

# Medicaid Program Updates

## Dr. Marcus Bachhuber

# Medicaid Program Updates

- COVID-19
- Managed care
- Coverage and benefits
- Quality dashboard

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# Federal Extension of Public Health Emergency

“...The Public Health Emergency (PHE) for COVID-19, as declared by the Secretary of Health and Human Services (HHS)... was renewed effective January 21, 2021, and will be in effect for 90 days... the PHE will likely remain in place for the entirety of 2021, and when a decision is made to terminate the declaration or let it expire, HHS will provide states with 60 days’ notice prior to termination.”

In an [HHS letter to governors](#)

# COVID-19 Vaccines and Treatments

- Testing:
  - All tests remain covered at 100% of Medicare rates
- Vaccines:
  - Provided at no cost to providers by the federal government
  - Administration is covered at 100% of Medicare rates (Louisiana-adjusted)
  - For more information: <https://ldh.la.gov/covidvaccine/>
- Treatments
  - Currently provided at no cost to providers by the federal government
  - Administration is covered at 100% of Medicare rates (Louisiana-adjusted)

# Medicaid flexibilities related to COVID-19

[Health Plan Advisories](#)

and

[Informational Bulletins](#)

are updated regularly and posted  
on the [LDH website](#).

As always, we appreciate your feedback.

# Medicaid flexibilities related to COVID-19

- Prior authorization for therapies, procedures, other services (see IB):
  - PAs extended one final time through 4/30/2021
- Resumption of PAs:
  - Each MCO will have the specific guidance posted to their provider portal sometime next week
  - Providers can start gathering information needed
  - Providers can start submitting PAs prior to 4/30 and they will be adjudicated

# Medicaid flexibilities related to COVID-19

- Questions?



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# Medicaid Managed Care Contracts

- Currently under emergency contracts with the 5 incumbent MCOs
- LDH plans to issue a new RFP for MCOs in 2021
- LDH has identified the following areas of focus for the RFP:
  - Behavioral health integration
  - Child and maternal health outcome improvement
  - Disaster planning and recovery
  - Delivery system reform
  - DOJ settlement agreement requirements
  - Fraud, waste, and abuse initiatives
  - Health equity
  - Increased MCO accountability

# Medicaid Managed Care RFP

- LDH created a webpage to access the latest information on RFP development
  - [www.ldh.la.gov/MCORFP21](http://www.ldh.la.gov/MCORFP21)
- Feedback and suggestions on how to improved the managed care program via this procurement were due by 12/29/2020
- LDH completed its review of comments and is finalizing the draft of the RFP for publication this spring to early summer
- We received a large amount of feedback on various aspects of the program and want to extend our sincere gratitude; it is helpful for the development of the RFP

# Provider Enrollment

- CMS requires that Medicaid (the state agency) enroll all providers
  - Currently, some providers are contracted with the MCOs, but not enrolled in with the state agency (FFS)
  - Web-based portal for all providers (even if already enrolled in FFS)
  - Launch target is April, 2021 with a six-month phase-in period
  - \*\*Does not take the place of or supersede MCO credentialing, that process must continue
- 
- For more information:
  - <https://ldh.la.gov/index.cfm/page/4125>

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# Manual Updates

- Continuing policy updates for provider manuals:
- Updated sections are posted for public comment for 45 days at [this website](#)
- In 2020, a total of 26 sections were modernized.
- Policy updates that became effective on or before 1/1/2021 include:
  - Bariatric surgery
  - Breast surgery
  - Inpatient concurrent care
  - Concurrent care for pediatric hospice
  - Prenatal ultrasounds for maternal fetal medicine specialists

# New Benefits

- Developmental, autism, and perinatal depression screening coverage began on January 1, 2021
  - Developmental and autism screening: \$10.00 each
  - Perinatal depression screening: \$8.14
  - Paid separately from the well-child visit
- A Performance Improvement Project with the MCOs for developmental screening is ongoing
  - A big focus is communication and outreach to providers about this new coverage
  - In addition, information and the tools that are appropriate for use

# Currently Evaluating

- Collaborative care model (behavioral health/primary care integration)
- Cochlear implants (policy revision)
- Prenatal ultrasounds for non-MFM (final draft)
- Endovascular revascularization for peripheral arterial disease
- Percutaneous coronary interventions
- Video capsule endoscopy
- Multiple sleep latency test for narcolepsy
- Universal non-invasive prenatal testing (cell-free DNA)
- Breast milk storage bags (for use with breast pumps)



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# Medicaid Managed Care Quality Dashboard



LOUISIANA  
DEPARTMENT OF HEALTH

Secretary  
DR. COURTNEY N. PHILLIPS

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About the Medicaid Managed Care Quality Dashboard  
Medicaid Quality Improvement & Innovations Section

The purpose of the Medicaid Quality Dashboard is to provide transparency and accountability in the health care provided to Medicaid members.

Medicaid regularly monitors the performance of contracted managed care organizations (MCOs) on a wide range of quality measures, including both HEDIS and non-HEDIS metrics. (Please note that this dashboard only contains data about the managed care program and does not include Medicaid fee-for-service members.)

The panel to your left shows groupings of quality measures. For each quality measure, results are reported for the most recent year, by plan and statewide, along with trend information since 2016. Trend information is not always available for all measures. The metrics on this dashboard are displayed according to the reporting year. Therefore, the quality measure results reflect care that happened in the preceding year. For example, 2020 quality measures represent care that happened in calendar year 2019.

In addition, where available, a dashed line shows baseline data from prior to implementation of the managed care program. This baseline data is from the 2012 measurement year, reflecting care that happened in 2011.

Medicaid Managed Care Quality Dashboard:  
<http://qualitydashboard.ldh.la.gov/>



# Medicaid Managed Care Quality Dashboard

## Updates:

- Added 2020 HEDIS and non-HEDIS rates (\*\*please note this refers to care that happened in 2019 due to HEDIS naming conventions)
- Added a new category for the Consumer Assessment of Healthcare Providers and Systems (CAHPS) measures (i.e., patient satisfaction with the plan)
- Retired measures have been relocated to the new "Retired" category (i.e., the Well-child Visit measure was retired and replaced)

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- Next meeting:
  - Deeper dive into quality and value-based payment
  - Any other topics (just email): [Marcus.Bachhuber@la.gov](mailto:Marcus.Bachhuber@la.gov)
  - Still taking volunteers for Quality Measurement group
- Questions?