



Medicaid Managed Care

*Improving Care & Health
Outcomes for Virginia's
Medicaid Populations*

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Optima Health Plan



Medicaid Managed Care

Program History in Virginia



- **Capitated Rates: Plans Take Risk & Cap Expense for Commonwealth**
- **5 Plans Serving Majority of State; 15+ year history in VA**
- **Program Goals to Improve Quality & Reduce Cost over Fee-for-Service**
- **Approximately 500,000 enrolled**
 - National recognition for disease management programs
 - Collaborate with DMAS on grants
- **DMAS Contractual Requirements:**
 - NCQA Accreditation - top 50 Medicaid plans by US News & World Reports
 - Participate in DMAS Quality Collaborative
 - Disease management & nurse triage phone lines
 - Credentialed networks

Optima Family Care

Community & Member Commitment



- **High Touch for Members**
 - Reach 72% (15,000) new households & complete 17,000 health assessments
 - In-home & telephonic ER outreach
 - Touch 30% of all members each year
- **Retain 85% of Newborns**
- **Participate in 700 Health Fairs Annually**
- **Invest with Community Partners**
 - Girls basketball league
 - Program sponsorships
 - 5 Regional Advisory Panels
- **National & Local Recognition**
 - AHIP Community Service Leadership Award
 - Best Medicaid Disease Management Program
 - EPA Award for Asthma Program

Focus on Prevention

Well Child Care



HEDIS Outcomes

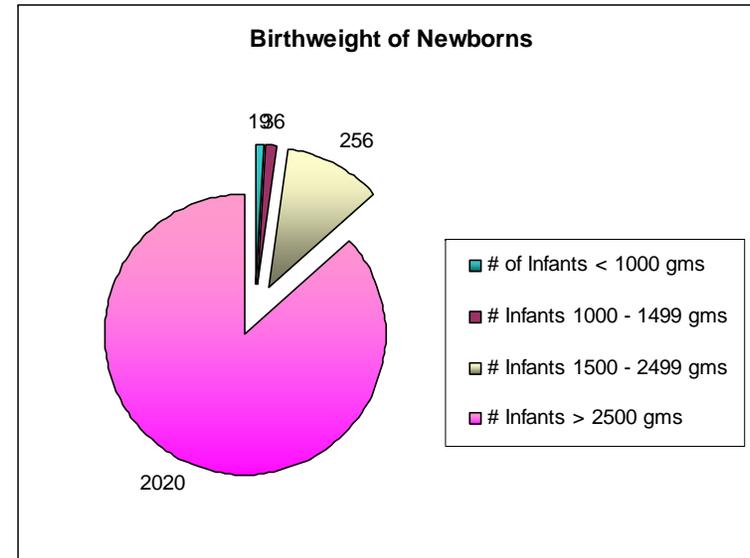
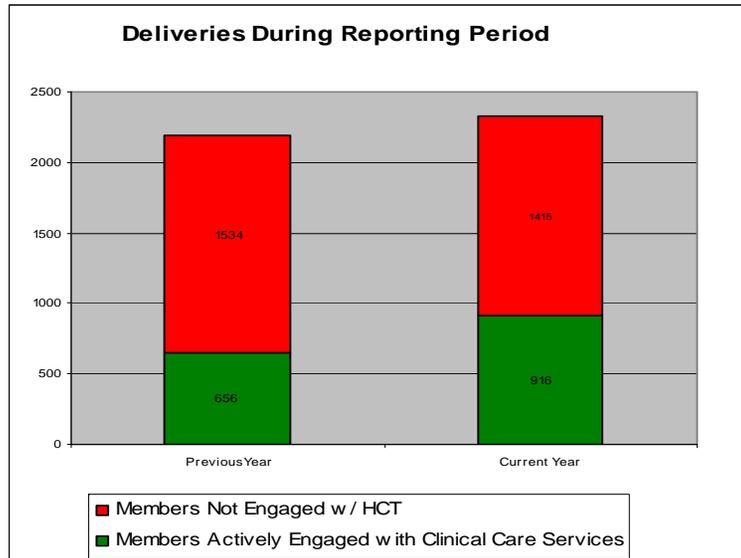
	<u>2006</u>	<u>2007</u>	<u>2008</u>
15-Mos No Visit	1.0%	1.0%	1.1%
15-Mos 6+ Visits	54.5%	61.4%	61.7%
3 rd , 4 th , 5 th & 6 th	67.4%	61.7%	70.0%
Adolescent	42.7%	39.1%	41.1%

Strategies:

- Parent birthday card reminders
- Incentives / drawings for adolescents
- Use of telephonic reminder messaging
- Provider medical record tool

Focus on Prevention

Partners in Pregnancy Program



Actions:

- Redesigned High Risk OB Model with Community Outreach Partner
- NICU Dollars Saved
 - Saved > \$300 PMPM / intervention baby
- Birth Weight Improvement
 - From 07-08, # Infants >2500 grams grew 10%
- High Patient Satisfaction

Virginia Medicaid Environment

Reducing Ability to Contain Cost for State



- **Seeing Significant Membership Growth**
 - More members ... More expense
 - Requires more providers, especially PCPs
 - More member churn with growth
- **Seeing Increased Medical Trends**
 - More chronic & disabling conditions
 - Increased complexity with Aged Blind & Disabled
- **Provider Cuts Compromise Access**
 - Plans pass through fee schedule changes
 - Reduced physician access leading to higher ER utilization
 - Increased Hospital / physician pressure for higher rates
- **Increasing Contractual Demands on MCOs**
 - More demands driving more expense
- **Plan Funding Cuts Lead to Higher Costs**
 - Force cuts in outreach & cuts in care coordination programs
 - Likely to see more service area reductions
- **MCO Exits Will Mean Higher Cost for Virginia**