

Aetna Better Health of Louisiana

Medicaid Managed Care RFP 2021 Online Feedback Form	
RFI Question	Response
<p>Behavioral health integration - Louisiana Medicaid seeks to integrate financing models by contracting with MCOs that manage all physical and behavioral health services for Medicaid enrollees to decrease fragmentation of care, improve health outcomes, and reduce costs. Goals of integration include enhancing provider access to data, incentives, and tools to deliver integrated services and coordinate care across settings. Please offer suggestions on how the MCOs can support key aspects of behavioral health and physical health integration and how they can improve integration of behavioral health and physical health care delivery for enrollees in this upcoming procurement. What specific network development, care delivery, and care coordination services approaches should LDH consider to allow the MCOs to better meet enrollees' behavioral health needs?</p>	<p>Aetna believes that managed care organizations (MCOs) can support key aspects of behavioral health and physical health integration by managing all physical and behavioral health services for Medicaid enrollees through a single point of contact and utilizing a local integrated model. MCOs can improve integration of behavioral health and physical health care delivery for enrollees by:</p> <ul style="list-style-type: none"> • Engaging members and providers on integration through education and contracting approaches, including value-based models • Advancing the use of telehealth solutions for behavioral health • Facilitating shared access to physical and behavioral health data for providers • Establishing relationships with community-based organizations (CBOs) to support enrollees with behavioral health needs • Using a system of care approach, through dedicated programs, that increases both internal and external focus on recovery and resiliency

Aetna Better Health of Louisiana

Medicaid Managed Care RFP 2021 Online Feedback Form	
RFI Question	Response
<p>Child and maternal health outcome improvement – Louisiana Medicaid provides health insurance for more than half of all pregnancies and more than three-quarters of all children in the State. The aim of the Medicaid managed care program is to improve child and maternal health outcomes. Please offer suggestions on the key aspects of child and maternal health outcome improvement and what strategies could be used to address these aspects. (Some possible topics may include coordination and transition of care, how to increase patient engagement, how to care for special populations for both mothers and children, and suggestions for mitigating trauma and adverse social determinants of health.)</p>	<p>Strategies MCOs can use to address key aspects of child and maternal health outcome improvement include:</p> <ul style="list-style-type: none"> • Using analytic tools and multiple strategies to increase early identification of pregnancy and understanding risk factors for pregnant women • Screening of pregnant and postpartum women for Adverse Childhood Experiences and social determinants of health (SDOH) and measure improvements • Establishing relationships with CBOs to provide services to pregnant and postpartum women • Using a closed loop referral SDOH solution to address social needs for pregnant and postpartum women
<p>Delivery system reform – In the last couple of years Louisiana has instituted a number of reforms related to payment models and provider network structures that will improve quality of care for Medicaid managed care enrollees. These reforms include instituting incentives such as Value Based Payments, and other incentives for quality care. Please offer suggestions on the best way to promote adoption of new payment methodologies that reward providers for the value they create as opposed to the fee-for-service methodology that rewards solely on the basis of volume of services.</p>	<p>MCOs can promote the adoption of new payment methodologies that reward providers for the value they create by implementing diagnosis-related groups to standardize prospective payment to hospitals and encourage cost containment.</p> <p>In addition, LDH can support MCO participation in delivery system reform by:</p> <ul style="list-style-type: none"> • Implementing a statewide value-based payment reform program that establishes the use of evidenced-based best practices • Balancing membership across MCOs and the assignment of members to providers to ensure providers have high enough volume of members to be successful in driving outcomes in value-based programs

Aetna Better Health of Louisiana

Medicaid Managed Care RFP 2021 Online Feedback Form	
RFI Question	Response
<p>Disaster planning and recovery – Disasters are a part of life in Louisiana, 2020 has proven that. Whether disease or weather-related, disasters present a serious risk to Louisiana Medicaid beneficiaries – who may be heavily impacted by public health emergencies such as COVID-19, or by tropical storms and hurricanes. In the event of such disasters, MCOs play a crucial role in meeting the health care needs of Medicaid managed care enrollees. Please offer suggestions as to what barriers to care enrollees and providers encounter during disaster events, and what specific measures can MCOs take in the care planning process to mitigate these barriers.</p>	<p>Specific measures MCOs can take in the care planning process to mitigate barriers to care enrollees and providers encounter in a disaster are:</p> <ul style="list-style-type: none"> • Including an emergency assessment for all members during the initial and annual health needs assessments to ensure the MCO and providers have a holistic, 360-degree view of the enrollee, including SDOH • Outreaching and engaging all enrollees affected by a disaster in care coordination services • Making sure that care management staff can perform their functions remotely when required by a disaster and aligning care management staffing as soon as enrollee needs are identified • Utilizing advanced strategies and tools for serving and engaging enrollees whose contact information changes during a disaster to ensure continuity of care (e.g., transferring to a new primary care provider) • Providing pharmacy services to all members displaced by a disaster, including pharmacy services at emergency shelter sites • Utilizing advanced strategies and tools to increase access to providers from outside the disaster area, such as telehealth <p>In addition, LDH can support MCOs’ ability to serve enrollees during a disaster and recovering from a disaster by sustaining increased opportunities for telehealth and making sure telehealth services remain reimbursable via the Medicaid fee schedule after the COVID-19 pandemic emergency.</p>

Aetna Better Health of Louisiana

Medicaid Managed Care RFP 2021 Online Feedback Form	
RFI Question	Response
<p>DOJ settlement agreement requirements – In 2018, a Federal Department of Justice (DOJ) investigation found that the State of Louisiana (along with several other states) violated the Americans with Disabilities Act (ADA) by housing mentally ill individuals in nursing homes. Subsequently, LDH agreed to review and add services for Medicaid-eligible adults with a serious mental illness (SMI) in community-based settings under terms of an agreement to resolve the investigation. Care and service integration provided by MCOs will play a crucial part in meeting the terms of that agreement and further advancement of outcomes for this population.</p> <p>Please offer suggestions for how care and services specific to the SMI-diagnosed population covered by the agreement could be developed to both avoid nursing facility placement and ensure community integration upon discharge from placement.</p>	<p>MCOs can provide services and ensure care for enrollees with serious mental illness (SMI) to support community integration and reduce nursing facility placement by:</p> <ul style="list-style-type: none"> • Dedicating care management staff to support DOJ initiatives, including required reporting • Close coordination of care and communication with crisis services system providers to improve timely and accessible services and supports to individuals with SMI experiencing a behavioral health crisis within their local community • Using a system of care approach that emphasizes partnership with the Louisiana Department of Public Safety and Corrections and the Office of Juvenile Justice • Engaging enrollees with SMI with wraparound supports in home and community-based settings, including benefits counseling, evidence-based supported housing and employment programs, intensive outpatient programs, medication-assisted treatment, and partnering with CBOs to engage community health workers (CHWs) and peer support specialists to support enrollee recovery and resiliency • Enrolling individuals with SMI in care management to ensure person-centered needs assessment and care planning, including engaging CBO care management resources <p>MCOs should demonstrate successful efforts at rebalancing, decreasing the proportion of enrollees residing in institutional settings.</p>

Aetna Better Health of Louisiana

Medicaid Managed Care RFP 2021 Online Feedback Form	
RFI Question	Response
<p>Fraud, waste, and abuse initiatives – Program integrity and compliance activities are meant to ensure that taxpayer dollars are spent appropriately on delivering quality, necessary care and preventing fraud, waste, and abuse (FWA) in Medicaid programs. Prevention, detection, and recovery of FWA ensures resources are efficiently administered in the Medicaid managed care program. FWA initiatives are designed to strengthen the State’s Medicaid managed care program integrity and oversight capabilities. Please offer suggestions for changes that could be made in the new MCO contract that will strengthen FWA prevention, detection, and recovery efforts.</p>	<p>There are no contract changes we suggest, but the following are suggestions for how Aetna and other MCOs could improve FWA by:</p> <ul style="list-style-type: none"> • Implementing national best practice, including the use of data analytics and predictive modeling to monitor provider, enrollee, and pharmacy utilization practices and identify those falling outside of normal activity • Collaborating with other MCOs and FWA associations to develop policies related to emerging fraud schemes • Engaging providers in FWA education and quality monitoring • Proactively utilizing pre-payment review processes to supplement recovery efforts <p>In addition, LDH can support MCOs by:</p> <ul style="list-style-type: none"> • Ensuring MCOs have access to the Louisiana Board of Pharmacy Prescription Monitoring Program site and data • Allowing MCOs to be involved in the enrollment process and develop protocols to disenroll individuals who are not Medicaid eligible, e.g., out of state members.

Aetna Better Health of Louisiana

<p>Health equity – Health Equity is defined as a state where every person has the opportunity to attain his or her full health potential and no one is disadvantaged from achieving this potential because of social position or other socially determined circumstances. Addressing health equity in the context of Medicaid Managed Care means focusing on improving population health by working to reduce identified disparities for Medicaid populations. Quality improvement and health equity approaches will inform and guide managed care in Louisiana. This will include identifying the key social determinants of health (SDOH) and related outcome measures such as baseline health outcome measures and targets for health improvement; measures of population health status and identification of sub-populations within the population; identification of key SDOH outcomes; and strategies for targeted interventions to reduce disparities and inequities. SDOH are the complex, integrated, and overlapping social structures and economic systems that are responsible for most health inequities. These social structures and economic systems include the social environment, physical environment, health services, and structural and societal factors. Please offer suggestions for how LDH can require the MCOs to focus on addressing social determinants of health and other health disparities in Louisiana. How can LDH best hold the MCOs accountable for significantly improving health equity among Medicaid managed care enrollees?</p>	<p>LDH can require MCOs to focus on addressing SDOH and hold them accountable for improving health equity among Medicaid managed care enrollees by:</p> <ul style="list-style-type: none">• Including Z-codes on the Medicaid fee schedule for reimbursement• Requiring MCOs to incorporate SDOH in all population health management (PHM) and care management programs and to establish performance improvement projects for the most prevalent health equity issues identified in their membership• Requiring MCOs to collaborate with each other on PHM initiatives• Requiring the development of a response strategy to address ongoing health equity issues that result from public health emergencies• Requiring MCOs to use a closed loop referral SDOH solution that incorporates partnership with local CBOs• Supporting MCO use of non-traditional, non-emergency medical transportation (NEMT) for enrollees residing in rural and underserved areas to improve access to care
--	--

Aetna Better Health of Louisiana

Medicaid Managed Care RFP 2021 Online Feedback Form	
RFI Question	Response
<p>Increased MCO accountability – The MCO contracts specify the MCOs’ responsibilities with respect to the Medicaid managed care program. Holding the MCOs accountable for meeting the terms of the MCO contracts are important to the efficient operation of the Medicaid managed care program and ensure quality care is delivered to Medicaid managed care enrollees. While penalty provisions such as significant fines are included in the existing MCO contracts, LDH is interested in enhancing MCO accountability.</p> <p>Please offer suggestions for how can LDH hold the MCOs accountable for statewide policy, operational, and financial priorities in the MCO contract.</p>	<p>LDH should continue to review MCO reporting and performance metrics to ensure they are aligned with LDH goals of increasing access to care, improving coordination, facilitating enrollee-centered, whole-person care, promoting wellness and prevention, improving chronic disease management, addressing population health and health disparities, paying for value, and minimizing wasteful spending. A couple specific areas are as follows:</p> <ul style="list-style-type: none"> • MCOs and LDH should continue to collaborate on administrative simplification, which in turn allows LDH to focus more on oversight to increase accountability • Since Dr. Phillips and Ruth Johnson have come on board, MCOs have seen an increase in collaboration. We suggest that collaboration continues to increase and move further towards a true partnership. The result will be improved accountability.

Aetna Better Health of Louisiana

Medicaid Managed Care RFP 2021 Online Feedback Form	
RFI Question	Response
<p>Have feedback on an area not represented above? Please provide it below.</p>	<p>Aetna would like to provide the following recommendations to LDH for the upcoming Medicaid managed care procurement:</p> <ul style="list-style-type: none"> • LDH should seek to ensure transparency in the scoring of request for proposal responses, including development of differentiated scoring based upon whether the MCO has signed provider network contracts, letters of agreement, or letters of intent and increased scoring incentive to contract with Veteran and Hudson Initiative vendors • Aetna advocates that LDH aligns with industry best practices in reimbursement and medical necessity standards established by CMS, such as the National Correct Coding Initiative, Medically Unlikely Edits, and Local and National Coverage Determination edits • LDH should consider taking into consideration all aspects related to the COVID-19 epidemic and how the quality section is scored • LDH should consider placing an enrollment cap or maximum size for any individual MCO to make sure the transition to a person-centered, managed care model directed toward enrollee wellness and budget predictability is met <p>Aetna would also like to make the following recommendations to LDH related to Medicaid managed care:</p> <ul style="list-style-type: none"> • LDH should consider the establishment of specialty plans for enrollees eligible for managed long-term services and supports • LDH should consider a single statewide specialty children’s plan for enrollees in foster care and other categories indicating special health care needs