



Special Needs Purchasing Stakeholder's Meeting for Seniors and People with Disabilities

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Introduction

Today's meeting focuses on how to connect with a health plan to give feedback about health plan issues at stakeholder meetings

- I. Introduction**
- II. DHS presentation on Managed Care Organization (MCO) stakeholder meetings.**
- III. Question and answer with health plan representatives**
- IV. Discussion with the audience on how health plans are doing**
- V. Wrap-up and Next Steps**

Ground Rules and Terms

Ground Rules

- Allow the facilitator to call on the next speaker
- One person speaks at a time
- Stay on topic
- Be respectful
- Use the microphones so everyone can hear
- Phone attendees' access explained

Terms

- MCO = managed care organization or health plan
- MSHO= Minnesota Senior Health Options
- MSC+ = Minnesota Senior Care Plus
- SNBC = Special Needs BasicCare

Introduction

- **DHS holds stakeholder meetings for seniors and people with disabilities in managed care. Health Plans also hold stakeholder meetings.**
- **DHS will review the contract, state law and federal regulations about health plan stakeholder meetings.**
- **DHS will report how health plans are approaching those requirements.**
- **DHS recently worked with one health plan to ensure that any enrollee who wanted to provide input would be included in the process**
- **DHS wants your input about stakeholder meetings. What's working? What needs improvement? Let's focus on the experiences of enrollees and their families.**

Introduction

Individual concerns vs. Health Plan concerns

There are different pathways to contacting your health plan based on the type of issue you want to address:

- 1) Do you need help for your own individual, personal concern?**
- 2) Do you want to give input on a health plan issue which may similarly impact other enrollees?**

Introduction

For individual concerns such as:

- Help finding a doctor or getting the care I need
- Concern about a bad experience with a medical provider
- Challenge a plan decision about how much medical care I can get
- Informing health plan when my needs change
- The focus is on resolving my personal, medical, confidential health care concerns

Examples:

- How do I schedule a ride to a medical appointment?
- How do I make a complaint if a provider is disrespectful to me?
- How can I file an appeal if my benefit is reduced or taken away?
- How do I get help from my care coordinator to get my needs met?

Introduction

Health plan concerns:

- Issues that might also affect other health plan enrollees
- Concern about patterns of care, quality of care, how the health plan does its work
- What matters to older adults and people with disabilities who need health care?
- May be based on my personal experience, but the focus is on improving health plan performance for other people in my situation

Examples:

- How can I tell the health plan about providers I think they should consider in order to better serve the cultural needs of older adults in my community?
- How do I make suggestions to the health plans about what care coordinators should and shouldn't ask people like me?
- How can I give feedback on how to improve the health plan's transportation scheduling system for people with disabilities?

DHS Presentation on Health Plan Stakeholder Meetings

This presentation covers the following topics:

1. What requirements must plans meet?
2. How do different MCOs structure their stakeholder meetings?
3. How do I find out about stakeholder meetings for my health plan?
4. How do MCOs create stakeholder meeting agendas?
5. How do MCOs follow up on stakeholder input from the meeting?
6. How can I give my MCO input outside of the stakeholder meetings?
7. What are the logistics of the stakeholder meetings?

Health Plan Stakeholder Meetings: Requirements

Stakeholder Meeting Requirements for SNBC and MSHO/MS C+ are found in:

- **DHS Contracts with Managed Care Organizations**
- **Federal Regulation, 42 CFR §438.110**
- **Minnesota Statutes, §256B.69, sub 28 (2)(e) (SNBC only)**

Health Plan Stakeholder Meetings: Requirements

What stakeholder meeting requirements must MCOs meet?

- **Minnesota's MSHO contract requires:**
 - The MCO will establish and maintain a local or regional stakeholders group, consistent with 42 CFR §438.110
 - to consider issues for the senior population group, and obtain periodic feedback from members on satisfaction with care, problem identification, and suggestions for improving the delivery system.
 - The group must include at least a reasonably representative sample of the Long Term Services and Support (LTSS) populations, or other individuals representing those Enrollees.
 - This stakeholder group will meet at least twice per year.
 - This process must include a way to use this information to improve access to, and quality of, the care delivered to MSHO/MSO+ Enrollees.
 - Results of consumer feedback activity mechanisms shall be shared with the STATE as described in section 11.4.1(14) below.

Health Plan Stakeholder Meetings: Requirements

What stakeholder meeting requirements must MCOs meet?

- **Minnesota's SNBC contract requires:**
 - MCO will establish and maintain a local or regional stakeholders group pursuant to Minnesota Statutes, §256B.69, subd. 28(2)(e), and 42 CFR §438.110,
 - Obtain periodic feedback from members on satisfaction with care, problem identification, and suggestions for improving the delivery system.
 - The group must include at least a reasonably representative sample of the Long Term Services and Supports (LTSS) populations, or other individuals representing those Enrollees.
 - This stakeholder's group will meet at least twice per year.
 - This process must include a way to use this information to improve access to, and quality of, the care delivered to Enrollees with disabilities.
 - Results of consumer feedback activity mechanisms shall be shared with the STATE as described in section 4.12.2.1(3).

Health Plan Stakeholder Meetings: Requirements

What stakeholder meeting requirements must MCOs meet?

Federal Regulations 42 CFR § 438.110

(a) General rule.

When LTSS are covered under a risk contract between a State and an MCO, Prepaid Inpatient Health Plan (PIHP), or Prepaid Ambulatory Health Plan (PAHP), the contract must provide that each MCO, PIHP or PAHP establish and maintain a member advisory committee.

(b) Committee composition.

The committee required in paragraph (a) of this section must include at least a reasonably representative sample of the LTSS populations, or other individuals representing those enrollees, covered under the contract with the MCO, PIHP, or PAHP.

Health Plan Stakeholder Meetings: Requirements

What stakeholder meeting requirements must MCOs meet?

Minnesota Statutes §256B.69, subd 28 (2)(e)

- Each plan under contract to provide [SNBC] shall establish a local or regional stakeholder group, including representatives of the counties covered by the plan, members, consumer advocates, and providers, for advice on issues that arise in the local or regional area.

Managed Care Stakeholder Meetings: Structure and Format

MCOs members' meeting activities may be considered advisory group, a stakeholder's group, member committee and/or other

MCOs have various stakeholder group structures:

- 1) **Stakeholder's Group** - structure used by most MCOs: Suggestions and recommendations gathered at the meeting
- 2) **Senior Advisory Council, used by one MCO**
 - ✓ **Advisory group with a charter created by the group**
- 3) **Member Advisory Committee**

Health Plan Stakeholder Meetings: Structure and Format

How do MCOs structure their stakeholder meetings?

Responses from MCOs serving SNBC members

- Many plans have stakeholder meetings without defined membership
- One plan holds one stakeholder meeting a year in conjunction with the organization's annual meeting that includes an open house for State Public Program members
- One plan hosts stakeholder meetings alongside monthly health and wellness classes
- One plan has a member advisory structure with a defined membership and seeks new enrollees to join each year
 - ✓ If an enrollee who is not a member feels strongly about having a topic heard during a SNBC stakeholder meeting, they can attend part of the SNBC stakeholder meeting and have an agenda item dedicated to hearing and discussing their concern
 - ✓ Going forward, this plan will add an open portion of the meeting for members who are not advisory committee members to participate

Health Plan Stakeholder Meetings: Structure and Format

How different MCOs structure their stakeholder meetings?

Responses from MCOs serving MSHO/MSD+ members:

- One plan holds meetings in tandem with a health education or cooking class
- One plan holds meetings in tandem with different community organizations known to serve specific communities to ensure that a variety of members' perspective and different cultural communities are heard within and outside of the metro area
- Some plans hold meetings at the same place each time and utilize the same staff to ensure comfort and consistency of experience for members

Health Plan Stakeholder Meetings: Communication

How do I find out about stakeholder meetings for my health plan?

Communicating the Stakeholder's Meeting date, logistics and accessible accommodations

- Several health plans send meeting information to people who have attended prior meetings or defined membership.
- Several plans use a recorded “hold” message on their Member Services or Customer Services phone line.
- One plan publicizes its meetings on their website
- Care guides, navigators and/or care coordinators are often the point person to share upcoming meeting information with members.
- Plans who host a meeting in conjunction with a health education class or another community organization use flyers

Health Plan Stakeholder Meetings: Communication

How do I find out about stakeholder meetings for my health plan?

Most of the plans have a point person (s) and or /process to contact department(s) which varies by plan such as:

- ✓ Partner Relations
- ✓ Member Services
- ✓ Care Coordinator
- ✓ Customer Service
- ✓ Through the county contact which connect with the health plan's community engagement managers

Health Plan Stakeholder Meetings: Agenda

How do MCOs create stakeholder meeting agendas?

Agenda Items and Topics:

- All MCOs indicated that the purpose of the meeting is to seek and gather members' input.
- All MCOs indicated that they seek topical/current issues that will generate members' interest which may include an internal or external speaker.
- All the MCOs noted that they provide time for the opportunity to comment/ask questions
- All MCOs involve health plan management from various areas to participate in developing the agenda
- All the MCOs seek members' input from care coordinators and care navigators
- Most of the MCOs seek members' input at end of their stakeholder's meeting for the next agenda
- One health plan surveys members for future agenda items

Health Plan Stakeholder Meetings: Agenda

How do MCOs create stakeholder meeting agendas?

Engaging Stakeholders' input during the meeting

- Many MCOs seek input for member related website, forms, member materials and marketing items (e.g., brochures).
- One MCO has a written and at times verbal survey with care coordination staff who are there to assist with literacy or physical issues that could be barriers to survey completion
- One MCO sets aside time following each topic for conversation both as a large and small groups at tables. Health plan staff sit with members to help lead discussion and take notes.

Health Plan Stakeholder Meetings: Follow-Up

How do MCOs follow up on stakeholder input from the meeting?

Follow up and feedback for suggestions or problems identified at stakeholder's meetings

All the MCOs have a process with varied practices:

- For each agenda item there is a time for participation/questions related to the topic
- Set aside a specific portion of the meeting to ensure participation
- Include specific questions in the agenda and also allow other questions from members
- Members are able to leave feedback with Care Coordinator or Member Services
- Surveys completed at the end of the activity provide staff with feedback, with results shared at next activity along with action and follow-up
- Open meeting provides a place for participant feedback
- Annual Care Coordination Satisfaction Survey results shared with stakeholders

Managed Care Stakeholder Meetings: Follow-Up

How do MCOs follow up on stakeholder input from the meeting?

MCOs' process to use the information provided through stakeholder's meetings:

- All the MCOs have a process, with steps that include, documenting, reviewing/addressing the issue of coordinating with the specific business areas such as transportation, communications or provider services etc.
- All MCOs indicated a process for addressing an individual's issue with timely coordinated follow-up

Managed Care Stakeholder Meetings: Follow-Up

How do MCOs follow up on stakeholder input from the meeting?

Organization's process in response to enrollees about significant concerns raised by the stakeholder's group participants

All the MCOs have a process:

- Concerns are directed to the correct business area and track follow-up. Examples: follow-up step or actions are shared at the stakeholder meeting, via website, members' publication and or added to the next stakeholder agenda
- Individual concerns are directed to appropriate staff with timely attention. Examples of follow-up is via phone, letter or care coordinator

For most MCOs:

- Staff from various areas attend the meeting and are able to follow-up/respond and determine potential next steps.
- MCOs include information about the process for enrollees to file a grievance

Managed Care Stakeholder Meetings: Follow-Up

How do MCOs follow up on stakeholder input from the meeting?

Sharing follow-up action items with participants, enrollees about concerns raised by the stakeholder's group participants

- Most of the MCOs share updates at stakeholder's meeting
- Other MCOs responses:
 - ✓ Use the health plan's website, and publications for enrollees and providers for issues raised or addressed
 - ✓ Items that require follow-up are indicated in meeting minutes
 - ✓ Internal leadership meetings share follow-up status
 - ✓ Individual's concerns addressed confidentially
 - ✓ Meeting minutes shared via, email, posted on line and or with plan's board of directors

Managed Care Stakeholder Meetings: Input

Process for alternative methods to gather input/feedback at the meeting for those who choose not to speak

Prior to meeting:

- **Most of the plans indicate that members are able to submit questions in various ways which include, member services, care coordinators/navigators, mail, email, phone and appeals and grievances.**
- **Several plans have a process to submit questions/comments from members who are unable to attend:**
 - ✓ **If it is a general concern, may add to agenda**
 - ✓ **Follow-up with member after the meeting by health plan staff**
 - ✓ **If it is an individual /personal concern, specific staff will follow-up**

Managed Care Stakeholder Meetings: Input

Process for alternative methods to gather input/feedback after meeting and ongoing for those who choose not to speak

- After the meeting:

- ✓ Feedback requested
- ✓ Information about how to send feedback
- ✓ Also seek suggestions for future meeting topics
- ✓ Send meeting minutes
- ✓ Ask for additional input or feedback

- Ongoing:

- ✓ Health Plan Staff
- ✓ Members may share information with any team member including county delegates.

Managed Care Stakeholder Meetings: Input

Input and feedback gathered outside of the stakeholder process

- **Surveys**
 - ✓ managed care advocates
 - ✓ care coordinators
 - ✓ members
- **Annual Consumer Assessment of Health Care Providers and Systems survey (CAHPS)**
- **Annual Care Coordination Satisfaction survey for SNBC and MSHO**

Managed Care Stakeholder Meetings: Input

Input and Feedback gathered outside of the stakeholder process

Other:

- Focus group senior members
- Community connection/outreach:
- Follow National Commission for Quality Assurance (NCQA) requirements and seek direct feedback on topics such as:
 - ✓ Member materials, website, provider network etc.
- Gather information throughout the year from:
 - ✓ Care coordinators
 - ✓ County and community events
- Stakeholder's feedback generated through the health plan's regularly scheduled meetings with:
 - ✓ County Care Coordinators
 - ✓ County Supervisors
 - ✓ County Directors

Managed Care Stakeholder Meetings: Logistics

Communicating Meeting's Protocol/Ground Rules:

- Most MCOs explain that if a member has a specific question or concern, which is considered personal/confidential, staff is available at the meeting for one to one conversation.
- Most plans have a staff available at the meeting to respond to general questions
- Other MCOs' responses:
 - ✓ Explain ground rules related to respect, encouraging questions and participating
 - ✓ Each member of the group receives an orientation that includes a copy of the ground rules listed within the charter.
 - ✓ One MCO's uses a facilitator who is not staff or a member. The facilitator explains and upholds ground rules during the meeting

DHS: Managed Care Stakeholder Meetings: Logistics

Reaching/engaging at distant or rural stakeholders Interactive Television and Video (ITV), Web Ex or other

Most of the MCOs have a process:

- Use Skype and meeting materials sent in advance in case the member is only able to access phone.
- Several at distant SNBC members choose to drive and the health plan provides a meal and mileage reimbursement
- To reach a variety of Senior Stakeholders, meetings are held with different cultural communities' organizations and rotate metro and non-metro meeting locations.
- If requested, will arrange for WebEx or call-in number
- One MCO has found remote meetings don't work well. In person is best
- Use multiple remote ITV sites
 - ✓ Onsite staff member to facilitate conversation among all the remote meeting locations

Health Plan Stakeholder Meetings: Logistics

RSVP Process:

- Most of the plans request an RSVP via phone or email to help plan for room set –up, beverages and food.
- Most plans have an RSVP process that allows people to indicate their interest in accessible accommodations including:
 - ✓ Transportation arrangements: All the plans have a process to assist with requests and make arrangements for transportation
 - ✓ Interpreters (American Sign Language and language interpreters)
 - ✓ Phone in access

Question & Answer with MCO health plan representatives

A representative from each health plan will answer the following question:

What are some important outcomes as a result of the MCO's stakeholders' input and or feedback?

Three minutes provided for each health plan to answer:

- Blue Plus
- Health Partners
- Hennepin Health
- Itasca Medical Care
- Medica
- Prime West
- South Country Health Alliance
- UCare

Audience Discussion on MCO Stakeholder Meetings

Discussion

DHS: Managed Care Organizations' Stakeholder's Meeting Next Steps

Managed Care Organization communicates their contact process to Enrollees

Enrollees will have information about:

How do I learn about the Stakeholder Group meetings?

- **opportunities to attend, participate**
- **become a member of defined membership group**

Who can I contact if I want to share my feedback on items such as:

- **improving the health care delivery system for me and other people in my health plan**
- **my satisfaction or dissatisfaction with the way my health plan delivers care**
- **my ideas about improving care for seniors or people with disabilities**
- **problems I see with the way my health plan delivers health care?**

Thanks



Thank you!

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