

# **Ohio Department of Medicaid Presentation**

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## **Ohio's Next Generation Medicaid Program**

**Mission Statement** 



## **Next Generation Ohio Medicaid Implementation**



**Implementation Complete** 



July 1, 2022



launched to help children and youth with behavioral health and multi-system needs



October 1, 2022

Centralized Provider Credentialing reduces duplication, providers have more time for members

Single Pharmacy Benefit Manager (SPBM) statewide pharmacy access for members, statewide payment policies for pharmacies





**February 1, 2023** 

**Next Generation Managed Care Plans** 

Individualized assistance and coordination for members, focus on quality and outcomes

**Significant IT Systems Implementation** 

Intake and route majority of claims to appropriate managed care plans, increasing transparency and visibility regarding care and services



**Gradual Completion** 

**Final IT Systems Implementation** 

Single point of entry for all claims and prior authorization requests

All data transparently available for ODM to monitor and evaluate our program

# Ohio Medicaid's Next Generation Managed Care Entities (MCE)



**Currently Serving Members** 



Single Pharmacy Benefit

Manager (SPBM)

Gainwell Technologies

Since October 1, 2022



**Serving Members since February 1, 2022** 

#### New Plans



AmeriHealth Caritas Ohio, Inc.

#### Humana

Healthy Horizons™ in Ohio

**Humana Healthy Horizons in Ohio** 

#### Hybrid



#### **Continuing Plans**



CareSource Ohio, Inc.



**Buckeye Health Plan** 



Molina Healthcare of Ohio, Inc.



United Healthcare Community Plan of Ohio, Inc.

# Next Generation Program Key Improvements

#### Better Services for Pregnant Members and Newborns

Support groups and nurse home visits for emotional and physical support during pregnancy. Free breast pump 24/7 help with breastfeeding for newborns.

# After-Hours Behavioral Health Crisis Services

Access to an after-hours phone number connecting individuals experiencing mental health/addiction-related challenges to a statewide crisis line.

# **Enhanced Support for Member Transportation**

Improved trips to appointments and pharmacies will include ambulance, wheelchair van, and other emergency transportation and county non-emergency transportation.

#### **Community Investment**

Ohio Medicaid is investing in local communities by partnering with community organizations and supporting local programs to help improve health outcomes.

#### 24/7 Medical Advice Line

Call your managed care plan's 24/7 medical advice line anytime you have a medical question or need help.

#### OhioRISE

OhioRISE is a specialized managed care program for children and youth with complex behavioral health and multisystem needs.

#### **Additional Support for Children**

Additional behavioral health services will include therapy and substance use disorder treatment services.

# Single Pharmacy Benefit Manager (SPBM)

With Gainwell as the Next
Generation's single administrator for
pharmacy needs and services, you will
be able to receive the medications you
need regardless of managed care plan.

# Commitment to Individual's Health and Cultural Respect

We are supporting healthcare staff by providing programs and trainings that include cultural understanding and respect for everyone's experiences.

#### **Increased Accessibility**

If English is not your primary language or you are hard of hearing, your plan has a toll-free number and telephone services available to make sure you can easily get the information and

services you need.

#### Individualized Coordination and Care Management

Access to a health navigator to help individuals find services specific to their needs.

#### Freeing Up Providers to Better Serve You

Ohio Medicaid has implemented changes to ease the administrative burden on providers, so they have more time to focus on you.

#### **Focus on Preventive Care and Wellness**

Members will have an opportunity to receive rewards for wellness visits, vaccinations, and preventative care screenings for illnesses including diabetes.

#### **Telehealth Services**

To ensure you can receive care even when you can't make it to the doctor's office, telehealth appointments are available for healthcare needs.



# Governor's & ODM Priorities for SFY 24/25

### Help every individual served by Medicaid live up to their God-given potential by:

- 1. Monitoring implementation of the Next Generation of Managed Care, which includes new whole-person supports (transportation, connections to food and housing, coordination of health care)
- 2. Carefully unwinding pandemic-related eligibility and flexibilities
- 3. Creating opportunity for every Ohio kid served by Medicaid and supporting Governor DeWine's objective to make Ohio one of the best states in the nation to raise a family (Bold Beginning)
- **4. Supporting providers serving Medicaid members**, including general provider rate increases and increases for home and community-based services providers serving elderly Ohioans and individuals with disabilities



## **Budget: Program and Policy Details**

#### New Services

- Structured Family Caregiving
  - A newer waiver service
  - Popular with consumers and families
  - Description: an agency with choice selfdirected model with a very strong caregiver focus (CMS does <u>not</u> consider this selfdirection)
  - States that have this: MA, MO, GA, IN, SD
- Exploring ramps to prevent falls for non-HCBS waiver participants
  - Benefits more consumers (not just those on waivers)
  - Preventative

#### Waiver Alignment

- MyCare
- Adding remote monitoring & vehicle modification to NF LOC waivers

#### Self-Direction

- Improve enrollment process
  - Feedback from stakeholders indicates process does not work well today
  - Utilization of self-direction comparatively
  - Conceptually differences from current reality
- Adding this as on option to Ohio Home Care Waiver (OHCW)
  - Greater alignment of waivers
  - Addressing workforce challenges
  - Consumer choice



# **Appendix K Flexibilities and Stakeholder Engagement**

- End of Federal PHE on May 11<sup>th</sup>
- November 11<sup>th</sup> Deadline & Other Priorities
- Stakeholder Meetings Next Two Weeks
- Most Utilized Flexibility



# What is the HCBS Settings Rule

- The HCBS Settings Rule is a federal administrative rule promulgated by the CMS from 2014.
- The Settings Rule applies to all HCBS waivers and the 1915(i)-state plan option.
- CMS has stated the intent of this rule is fourfold:
  - » Provide individuals utilizing HCBS waivers full access to benefits of community living;
  - » Opportunity to receive services in the most integrated setting appropriate;
  - » Enhance the quality of HCBS; and
  - » Provide protections to HCBS waiver participants.



## **HCBS Settings Rule: Types of Providers**

For the proposes of applying the Settings Rule there are three distinct provider types:

#### » Presumed Home and Community Based

• The Settings Rule still applies to these providers but CMS assumes these providers meet the rule.

#### » Provider Owned and Controlled

• The state must review and make sure they meet the Settings Rule by the March 17, 2023 deadline.

#### » Presumed Institutional

• These are a subset of provider owned and controlled providers. If the state believes these providers meet the Settings Rule requirement, then the state must submit documentation to CMS showing why these settings are home and community-based and not institutional. CMS makes the final decision not the state through a process called *Heightened Scrutiny*.



# **HCBS Settings Rule: Where Are We At Now?**

March 17 Deadline

May 11 End of PHE

Corrective Action Plan

Ongoing Compliance



## Restrictions requiring person-centered service plan updates

- Food
- Locked doors or no key
- Visitors
- Schedule and activities

- Roommate/housemate
- Shared bedroom
- Decorations or furnishings