

Louisiana Medicaid Managed Care RFP Input

On Behalf Of: Merakey Pennsylvania

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Greetings

In response to the recent bulletin stating that LDH is seeking online input on key elements of the Medicaid managed care contracts, prior to releasing the RFP in 2021, please see the following feedback on behalf of Merakey Pennsylvania. We provide addiction recovery services, assistance for individuals with intellectual and developmental disabilities, adult behavioral health services, and much more.

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?

Feedback: Merakey Pennsylvania recommends MCOs look to incentivize/integrate physical health delivery into the Assertive Community Treatment (ACT) Team model. ACT teams are often providing a substantial amount of primary and preventative services to their populations. Many enrollees who utilize ACT teams have co-occurring (often chronic) physical health concerns. MCOs that are willing to help facilitate med management and regular screenings of physical health for this same population would have a tremendous impact on the day to day quality of life of these individuals.

ACT teams could also be utilized by the MCOs to expanding and adapt the Ryan White model of HIV care for other high-risk groups with complex health and social needs, including justice-involved and homeless populations.

Merakey Pennsylvania additionally recommends that as the Medication Assisted Treatment (MAT) program in Louisiana continues to expand, that the MCOs look to pair these pharmacotherapy programs with intensive outpatient programs (IOP) which integrate physical health screens, med management, and care coordination with a primary care provider.

It is imperative that the MCOs institute a functional crisis continuum of care. Louisiana continues to improve regarding services which identify and triage individuals in crisis. Where the MCOs must engage in a more aggressive way is in the navigation of those individuals who need them to an appropriate provider with an available bed. It is not enough to simply find a bed for an individual, but one with the appropriate level of care and in coordination with easily accessible physical health providers on-site and/or through telemedicine. MCOs should endeavor to develop an accurate and real-time inventory of available inpatient services and locations.

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.)

Feedback: *Merakey Autism and Education Centers partner with families, school districts, and community organizations to provide a safe and fun learning environment. We help students gain the skills they need to be successful in their home school district, on the job, and at home. Louisiana is already aware of the importance of early screening and intervention of ASD. MCOs promotion and expansion of opportunities for these screenings across the Medicaid population could have a tremendous impact on developmental outcomes of Louisiana children.*

Merakey Pennsylvania has also seen the merit and impact of In-District Specialized Classrooms that provide special programming and support for students with autism and cognitive and emotional challenges within their home school environment.

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.

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.

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.

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.

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.

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?

Feedback: *Merakey Pennsylvania recommends the MCOs be mandated to unite disparately funded programs, creating a “single point of entry,” and developing a centralized navigation resource for patients, families, and providers to increase access to care management for individuals with complex health and social needs.*

Merakey Pennsylvania recommends that our MCOs prioritize redefining risk algorithms to incorporate social needs and expand eligibility. One way to do this would be to expand their definition of high-risk beyond traditional medical criteria to include behavioral health and health-related social needs, and then providing care management services to individuals who previously have not met required eligibility criteria based on medical conditions alone.

MCOs should also explore bringing a trauma-informed frame to food insecurity to improve overall health outcomes.

Access to complete and accurate patient data that flows freely across boundaries is a catalyst for improving community health and well-being. MCOs should facilitate incorporating social determinants data into EMRs allows care managers to access and apply data-rich insights into

a patient's treatment plan. By complementing extensive clinical data found in EHR systems, SDOH enables more informed care decisions.

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.

Please offer suggestions for how can LDH hold the MCOs accountable for statewide policy, operational, and financial priorities in the MCO contract.

Feedback: *Merakey Pennsylvania believes that a key operational improvement which could be achieved in this RFP is a single point of entry credentialing system for all Louisiana Medicaid Managed Plans. This would significantly lower the provider burden of duplication of effort. Developing a more robust and provider friendly single sign-on offers healthcare professionals an easy and secure way to access the provider portals of major local health plans and hospitals as well as other valuable online services. This portal would operate as the provider data service as one element of its administrative simplification work for Louisiana. It is a statewide solution for gathering all the information that health plans and hospitals request from providers in the course of credentialing.*