

Medicaid Services Advisory Committee

Please sign in

Guest wireless

- DHSGuest
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Medicaid Services Advisory Committee

Krista O'Connor | Strategic Development Director

July 9, 2019



Introductions

Medicaid Services Advisory Committee

Agenda

- HCA vision; committee purpose & duties
- Membership discussion: Krista O'Connor
- Quality follow up: Sam Mills, Krista O'Connor
- Member experience: MSAC discussion
- The next generation of IHPs: Mat Spaan
- Public comment



Health Care Administration Vision:
The Health Care Administration builds and operates affordable and efficient health care programs that improve the health of Minnesotans.

Purpose & duties

Purpose

- Provides guidance on key initiatives brought forward by DHS that affect Medicaid program administration, policy or Medicaid funded services
- Represent community groups and professional stakeholder organizations, Medicaid beneficiaries and caregivers, and various health care and long term services and supports professionals that influence the health and covered services of Medicaid populations
- Serves to advise DHS and is not a governing board.

Duties

- Provide guidance on specific policies, initiatives, and proposed program changes brought forward by DHS
- Act as liaisons back to individuals, organizations, and institutions that receive, facilitate, or provide Medicaid services



Membership Discussion

Krista O'Connor, Strategic Development Director

Health Care Administration

Available seats



Beneficiary/Caregiver

Robert Marcum

Seat 2: posted

Seat 3: posted

Seat 4: posted



Physicians/Providers

Shannon Bakshian

Dr. Christine Foulkes

Seat 3: posted

Seat 4: posted



Non profit/Human Service

Kerri Gordon

Hodan Guled

Dominic McQuerry

Seat 4: posted

Timeline & process

Timeline	Process
July 8 – July 26	Solicitation of new membership
July 1, 2019 – July 26	Positions open for appointment
July 29 – Aug 2	Applicants complete additional survey
Aug 5 – Aug 9	Applications organized for review
Aug 12 – Aug 16	Application review & finalized recommendations
Aug 19 – Aug 23	Recommendations provided to Asst. Commissioner for review
Aug 26 – Aug 30	Recommendations provided to Commissioner for appointments
Sept 3 – 6	Sept 6: signed letters of intent to appoint from commissioner
Sept 9 - 13	Intent to appoint sent to SOS; appointments finalized
October 8, 2019	2019 Q4 MSAC meeting

- Kerri Gordon, MSAC member
- Robert Marcum, MSAC member
- Linda Monchamp, DHS Tribal Relations
- Krista O'Connor, DHS Strategic Development Director
- Diogo Reis, DHS Manager, Purchasing & Service Delivery
- Rebeca Sedarski, DHS CMR Community Engagement Coordinator
- Mat Spaan, DHS Manager, Care Delivery & Payment Reform

Outreach & engagement discussion

- An announcement will be sent out on DHS' external list serve.
- What other organizations or associations should be notified?
- How do we reach potential members?





Quality Follow Up: Medicaid Matters

Sam Mills, Deputy Assistant Commission

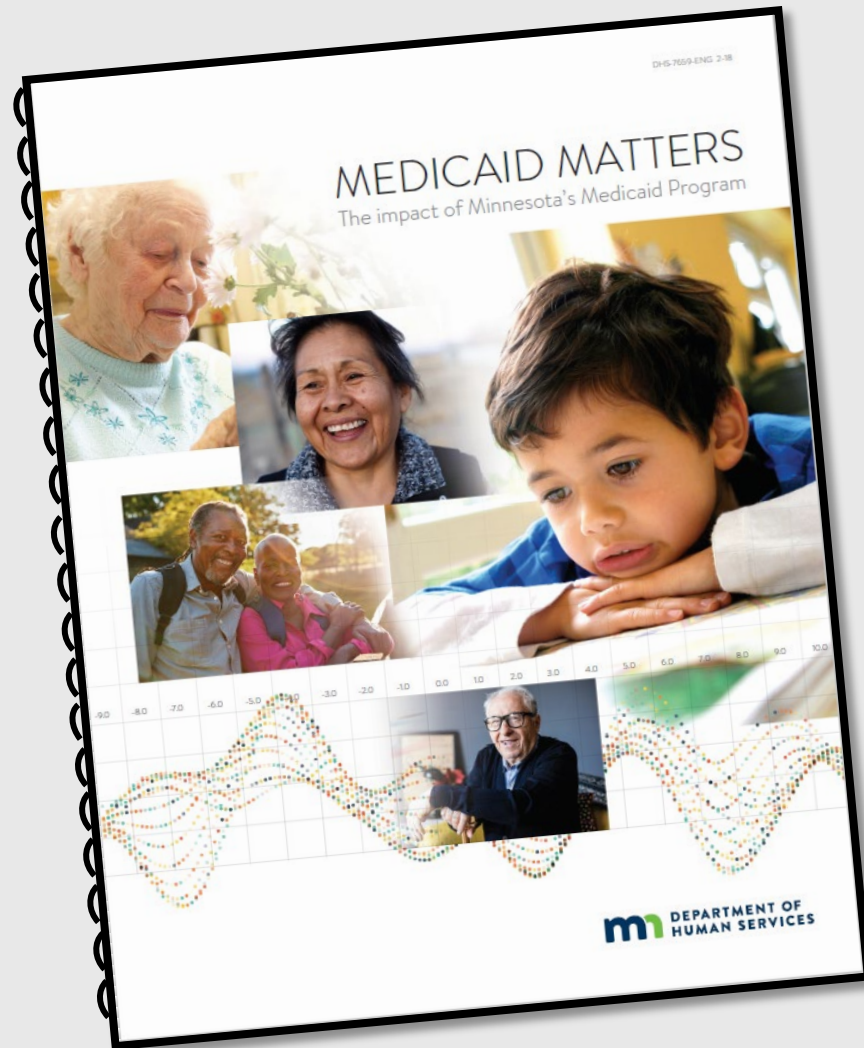
Health Care Administration



Medicaid Matters: The impact of Minnesota's Medicaid Program

Minnesota Department of Human Services | mn.gov/dhs

Medicaid Matters: Informing the health care debate



Launched in 2017 to:

- Provide factual information on Minnesota's Medicaid program
- Dispel common misconceptions
- Highlight the impact of the program at the state, regional and county level

Medicaid Matters 2.0



WHO MEDICAID AND MINNESOTACARE SERVE

INVESTMENTS IN HEALTH CARE

ORAL HEALTH

BASICS



About Medicaid and MinnesotaCare

Minnesota's **Medicaid** and **MinnesotaCare** programs are cornerstones of the state's system of health and long-term care coverage, serving more than 1.2 million people in 2018, including children, parents, people with disabilities, and adults 65 or older. Nearly every Minnesotan knows someone who relies on one of these programs to meet their health care needs: their neighbor, a relative, their child's preschool teacher, a new small-business owner. Over the years, the programs have helped Minnesota lead the nation in health care innovations.

Who Medicaid and MinnesotaCare serve

Enrollment

Minnesota Medicaid and MinnesotaCare: 2014 to 2018

This dashboard shows Minnesota Medicaid and MinnesotaCare enrollee data by region, county, and eligibility type. It also shows Minnesota Medicaid and MinnesotaCare spending by enrollee eligibility type.

Year	Program	Age
<input checked="" type="radio"/> 2018	<input checked="" type="radio"/> Medicaid	<input checked="" type="radio"/> All ages
<input type="radio"/> 2017	<input type="radio"/> MinnesotaCare	<input type="radio"/> 0-19 years
<input type="radio"/> 2016		<input type="radio"/> 20-64 years
<input type="radio"/> 2015		<input type="radio"/> 65+ years
<input type="radio"/> 2014		

Certain age groups in MinnesotaCare have been removed due to concerns over data privacy. Only the total category is available for the county map.

Average monthly enrollment in Medicaid by region

	Minnesota	7-County Metro	Central	Northeast	Greater MN Northwest	Southeast	Southwest
2018	1,118,152	600,145	136,104	71,680	135,893	92,511	81,819
2017	1,105,146	592,409	134,658	71,694	133,705	91,882	80,798
2016	1,093,039	586,353	132,767	71,247	131,615	91,506	79,551
2015	1,082,293	583,152	130,704	71,566	129,243	90,401	77,227
2014	1,005,446	538,219	120,937	69,069	121,790	83,858	71,573

Investments in health care

Annual payments to providers Minnesota Medicaid and MinnesotaCare: 2014 to 2018

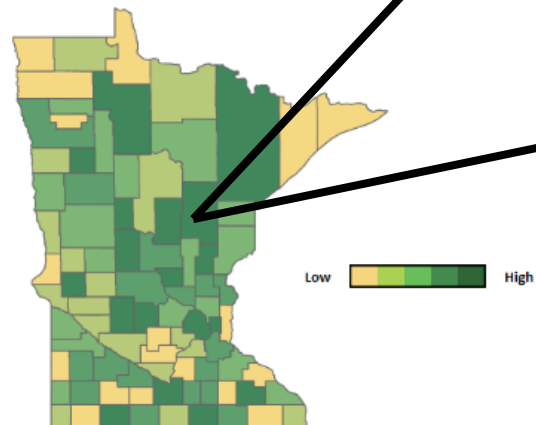
This dashboard shows the payments providers in each county received from Medicaid or MinnesotaCare by their provider category. It also shows the number of providers in the county, the number of Medicaid or MinnesotaCare claims per county, the average per claim and the average annual payment providers received from each program.

- Year**
 - ☒ 2018
 - ☐ 2017
 - ☐ 2016
 - ☐ 2015
 - ☐ 2014
- Program**
 - ☒ Medicaid
 - ☐ MinnesotaCare
- Provider category**
 - ☒ All providers
 - ☐ Health care providers
 - ☐ Hospitals
 - ☐ Surgical centers
 - ☐ Other providers

Minnesota statewide summary

Year	Number of claims	Payments	Providers	Payment per provider
2018	34,263,102	\$10,773,639,884	19,735	\$545,915

Average payments to providers by county (Hover to see numbers for each county)



All providers in Aitkin County received an average Medicaid payment of \$627,712 in 2018.

Total payments from Medicaid in 2018: **\$32,641,046**

Total of All providers receiving payments from Medicaid in 2018: **52**

Number of Medicaid claims reimbursed for 2018: **71,611**

Average Medicaid reimbursement per claim in 2018: **\$456**

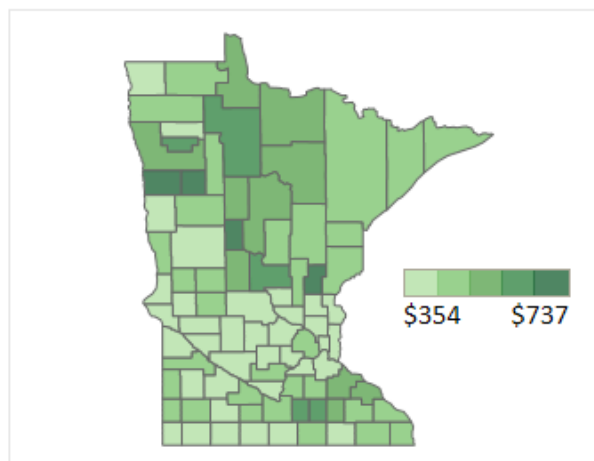
Annual dental visits and spending Minnesota Medicaid and MinnesotaCare: 2014 to 2018

This dashboard presents dental visits and spending for enrollees in Minnesota Medicaid and MinnesotaCare programs.

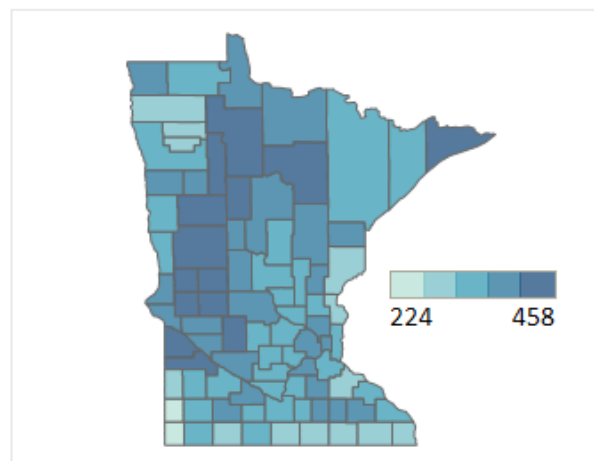
Year	Program	Age
<input checked="" type="radio"/> 2018	<input checked="" type="radio"/> All	<input checked="" type="radio"/> All ages
<input type="radio"/> 2017	<input type="radio"/> Medicaid	<input type="radio"/> 0-18 years
<input type="radio"/> 2016	<input type="radio"/> MinnesotaCare	<input type="radio"/> 19-64 years
<input type="radio"/> 2015		<input type="radio"/> 65+ years
<input type="radio"/> 2014		

Dental spending and visits by county in 2018

Average spending per member
with at least one dental visit



Members with dental visits
per 1,000 members



Key findings



1 in 5 Minnesotans
get their health care through
Medicaid and MinnesotaCare



**Medicaid serves more than half a
million children each year.**

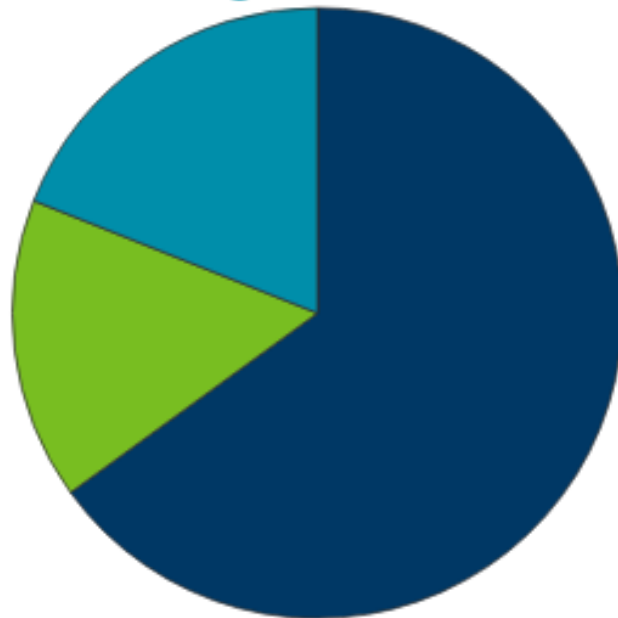


Key findings

2018

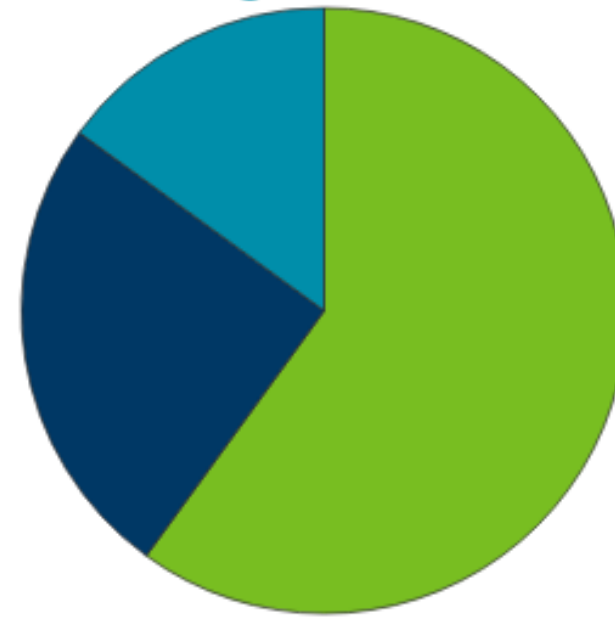
Medicaid enrollees

- Parents, children and pregnant women
- People 65 or older or with disabilities
- Adults



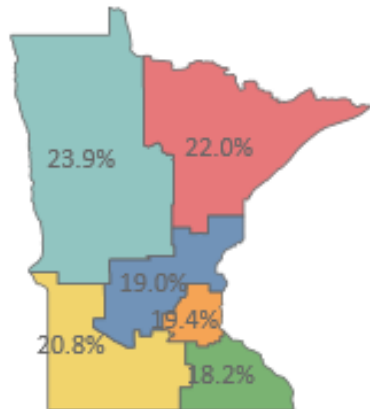
Medicaid spending

- People 65 or older or with disabilities
- Parents, children and pregnant women
- Adults

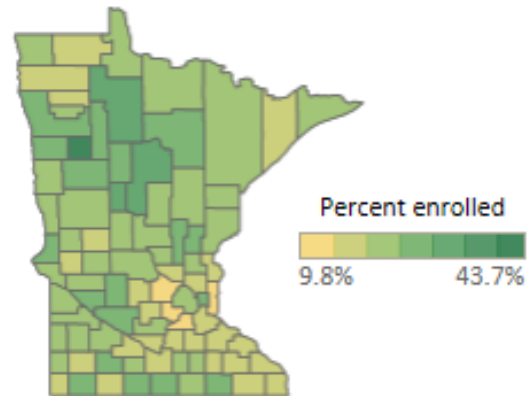


Key findings

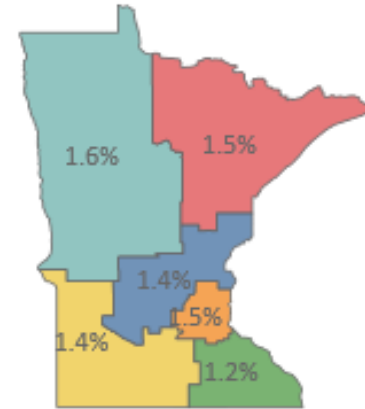
Percentage of the population within the region enrolled in Medicaid



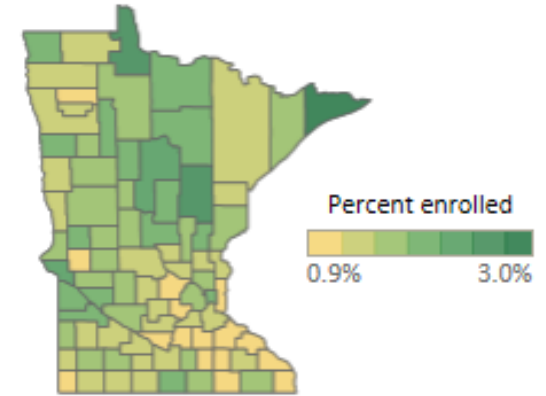
Percentage of the population within the county enrolled in Medicaid



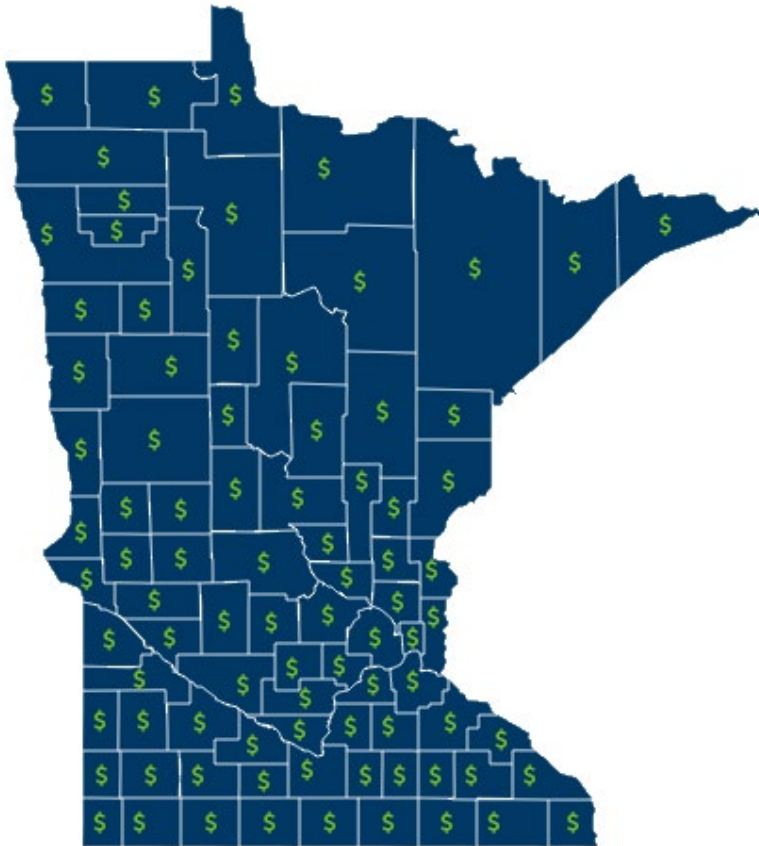
Percentage of the population within the region enrolled in MinnesotaCare



Percentage of the population within the county enrolled in MinnesotaCare



Key findings



- Medicaid and MinnesotaCare contribute significantly to the state's health care sector, supporting public health infrastructure, hospitals, mental health centers, home care, community clinics, nursing homes, physicians and many other health professionals.
- Medicaid — not Medicare — is the primary source of coverage for people who need long-term care services.
- Both programs help to significantly reduce the number of Minnesotans that go without health care coverage, and serve as a lifeline to Greater Minnesota providers.

Key findings

State level dental spending and visits: 2014 to 2018, 0-19 years old

	2014	2015	2016	2017	2018
Total spending in millions	\$58M	\$70M	\$75M	\$91M	\$103M
Average spending per member with at least one dental visit	\$300	\$328	\$331	\$388	\$427
Members with dental visits per 1,000 members	401	386	401	418	443
Total number of members with at least one dental visit	194,308	213,234	225,982	235,569	242,179
Total members in the program	484,339	552,101	563,009	562,975	546,272

Future updates

- Improvements to dental dashboard
- Pharmacy dashboard
- Other additions?



Thank you



Quality Follow Up: Survey Responses

Krista O'Connor, Strategic Development Director

Health Care Administration

Quality survey update

- Responses received from several MSAC members
- Mid-week, July 4th holiday, created some timing challenges with folks being out of the office, vacations, etc.
- Request responses from additional members by Monday, July 15th
- Results will be shared via email to members
- Results will be shared to DHS Quality Manager, Karolina Craft



Member Experience

Medicaid Services Advisory Committee

Member experience



- What's most important to you (our members) regarding health care experience?
- What's working well, and what needs improvement?



The next generation of Integrated Health Partnerships

Mat Spaan, Care Delivery and Payment Reform Manager

Health Care Administration



Next Generation of the Integrated Health Partnerships Program

July 9, 2019

Continued Innovation Supporting Systematic Change

Improved population health

Increased access to health care services

Increased beneficiary & provider satisfaction

Improved clinical quality and health care outcomes

Sustainability of the Medicaid program



Procurement and Timeline



- Coordination with other Medicaid purchasing strategies
- Demonstration in the seven-county metro area; up to 5 year contracts
- Medicaid and MinnesotaCare families and children
- Timeline for 2021 Service Delivery
 - RFP released January/February 2020
 - Responses due April/May 2020
 - Awards issued July 2020
 - Contracts in place September 2020
 - Open enrollment October 2020

What will change under the Next Generation of IHP



- Enhanced enrollee experience
 - Stronger relationship with provider
 - “Whole person” view
- Robust performance measurement model that prioritizes patient outcomes
- A payment model that supports more upfront, flexible care coordination and service delivery
 - Prospective payments coupled with reduced service reimbursement
 - Performance-based payments

Enrollment Experience



Closer relationship between beneficiary and provider –

- 1. Enrollee selects** a Next Generation IHP or MCO.
- 2. DHS identifies** a Next Generation IHP or MCO for enrollees that don't choose.
- 3. Existing options** for plan changes remain in place.

Enrollees have a similar experience across Next Generation IHP and MCO models.

Enhanced Responsibilities of Next Generation of IHPs



Administration



**Medical management
and care
coordination**



**Direct health care
services**

Medical management and care coordination



Partial capitation payment = the Next Generation of IHPs will be responsible for population health programs, identification of high risk populations...



Next Generation of IHPs will be responsible for core health care services

Thank you!

Public comment

- Public comment will be taken in the order listed on the sign up sheet
- Please raise your hand if you would like to provide public comment and did not have an opportunity to register
- Public comment is limited to 2 minutes
- We will take as many comments as time allows
- Written comments can be submitted to krista.oconnor@state.mn.us

Next meeting

October 8, 2019

12:30 – 2:30 pm

Elmer L. Andersen Human Services
Building

Room 2360

- Questions?
- Additional Comments?

Thank You!

Krista O'Connor

krista.oconnor@state.mn.us

651-431-7297