Medicaid Services Advisory Committee
12:30 – 1:00 pm
Member Networking
Health Care Administration Vision:
The Health Care Administration builds and operates affordable and efficient health care programs that improve the health of Minnesotans.
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
Welcome and agenda

• Welcome

• Agenda
  • Updates
  • Beneficiary materials feedback
  • Case Management Redesign
  • Discussion topics
  • Public comment

• Introductions
• Member updates

• DHS updates
  • Additional MSAC members
  • New leadership
Commissioner Tony Lourey

- Appointed by Governor Tim Walz
- Former state senator from East Central Minnesota, served from 2006 to 2019
- Served as chair of the Senate Health and Human Services Finance Committee from 2013 to 2016
Commissioner

Program Administrations

Direct Care Areas

Agency wide Functions
Beneficiary Materials Feedback: Medicaid Services Advisory Committee
March 1, 2019

Krista O’Connor
Health Care Administration
Materials reviewed

• Managed care guide to health care enrollment
• Notice about your rights and responsibilities
• Summary of coverage, cost sharing and limits for Medical Assistance
Survey: general comments

Materials were...

• Helpful
• Straightforward
• Easy to understand
• Clear
• Complete and contained appropriate information
• Clear on how to file complaint

Feedback...

• Language block at the beginning; organized by prevalence spoken; and connect to live people
• Some formatting made it difficult to read
• Use large print to emphasize important information (like county managed care coordinators)
• Use of the word “worker” confusing
Survey: general comments continued

Most useful
• Worksheets and checklists to guide applicants through the process
• Information on how to pick a plan

Least helpful
• Limited and confusing information on estate claims and liens
• non-applicable info listed (cost sharing)
Suggestions

• Add signature line to indicate review and understanding of estate claim and lien information

• Add information on how to report income changes; new family members

• Explain the purpose of the two different cards

• Include a list of navigators (to help complete the enrollment process) and county contacts and phone numbers
Suggestions

• Include information on the renewal process
Survey: Summary of coverage, cost sharing & limits

Suggestions

• Separate cost sharing info for MA and MN Care
• Include income guidelines and household definitions
• Include information on accessing employer health insurance
• Include information on the renewal process
Successful approaches or strategies

• Partner with HHS Advisory Committees; Minnesota CAPS

• Surveys

• Collect during the renewal process using a trusted organization
Priority areas for consumer feedback

• Quality of services from providers

• The ease of obtaining information

• The overall enrollment process and the changes needed to make the system more person-centered

• What barriers are consumers experiencing

• The costs members are currently responsible for
Thank you for the feedback you provided

Questions or additional comments: Krista O’Connor @ krista.oconnor@state.mn.us or 651-431-7297
Case management redesign - updates on draft service design
Medicaid Services Advisory Committee
March 1, 2019

Lisa Cariveau
Community and Care Integration Reform | Community Supports and Health Care Administrations
The initial design team was created to draft a definition for the service of case management and create a foundational set of standards around the delivery of the service so that people know what they can expect and rely on.

The primary purpose of this team was to create a draft service design to be reviewed more broadly so that as many people as possible can provide input into the design.
Community engagement

Community events

Additional sites for community events may be added.
Draft service design

• Includes **foundational policies and expectations** that would be required of all case management services.

• The foundational policies and expectations will be expanded upon to reflect additional expectations based on the needs of a specific population, expertise needed to provide the service to a specific population or to meet federal requirements for specific service areas.
Vision for case management

Services are simple, flexible, person-centered, culturally responsive, universally available to those who qualify for them, and are effective in assisting people and families to access formal and informal supports.
Goals of case management

• Assist people and families to access formal and informal services and supports that help people achieve their goals and meet their basic needs

• Promote health, safety, and stability across settings and situations

• Support individually meaningful connections to family, friends and communities

• Support the quality of life as defined by the person
Service design components (assess, plan, refer, monitor)

• Expected activities
• Standards for how the service should be delivered
• Policies regarding implementation of the service component
• Solidified definitions and expectations

• Person at the center

• Elements that must be included in an assessment within case management

• Elements that must be included in a plan

• Expectations of communication and delineating roles when someone has more than one case manager or care coordinator
Call for input

Read the draft service design

Submit your feedback online

https://mn.gov/dhs/case-management-redesign
Questions?

Email
dhs.cmredesign@state.mn.us

Call
651-431-4895
Next steps

• Continue to gather feedback on the draft service design

• Summarize and share the input with the initial design team who will help to finalize recommendations for a legislative proposal
Overall timelines

• Nov, 2018-April, 2019:
  • Share draft service design with stakeholders and community members to gather feedback
    • Expert review group
    • Statewide (meetings, in-person, survey)
  • Develop and model alternative rate methodologies

• May, 2019- Sep, 2019: Finalize service design, finalize timeline for implementing changes to the service design and payment methodologies, work with stakeholders to scope legislative proposal

• 2020 session: Statutory language will need to pass in order to implement changes in 2021 to meet CMS expectation related to county negotiated rates
Thank you!

Lisa Cariveau
Lisa.Cariveau@state.mn.us
651-431-5827
Revisit topics for discussion
Medicaid Services Advisory Committee
March 1, 2019

Krista O’Connor
Health Care Administration
Discussion Topics

• Housing stabilization services
• Medicaid quality measures
• Other
• 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

April 9, 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