



**Testimony
Senate Finance Sub-Committee**

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May 7, 2015**

Chairman Burke and members of the Senate Finance Sub-Committee, thank you for the opportunity to speak to you about the partnership that Paramount Health Care has with the Ohio Department of Medicaid (ODM). My name is Dale Ocheske and I am the Executive Director for Paramount's Medicaid health plan, Paramount Advantage. I want to take a few minutes of your time and give you an overview of Paramount and our commitment to serving Medicaid recipients in Ohio.

Paramount Health Care is a unique partner in that we are one of three provider sponsored health plans in Ohio. As a provider sponsored health plan, we have a health care delivery system that incorporates both the delivery of health care services and health insurance. We're part of ProMedica. The efficiencies and health outcomes we both achieve and set as goals through ProMedica are passed through to Paramount.

Some other facts about Paramount that I am very proud of include:

- Paramount Advantage, Paramount's Medicaid plan, has been a partner in Ohio's Medicaid Managed Care Program since its inception in 1993 and has consistently retained some of the highest overall member satisfaction ratings in Ohio since 1995.
- Paramount Advantage has maintained continuous accreditation from one of the major accrediting bodies for health plans, the National Committee for Quality Assurance (NCQA) – since 1995.
- In SFY 2014 Paramount Advantage received the highest score for three of the six ODM Pay for Performance measures which included, *Timeliness of Prenatal Care*, *Controlling High Blood Pressure*, *Use of Appropriate Medications for Asthma* and scored above the national average for all HEDIS measures combined that are part of the ODM quality strategy.
- Paramount has received a Pinnacle Award from the Ohio Association of Health Plans (OAHP) ten times since the award program's inception 10 years ago. The annual awards recognize the most outstanding health plan in three categories: community outreach/partnership, healthcare programs, and business/operations.

Over the years, we have challenged ourselves to continue to build on this foundation of excellence. In 2013 Paramount Advantage was selected by the State to be one of five statewide partners in Ohio's new Medicaid Program. While we maintain our roots as a local company in northwest Ohio, we have made significant investments in the state of Ohio and have taken the strength of our business model and built a Medicaid managed care network across Ohio to deliver high quality health care services to produce great health outcomes for Medicaid recipients across this great state. Currently, Paramount Advantage contracts with over 30,000 providers and serves 215,000 Medicaid consumers statewide.

Enrollment of Foster Children in Managed Care – Lucas County

Paramount fully supports all of the 2016-2017 budget recommendations put forth by the Ohio Association of Health Plans. As the state considers covering additional populations through managed care plans (MCPs) I would like to share information with you regarding Paramount's experience working with Lucas County Children Services (LCCS) to cover foster children through managed care. Paramount has partnered with LCCS since 1994. Currently, we cover 404 LCCS foster children in Paramount Advantage.

Although enrollment of foster children in Medicaid managed care has always been voluntary throughout the state, LCCS has embraced the managed care model for years. LCCS has a full time employee (agency lead) dedicated to enrolling and coordinating care for foster children through managed care. As children are taken into custody by LCCS, their health needs and medical provider history are assessed by the agency lead to determine which Medicaid managed care plan (MCP) is most appropriate for enrollment. It is LCCS' policy to make every attempt to maintain the PCP relationship that the child had prior to custody. Hospital and specialty provider needs are also given consideration. All provider changes are handled through the agency lead.

Foster Parent Education Classes

Foster parents are required to complete a set number of training hours on various topics to become licensed and maintain certification. LCCS offers a two hour class on Medicaid managed care basics. MCP marketing and education materials are reviewed. Some examples of training topics include:

- How an MCP works (e.g., use of network providers, prior authorization/referral process, covered/non-covered services)
- Why LCCS enrolls children into managed care
- MCPs available in Lucas County (LCCS has typically only worked with two MCPs, Paramount Advantage and Buckeye)
- Differences between MCPs (e.g., provider networks)
- Benefits to a MCP as opposed to FFS (e.g., extra services and programs)
- Who to call if there is an issue with the MCP

Benefits of Managed Care Enrollment

Care Coordination/Case Management

LCCS cites care coordination and continuity of care as the main benefits of managed care. Under the FFS model, access to care can be limited and difficult to track/coordinate. Upon being placed in custody, children are required to have a physical within 30 days, a dental visit within 30 days and an eye exam within 1 year. All medical issues are coordinated through the agency lead who serves as the liaison between the foster parents and managed care plans. The agency lead has specific contacts at each MCP when foster parents are experiencing access issues such as locating a physician, problems getting a prescription filled, etc. There is always someone to call at the MCP to get an answer to a question or to assist resolving a problem as opposed to FFS Medicaid. MCP nurse case managers coordinate care with the agency lead and LCCS nurses.

For example, foster children with a history of asthma or newly identified as asthmatic have access to disease management and home care programs developed by the MCPs. Paramount's asthma initiatives help to improve utilization patterns for members with an asthma related admission or emergency room visit. Foster parents are educated on medications, use of inhalers, triggers in the home and care management action plans in coordination with LCCS nurses or directly by MCP nurses depending on instructions from the agency lead. All of the programs target preventing complications and acute care utilization, especially emergency room visits.

Placements can happen when foster children are already in a course of treatment and/or have scheduled appointments. In an effort to support continuity of care, the agency lead works with ODM and the MCPs to retroactively enroll children so that continuity of care is maintained. Many providers only accept patients enrolled in managed care and not those on FFS Medicaid. The MCP accepts these enrollments with delayed payment to ensure the immediate health needs of the children are met.

Robust Provider Networks

Medicaid MCPs offer more robust provider networks compared to FFS Medicaid. This allows more choice for the agency and foster families and supports continuity of care efforts.

Extra Services and Programs

- 24/7 Nurse Line
- Transportation Assistance
- Health Needs Screening Program
- Social Services Outreach

- Community Resources Guide
- Customer Service Call Center with Personal Representatives Available
- Interpreter/Translation Services
- Member/Provider Incentive and Reminder Programs
- Disease Management and Home Care Programs

Member ID/Insurance Cards

All members receive individual ID/insurance cards instead of the standard Medicaid documentation. LCCS and foster parents feel that this helps reduce the stigma of being on Medicaid for foster children. Any replacement cards needed are issued by the MCPs within a few days opposed to a month when on FFS Medicaid.

It is important to note that 80% of the children taken into custody by LCCS are already enrolled in Medicaid managed care because they are in either the Covered Families and Children (CFC) or Aged, Blind or Disabled (ABD) mandatory enrollment aid categories. Typically, these children will stay with the MCP they were previously enrolled in. However, if the foster home that they are going to has all of their children on a different managed care plan, LCCS will change the plan to their preference as long as the child's PCP accepts that plan. The other 20% of children fall into the foster care maintenance category that LCCS assigns to a plan based on provider history if available.

LCCS has always had many ABD children in their custody and did not face any unique challenges when enrollment became mandatory in 2013. To be cautious, LCCS offered foster parents caring for ADB children a 1 year exemption to ease them into managed care. Very few foster parents took that exemption and the few that did have since enrolled their respective foster children in managed care.

The LCCS agency lead has been called on by the Public Children Services Association of Ohio (PCASO) and has been serving as a subject matter expert at monthly planning meetings over the past two years. Her name is Kristi Schmidt. Ms. Schmidt has been a wealth of knowledge from an agency/operational perspective and is willing to meet with any legislators that are interested in learning more about how foster care enrollment in managed care has worked and benefited children in Lucas County.

Foster Care Case

Comprehensive care coordination offered in conjunction with many extra services and programs can ultimately lead to overall member success. Attached for your review is an example that demonstrates how the efforts of Medicaid MCPs like Paramount Advantage working in conjunction with LCCS lead to positive health outcomes for foster children.

Paramount Advantage is a committed partner and is privileged to be part of the improvements being made to improve the health and enhance the lives of thousands of Ohioans, including foster children. We are confident that we will fulfill our mission to improve the health and well-being of all of our members.

Thank you for this opportunity and I will be happy to answer any questions you may have.