

# Medical Care Advisory Committee

February 7, 2019



# State Plan Amendment (SPA) Updates

## **SPA 18-0012 Federally Qualified Health Center (FQHC) Physician Administered Drugs (PAD)**

- Approved 10/30/18, Effective 7/1/18

## **SPA 18-0013 Rural Health Centers (RHC) PADs**

- Approved 10/30/18, Effective 7/1/18

## **SPA 18-0014 Early and Periodic Screening, Diagnostic and Treatment (EPSDT)**

- Approved 11/28/18, Effective 10/1/18

## **SPA 18-0018 Mississippi Coordinated Access Network (MSCAN)**

- Approved 11/21/18, Effective 10/1/18

# SPA Updates

## **SPA 18-0020 Physician Visit Limit**

- Approved 1/31/19 (Effective Date 1/1/19)

## **SPA 18-0011 Physician Administered Drugs**

- CMS Submission 8/23/18 (Effective Date 7/1/18)
- CMS Request for Additional Information (RAI) Response 1/28/19

## **SPA 18-0015 Disproportionate Share Hospital (DSH) Payments**

- CMS Submission 12/3/18 (Effective Date 10/1/18)

# SPA Updates

## **Children's Health Insurance Program (CHIP) SPA #10**

- CMS Submission 1/9/18 (Effective Date 1/1/18)
- RAI Response 11/9/18

## **SPA 19-0001 Targeted Case Management for Beneficiaries with Intellectual and/or Developmental Disabilities in Community-Based Settings**

- Public Notice Posted 12/19/18 (Effective Date 1/1/19)

## **Non-emergency Transportation Broker Contract**

- Public Notice Posted 1/22/19 (Effective Date 2/1/19)

# Proposed SPA Updates

## **SPA 19-0001 Targeted Case Management for Beneficiaries with Intellectual and/or Developmental Disabilities in Community-Based Settings**

- Public Notice Posted 12/19/18 (*Eff. Date 1/1/19*)

## **Non-emergency Transportation Broker Contract**

- Public Notice Posted 1/22/19 (*Eff. Date 2/1/19*)

# Waiver Updates

## **1115 Workforce Training Initiative**

- Completeness Letter Received 1/22/18
- CMS Review in Process

# Administrative Code Updates

- AC 19-001 Program Integrity – Beneficiary Health Management – eff. 2/1/19
- AC 19-002 Tobacco Cessation – eff. 3/1/19
- AC 19-013 Three (3) Day Window Payment – eff. 3/1/19
- AC 19-014 Mammoplasty – eff. 2/1/19
- AC 19-015 Provider Based Billing – eff. 1/1/19
- AC 19-018 EPSDT in a Psychiatric Residential Treatment Facility (PRTF) – eff. 4/1/19
- AC 19-022 Non-Emergency Air – eff. 2/1/19
- AC 19-025 Pharmacy – eff. 4/1/19

# Public Comments

- Dr. Mark Livingston, University of Mississippi Medical Center
  - Dental Concerns



# Old Business

- Bariatric Surgery Update
- Prosthetics Update
- EPSDT & Sports Physical Update
- Reproductive Health LARC/ 17p Update From CANs
  - Magnolia Health
  - UnitedHealthcare Community Plan
- Behavioral Health Readmission Update
- Pediatric Cardiac Care Update

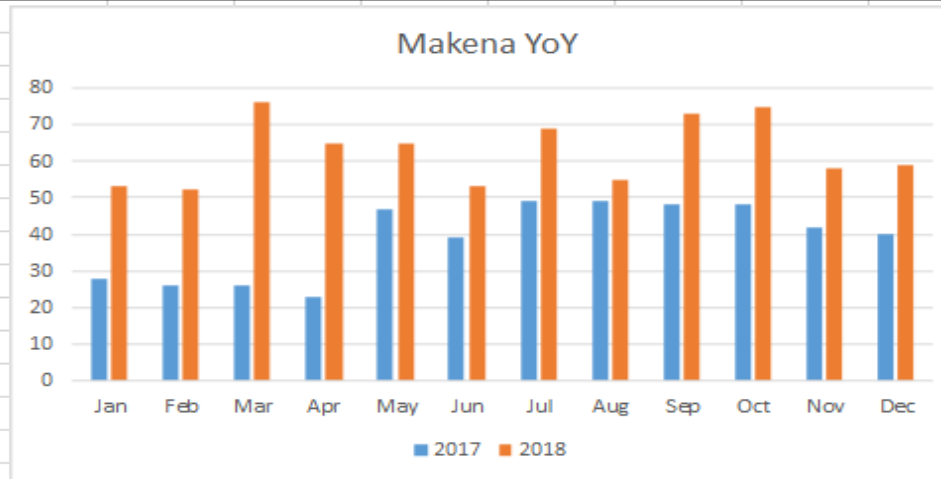
# Pregnancy

- Our Obstetrical Provider Scorecard
  - Statistically valid
  - Provided to physicians annually
  - Measures (from 2017 data):
    - C/S rates (38.7%)
    - **Makena** usage (68.1%)
    - Postpartum visit rate (33.7%)
    - NOP success (27.7%)
    - Non-medically indicated IOL before 39 weeks (1.5%)
- In person educational visits to low scoring obstetrical providers around the state for personalized education based on scorecard data

# Pregnancy

- Streamlined the Makena PA process to create a specialty pharmacy benefit for providers who can now obtain this medication as a pharmacy or medical benefit

	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
2017	28	26	26	23	47	39	49	49	48	48	42	40
2018	53	52	76	65	65	53	69	55	73	75	58	59



# Pregnancy

- Birth spacing and contraception, including LARCs, are presented in all pregnancy member education. It is discussed with all pregnant members more than once, and is also presented in detail at the baby showers

Date	Number of Members	Number of Guest
3/24/2018	18	13
6/23/18	37	25
9/29/2018	31	15
12/1/18	33	19

# Pregnancy



- Direct telephonic outreach to postpartum mothers in 2018
  - Total telephonic outreach 4155
  - Successful outreach and education 1203
  - Referrals to Care Management 170

# Pregnancy My Health Pays Rewards (effective June 1<sup>st</sup>)



- **\$50** Notification of Pregnancy Form.
  - Completed within first trimester.
- **\$25** Notification of Pregnancy Form.
  - Completed within second trimester.
- **\$20** Postpartum Doctor Visit.\*
  - 4-6 weeks after delivery.

# Reproductive Health



- Continued focus on LARCs
  - DOM now allows the provider to place a LARC immediately post partum and be reimbursed outside of the global benefit
  - Educating providers on this change
- Have removed PA requirements for LARCs to make them available as a pharmacy or medical benefit
- Developing E-blasts and website/portal provider education on LARCs

# Reproductive Health



- Developing a proposal for a pilot program for LARC dispensing with Bayer and Stellar RX
  - On-site family planning medications and Long Acting Reversible Contraceptives (LARCs) in a secure XpeDose unit from physician direct to patient
  - Direct Dispensing
  - Insertion of LARCs at office visit



# Reproductive Health



- Direct member outreach for non-compliant members for Breast Cancer Screening, Cervical Cancer Screening, and Chlamydia Screening
  - In September 2018 1877 members identified as non-compliant for outreach
    - 214 successful contacts
- Well Women Flier (Breast Cancer Screening, Cervical Cancer Screening, and Chlamydia Screening) mailed to 1742 non-compliant members at the end of October
- In 2019 will try to partner with American Cancer Society to offer joint educational materials to members and providers

# Reproductive Health



- In 2019 we are beginning a Pay for Performance program with FQHCs (15 so far) that includes the Breast Cancer Screening, Cervical Cancer Screening, and Chlamydia Screening measures
- Providing onsite education to the FQHCs to educate on the measures and ways to close gaps in care
- Member Services review open care gaps when members call into the health plan
- Care Management educates on all open care gaps with members in Care Management

## Reproductive Health - My Health Pays Rewards (effective June 1<sup>st</sup>)



- **\$20** Annual Cervical Cancer Screening.
- Age 21-64. One per calendar year.
- **\$20** Annual Breast Cancer Screening
- Age 40-69. One per calendar year.

# LARC Utilization

## Nexplanon

2016: 1,412

2017: 1,252

2018: 1,047 (Jan-Sep)

**TOTAL = 5,775**

## IUDs

**\$597,267**

2016: 618

2017: 725

2018: 721 (Jan-Sep)

# MAKENA/17p Utilization

**2016: 780 units**

**2017: 868 units**

**2018: 794 units (Jan-Sep)**

**TOTAL UNITS = 2,442 @ cost of \$1, 830,863**

# Old Business (Cont.)

- Behavioral Health Readmission Update
- Pediatric Cardiac Care Update

# New Business

- Coverage Determinations
- Medicaid Vital Signs and Other Metrics to Assist Providers
- Collaboration Efforts to Address High Risk Pregnancies
- Innovations/Best Practices (DOM, UHC, Molina and Magnolia Presentations)
- CCO Quality Measures Update 2019
- Medicaid EASE Initiative

# Accountable Innovation



# The Approach

Not more of the same.

Not more for the same.

More with the same.

# Other States

## 1. Alternative Care and Payment Models

Accountable Care Organizations (MA)

Global Payments (PA)

Episodic Care (OH)

Value-Based Payments (NY)

## 2. Transitioning interoperability from IT to clinical uses

## 3. Reducing administrative burden

## 4. Integrating multiple clinical or social services to address root cause of issues

# Division of Medicaid

Specific focus on innovation (Office of Innovation Initiatives)

Recognize importance of advancing strong partnerships with stakeholders

Some of the proposals in the pipeline

- Integrated Care for Kids Model Waiver (InCK)
- National Association of State Health Policy - PHRM/ISS Program Transformation
- Maternal Opioid Misuse Model (MOM)

# Managed Care Entities

Medicaid managed care organizations are playing a large role in innovation across the country.

## **Magnolia**

Diabetes Care

OpiEnd

Readmission Reduction

Value-Based Payments

## **Molina**

Episodes of Care

Paramedicine

Premanage

Value-Based Payments

## **United**

High Performer Network

Housing

Opioid Management

Value-Based Payments

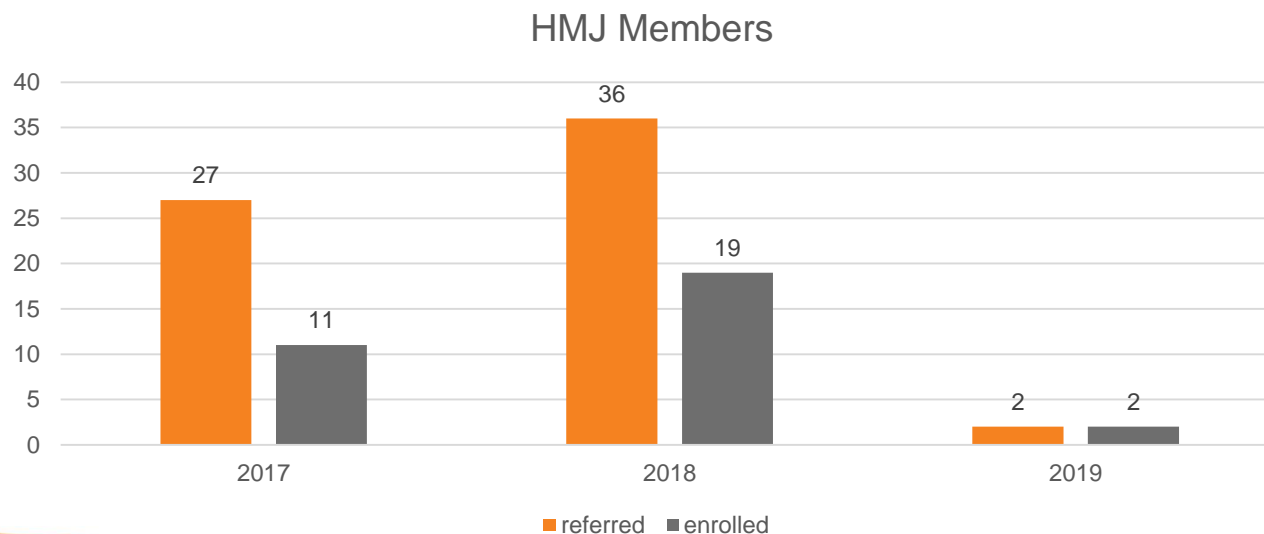
# Pregnancy



- Standardized Notification of Pregnancy form (NOP) to be used by all Medicaid beneficiaries
- Our award-winning Start Smart program
- NICU breast pump program
- Obstetrics Scorecard

# Pregnancy

- Healthy Mother's Journey (Addiction in Pregnancy Program)
  - Integrated program of medical and behavioral professionals to help members with identified or reported substance use during pregnancy through telephonic outreach, engagement, and care management for up to 12 months.





# **BEST PRACTICES**



# PHARMACY

1. Narcotic Utilization Program – pharmacy claims review for excessive refills, doctor and pharmacy shopping, therapeutic duplications, etc.
2. Safety Management Program – target inappropriate RX patterns to minimize adverse events
3. Gap in Care Program – Asthma : closes gaps in medication therapy and lowers costs



# 2019 New Pharmacy Gaps in Care Program

1. ASTHMA – optimize use of Long Term Controller meds, appropriate use of short acting beta-agonists
2. DIABETES - identify members not on a statin and members with DM and HTN not on certain anti- HTN meds
3. COPD – same as Asthma
4. CARDIOVASCULAR - Atrial Fib and no anti-thrombin Rx  
CHD/IVD not on a statin or appropriate statin dose  
CHF not on an appropriate beta-blocker  
CHD not on a RAAS inhibitor  
Post-MI not on beta-blocker
5. HIV – on protease inhibitor without ritonavir

# **Dental Fluoride Varnish Program- Kids < 3 y/o 2018**

- **Collaboration with State Dental Office , MSDH, to train PCPs to do Dental Fluoride Varnish Application**  
**\_10,933 members received Dental Varnish by their PCP (Jan-Oct 2018):**
  - 78% had a dental visit within 4 months of varnish**
  - 98% had preventive dental service within 4 months of varnish; 2% had non-preventive dental service**
- **Mississippi has the HIGHEST compliance percentage out of all UHC Community Plans**

# CCO Quality Measures

- Magnolia Health
- UnitedHealthcare Community Plan
- Molina Healthcare

# Reproductive Health



## New HEDIS measures for 2019

Measure	Submeasure	July	August	September	October	November	December
Contraceptive Care Postpartum Women Ages 15-20 (CCP18CH)	LARC 3 days	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%
	LARC 60 days	9.68%	11.16%	10.63%	10.78%	10.57%	11.83%
Contraceptive Care Postpartum Women Ages 21-44 (CCP18AM)	LARC 3 days	0.17%	0.12%	0.14%	0.14%	0.15%	0.15%
	LARC 60 days	6.64%	6.94%	6.66%	6.79%	6.73%	7.63%

# Reproductive Health

## HEDIS Rates:

### September Rates

BCS – 52.69%

CCS – 54.56%

CHL – 40.53%

vs

### December Rates

BCS – 56.11%

CCS – 57.46%

CHL – 46.37%



# UHC QUALITY MEASURES



# HEDIS Indicators 2015-2017

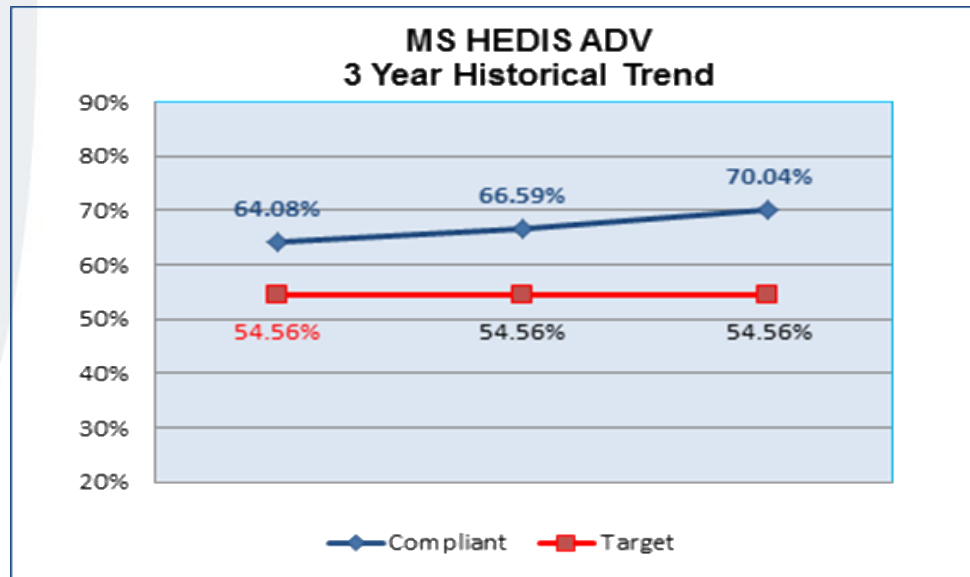
Measure	2015	2016	2017	%Improvement CY2015-2017
Prenatal Care	82.75%	90.49%	86.13%	4.08%
Postpartum Care	35.57%	62.93%	53.04%	49.11%
Breast Cancer Screening	47.78%	50.21%	49.96%	4.56%
Cervical Cancer Screening	60.00%	56.82%	62.77%	4.62%
Annual Dental Visit	59.61%	64.98%	69.81%	17.11%
Diabetes: Improvement in HbA1C control (<8.0%):	26.76%	35.04%	35.22%	31.61%

# Quality Indicators

- **Behavioral Health – Follow-up visit with Mental Health Provider after a mental health hospitalization improved by 51% for 7 day follow-up and 26% for 30 day visits**
- **EPSDT Rates – 2012-present, UHC EPSDT-eligible members have experienced a 270% increase in Pediatric wellness exams**



# Kids' Annual Dental Visits



# 2019 Quality Measures

- Behavioral Health Facility Inpatient Readmissions
- Improvement in Pregnancy Outcomes
- Improved Medication Compliance Asthma and COPD
- Comprehensive Management of Sickle Cell Disease

## Maternity/NICU Data Jan-Oct, 2017-18

- **Total Births: 2018 : 8,677  
2017 : 9,019**
- **NICU Admits/Birth: 2018: 18.6%  
2017: 17.0%**
- **Gestational Age: 24 wks or <: 2018: 1.92%  
2017: 2.93%**

## **Gestational Age:**

**25 -29 wks: 2018: 7.43% 2017: 9.39%**

**30 – 34 wks: 2018: 29.53% 2017: 30.92%**

**35 – 36 wks: 2018: 16.05% 2017: 17.41%**

**37 – 39 wks: 2018: 34.70% 2017: 32.86%**

**40 – 44 wks: 2018: 3.83% 2017: 2.87%**

# Molina Healthcare of Mississippi

Population Health Management



## OB-Monitoring Program

### PROGRAM DESIGN

The goal of OB-Monitoring is to address the healthcare needs of ALL expecting mothers enrolled in MSCAN while promoting positive maternal and newborn health outcomes. OB-Monitoring is offered to low-moderate risk expecting mothers that have traditionally been outside the purview of OB care management programs. The program is led by a team of locally embedded community connectors. Community Connectors are equipped to provide health coaching and health outreach for low to moderate risk populations. Community Connectors are also supported by a clinical team of nurses, behavioral health clinicians, medical directors, and pharmacist.

### HEALTH COACHING

- Provide Molina benefits education
- Help schedule appointments with providers
- Arrange transportation for healthcare visits
- Follow-up on missed appointments
- Conduct ongoing telephonic and/or face-to-face outreach visits
- Encourage completion of preventive screenings
- Employ behavior change strategies
- Provide lactation education

# Molina Healthcare of Mississippi

Population Health Management



## OB-Monitoring Program

### COMMUNITY CONNECTORS

- Outreach to ALL expecting mothers and are accessible by telephone
- Reviews care databases for Rising Risk Indicator's (RRI) throughout the course of the member's pregnancy
- Consults with clinical team when RRI's are identified and make appropriate referrals
- Promotes positive health outcomes through education and incentives
- Completes Maternity and Post-Partum Screening and referrals as needed
- Complete Health Information Screenings as needed
- Complete home visits to HROB members who have become UTC

### HEALTH OUTREACH

- Locate member
- Travel to last known address
- Contact providers, caregivers
- Travel to community resources locations
- Assess member needs through home visits
- Complete appropriate assessments
- Help get prescriptions filled
- Connect member to a Primary Care Physician
- Help eliminate barriers to following Care Plan
- Provide alternatives to Emergency Room visits
- Conduct safety check in home setting
- Help identify if a support system in home setting exists
- Identify barriers to accessing care

# New Business

- Medicaid EASE Initiative
- ✓ Next Meeting Dates
- ✓ Adjourn