

Medicaid Services Advisory Committee Meeting

Public Meeting

Tuesday, November 9, 2021

12:30 – 2:30 pm

- This meeting is open to the public
- Please mute your line to reduce background noise
- Public comment will be taken at the end of the meeting or can be submitted in writing to krista.oconnor@state.mn.us



Medicaid Services Advisory Committee

November 9, 2021

Krista O'Connor | Strategic Development Director

Welcome



Housekeeping items

- WebEx Meeting
- Meeting is public
- Please mute your line when not speaking and state name prior to speaking
- Committee members can use the chat to provide comment or ask questions
- Public members can provide public comment today by putting “public comment: your name, and your organization” in chat
- Written public comment is also welcomed and encouraged. Please submit to krista.oconnor@state.mn.us
- Indicate conflicts of interest prior to providing comment



Health Care Administration Vision:

The Health Care Administration builds and operates affordable and efficient health care programs that improve the health of Minnesotans.

Purpose & duties

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

- New Member Introductions
- Updates
- Resumption of Normal Eligibility after Public Health Emergency
- Consumer Assessment of Healthcare Providers and Systems (CAHPS)
- 2022 MSAC Meetings
- Public Comment
- Next Meeting & Adjourn

Member Introductions

Beneficiary/Caregiver

Robert Marcum

George Klauser

Saudade Sammuels

Kate Quale

Bradford Teslow

Aaron Wittnebel

Physicians/Providers

open

Abdirahman Ahmed

Micah Niermann

Nneka Sederstrom

Lynette Tahtinen

Non profit/Human Service/Consumer

Stephanie Schwartz

Hodan Guled

Megan Ellingson

Abdullahi Abdullahi

Samuel Moose

Jovon Perry, Director, Economic Assistance & Employment Support Division
Children and Family Services, DHS

Members in bold are new appointments as of November, 2021



Updates

Medicaid Services Advisory Committee

Public Health Emergency Extended

- The US Department of Health and Human Services Extended public health emergency effective October 18, 2021
- In place for a maximum of 90 days

Metro Families & Children Health Care Contracts

- \$3.87 billion in managed care contracts
- Serve 600,000 children, parents and pregnant people in seven county-metro area in 2022

Procurement for Medicaid and MinnesotaCare

- **October 2021** – RFPs released for statewide seniors and Special Needs BasicCare (SNBC) contracts beginning January 1, 2023
- **January 2022** – RFP will be released for greater Minnesota Families and Children contracts beginning January 1, 2023 (includes the 80 greater Minnesota counties exclusive of the 7 metro counties)

Mnbenefits: mnbenefits.mn.gov

- New MNbenefits application for nine human services programs available
- 16-county pilot showed DHS clients can complete in 12 minutes
- Mnbenefits is a partnership between DHS, MNIT, counties, tribal nations and the development partner, Code for America.

Community Conversations: BREWMedicaid@state.mn.us

- Two community conversations gathered feedback on racial equity for US Born Black Minnesotans to improve MN Medicaid program
- Feedback used by Dr. Chomilo to draft report



Resumption of Eligibility after Public Health Emergency

Gena Savage, HCEA & Jackie Heard, HCEO

Eligibility Renewals Draft Timeline

Activity by Month	Nov 2021	Dec 2021	Jan 2022	Feb 2022	Mar 2022	April 2022
Medical Assistance (MA) and MinnesotaCare Enrollees	Mail renewals restart notice (starting mid-November)	Mail renewals restart notice	Mail renewals restart notice Mail April MA renewals	Mail May MA renewals	Mail June MA renewals	Mail July MA renewals
Eligibility Workers	Inform of renewals restart	Renewals training	Renewals training	Renewals processing	Renewals processing	Renewals processing
Health Plans, Providers & Stakeholders	Inform of renewals restart	Provide updates	Provide updates	Provide updates	Provide updates	Provide updates

Eligibility Renewals Discussion

- Discussion
- Comments
- Questions



Thank You!

Gena Savage & Jackie Heard

Gena.savage@state.mn.us

Jacqueline.heard@state.mn.us



Consumer Assessment of Healthcare Providers and Systems (CAHPS)

Karolina Craft | Quality Program Manager

Healthcare Research and Quality

Minnesota DHS Mission

The Minnesota Department of Human Services, working with many others, helps people meet their basic needs so they can live in dignity and achieve their highest potential.



Measuring Consumer Experience



1. *Minnesota Senior Health Options (MSHO) CAHPS*
2. *Clinician & Group CAHPS (CG-CAHPS)*
3. *Hospital CAHPS (HCAHPS)*
4. *Adult Health Plan CAHPS*

Adults Health Plans CAHPS

Fee-for-Service	FFS
Blue Plus	F&C-MA, MinnesotaCare, MSC+
HealthPartners, Inc.	F&C-MA, MinnesotaCare, MSC+, SNBC
Hennepin Health	F&C-MA, MinnesotaCare, SNBC
Itasca Medical Care	F&C-MA, MinnesotaCare, MSC+
Medica Health Plans	MSC+, SNBC
PrimeWest Health System	F&C-MA, MinnesotaCare, MSC+, SNBC
South Country Health Alliance	F&C-MA, MinnesotaCare, MSC+, SNBC
UCare Minnesota	F&C-MA, MinnesotaCare, MSC+, SNBC



YOUR HEALTH CARE IN THE LAST 6 MONTHS

These questions ask about your own health care from a clinic, emergency room, or doctor's office. This includes care you got in person, by phone, or by video. Do not include care you got when you stayed overnight in a hospital. Do not include the times you went for dental care visits.

3. In the last 6 months, did you have an illness, injury, or condition that needed care right away?

- Yes
- No → Go to Question 5

4. In the last 6 months, when you needed care right away, how often did you get care as soon as you needed?

- Never
- Sometimes
- Usually
- Always

5. In the last 6 months, did you make any in person, phone, or video appointments for a check-up or routine care?

- Yes
- No → Go to Question 6a

6. In the last 6 months, how often did you get an appointment for a check-up or routine care as soon as you needed?

6b. In the last 6 months, how many times did you go to an emergency room to get care for yourself?

- None
- 1
- 2
- 3
- 4
- 5 to 9
- 10 or more

7. In the last 6 months, not counting the times you went to an emergency room, how many times did you get health care for yourself in person, by phone or by video?

- None → Go to Question 9a
- 1 time
- 2
- 3
- 4
- 5 to 9
- 10 or more times

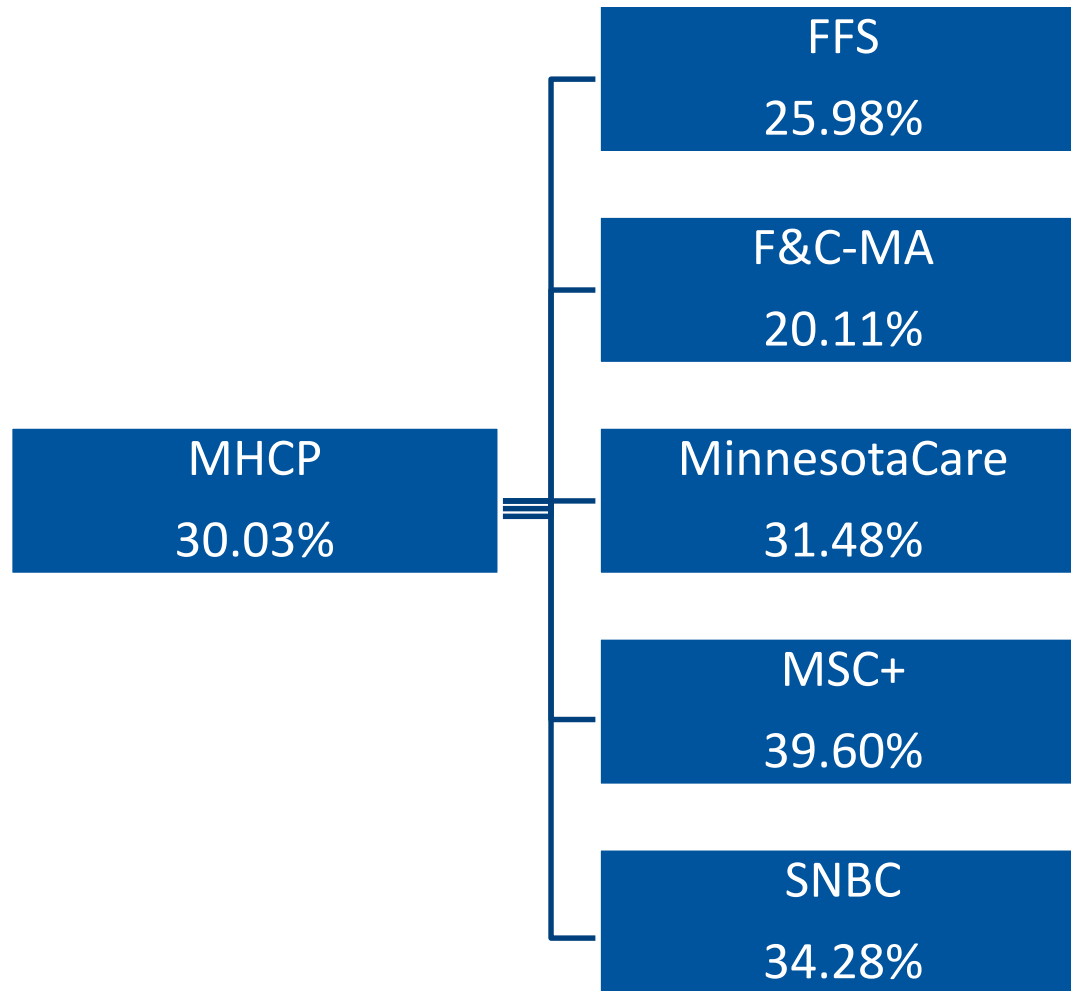
8. Using any number from 0 to 10, where 0 is the worst health care possible and 10 is the best health care possible, what number would you use to rate all your health care in the last 6 months?

-
- 0 1 2 3 4 5 6 7 8 9 10
- Worst Health Care Possible Best Health Care Possible

CAHPS Measures and Top-level Scores

Measures	Top-level Scores
Rating of Health Plan (Q 28)	“9” or “10” for global ratings
Rating of All Health Care (Q 8)	“9” or “10” for global ratings
Rating of Provider (Q 18)	“9” or “10” for global ratings
Getting Needed Care (Q 9, 20)	“Usually” or “Always”
Getting Care Quickly (Q 4, 6)	“Usually” or “Always”
How Well Doctors Communicate (Q 12-15)	“Usually” or “Always”
Customer Service (Q 24, 25)	“Usually” or “Always”
Coordination of Care (Q17)	“Usually” or “Always”

Response Rate



MN MHCP Results

Measures	FFS Program	F&C-MA Program	Minnesota-Care Program	MSC+ Program	SNBC Program
Global Ratings					
<i>Rating of Health Plan</i>	★	★★	★★	★★★★	★★
<i>Rating of All Health Care</i>	★★	★★	★★★	★★★★★	★★
<i>Rating of Personal Doctor</i>	★★★★★	★★★	★★★★	★★★★★	★★★
<i>Rating of Specialist Seen Most Often</i>	★★	★★	★★	★★★★	★★
90th Percentile or Above	75th – 89th Percentiles	50th – 74th Percentiles	25th – 49th Percentiles	Below 25th Percentile	
★★★★★	★★★★	★★★	★★	★	

MN MHCP Results

Measures	FFS Program	F&C-MA Program	Minnesota-Care Program	MSC+ Program	SNBC Program
Composite Measures					
<i>Getting Needed Care</i>	★★★★★	★★★	★★★★★	★★★★	★★★★
<i>Getting Care Quickly</i>	★★★★★	★★★	★★★	★★★★	★★★
<i>How Well Doctors Communicate</i>	★★★★★	★★★★	★★★★★	★★★	★★★★
<i>Customer Service</i>	★*	★★★	★★★★★	★★★	★★★
Individual Item Measure					
<i>Coordination of Care</i>	★★★★	★★★★	★★★★	★★★★	★★★★
90th Percentile or Above	75th – 89th Percentiles	50th – 74th Percentiles	25th – 49th Percentiles	Below 25th Percentile	
★★★★★	★★★★	★★★	★★	★	

* Indicates fewer than 100 responses. Caution should be exercised when evaluating these results.

Comparing Health Plans – F&C MA

Families and Children–Medical Assistance (F&C–MA) Program: Responses from 18 to 64 years of age									
Measure	How Members felt about their Health Plan	Blue Plus	Health Partners	Hennepin Health	IMCare	Prime West	SCHA	UCare	F&C–MA Program
Rating of Health Plan	<i>% who felt their health plan was the best health plan possible</i>	58.5%	62.4%	50.3%	60.0%	57.3%	64.6%	69.6%	62.3%
Getting Needed Care	<i>% who said that it was always, or usually easy to get the care they needed</i>	89.1%	82.6%	85.7%*	84.2%	85.5%	83.9%	85.8%	86.5%
Getting Care Quickly	<i>% who said that they always, or usually got the care as soon as they needed</i>	87.7%	83.3%	81.1%*	84.1%	86.2%	88.6%	84.6%*	85.6%
How Well Doctors Communicate	<i>% who said that their doctor always, or usually communicated well with them</i>	97.6%	95.4%	95.2%*	96.2%	94.4%	93.7%	93.5%	95.6%
Customer Service	<i>% who said that their health plan's customer service always, or usually treated them with respect and gave them the information they needed</i>	89.7%*	92.1%*	91.7%*	89.2%*	86.3%*	92.2%*	91.6%*	90.7%

Comparing Health Plans – MN Care

MinnesotaCare Program: Responses from 18 to 64 years of age						
Measure	How Members felt about their Health Plan	Blue Plus	Health Partners	UCare	HH/IMCare /PW/SCHA	MinnesotaCare Program
Rating of Health Plan	<i>% who felt their health plan was the best health plan possible</i>	61.2%	58.5%	60.3%	58.1%	60.0%
Getting Needed Care	<i>% who said that it was always, or usually easy to get the care they needed</i>	88.8%	86.2%	90.3%	90.2%	88.8%
Getting Care Quickly	<i>% who said that they always, or usually got the care as soon as they needed</i>	87.7%	82.1%	81.7%	87.3%	84.4%
How Well Doctors Communicate	<i>% who said that their doctor always, or usually communicated well with them</i>	96.9%	96.9%	98.3%	98.2%	97.5%
Customer Service	<i>% who said that their health plan's customer service always, or usually treated them with respect and gave them the information they needed</i>	91.1%*	93.4%	92.4%*	93.3%*	92.3%

Results by Race

Measure	Multi-Racial	White	Hispanic	Black	Asian	Other
Chose the Highest Rating (9 or 10) for Their Health Plan	↓		↑	↑		
Chose the Highest Rating (9 or 10) for Their Overall Health Care	↓		↑	↑		↓
Chose the Highest Rating (9 or 10) for Their Personal Doctor			↑	↑		↓
Usually or Always Received the Care They Needed		↑		↑	↓	

↑ The demographic category is statistically significantly higher than the program average

↓ The demographic category is statistically significantly lower than the program average

Supplemental Questions

Supplemental Item	Percentage of Responses (%)
Q6a. Number of Days Waiting to See Health Provider	
Same Day	13.0%
1 day	8.6%
2 to 3 days	23.9%
4 to 7 days	25.1%
8 to 14 days	13.7%
15 to 30 days	8.9%
31 days or longer	6.8%
Q9a. Access to After Hours Care	
Never	41.6%
Sometimes	15.9%
Usually	17.3%
Always	25.2%

Supplemental Questions

Supplemental Item	Percentage of Responses (%)
Q9b. Got Interpreter to Speak with Doctors or Health Providers	
Never	67.0%
Sometimes	7.5%
Usually	5.8%
Always	19.6%
Q41b. Got Help to See Another Provider or Set Up New Appointment	
Yes	75.5%
No	24.5%
Q41c. Felt Judged or Treated Unfairly by Health Professional Because of Race	
Yes	3.0%
No	97.0%

Key Drivers of Member Experience

Key Drivers	Rating of Health Plan	Rating of All Health Care	Rating of Personal Doctor
Q9. Respondents reported that it was never or sometimes easy to get the care, tests, or treatment they needed.	✓	✓	
Q24. Respondents reported that their MCO's customer service never or sometimes gave them the information or help they needed.	✓		NA
Q27. Respondents reported that forms from their MCO were never or sometimes easy to fill out.	✓		NA

Questions



How we use the survey results:

- to understand Minnesota Medicaid enrollees' experience with health care;
- to provide enrollees with tools to better inform their decisions – the results are shared with the members at the time of enrollment;
- to facilitate quality improvement among health plans - the results are shared with MCOs;
- for public reporting – the results are reported to CMS for the Medicaid Core Sets and are made available on the at DHS's Managed care: Quality website: [Managed care: Quality, outcomes and performance measures / Minnesota Department of Human Services \(mn.gov\)](#)

MN Medicaid Comprehensive Quality Strategy



Thank you

Karolina Craft, MA, CPHQ

Karolina.Craft@state.mn.us



MSAC 2022 Meetings

Krista O'Connor, MA

Strategic Development Director, Health Care Administration

2022 Meeting Framework

Meeting Dates

- February 8, 2022
- May 10, 2022
- August 9, 2022
- November 8, 2022

Meeting Framework

12:30 – 2:30 pm

Remote via WebEx

Meeting invites to members

Meeting information on public site

[Minnesota's Medicaid Services
Advisory Committee / Minnesota
Department of Human Services
\(mn.gov\)](#)

2022 Meeting Topics of Interest

2020 Topics

- Procurement
- Equity, Health Disparities
- Blue Ribbon Commission
- COVID-19 waivers
- Legislative Session
- Quality
- Integrated Health Partnerships
- Child and Teen Checkups

2021 Topics

- Integrated Health Partnerships
- Equity, Health Disparities
- Legislative Session
- Managed Care Quality
- Maternal/Child Health
- Resumption of Eligibility after PHE
- CAHPS Survey



Public Comment

Krista O'Connor, Strategic Development Director

Medicaid Services Advisory Committee

- Please state your name, organization (if relevant) and any conflicts of interest
- Please limit comments to approximately 2 minutes
- Written comments can be submitted to:
krista.oconnor@state.mn.us



Next meeting



Tuesday, February 8, 2022

12:30 – 2:30 pm

Remote option

Thank You!

Krista O'Connor

krista.oconnor@state.mn.us

651-431-7297