

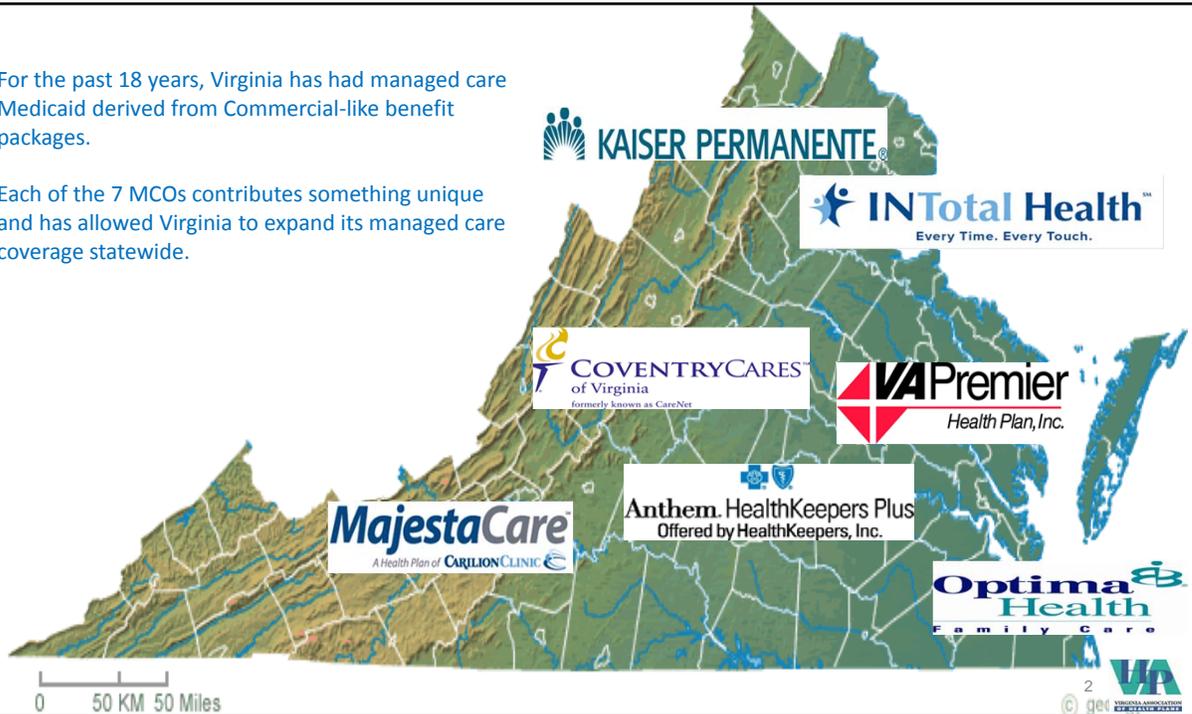
Private Sector Approaches to Increasing Access to Health Insurance in Virginia

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Virginia Association of Health Plans
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Senate Finance HHS Subcommittee



For the past 18 years, Virginia has had managed care Medicaid derived from Commercial-like benefit packages.

Each of the 7 MCOs contributes something unique and has allowed Virginia to expand its managed care coverage statewide.



Why use Private Sector Insurance (MCOs) vs. Fee For Service Designs?

Risk Based Designs Incentivize Proper Management
Controls that include:

- Provider Network Credentialing
- Utilization Management - Service Approvals
- Program Integrity
- Disease Management
- Quality Measurement & Improvement

3



MIRC Reform Contract Provisions

For FY 2013, DMAS completely revised the MCO contract at the direction of the MIRC to include provisions on:

- Commercial-like Benefits
- Coordinating with the BHSA
- Delivery System Reforms
- Data Improvements
- Foster Care
- Program Integrity
- Quality Improvement

4



Commercial-like Benefits

- DMAS and the plans have worked together to develop potential commercial benefit designs.
- Alternative Benefit Plan - Based on the Essential Health Benefit with wrap around services that make sense in one coordinated benefit plan.
- Offer coverage through a private enrollment broker
- Promotes Patient Responsibility and Accountability with cost sharing, wellness incentives and patient education to encourage appropriate use of services.



Delivery System Reforms

Many MCOs are part of Integrated Health Systems:

- INTotal Health – Inova
- MajestaCare – Carilion
- Optima – Sentara
- Virginia Premier – VCU

Other MCOs are also involved with delivery system innovation:

- Anthem HealthKeepers – CareMore
- Coventry Cares – telemedicine
- Kaiser Permanente – integrated care clinics



Program Integrity

- Virginia is a national leader with Program Integrity Collaborative
- MCOs, DMAS, and vendor working together.
- Strengthened audit and reporting provisions in MCO contract.
- Health Plan Predictive Modeling
- Ability to Leverage Commercial Capabilities

7



Change in Federal Support

- Concerns have been raised by policymakers about how Virginia would administer an exit from an expanded health care benefit for those below 138% of federal poverty level.
- Private sector insurers can take responsibility for disenrollment of recipients as required by last year's budget should the federal government reduce financial support.

8

