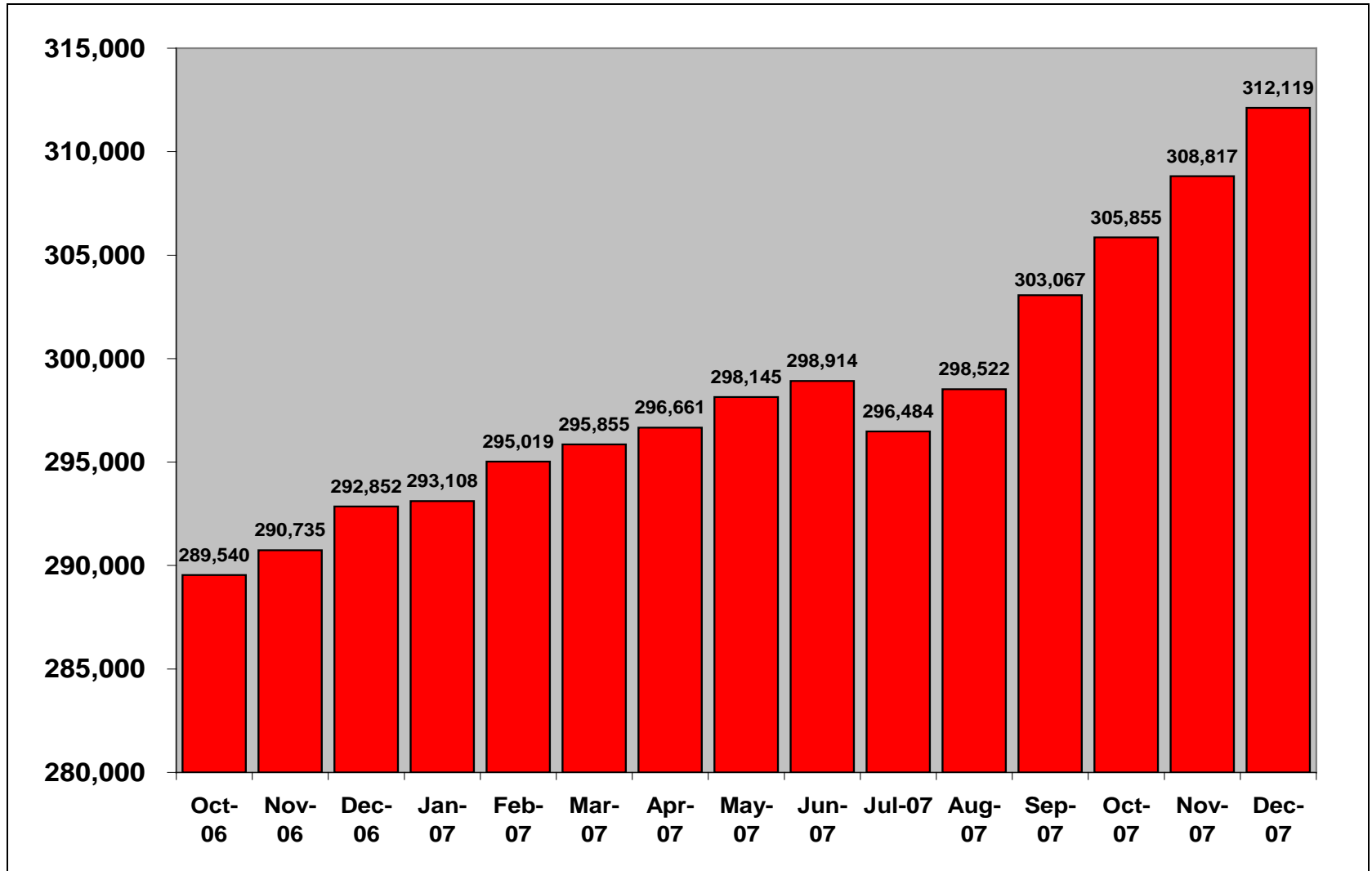




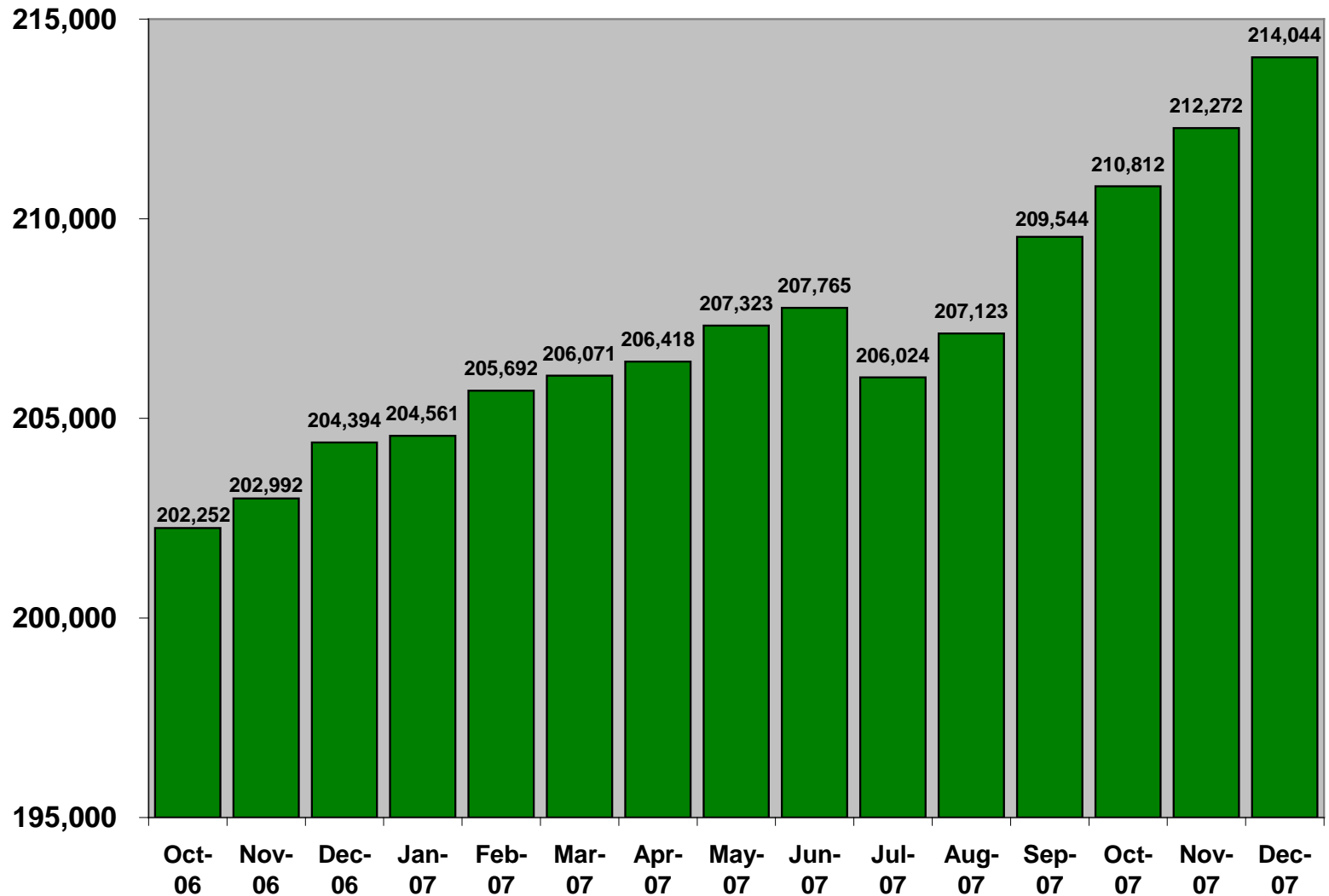
DSS and DCF report to the
Behavioral Health Partnership
Oversight Council

December 12, 2007

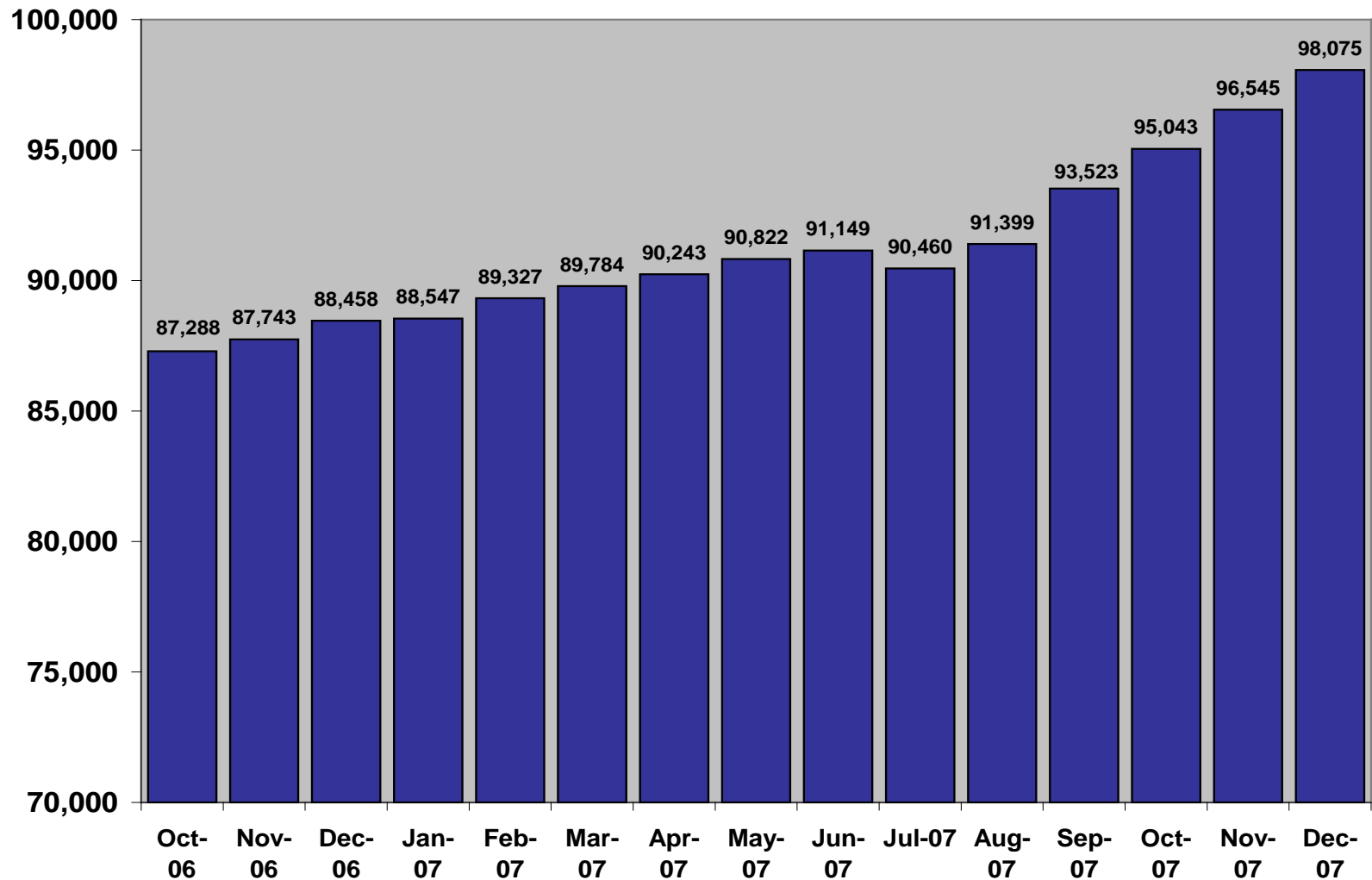
HUSKY A Enrollment Growth - All



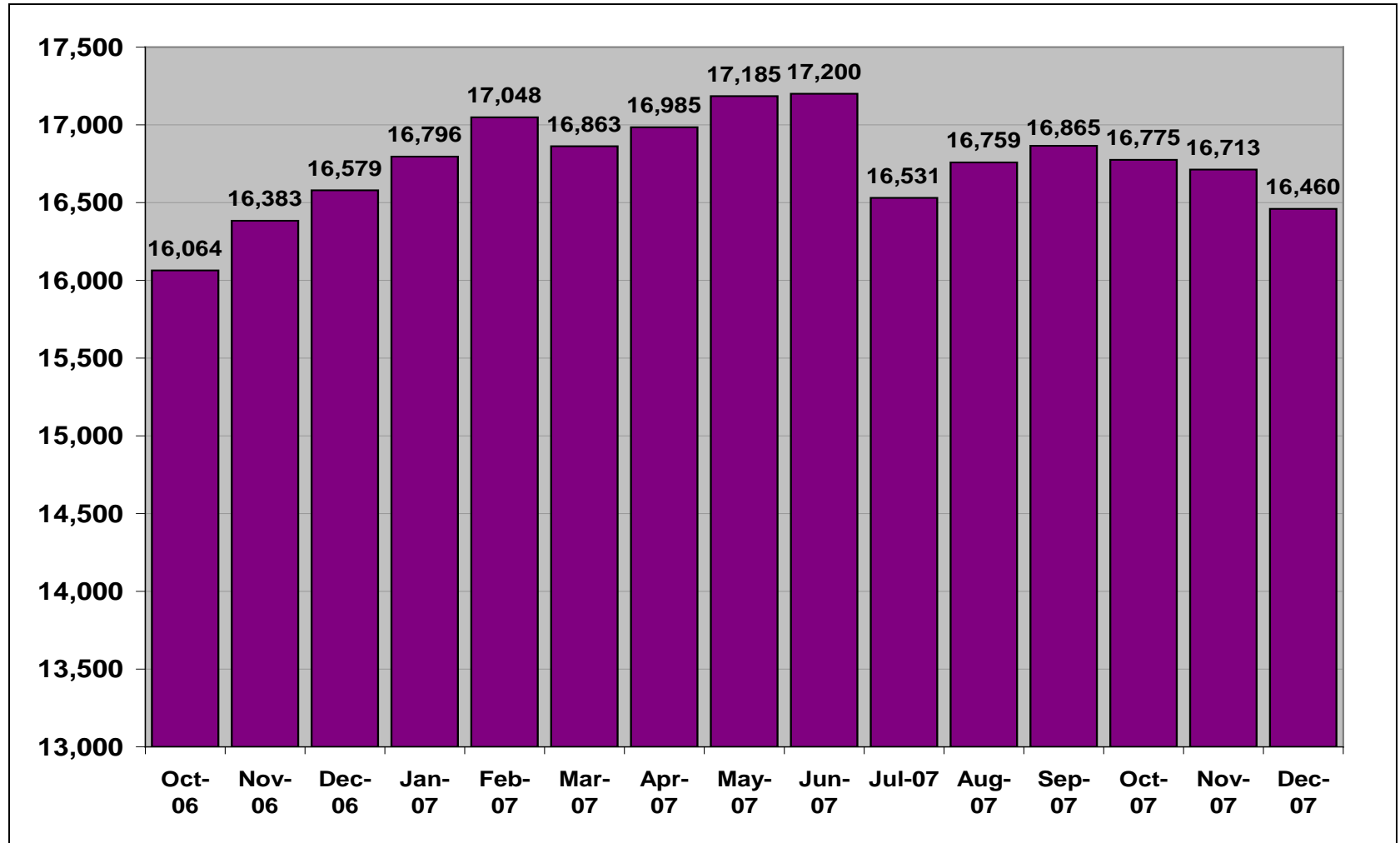
HUSKY A Enrollment Growth <19



HUSKY A Enrollment Growth Adults



HUSKY B Enrollment Growth



HUSKY Program Transition

- Governor has made FOI language a condition for HUSKY MCO contracts
- Anthem and HealthNet have not agreed to this language and will discontinue participation in the HUSKY program
- Anthem and HealthNet have signed non-risk transition agreements effective 12/01/07 and 12/8/07 respectively and ending 2/08

HUSKY Program Transition

- CHN and WellCare remain full risk through 12/31/07
- Expect non-risk PIHP contracts 1/1/08 through 6/30/08
- PIHP (pre-paid inpatient health plan) is a 1915(b) managed care option

HUSKY Program Transition

Implementation Plan

- Client notice of options
 - CHN, WellCare, FFS
- Provider notice, focus on providers participating with Anthem or HNT but not CHN, WellCare or FFS
- New physician fees will be CHN/WellCare floor
- Will encourage providers to enroll in CHN, WellCare and FFS
- DSS intends to maintain CT BHP enrollment for all three client enrollment options.

Pharmacy carve-out

- Pharmacy carve-out is scheduled for 1/25/08
- Medicaid FFS pharmacy rules will apply
 - No formulary/PDL for psych drugs
 - 5 day temporary supply

interChange (MMIS)

- interChange – the Medicaid claims system for unmanaged Medicaid and BHP will be replaced on January 25, 2008
- New system will process pharmacy claims for HUSKY members as of January 25
- Will also process HUSKY dental carve-out claims in the future
- Testing and adjustments are ongoing

Enhanced Care Clinics

- Primary care – behavioral health coordination policy draft is under review by Provider Advisory Subcommittee
- New RFA released September 2007
- 27 letters of intent received
- 11 applications received by deadline
- Review teams have been trained
- Qualification Decision Date – January

Ongoing Activities

- Rate setting
 - 2% pool, Departments may consider increase in excess of 2%
 - Departments continue work with BHP OC ad hoc on inpatient for special populations, propose to expand scope to other hospital rate investment options
 - Other strategic investment options are under consideration

Questions?