Joint Medicaid Oversight Committee: MyCare Ohio

July 2014

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Any CareOhio Connecting Medicare + Medicaid



MyCare Ohio: Overview

An innovative, new managed care program designed for Ohioans eligible for **both** Medicaid **and** Medicare benefits

Ohio became just the third state to receive federal approval for its plan to integrate care delivery between the two programs

- Massachusetts and Washington previously approved
- Ohio second to take managed care approach



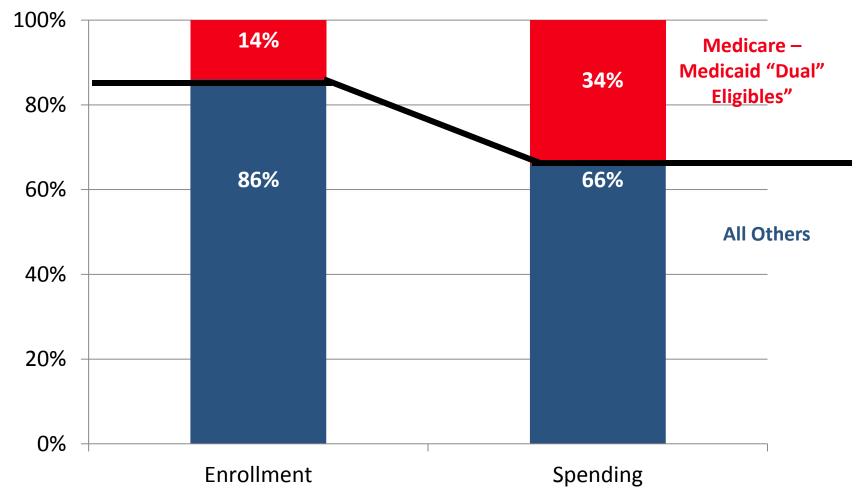
Why MyCare Ohio?

- Approximately 182,000 dual-eligible residents of Ohio
- Very little coordination between Medicare and Medicaid benefits
- Fragmentation and waste too often the result
- Integrate physical, behavioral and long-term care services into a seamless experience for the individual
- A capitated managed care model to improve care management along the full continuum of Medicare and Medicaid benefits



MyCare Ohio: Medicaid Hot Spot

Dual eligible individuals make up just 14% of the Medicaid population – but consume 34% of total costs.





MyCare Ohio: Overview

Goals of Demonstration

- Improve health outcomes
- Identify new ways to reduce overall cost of care between systems
- Provide individuals with a single point of contact for the administration of services
- Establish a delivery system that is easy to navigate for both the individual and provider
- Create a seamless transition between care settings and programs the needs of individuals change



MyCare Ohio: Timeline

2/2011: Ohio announces its vision for Medicare-Medicaid integration

- 9/2011: State submits letter of intent to Center for Medicare and Medicaid Innovation (CMMI)
- 4/2012: Ohio Medicaid releases a Request for Applications (RFA) to the managed care plans
- 12/2012: RFA scores announced; Managed care plans selected – Ohio enters into a Memorandum of Understanding with CMS
- 2013: CMS negotiations; Stakeholder input; consumer and provider education

5/2014: MyCare Ohio goes "live"



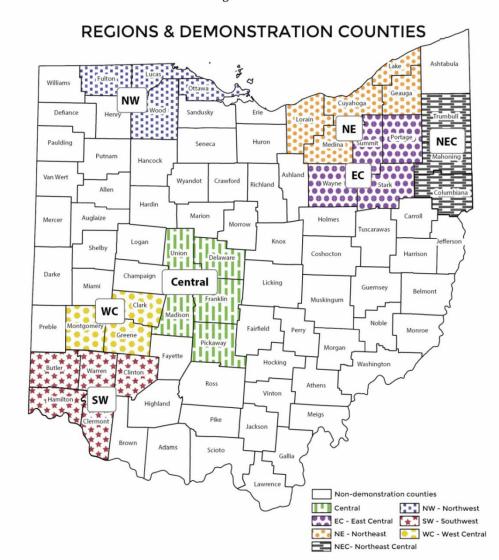
MyCare Ohio

Program Launch

- Three year demonstration goes live in seven geographical regions
- Seven regions composed of 29 Ohio counties
- At least two managed care plans in each region
 - (three plans in NE Ohio)
- Program may serve up to 114,000 Ohio residents



HyCareOhio Connecting Medicare + Medicaid

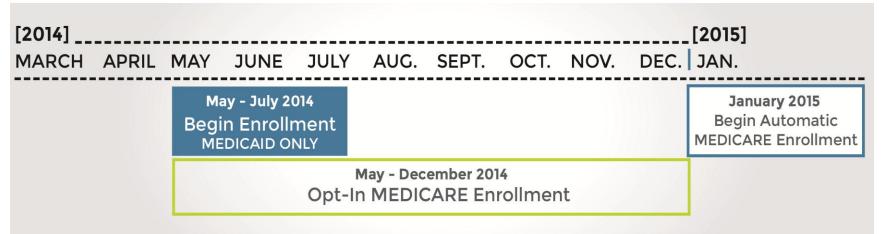


REGION	EFFECTIVE ENROLLMENT DATE
Northeast	5/1/2014
Northwest Northeast Central Southwest	6/1/2014
East Central Central West Central	7/1/2014



MyCare Ohio – Enrollment Update

- Enrollment began May 1 and phased in through June and July.
- **Multiple enrollment notices** mailed to residents in all seven regions prior to enrollment deadline.
- Individuals will now have until the end of the year to decide which plan best fits their Medicare health care needs.
- January 2015: Those who have not yet selected a Medicare plan will be enrolled in one of the MyCare Ohio managed care plans to ensure the full coordination of their care.





MyCare Ohio: Overview

- You must enroll in a MyCare Ohio plan if you are:
 - 18 or older;
 - Live in one of the 29 demonstration counties;
 - Are considered to be a Full Benefit Medicare-Medicaid enrollee;
 - Eligible for Medicare Parts A, B, & D
 - Eligible for all Medicaid benefits

MyCare Ohio: Outreach and Education

- ODM holds nine regional forums in conjunction with advocacy organizations and ODA;
- ODA working with the ADRN's and others, provides one-onone counseling to beneficiaries;
- ODM convenes an enrollment workgroup consisting of advocates, plans, providers, beneficiaries and others to advise and provide input on communications and process;
- ODM conducts a webinar and written survey for beneficiaries;
- ODM, workgroup, and plans develop provider and beneficiary specific informational material;
- MyCare plans conduct educational forums for providers and beneficiaries.



MyCare Ohio: Enrollment Counseling Numbers

Totals for Sites

AAA	# consumers 7 interactions	A Fotal minutes of counseling	Average length counseling session (minutes)	n Phone interactions	In-person interactions
1	208	5256	53	207	1
2	181	5607	68	51	130
4	311	11189	75	176	135
6	210	4620	83	194	16
10A	696	14500	44	456	240
10B	51	1555	100	43	8
11	151	2930	39	120	31
Totals	1808	45657	25	1247	561
Hours		761		69%	



MyCare Ohio: Quality Measures

Measures required by CMS which will be used by all demonstration projects

- Evaluate access
- wellness & prevention
- quality of life
- care coordination/transitions
- behavioral health
- patient experience

National measurement sets – Healthcare Effective Data and Information Set (HEDIS) and National Quality Forum (NQF)

Ohio specific measures focused on transition, diversion and balance



MyCare Ohio: Quality Withhold Framework

Both Medicare and Medicaid will withhold a percentage of the capitation rates to be repaid based on plan performance consistent with established quality standards

- Year 1: 1%; Year 2: 2%; Year: 3%

Withhold measures include a combination of core quality measures common to all states <u>and</u> a set of measures specific to Ohio

– Year 1: Seven Measures; Years 2-3: Nine Measures

Includes national measures related to customer service, access, quality, as well as Ohio-specific diversion/transition measures



MyCare Ohio: Quality Withhold Framework

Plan receives a score of "pass" or "fail" for each measure

Quality withhold payments determined based on the percentage of withhold measures that the plan "passes"

Similar methodologies and measures for both 'Medicaid-only' and dual benefits populations



MyCare Ohio: Cost Savings

Review the cost savings assumptions in the demonstration

- Shared Savings: Year 1: 1%; Year 2: 2%; Year 3: 4%

Savings projections were developed based on analysis completed by CMS's consulting actuaries

The savings analysis was used to determine the average percentage of cost savings achievable through the three year MyCare Ohio program

The analysis considered the unique contracting and reimbursement issues specific to the demonstration

 Such as requirements to honor existing contracted provider payment rates and existing patient care plans



When will we know results?

CMS has retained a firm that will estimate the cost savings for the program

CMS has not yet discussed with ODM the details regarding this cost savings analysis

This look back will occur after 24 months of operation



MyCare Ohio: Enrollment

Region	Total Enrollment
Central	14,531
East Central	14,926
Northeast	29,252
Northeast Central	8,263
Northwest	8,917
Southwest	17,617
West Central	12,129
Grand Total	105,635

*As of 7/10/2014

Ohio Department of Medicaid



Questions