

MCAC Health System Redesign Subcommittee Update

October 7th Agenda

- Welcome
- DHCF Update
 - Emergency Funding for Telehealth
 - Behavioral Health RFI Update
 - SUD Provider Capacity Grant
- Roundtable on MCO Transitions
- Health System Re-design FY21 Survey Results
- Next Meeting: December 2nd 4-5:30pm

Ranked Health System Re-design Topics

1. Behavioral Health

2. Care Management

3. Mayor's Commission on Healthcare Transformation

4. Value Based Payment Initiatives

5. Enhancing Access to Preventive Services


6. Communication & Outreach

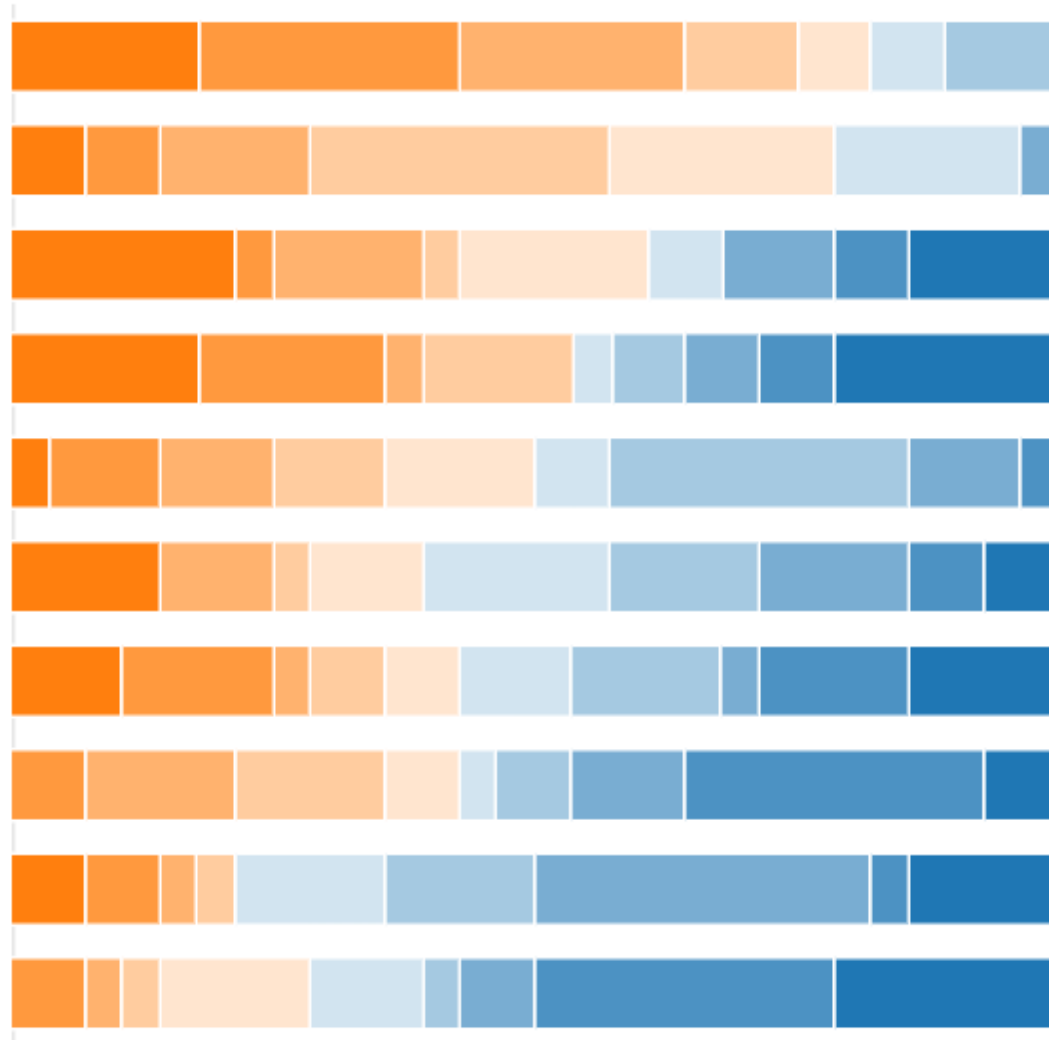
7. Telehealth Issues & Digital Divide

8. Practice Transformation Needs

9. Monitor New MCO Population

10. Remote Monitoring Tools

First choice  Last choice



15 Respondents Mentioned Other Health System Re-design Topics

- Several mentions:
 - MCO
 - Accountability
 - Contracting
 - Provider readiness
 - Outreach and communication
 - Addressing Health Equity
 - Improving Outcomes
 - SDOH
 - Bias in Provider, Population Health Management
 - Systemic Racism
 - Perinatal Care
- Single mentions
 - School Health
 - Lag in cancer screening due to CoVID
 - Engaging beneficiaries in health systems change
 - Minority Business Participations
 - Review of DC pilot and Evidence-based practice projects and promising practices happening in DC
 - Expand to include Alliance

Top 5 Ranked Topics and Discussion Items

Behavioral Health Discussion Items

- **System transformation and MCO carve-in**
 - Map out a plan of what the system should look like
 - Results from BH RFI and Needs Assessment
 - What does carve-in of Behavioral Health into MCO contracts look like?
 - What is the transition process?
 - How does will it impact beneficiaries and providers?
 - Are there tools to hold the MCOs accountable
 - Explore initiatives to de-stigmatize Behavioral Health especially in BIPOC communities
- **Broadening access**
 - What is the impact of 1115 Waiver?
 - How can we support behavioral health interventions occurring in non-traditional settings?
 - How can we support and incentivize care in settings where patients are - barber shops, community centers, places of worship.
 - Has there been any changes to service utilization?

Care Management Discussion Items

- Discuss transitions in care coordination, especially with the Medicaid reform
- How can care management benefit be expanded to a larger group?
 - How can the My Health GPS program (Health homes) be simplified and improved?
 - How can we expand support for this benefit?
- Improve an eligible enrollee' access to a wide range of appropriate services to
 - Promote continuity of care by coordinating service delivery arrangements
 - Enhance a beneficiary's health status and level of functioning
 - Promote efficiency by reducing or containing the overall cost of services
- Care management provided by many MCOs results in communication like "Unable to reach patient, care management cancelled." This is precisely why health care providers need CM - for those patients we can't reach - we need CM to move well beyond phone calls for our high needs patients if we are to improve the health of our communities.

Mayor's Commission Discussion Items

- What progress has been made on the recommendations from the Mayor's Commission on Healthcare Transformation in terms of measurement and data analytics, policy implications, time frames and community engagement?
- How the Mayor's Commission recommendations could apply to the Medicaid populations and what this would/could look like practically?
- What is the end goal for the transformation activities and how it aligns with the Quadruple Aim?

Value Based Payment Initiatives

Discussion Items

- Discuss value-based payment options and strategies and alignment of stakeholder needs and District population health goals
 - Discuss financing social determinants of health across the health system
 - How do we develop and implement VBP pilots across the continuum?
 - How do we ensure effective patient care while decreasing costs?
 - Rewarding providers who save costs/money doesn't necessarily equate to safe, effective, and good healthcare.
- How do we help practitioners access and use data for rapid quality improvement and partnering on data transparency that will be critical to make care efficient and to forward a culture of performance improvement?

Enhancing Access to Preventive Services Discussion Items

- Develop a strategic plan emphasizes the ways access can improve across all audiences
- Explore the role of CHWs in enhancing access to preventative services & sustainable strategies to finance community health workers (prevention and care) across the health system in DC.
 - What are strategies to get CHWs into multiple settings in DC?
- Review preventive services by categories by census tracts and advocate for increasing services in areas of greatest need.
- How the Medicaid system can work with participants in receiving preventative services across the spectrum?

Key Takeaways from October HSR Meeting

- Suggested to discuss three perspectives at meetings:
 - Payor (i.e., DHCF and MCOs)
 - Provider
 - Beneficiaries
- There is connections not only between topics but also between MCAC subcommittees. For example:
 - Enhanced Access to Preventive Services or School Health could be a joint meeting with the Access subcommittee
 - Mayor's Commission contains several themes connected with Value-based Payment initiatives, Behavioral Health and Care Management
- Participants want to be able to monitor progress on initiatives

Next Meeting: Behavioral Health Transformation

Wednesday, December 2nd from 4-5:30pm