicare and Medicaid for Duals Eligibles

Open Public Meeting

Deputy Medicaid Director Robin Callahan welcomed attendees and presented updates and information on the Massachusetts Duals Demonstration timeline, implementation activities, and Demonstration options counseling. The presentation is available at www.mass.gov/masshealth/duals. Highlights from the discussion portion of the meeting, including questions from the attendees fielded by Robin Callahan, are provided below.

Timeline

- A question was asked about the timeframe for releasing rates to the ICOs. Rates will be released during the Readiness Review period. ICOs will have adequate time to review the rates prior to completing contracts with providers.
- An attendee asked if the Centers for Medicare and Medicaid Services (CMS) would release guidance about the Readiness Review process. The documents are still in the CMS clearance process. A generic Readiness Review tool will be customized for the Massachusetts Demonstration. Stakeholders noted interest in assisting with customization.
- Additional questions about the relationship between rates and the Readiness Review were asked by attendees. Also, several attendees noted concerns that provider rates could be inadequate. Signed contracts with providers will be a required component for successful completion of the Readiness Review. ICOs must demonstrate adequate networks across the mix of providers that meet CMS and MassHealth guidelines. Although CMS has not released the rates, they are based on historical spending. The fee-for-service rate structure is a logical starting place for ICO and provider negotiation.
- It was clarified that information about self-selection will be sent to eligible members approximately two months prior to the self-selection enrollment date.
- An attendee inquired about how the state will ensure savings targets are met without a reduction in services by the ICOs. MassHealth will post an FAQ document to its website (<u>www.mass.gov/masshealth/duals</u>) in the upcoming week with further information about this issue and other concerns raised by stakeholders. The Demonstration savings percentages are not off of current spending. Savings are off of projected future spending within the current system. The savings will be realized

as a result of improved care management, flexibility in service options, reductions in the need for hospital and emergency room use, and effective transitions between care settings. In addition, quality metrics will be used to measure how the program is affecting services. Stakeholder topical work groups on quality metrics are currently ongoing.

A proposal for an Implementation Council was presented and well received by attendees

- A concern was raised about ensuring geographic diversity.
- An attendee noted that staff time and capabilities are needed to prepare and present technical reports. MassHealth will have staff involved to provide support and access reports.
- It was also noted that Implementation Council activities should be documented for public review.
- A concern was noted about the amount of the consumer stipend and the timeliness of providing compensation and travel reimbursement.
- It was suggested that the Implementation Council evaluate the success of integration of physical and mental health as well as implementation of mental health parity in insurance.
- It was noted that sometimes family members and people with mental illness have different interests. Individuals with mental illness should be on the Implementation Council.
- An attendee asked if the Implementation Council will be involved in reviewing marketing materials. The Implementation Council will create a work plan, decide the appropriateness of certain activities, and decide timeframes for completing activities. MassHealth would like the Implementation Council to be involved in reviewing marketing materials.

Information was presented about the Ombudsperson role and a potential model was described

- The following concerns were noted:
 - Reports must be frequent and should go to the Implementation Council;
 - One staff person may be inadequate for the scope of work;
 - Multiple staff from different communities and with different specialties, such as a person familiar with the Deaf community, would ensure that the Ombudsperson can handle diverse questions and issues.

- There were several suggestions regarding contracting with advocacy organizations or networks for this role.
- An attendee suggested creating a triage matrix to assist with determining urgency and identifying immediate dangers. A standard question list would assist a staff member to determine if the caller is in immediate danger.
- The Implementation Council will work on further clarifying the Ombudsperson role.

An Options Counseling grant opportunity was presented

• Due to limited time for discussion, individuals volunteered to participate in a stakeholder workgroup to discuss Options Counseling implementation strategies.

Additional meetings are scheduled for:

- Open Meeting
 - December 7,2012, 10 AM 12 PM on the 21st Floor of One Ashburton Place
- Quality Metrics Work Group
 - December 7, 2012, 1 PM 2:30 PM on the 21st Floor of One Ashburton Place