Expansion of Medicaid Managed Care: Consumer and Family Perspectives

Senator Finance HHR
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National Alliance on Mental Illness of Virginia
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Our Vision

• Meaningfully involve persons receiving mental health services, and their family members;
• Respect choice of services, providers, and treatment
• Ensure necessary legal and ethical protections and services;
• Establish grievance, mediation, and appeals procedures in a timely manner;
• Support empowerment by providing education about and access to self-help groups;
• Ensure confidentiality and privacy.
Benefits

• Provide the most effective services for adults and children with mental health disorders.
• Expand choices.
• Use resources as wisely and effectively as possible.
Concerns

• Will people in need get the services that they need, when they need them?

• What about ongoing problems in Virginia’s system?
  – Waiting lists for community-based mental health services
  – Over-reliance on state mental hospitals
  – Criminal justice system / mental illness
  – Need for safe, stable housing

• What will happen to anticipated managed care savings?
Comments to DMAS’ Draft Request for Proposals

• Involvement of persons receiving services and family members
• Reinvestment of savings
• Outcome measures and reporting
• Optional services
Devil is in the details

- Are the services a person needs covered by the benefit package?
- How long will it take to get an appointment with a provider? Will the person have a choice of provider?
- “Medical necessity”: what does it mean? Is it adequate?
- For hospital care, what is the maximum and average length of stay? What happens if the clinician and the managed care company disagree on the hospital discharge date?
- For outpatient care, what is the maximum and average number of visits a year?
- Will the plan pay for medications? Is there a limit on the number or total cost of medications each year? Will certain medications be restricted?
- How does a person appeal decisions and file a grievance if they are not satisfied with the services being provided, or if they are denied a service?
Other States’ Experiences with Managed Care

• Saves money.
• Improves access to services primarily for those whose mental health conditions can be treated in outpatient settings.
• May restrict access to high intensity services, such as inpatient services, needed by those with the most serious mental illnesses.
• Coordinating physical and mental health care is important, but the “how to” is unclear.
Other States’ Experiences with Managed Care, Continued

- May worsen some existing problems, particularly cost-shifting across systems.
- May solve some long-standing problems (i.e. over-reliance on state mental hospitals).
- May create or expose new problems.
Overall: What to Watch For

- How people with the most serious mental illnesses fare.
- Are costs shifted to other systems? Localities, corrections, etc.
- Are services being expanded? Are new services being created?
- Is the appeals/grievance process easy to understand and navigate?
Thank you!

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