

# History of Managed Care in Idaho

Health Care Task Force  
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# Medicaid Managed Care

- A combination of techniques designed to maintain or improve access to quality care *and* reduce costs by eliminating inappropriate and unnecessary services.
- Different approaches with varying degree of impact on health care system and method of payment for services.
  - *May* focus entirely on care coordination.
  - *May* include departure from conventional fee-for-service provider payments – Risk-Based Managed Care.
- **OVERALL GOAL:** To ensure the provision of appropriate health care services in a cost-efficient manner.

# Primary Care Case Management

- Coordinate beneficiary care through a single primary care doctor or clinic.
- Primary care doctor addresses general health issues, and makes referrals when more specialized care is needed.
- Primary care doctor monitors specialized care.
- Primary care provider receives monthly fee in addition to traditional fee-for-service payments.

# Primary Care Case Management

- **Healthy Connections:** Idaho's PCCM Program
  - Initiated in 1993.
  - Required for most people participating in Medicaid Basic or Enhanced Plan.
  - May require referral from primary care provider to receive specialized Medicaid services.
  - Patient Centered Medical Home Collaborative – EO 2010-10.
  - More Information:  
<http://healthandwelfare.idaho.gov/Medical/Medicaid/ManagedCareforIdahoMedicaid/tabid/1931/Default.aspx/>

# Expanding Managed Care in Idaho

- H 341: DHW Appropriation
  - Provided \$300,000 to prepare Medicaid Managed Care actuarial analysis for all Medicaid plans by population, subgroup, and region.
  - Existing conditions report.
- H 260: Medicaid Cost Containment
  - “The legislature finds that the current health care delivery system of payment to medicaid health care providers on a fee for service basis does not provide the appropriate incentives and can be improved by incorporating managed care tools, including capitation and selective contracting, with the objective of moving toward an accountable care system that results in improved health outcomes.”

# Expanding Managed Care in Idaho

- H 260: Medicaid Cost Containment (continued)
  - Requires DHW to prepare a plan for Managed Care in Idaho.
  - Provides general guidance on plan focus areas:
    - High-risk/high-cost populations;
    - Improved PCCM;
    - Elimination of duplicative practices;
    - Alternatives to fee-for-service payments.
- FY 2013: DHW received ~ \$650,000 to prepare plan.
  - Pre-planning/information gathering, ongoing.
  - Managed Care Plan Completion: June 2013.