Transition to Managed Care for New York State Foster Care Agencies

Technical Assistance Kickoff Webinar

February 23, 2015

2 – 4 PM
Presenters

• Lana I. Earle, Deputy Director, NYS Department of Health, Division of Program Development & Management, Office of Health Insurance Programs

• Laura Velez, Deputy Commissioner, NYS Office of Children and Family Services, Child Welfare and Community Services

• Terri Greco, Project Director, IPRO Foster Care Technical Assistance Program

• Andrew Cleek, Executive Officer, NYU McSilver Institute - UIBH
Agenda

• Welcome

• Overview of the Transition of Health Care for Foster Care Children to Managed Care, Health Home for Children and Readiness Activities for Foster Care Agencies

• Foster Care Technical Assistance Project
  ✓ Project Partners and Project Activities
  ✓ Preparedness Assessment
  ✓ Trainings and Technical Assistance
  ✓ What’s next
  ✓ Q&A
MRT Action Plan and the Transition of Foster Care to Managed Care

• The transition of foster care to Managed Care is part of the MRT Action plan to reform and transform Medicaid to achieve the Triple Aim of improving quality, improving health and reducing overall costs.

• Key tenets of the Medicaid reform and transformation initiatives include:
  • Care Management for All – over multi year period all members enroll in high-quality fully integrated care management program (e.g., Managed Care, Managed Long Term Care)
  • The integration of physical and behavioral health and community and social supports, including moving the behavioral health benefit to managed care
    • Health Homes play important role in each of these initiatives
MRT Action Plan and the Transition of Foster Care to Managed Care

• The MRT Action Plan will change and improve the types of health care services provided to foster care children and the delivery of these services

• Transition activities are underway and are scheduled to be implemented between now and 2016

• **October 2015**: MRT Action Plan includes expanding the Health Home care management model to serve children with chronic and complex health care needs that meet Health Home eligibility criteria
  – Many foster care children will likely be eligible for Health Home under currently proposed modifications to eligibility criteria to include trauma (October 2015)
MRT Action Plan and the Transition of Foster Care to Managed Care

• **January 2016:** MRT Action Plan includes:
  – Transitioning the health care of children in foster care from fee-for-service/per diem to Medicaid managed care
    • Residual foster care per diem under development
  – Transitioning fee-for-service behavioral health services to Medicaid Managed Care
  – Providing an array of HCBS services that will be available to expanded population of children based on Level of Care and Level of Need criteria now under development
  – Adding 6 new State Plan services
• State Agency Partners (OCFS DOH OMH OASAS) will continue to provide foster care agencies and other stakeholders updates on progress being made to implement these MRT initiatives
Proposed 2016 Children’s Medicaid Managed Care Model

For all children 0-21 years old

Mainstream Medicaid Managed Care Organization: Benefit Package*

- All Health & Pharmacy Expanded Benefits
- Behavioral Health State Plan Services and New State Plan Services
- Align & BIS Services for children meeting LON and LOC criteria (transition of existing children’s 1915c Waivers - OMH, B2H & CAH I/II)

Care Management for All
Care Management will be provided by a range of models that are consistent with a child’s needs (e.g., Managed Care Plans, Patient Centered Medical Homes and Health Homes). Most children’s care and services will be coordinated through Health Homes.

*MCOs may opt to contract with other entities (e.g., BHOs) to manage behavioral health benefits
New York State Health Home Model for Children

Managed Care Organizations (MCOs)

Health Home
Administrative Services, Network Management, HIT Support/Data Exchange

HH Care Coordination
Comprehensive Care Management
Care Coordination and Health Promotion
Comprehensive Transitional Care
Individual and Family Support Referral to Community and Social Support Services
Use of HIT to Link Services

Care Managers Serving Adults
(Will support transitional care)

Care Managers Serving Children

Pediatric Health Care Providers
OMH TCM (SCM & ICM)
Waivers (OMH SED, CAH & B2H)
DOH AI/COBRA
OASAS/MATS
OCES Foster Care Agencies and Foster Care System**

Network Requirements

Downstream & Care Manager Partners
Primary Community and Specialty Services

Access to Needed Primary, Community and Specialty Services (Coordinated with MCO)
Pediatric & Developmental Health, Behavioral Health, Substance Use Disorder Services, HIV/AIDS, Housing, Education/CSE, Juvenile Justice, Early and Periodic Screening Diagnosis and Treatment (EPSDT) Services, Early Intervention (EI), and HCBS/Waiver Services (1915c/i)

**Foster Care Agencies Provide Care Management for Children in Foster Care**
What is Managed Care?

• Managed Care is:
  – A general term used to describe any health insurance plan or system that coordinates care through a primary care practitioner or is otherwise structured to control quality, cost and utilization, focusing on preventive care
  – An integrated system that manages health services for an enrolled population rather than simply providing or paying for the services
    • Services are usually delivered by providers who are contracted under and capitated payment structure or employed by the pla

• Medicaid Managed Care - A NYS-sponsored health insurance program for adults and children who have little or no income or who receive Supplemental Security Income (SSI)
  ▪ Authorized under Section 364-j of Social Services Law
  ▪ NYS contracts with Managed Care Organizations who then pay the participating provider directly for services
  ▪ NYS pays the plans a capitated rate (per member/per month)
  ▪ Benefits consist of plan covered services and Medicaid FFS carve-out services
  ▪ Most carve-out services will be covered by MMC by 2015
What is Managed Care?

• NYS Mainstream Medicaid Managed Care Plans (MMCP)
  ▪ Are HMOs, PHSPs, or HIV SNPs
  ▪ Certified under Article 44 of the Public Health Law
    By the NYS Department of Health in conjunction with the NYS Department of Financial Services
  ▪ Qualified by NYS Department of Health to provide Medicaid services
  ▪ Meet federal regulations at 42 CFR 438

• These plans are responsible for assuring enrollees have access to a comprehensive range of preventative, primary, specialty, ancillary and inpatient services through their provider network
What is Managed Care?

• MMC enrollees are entitled to all Medicaid covered benefits

• FFS coverage is the minimum level of service that plans must provide

• Plans may establish their own:
  ✓ Prior approval policies
  ✓ Reimbursement levels/methodologies (except for when mandated government rate are imposed, generally for transitional periods)
  ✓ Medical necessity (utilization review) criteria
Managed Care: Key Ingredients

• Care “management”
  – Utilization management
  – Disease management

• Vertical service integration and coordination

• Financial risk sharing with providers
  – Services are usually delivered by providers who are contracted under and capitated payment structure or employed by the plan
Role of Foster Care Agencies in Managed Care Environment

• Foster care agencies that now provide health care services may continue to do so in Managed Care environment
  – Foster care agencies would need to contract with Plans to provide these services and become part of the Plan’s network
  – Requires changes to foster care agency’s business model
• Health care services will be delivered to foster care children through the Plans network of provider – Foster care agencies will have to be knowledgeable about the delivery of plan services
• Under the Health Home model for children Health Homes must contract with Foster Care Agencies to provide care management for children in foster care
  – Agencies may choose not to provide Health Home care management for children in their Agency (in this case, it is anticipated the Health Home will contract with a downstream care manager to provide care management to such foster care children)
Role of Foster Care Agencies in Managed Care Environment

- Agencies providing Health Home care management will be required to comply with health care oversight mandates for children in foster care and meet the core care management requirements of the Health Home Program.
- Agencies may also provide Health Home care management for children who are not placed in foster care or who were formerly enrolled in Foster Care.
- Health Homes and VFCA will be required to establish agreements to ensure transitional arrangements are in place for children that transition in and out of foster care.

- Depending on the roles foster care agencies play, the actions required to be taken to become ready to operate in managed care environment will vary depending on the roles and decisions foster care agencies make about their future business models.
New York State is Launching a Series of Activities to Help Foster Care Agencies become Ready to Operate in Manage Care Environment

• The 2014-15 Budget included resources of $5 million in 2014-15 and $15 million in 2015-16
  ✓ 2015-16 Executive Budget includes amendment to authorizing statute to make available the $15 million included in last year’s budget
• DOH and OCFS has engaged IPRO and a team of subject matter experts to use approximately $1.5 million to $2 million of these resources to engage in the following readiness activities:
  ✓ Data collection and analysis that will help inform the build of capitated managed care rates for foster care children and the residual per diem
  ✓ Health Home care management training, including Health Home care management roles and child welfare case worker roles
  ✓ Tools to assist agencies in assessing their Managed Care readiness and providing managed care technical assistance and training (topic of today’s discussion)
    ✓ Following the enactment of the 2015-16 Budget, the remaining balance of approximately $18 million, will be distributed through a grant Application/contract process
Foster Care Managed Care Readiness Activities

A collaboration between IPRO, the New York State (NYS) Department of Health’s Office of Health Insurance Programs (OHIP) and the New York State Office of Children and Family Services (OCFS). Its purpose is to ensure the achievement of important activities that will facilitate the transition of children placed in voluntary agencies to Medicaid Managed Care.
IPRO provides a full spectrum of healthcare assessment and improvement services that foster the efficient use of resources and enhance healthcare quality to achieve better patient outcomes.

IPRO holds contracts with federal, state and local government agencies and corporate clients, in more than 33 states and the District of Columbia.

For more information about IPRO, please visit ipro.org.
IPRO has engaged a panel of highly qualified consultants and subject matter experts to accomplish project activities:

- **Empire Health Advisors (EHA):** Data Collection & Analysis
- **New York Care Coordination Program (NYCCP):** Health Home Training
- **Raymond Schimmer:** Foster Care Subject Matter Expert
- **Community Technical Assistance Center of New York at the NYU McSilver Institute:** Preparedness Assessment, Technical Assistance, and Medicaid Managed Care Training
IPRO Project Partners

30 years of experience in health care finance consultation and administration

DATA COLLECTION AND ANALYSIS

• Statistically Drawn Random Sample
  • Over 600 children
  • Twenty-six agencies
• Medical Record Reviews
• Case Record Reviews
• Activity Studies
• Medicaid Claims Data
IPRO Project Partners

New York

CARE COORDINATION PROGRAM

Creating a person-centered, recovery-focused system of care

HEALTH HOME TRAINING

• What does it means to be a downstream children’s health home provider for children in foster care and their families?
• How is Care Coordination different from Case Management?
• How do we integrate the six core Health Home functions within the foster care service environment?

❖ NYCCP has been providing care management trainings since 2002
❖ In 2012, NYCCP was approved to provide Health Homes across 22 counties in Western New York (HHUNY)
IPRO Project Partners

RAY SCHIMMER, SUBJECT MATTER EXPERT

• Over 40 years of experience in the fields of child welfare, special education, and child and family behavioral health
• Former CEO of Northern Rivers Family Services, a large multi-service voluntary foster care agency
• Appointed to the OCFS Advisory Board by the Governor
• Serves as the Upstate Vice President and member at-large for the Board of Directors of The Council of Family and Child Caring Agencies (COFCCA)
IPRO Project Partners

• PREPAREDNESS ASSESSMENT – Now - The Focus of the Remaining Part of Today’s Discussion

• MANAGED CARE TRAININGS – Beginning in April

• TECHNICAL ASSISTANCE – Throughout the Project
Andrew Cleek, PsyD, Executive Officer, McSilver Institute - UIBH

COMMUNITY TECHNICAL ASSISTANCE CENTER OF NEW YORK
About CTAC

- CTAC was founded in 2011 as the Children's Technical Assistance Center.

- Expanded in 2012 to offer technical assistance to all Article 31 mental health clinics in New York State.

- As of December 2014, CTAC has hosted 216 in-person and online events, reaching 2,606 unique individuals and 7,389 total participants.

- 80% of all OMH Children’s Providers and 70% of all child and adult serving mental health clinics have participated in at least one CTAC offering.
CTAC & Managed Care (MCTAC)

In September 2014, the Managed Care Technical Assistance Center launched in partnership with NYS DOH, OMH, and OASAS.

What is MCTAC?
MCTAC is a training, consultation, and educational resource center that offers resources to all mental health and substance use disorder providers in New York State.

MCTAC’s Goal
To prepare and assist providers with the transition to Medicaid Managed Care. provide training and intensive support on quality improvement strategies, including business, organizational and clinical practices, to
MCTAC (cont.)

CTAC & MCTAC are also working with NYS mental health and substance use disorder providers to offer:

- Foundational information in preparation for Managed Care:
- Support and capacity building:
  - tools
  - informational training & group consultation
  - assessment measures
- Information on the critical domain areas necessary for Managed Care readiness
- Aggregate feedback to providers and state authorities
What Participants Can Do to Make the Most of Technical Assistance Offerings

• Designate a project team including:
  – Executive leadership, Finance & Program leadership, and Evaluation staff when available

• Commit to investing the time and effort needed to assess, diagnosis, improve, and monitor your organization’s operations, business practices, and financial performance
Making the Most of T.A. (cont.)

• Begin to think through with agency leadership and staff what role and services your agency envisions providing in the Managed Care environment
  – Will we provide primary care services?
  – Will we provide behavioral health services?
  – Will we provide Health Home Care Coordination?
  – What if we haven’t decided yet?

• Complete the readiness assessment and participate actively in TA activities
Survey to Help Foster Care Agencies Assess their Managed Care Readiness

• CTAC has prepared a Managed Care Readiness Assessment to help Foster Care Agencies assess the degree to which they are ready to operate in a Managed Care environment.

• To be eligible to submit an Application to receive and use their share of the $18 million of grant resources described earlier, foster care agencies must complete and submit the Readiness Assessment.

• The Application will require the foster care agencies to use the results of the Readiness Assessment to develop a work plan that will identify how the agency plans to use its allocation of the grants to fulfill its readiness needs.
Managed Care Readiness Assessment

Domain Areas

• Understanding MCO Priorities
• MCO Contracting
• Communication /Reporting
• IT System Requirements
• Credentialing Process
• Level of Care (LOC) Criteria / Utilization Management Practices
• Member Services/Grievance Procedures
• Medical Management
• Quality Management/Quality Studies/Incentive Opportunities
• Finance and Billing
• Access Requirements
• Demonstrating Impact/Value (Data Management & Evaluation Capacity)
Readiness Assessment Basics

• Readiness Assessment and addendum are available online at http://mctac.org/page/provider-readiness/

• 20 OCFS Voluntary Agencies already submitted a readiness assessment in the Fall of 2015 to MCTAC – these agencies only need to fill out addendum.

• Other agencies should fill out both the readiness assessment and the VA addendum.
Readiness Assessment Basics (cont.)

• Agencies are strongly encouraged to complete the assessment as part of a management team meeting

• Fill out the PDF version before entering into the online entry portal. Available here: http://mctac.org/files/misc/10/2.23.15-readiness-assessment-tool-final.pdf

• Due back via online entry portal by Friday, March 13th: https://nyu.qualtrics.com/SE/?SID=SV_55OxtP3lvPZwW2N&Preview=Survey&BrandID=nyu

• CTAC will not report individual agency results to the State; however, agencies may share their results with State agencies as part of work plan development and contracting process

• Agencies that do not submit a Readiness Assessment will not be eligible to submit an Application for grant resources
Agencies should use the hard copy of the entire assessment to fill out answers along with their agency leadership and management team.

Once completed, the online survey input tool automatically uses skip logic so that participants are asked to respond to relevant questions based on the information they provide throughout the process.

For example...
Does your agency currently or plan to provide mental health, substance abuse, or primary care services?

- Yes
- No

If yes...

OCFS Readiness Assessment Tool

Information about your Present Medicaid Involvement:

The Managed Care transition will affect an agency in direct proportion to the amount of revenue the agency derives from Medicaid.

Percentage of current reimbursement for services coming from Medicaid

- Less than 10%
- 10% to 25%
- 26% to 50%
- 51% to 75%
- More than 75%
- I do not know/Not applicable

Percent of current reimbursement for services coming from commercial insurances

- Less than 10%
- 10% to 25%
- 26% to 50%
- 51% to 75%
- I do not know/Not applicable

Does your agency currently provide onsite primary health services?

- Yes
- No
- I don’t know/Not applicable

If no...

CTAC is a training, consultation, and educational resource center available to all mental health clinics in New York State. We’re here to assist both adult and children’s mental health clinics for your clinical and business needs.

Webinar Series

Sign up for live trainings and access our ongoing clinical webinar series

MCTAC

Learn about the Managed Care Technical Assistance Center, register for our events & view past webinars related to the current transition to managed care.

Clinical & Business Initiatives

Information on present and past CTAC Clinical Investment and Investment Initiatives
Managed Care Readiness Assessment

Data Collection and Analysis

• Data Collection/Submission of Readiness Assessment: submitted online through Qualtrics

• Analyze Collected Data: Examine readiness and preparedness for the transition to managed care and identify areas where additional support is needed

• Report: CTAC will report back results to agencies to inform their work plan development
Example Agency Readiness Assessment

**Introduction:** 554 Readiness Assessments were analyzed. 306 were completed. The following data is included in your report:
- **Average Score** – the mean of the population (N=554) in the domain, which could range from 0 - 5
- **Agency Score** – your agency’s individual score in the domain, which could range from 0 - 5
- **Percentile** – your agency’s rank compared to the population, which could range from 0 – 100.

<table>
<thead>
<tr>
<th>Domain</th>
<th>Average Score</th>
<th>Agency Score</th>
<th>Percentile (%)</th>
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</thead>
<tbody>
<tr>
<td>Understanding MCO Priorities &amp; Present Managed Care Involvement</td>
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<td>3.7</td>
<td>63</td>
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<tr>
<td>MCO Contracting</td>
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<td>3.17</td>
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<tr>
<td>Communication /Reporting (Services authorization, etc.)</td>
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<td>IT System Requirements</td>
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<td>Level of Care (LOC) Criteria / Utilization Management Practices</td>
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<td>1.64</td>
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<td>Member Services/Grievance Procedures</td>
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<td>Interface with Physical Health, Social Support and Health Homes</td>
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<td>Quality Management/Quality Studies/Incentive Opportunities</td>
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<td>Finance and Billing</td>
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<tr>
<td>Access Requirements</td>
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<td>Demonstrating Impact/Value (Data Management &amp; Evaluation Capacity)</td>
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<td><strong>Overall Score</strong></td>
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<td><strong>2.28</strong></td>
<td><strong>23</strong></td>
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Work Plan Development

• Using a work plan template, individualized results of the readiness assessment, and a menu of suggested activities in areas of greatest need, agencies will develop individual strategies as part of the contracting process with DOH.

• Agencies will draft their work plans as part of Application/contract process for distributing grant resources beginning in late March for April submission (after enactment of 2015-16 Budget) to NYS DOH. The work plans would be submitted as part of the Application for the grant resources.
Leadership Forums

- March/April in Western New York, Albany, NYC
- Presented by DOH, OCFS, CTAC, and other project partners
  - Readiness Assessment results
  - Work Plan Development
  - Application Process
  - Technical Assistance
  - Participant Feedback
Technical Assistance Offerings Will be Scheduled

• Tailored specifically for Foster Care Agencies affected by transition to Medicaid Managed Care

• In-person and web-based trainings to address:
  – Contracting
  – Business Practices
  – Utilization Management
  – Outcome Management
  – Change Leadership
## Technical Assistance Timeline Review

<table>
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<th>Activity</th>
<th>Timeframe</th>
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<tr>
<td>Kick Off Webinar</td>
<td>February 2015</td>
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<tr>
<td>Readiness Assessment and Leadership Forums</td>
<td>March – April 2015</td>
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<tr>
<td>Workplan Development</td>
<td>March – April 2015</td>
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<tr>
<td>Trainings around critical areas of readiness</td>
<td>April ongoing</td>
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**Reminder:** Readiness Assessment due Friday, March 13.
Visit [www.ctacny.com](http://www.ctacny.com) and [www.mctac.org](http://www.mctac.org) to view past trainings, sign-up for upcoming events, and access resources.

[The Managed Care Technical Assistance Center](http://www.mctac.org)

**Upcoming Events**

- **Tuesday, February 10, 2015**
  Contracting for Managed Care Webinar Overview and Office Hours, 10 am - 12 pm

- **Thursday, February 26, 2015**
  Readiness Assessment: Follow-up Webinar

[Contact Information](mailto:ctac.info@nyu.edu)

[@CTACNY](https://twitter.com/CTACNY)
Timeline of All Foster Care Readiness Activities

February
- Data Collection Activities

March
- Kick-Off Webinar
- Agencies Complete Surveys

April
- Survey Results
- Leadership Forums

May
- Work Plan Technical Assistance
- Work Plans/Applications Submitted

June
- Managed Care Trainings

July
- Health Home Trainings

August
- Data Collection (EHA)
- Preparedness Assessment (CTAC)
- Work Plan Development (CTAC)
- Managed Care Training (CTAC)
- Health Home Training (NYCCP)
Questions?

For additional questions:

- Terri Greco, Project Director, IPRO Foster Care Technical Assistance Program tgreco@ipro.org
- Anna Dean, New York State Department of Health anna.dean@health.ny.gov
- Patricia Higgins, New York State Department of Health patricia.higgins@health.ny.gov