Meeting Summary for MAPOC (Full Council) Zoom Meeting

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Quick recap

The team discussed the legislative session's highlights, challenges faced by nursing homes, and the ongoing conversation with the Commissioner about the use of managed care in the Medicaid program. They also addressed concerns about changes to the Medicaid program, the potential return to a managed care model, and the need for transparency in the vendor selection process. Lastly, they discussed stakeholder engagement, the scope of the RFP process, and the disclosure of public information, while also planning for future committee meetings.

Next steps

DSS to provide an updated list of legislative mandates to MAPOC by end of day.

DSS to include data on where managed care is not working well in the RFQ scope.

DSS to ensure the RFQ scope includes examining Connecticut's current Medicaid innovations and performance.

DSS to consider including medical loss ratio and transparency requirements in the RFQ criteria.

DSS to release the full RFQ document publicly when issued.

DSS to provide MAPOC with the list of vendors eligible to respond to the RFQ.

DSS to prepare a presentation on the AHEAD grant for a future MAPOC meeting.

Complex Care Committee to hold meeting on Medicare Advantage plans on Thursday July 18, 2024 at 1pm.

DSS to aim to have landscape analysis report completed by early December 2024.

Summary

Representatives and Officials Meeting with Senator Anwar

The meeting was set to be covered live on CT-N. The meeting started with Senator Anwar convening the session.

Legislative Session Review and Future Plans

Sen. Anwar and Bill Halsey (DSS) discussed the legislative session's highlights, including key bills passed and upcoming initiatives such as the home care provider registry and the Children's Behavioral Health Funding rate increase. They also touched on the development of a home health safety assessment and grant program, and the implementation of biomarker testing and wheelchair repair. The discussion further covered updates on the comprehensive HUSKY report, the need for better ambulance reimbursement rates, and the progress of various work groups. The conversation ended with William agreeing to share more details on the Medicaid ambulance rates increase and the ongoing work group studying FQHC rates.

Addressing Behavioral Health Challenges in Nursing Homes

Rep. Susan Johnson and Bill Halsey discussed challenges nursing homes face with behavioral health patients and agreed to find a solution that avoids triggering the IMD exclusion. Rep. Johnson raised concerns about discharge planning and need for more certification opportunities. Alexis Mohammed (DSS) introduced the Medicaid Justice Involved Demonstration Waiver, with Connecticut awaiting approval for their application and aiming to implement it by late 2025 or early 2026. The team discussed learning from other states like California.

Managed Care in Medicaid Program Discussion

Bill discussed the ongoing conversation with the Commissioner about the use of managed care in the Medicaid program. He emphasized the Commissioner's engagement and hinted at her potential involvement. The discussion also reiterated the discussion points from previous meetings, including the draft criteria to evaluate options and the proposed next step of issuing a request for proposal (RFQ) to an existing vendor panel. The aim of this RFQ is to expedite the process while incorporating concerns from various stakeholders. The RFQ will focus on innovative healthcare delivery and payment models, with a particular emphasis on managed care, access outcomes, equity, and sustainability. William also clarified the difference between an RFP and an RFQ and confirmed that the rate study was a separate deliverable.

Medicaid Program Concerns and Vendor Request

Rep. Johnson expressed concerns about changes to the Medicaid program leading to reduced accessibility, similar to what happened with the temporary assistance for Navy Families program. Matthew Antonetti (DSS) clarified that the request for quotes is focused on obtaining vendor feedback for a broad landscape analysis, rather than implementing care delivery systems. Matt Lesser raised confusion about the process, as it seemed to be moving faster than previously indicated and sought assurances that the legislature would be involved if Medicaid managed care was pursued. William affirmed that the current process aligns with prior discussions about securing vendor support.

Concerns Over Upcoming Report and Medicaid Changes

Bill expressed uncertainty about the upcoming report and its potential implications. Sen. Matt Lesser raised concerns about substantive changes to the Medicaid program, questioning whether the DSS would follow through with previous commitments made by Commissioner Barton Reeves. Ellen Andrews shared her distress about the situation, highlighting the need for thorough consultation and a broad range of criteria for the new vendor. She also urged for transparency in the process and disqualification of consultants with ties to Connecticut's history with MCOs. The team agreed to proceed with caution and to seek input from various stakeholders.

Managed Care Model Concerns and Vendor Selection

Ellen expressed her interest in seeing the list of qualified vendors for the managed care model. Bill confirmed that the scope of work was more detailed and addressed some of Ellen's concerns. Rep. Tammy Nuccio raised concerns about the potential return to a managed care model without proper performance guarantees and emphasized the need to examine both successful and unsuccessful instances of managed care. Sheldon Toubman agreed with Rep. Nuccio's points and further expressed his own concerns about access, cost, and transparency. He suggested including a detailed analysis of denied services, medical loss ratio, and prior authorization denial rates in the vendor selection process.

Stakeholder Engagement and RFP Process Discussion

Bill, Sheldon, Matt Barrett, Sen. Anwar, and Mark Schaefer discussed stakeholder engagement, the scope of the RFP process, and the disclosure of public information under the Connecticut Freedom of Information Act. Matthew clarified that the RFP itself is a public document and would be disclosed to both the MAPOC and the public. Mark raised a question about the alignment of a new hospital reimbursement model with the ongoing study, to which Bill responded that they would try to align major initiatives. Sen. Anwar suggested considering the source of managed care data and the experience of existing vendors when making projections and decisions.

Medicaid Analysis and Committee Updates

Bill expressed the team's positive view on the upcoming landscape analysis for the Medicaid Agency. Sen. Anwar emphasized the need for a change in approach towards Medicaid, citing past investments and lack of population well-being improvement. The team then moved to committee updates, with discussions on the Women and Children's Health Committee, the Care Management Committee, and the Complex Care Committee. The Complex Care Committee planned a meeting to discuss the impact of Medicare Advantage plans on Medicaid and retirement. Finally, the Quality Access Committee's next meeting was mentioned to be in September.

Concerns Over Global Hospital Budget Proposal

Sheldon expressed concerns about a radical proposal for global budgets for hospitals, which could result in hospitals stinting on care if they went over the allotted budget. He also noted that the proposal had been developed without proper input and had been approved without being presented to MAPOC, a statutory body. Sheldon emphasized the potential harm to Medicaid and the need for caution in implementing such changes. Here is the CT Public Radio story about the AHEAD grant proposal submitted to, and approved by, CMS with no MAPOC input: <u>CT</u> aims to boost primary health care and rein in costs with grant funding | Connecticut Public (ctpublic.org)

Bill agreed to take the proposal back to OHS and DSS for consideration of a presentation. Rep. Johnson proposed considering a state-style Hill Burton Act as an alternative approach, suggesting a review of the past 25 years to inform this. The next meeting was scheduled for September 13, 2024 at 1 PM.