

Health transformation update

- Brief highlights on several transformation activities:
 - Behavioral health integration
 - Medicaid managed care organizations (MCOs)
 - Medicaid Transformation Project extension application
 - Other value-based purchasing (VBP) activities



Behavioral health integration

- Fully integrated Medicaid physical and behavioral health services statewide, as directed by SSB 6312.
 - Integration was phased in by region, with last region integrated January 1, 2020.
- Work continues to support behavioral health providers in their transition to managed care.
 - Final stages of the transition further challenged by COVID-19.
 - ► HCA staff continue to support regional provider meetings to help address issues/concerns.



Behavioral health integration continued

- Stabilizing the behavioral health provider network has had extra challenges due to COVID-19.
 - Implemented telehealth broadly MCOs report considerable uptake.
 - ► To mitigate financial instability, MCOs targeted financial support and contracting flexibility to providers early in the pandemic.
- Next steps: further advance clinical integration and ensuring full continuum of services.
 - Whole-person care is the ultimate goal.
 - ► There is also a great opportunity to dive deeper into data/outcomes and network adequacy to make system improvements and advance VBP.



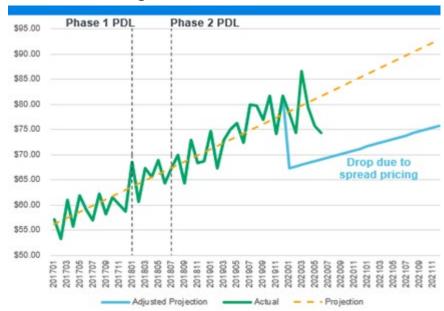
Medicaid managed care updates

- Goal: ensuring value for our members, providers, and the state in achieving whole-person, equitable health care.
- Managed care advantages:
 - Plans are at risk.
 - Federal regulations and actuarial rate-setting offer considerable oversight, including adequate network and actuarial sound rates.
 - Medicaid expansion and behavioral health integration made considerably easier to implement.
 - VBP easier to accomplish.
 - Rates have been steady (per capita Medicaid spending in Washington State has stayed significantly under the national average).
- Managed care is the mode of service delivery, not just in Washington, but in at least 38 other states.
 Washington State Health Care Authority

Recent updates in managed care

- 2021 rates are low and steady: 1.9 percent overall
 - Pharmacy spread pricing prohibition reduces rates by ~\$130M – results from important program integrity work
 - Other efficiencies reduces rates by ~\$51M

Pharmacy costs (PMPM):





Quality and customer satisfaction

- Using quality VBP to increase quality.
- Medicaid quality is consistent with national Medicaid and local comparisons with commercial insurance coverage (WA Health Alliance).
- Client survey conducted by DSHS indicates increasing trend in client satisfaction, specific to access to care.
 - ▶ 86 percent of clients said it was easy to get services through Apple Health.
 - ▶ 90 percent said they were able to get Apple Health services as quickly as they needed.
 - ▶ 93 percent felt the providers' offices were open at times that were good for the client.



Medicaid Transformation Project (MTP)

In 2017, Washington State received a five-year Section 1115 Medicaid demonstration waiver, to receive up to \$1.5 billion in federal funding.

MTP initiatives at-a-glance:

- 1. Transformation through Accountable Communities of Health (ACHs) and Indian Health Care Providers (IHCPs)
- 2. Long-term Services and Supports (LTSS)
- 3. Foundational Community Supports (housing and employment supports)
- 4. Substance use disorder (SUD) IMD
- 5. Mental health IMD

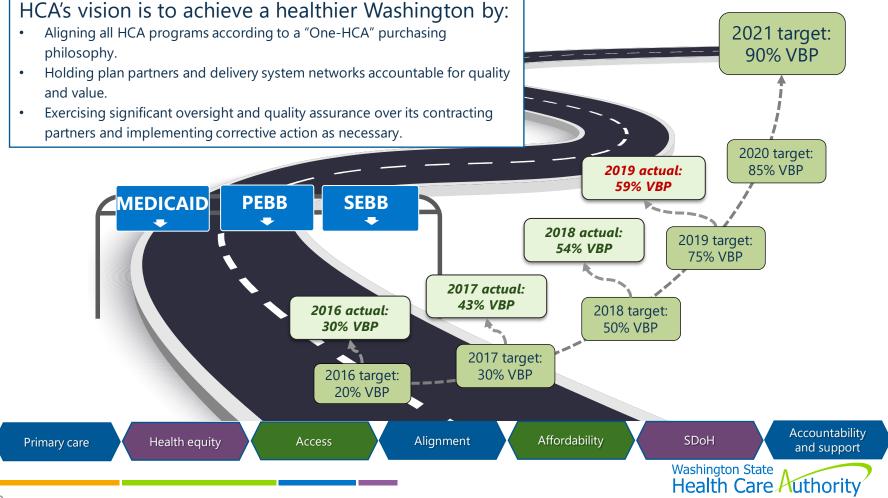


MTP continued

- We submitted an application to CMS for a one-year extension for the waiver to continue through December 2022 (and legislative budget package for spending authority).
- The extension would create a sixth MTP year and continue all initiatives without significant program changes.
- This extension would use federal funding:
 - Access \$260 million total federal and local money that would otherwise go unspent.
 - ► For the one-year extension, we will not need General Fund-State dollars.



Value-based purchasing





Questions?

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