



Colorado Department of Health Care Policy and Financing

Report to Joint Health and Human Services Committees

Managed Care Program Report Card

CRS 25.5-5-410

July 1, 2014



COLORADO DEPARTMENT OF HEALTH CARE POLICY & FINANCING

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John W. Hickenlooper, Governor • Susan E. Birch MBA, BSN, RN, Executive Director

July 1, 2014

The Honorable Dianne Primavera, Chair
Public Health Care and Human Services Committee
200 E. Colfax Avenue, Room 271
Denver, CO 80203

Dear Representative Primavera:

Enclosed please find a legislative report to the House Public Health Care and Human Services Committee from the Department of Health Care Policy and Financing on Section 25.5-5-410 regarding quality for Medicaid managed care programs.

Section 25.5-5-410 C.R.S. requires the Department to submit a report each year on July 1, showing a comparison of the effectiveness of the Colorado Medicaid managed care organizations, including the Primary Care Physician program based on common performance standards, which include member satisfaction.

The attached "Colorado Medicaid Health Care Plan Report Card" is a tool developed by the Department to enable the Colorado Medicaid clients to make informed decisions regarding the four available managed care plans available in the state. The Report card includes information on both the quality and level of satisfaction clients have with their health plan. The Colorado Medicaid Health Care Plan Report Card does not include the Accountable Care Collaborative organizations.

If you require further information or have additional questions, please contact the Department's Legislative Liaison, MaryKathryn Hurd, at MK.Hurd@state.co.us or 303-547-8494.

Sincerely,

A handwritten signature in black ink, appearing to read 'Susan E. Birch'.

Susan E. Birch, MBA, BSN, RN
Executive Director

Enclosure(s): 2014 Managed Care Program Report Card

Cc: Representative Dave Young, Vice Chair, Public Health Care and Human Services Committee

Representative Joann Ginal, Public Health Care and Human Services Committee

Representative Beth McCann, Public Health Care and Human Services Committee

Representative Sue Schafer, Public Health Care and Human Services Committee

Representative Jonathan Singer, Public Health Care and Human Services Committee

Representative Max Tyler, Public Health Care and Human Services Committee

Representative Amy Stephens, Public Health Care and Human Services Committee

Representative Kathleen Conti, Public Health Care and Human Services Committee

Representative Janak Joshi, Public Health Care and Human Services Committee

Representative Lois Landgraf, Public Health Care and Human Services Committee

Representative Justin Everett, Public Health Care and Human Services Committee

Representative Jim Wilson, Public Health Care and Human Services Committee

Bettina Schneider, Budget Analyst, Office of State Planning and Budgeting

Katherine Blair, Health Policy Advisor, Governor's Office

Legislative Council Library

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John Bartholomew, Finance Office Director

Suzanne Brennan, Health Programs Office Director

Antoinette Taranto, Acting Client Services Eligibility & Enrollment Office Director

Tom Massey, Policy and Communications Office Director

MaryKathryn Hurd, Legislative Liaison

Rachel Reiter, Communications Director

A Comparison of the Managed Care Programs Based on Quality

This report describes the effectiveness of medical care given to clients in the Colorado Medicaid Program that are enrolled in a Managed Care Plan. During FY2013-2014 the Colorado Department of Health Care Policy and Financing (the Department) worked with four managed care health plans to collect data related to the quality of care received by clients in managed care. The four managed care health plans are as follows: Denver Health Medicaid Choice, Rocky Mountain Health Plan, Program of All-Inclusive Care for the Elderly (PACE), and the Department administered Primary Care Physician Program. Denver Health Medicaid Choice and PACE are the only fully capitated risk based contracts.

Data from the FY2012-2013, the most recent fiscal year for which complete data is available, shows the Colorado Medicaid Population distributed among the four managed care health plans as follows¹:

- The monthly average number of clients enrolled in Colorado Medicaid was 682,995.
- Of those the average monthly enrollment in the contracted managed care organizations of Denver health Medicaid Choice and PACE was 53,432 clients, or eight percent of all clients.
- The average monthly enrollment in the plan type designated by the Centers for Medicare and Medicaid Services as a prepaid inpatient health plan, Rocky Mountain Health Plan was 22,979 clients, or three percent of Medicaid clients.
- The average monthly enrollment in the Primary Care Physician Program was 23,228 clients, or three percent of Medicaid clients.
- The remaining clients enrolled in Medicaid are in a Fee-for-Service Program or the Accountable Care Collaborative. Clients are continuing to be enrolled into the Accountable Care Collaborative to improve care and coordinate services for Colorado Medicaid Members.

Health and Outcomes Data

The Department has two primary activities that collect data on the performance of Colorado Medicaid health plans. These include client satisfaction surveys from the *Consumer Assessment of Healthcare Providers and Systems (CAHPS)*² and quality of care performance measures included in the *Healthcare Effectiveness Data and Information Set (HEDIS)*².

Selected data from each of these sources was used to create a Health Plan Report Card for client use. Letter grades are used in the report card to help Colorado Medicaid clients make an informed decision about which health care plan is best for them. Attached, please find the Colorado Medicaid Health Plan Report Card for 2013. Additional CAHPS and HEDIS data can be found in the annual budget submission.

Cost Effectiveness

¹ May 2012-13 Medical Premiums Expenditure and Caseload Report.

² HEDIS and CAHPS are registered trademarks of the National Committee for Quality Assurance (NCQA)

Colorado Statute (25.5-5-410) also requires the Department to report on the cost-efficiency of each managed care program. Rocky Mountain Health Plan has a contractual provision that provides for the Department to calculate the net savings and value to the Colorado Medical Assistance Program after payment of the Administrative Services Fee. Beginning on September 1, 2014, the Rocky Mountain Health Plan will be transition into a new program. Rather than traditional Managed Care, the plan will become a shared savings payment reform pilot. A seven county region will participate in the ACC Payment Reform Program, with the remaining counties in the current Managed Care Plan being enrolled into the Accountable Care Collaborative Program. In addition to cost savings, the goals of the program are to improve patient activation in managing health, increase depression screening and interventions for behavioral health conditions, and improve care for chronic conditions.

Reimbursement rates for the Denver Health Medicaid Choice contract are based on the service utilization and cost history from clients in the Fee-for-Service Program. Once the base rates are set, the rates are then adjusted up or down depending on the complexity of the conditions for clients enrolled in Denver Health Medicaid Choice experience when compared to Fee-for-Service Program clients.

The Accountable Care Collaborative has continued to expand and currently plays a significant role in providing care to the majority of clients in Medicaid. Eighty Five percent of the Medicaid members are not enrolled in managed care, but are either in Fee for Service or the Accountable Care Collaborative. The Department suggests the focus of this report in future years concentrate on the performance of the Accountable Care Collaborative, as the current enrollment in the Accountable Care Collaborative continues to expand and is the Departments primary delivery system.



How we got the grades for this report card

We asked Medicaid clients about the care they got from Medicaid health plans and Medicaid doctors. We also collected information from Medicaid doctors. Then we gave each plan a grade: **A, B or C.**

- The Accountable Care Collaborative program continues to expand.
- The Accountable Care Collaborative enrollment for children expanded in 2013.
- Data for this report card relates to 2012.

Stay Healthy

Take good care of yourself by:

- Exercising
- Seeing your doctor at least once a year
- Quitting smoking
- Taking your children to the dentist regularly

Rocky Mountain Health Plan

Care for children and teenagers

Parents' overall rating of all health care	B
Getting kids vaccinated	C
Getting well care for babies	A
Getting well care for 3-6 year olds	A
Getting well care for 12-19 year olds	A
Getting care quickly	A
Parents are happy with their kids' doctor	B

Rating care for adults

Getting care for mom after baby is born	A
Controlling high blood pressure	A
Comprehensive diabetes care - HbA1c test	A
Cervical cancer screening	A
Percent receiving chlamydia screening ages 21 to 24	C
Getting routine care	A

Accountable Care Collaborative Program

New Medicaid health plans will be included in this report card when data are available.

Denver Health Medicaid Choice

Care for children and teenagers

Parents' overall rating of All Health Care	A
Getting kids vaccinated	A
Getting well care for babies	A
Getting well care for 3-6 year olds	A
Getting well care for 12-19 year olds	A
Getting care quickly	C
Parents are happy with their kids' doctor	A

Rating care for adults

Getting care for mom after baby is born	B
Controlling high blood pressure	A
Comprehensive diabetes care - HbA1c test	A
Cervical cancer screening	A
Percent receiving chlamydia screening ages 21 to 24	A
Getting routine care	C

Regular Medicaid

Care for children and teenagers

Parents' overall rating of All Health Care	C
Getting kids vaccinated	B
Getting well care for babies	C
Getting well care for 3-6 year olds	B
Getting well care for 12-19 year olds	B
Getting care quickly	A
Parents are happy with their kids' doctor	C

Rating care for adults

Getting care for mom after baby is born	B
Controlling high blood pressure	C
Comprehensive diabetes care - HbA1c test	B
Cervical cancer screening	B
Percent receiving chlamydia screening ages 21 to 24	A
Getting routine care	B
Adults happy with their doctor	B



Colorado Medicaid Health Plan Report Card 2013



This Report Card tells you about the Medicaid health plans.

You can use this chart to help you choose the Medicaid health plan that is best for you.

The Department of Health Care Policy and Financing
Colorado.gov/hcpf

Mission: Improving health care access and outcomes for people we serve while demonstrating sound stewardship of financial resources.