Medicaid Program Updates
Overview

• MCO RFP
• Quality
• Benefits
• Future/ongoing initiatives
LDH will be re-procuring the managed care organizations
Please send any and all suggestions to healthy@la.gov
Currently in an emergency contract with the 5 current MCO’s which will be extended through calendar year 2021
• HEDIS 2020 results are in (care that occurred in 2019)

• Preparing the report of patient experience survey results
  • We are interested in exploring supplemental patient experience questions (https://www.ahrq.gov/cahps/surveys-guidance/item-sets/search.html)

• Continuing research and development of the Quality Rating System (this was the health plan “report card” that you all provided feedback on)
  • The new federal managed care rule impacts this and so we will bring back changes to the group

• Will be advancing to a new quality measure set in 2021, as determined by public engagement process throughout last year
## Quality: New Incentivized Measures

<table>
<thead>
<tr>
<th>Measure</th>
<th>New/existing</th>
<th>Rationale</th>
</tr>
</thead>
<tbody>
<tr>
<td>Childhood Immunization Status (Combo 3: DTAP, IPV, MMR, HIB, Hepatitis B, VZV, and PCV)</td>
<td>New</td>
<td>Provider stakeholder and OPH request, evidence-based treatment</td>
</tr>
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<td>Immunizations for Adolescents (Combo 2: meningococcal, TDAP/TD, HPV)</td>
<td>New</td>
<td></td>
</tr>
<tr>
<td>Cesarean Rate for Low-Risk First Birth Women*</td>
<td>New (had been incentivized previously)</td>
<td>Continuing ongoing work in improving maternal and neonatal outcomes</td>
</tr>
<tr>
<td>Colorectal Cancer Screening</td>
<td>New</td>
<td>Provider stakeholder request, Medicaid priority, evidence-based treatment</td>
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<td>Cervical Cancer Screening</td>
<td>New</td>
<td>Provider stakeholder and OPH request, high rates of cervical cancer, evidence-based treatment</td>
</tr>
<tr>
<td>HIV Viral Load Suppression</td>
<td>New (had been incentivized previously)</td>
<td>Provider stakeholder and OPH request, MCO request, high public health impact, outcome-based measure</td>
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*A lower rate indicates better performance*
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<td>Controlling High Blood Pressure</td>
<td>Existing</td>
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Benefits 
(COVID-19)

- COVID-19 testing, treatment, and vaccination
  - Under the Families First Coronavirus Relief Act, Medicaid is required to cover all of these
  - We work to implement as soon as we receive information from CMS
  - There may be delays in adding to our fee schedules, but we work with MCOs and providers to recycle claims to ensure appropriate reimbursement
Benefits (Revisions)

- Bariatric Surgery, updates to eligibility criteria:
  - A BMI $\geq 40 \text{ kg/m}^2$, or more than 100 pounds overweight; or
  - A BMI $\geq 35 \text{ kg/m}^2$ with one or more comorbidities related to obesity; or
  - A BMI of 30 to 34.9 $\text{ kg/m}^2$ with type 2 diabetes mellitus if hyperglycemia is inadequately controlled despite optimal medical control by oral or injectable medications
- Specified details regarding services for beneficiaries under 18
  - a BMI $\geq 40 \text{ kg/m}^2$ or 140% of the 95th percentile for age and sex, whichever is lower; or
  - a BMI of 35 to 39.9 $\text{ kg/m}^2$ or 120% of the 95th percentile for age and sex, whichever is lower, with one or more severe obesity-related medical conditions
- Requests for beneficiaries under the age of 13 will be reviewed for medical necessity on a case-by-case basis
Benefits (Revisions)

- Obstetric ultrasounds: Will exclude maternal fetal medicine specialists from pre-specified limits (January 1, 2021)
  - Currently a workgroup to determine ultrasound policy for general OBs

- Non-invasive prenatal testing: prevent prior authorization or medical review due to time-sensitive nature of the test (December 1, 2020)
Benefits (Revisions)

- Breast Surgery, clarified coverage (January 1, 2021):
  - Medically necessary mastectomy
  - Breast conserving surgery
  - Reconstruction
  - Risk-reducing mastectomy
  - Reduction mammoplasty including medically necessary removal of breast implants
- Inpatient concurrent care, revised coverage (January 1, 2021):
  - Each provider from a different specialty/subspecialty can be reimbursed for one initial hospital visit per admission
  - Within the same specialty/subspecialty:
    - Only one provider can be reimbursed for one initial hospital visit per admission
    - Only one provider can be reimbursed for a maximum of one subsequent hospital visit per day
  - Only the provider responsible for discharging the beneficiary shall be reimbursed for hospital discharge services on the discharge day
Benefits
(New)

• Perinatal Depression Screening (January, 2021)
  • Performed during a well-child visit, billed under the child’s coverage, separately reimbursed
  • Administered from birth to 1 year in accordance with American Academy of Pediatrics (AAP)/Bright Futures periodicity schedule
  • (Recommended but not required)

• Developmental and Autism Screening (January, 2021)
  • Administered during well-child visit in accordance with the American Academy of Pediatrics (AAP)/Bright Futures periodicity schedule
  • Separately reimbursed
Future and Ongoing Initiatives

- Pediatric concurrent care during hospice:
  - For members under age 21
  - Clarification that they may receive hospice services in addition to life-prolonging care

- Improving breastfeeding support services
  - Louisiana has one of the lowest breastfeeding rates in the country
  - Only about 40% of all Medicaid beneficiaries breastfeed their infants at least 8 weeks, which means that over 8,000 mothers stop breastfeeding their infants during these early weeks.
  - Member interviews
  - Review of coverage and benefits
  - Provider engagement forthcoming
Future and Ongoing Initiatives

- Reducing Low-Value Medical Device Use
  - Collaboration with the University of California-San Francisco (they receive funding from Arnold Ventures)
  - A significant proportion of low-value care originates from inappropriate use or overuse of technology
  - A growing contributor to this waste and harms are high-risk medical devices, which too often enter the market based on little or no evidence of clinical benefits
Low Value Medical Devices

- First Initiative: Endovascular revascularization for peripheral arterial disease
  - Analyzed utilization through Medicaid claims
    - In 2019 LA Medicaid expenditures were $7M for this procedure
    - Of the 1923 revascularization claims filed that year, 43.6% were for patients with an intermittent claudication diagnosis code
  - Conduct literature review of publicly available FDA adverse event reports to estimate the harms of procedure/device
    - A 4.6% increased risk of mortality was found in a meta-analysis of 8 RCTs
    - Similar quality of life, functional, and long-term outcomes found between conservative therapy and endovascular revascularization without any of the potential procedure-related complications
Endovascular revascularization:
  - Develop policies and procedures to drive appropriate use
  - Support optimization of conservative management:
    - Physical activity (provider directed)
      - Exercise lasting 30-60 minutes at least 3 times per week
    - Guideline directed medication therapy:
      - Antiplatelet therapy
        - Aspirin
        - Clopidogrel
        - Statins
      - Antihypertensive therapy for patients with hypertension
    - Smoking cessation
      - Behavioral counseling
      - Medication therapy (i.e., varenicline, bupropion, and/or nicotine replacement)
Low Value Medical Devices

Next Steps:
- Continued development of policies and procedures
- Stakeholder engagement
- Review and data analyses of other devices:
  - Other types of stenting
  - Musculoskeletal injections
Sexually transmitted infection testing in Medicaid-insured people:
- Supported by CDC and a multistate collaborative with Alabama, Georgia, Kentucky, North Carolina, South Carolina, and Tennessee
- Project aim is to look at syphilis, chlamydia, and gonorrhea testing in different populations
- Preliminary results in Q1 and Q2 2021
COVID-19 Updates

- **PHE** status updated by Health and Human Services on October 23, 2020
- Louisiana guidelines are subject to change, keep an eye out
- Medicaid-related updates continue to be posted on [Louisiana Medicaid](#) website
- Can always email us with questions
Questions?