

**MEDICAID TRANSFORMATION GRANT PROPOSAL**

**Ohio Medicaid Concept One: On-Time Medication Management/Continuity Of Care  
Record**



**STATE OF OHIO  
Ohio Department of Job and Family Services  
Ohio Health Plans**

**June 13, 2007**

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## **Ohio Medicaid Concept One: On-Time Medication Management/Continuity Of Care Record**

### **ABSTRACT**

The Office of Ohio Health Plans (OHP), within the Ohio Department of Job and Family Services, administers Ohio's Medicaid program providing health insurance coverage for 2.2 million residents. Services to these beneficiaries are delivered through a diverse network of providers through fee for service (FFS) and managed care organization (MCO) arrangements. The intent of this project is to create a Medicaid patient centric Continuity of Care Record (CCR) for Medicaid Beneficiaries. Through this Continuity of Care Record Medicaid, providers will have access to Medicaid clinical information to help make better informed high quality healthcare decisions, including the utilization of clinical decision support tools for effective and efficient pharmacological management. This system will provide current data that will promote patient centered care throughout the health care delivery system. The terminology "On-Time" was selected because it is consistent with the pharmacy point of sale vendor terminology. The goal is to provide critical Medicaid information to improve the health outcomes of Medicaid Beneficiaries in rural Ohio. *Information will follow the patient* as the patient navigates the Medicaid system. Essential to this vision, is the utilization and promotion, rather than duplication, of existing networks, (HealthBridge, HealthLink, Appalachian Regional Informatics Consortium and Clark County) for information sharing such as Regional Health Information Organizations (RHIOs).

**MEDICAID TRANSFORMATION GRANT PROPOSAL**

**Ohio Medicaid Concept Two: Creation Of A Shared Care Record**



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Ohio Department of Job and Family Services  
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## **Ohio Medicaid Concept Two: Creation Of A Shared Care Record**

### **ABSTRACT**

The Ohio Medicaid Transformation Initiatives envision a coordinated comprehensive and Medicaid HealthCare Information System that focuses on pooling and analyzing information about health care wellness and prevention services and hospitals and physician services and procedures. The Ohio Medicaid Transformation vision and mission focuses on Medicaid beneficiary-centered care driven by clinical quality and outcomes measures. The proposed Ohio Medicaid Transformation Initiatives consist of the **Creation of a Shared Care Record**.

In order to achieve a Medicaid Information System Ohio has launched many initiatives. This includes: increased enrollment of beneficiaries in full-risk managed care; controlling pharmacy costs through a preferred drug list, promotion of alternatives to nursing home care; and improvement of the Medicaid Business Intelligence Infrastructure and data collaboration. The Continuity of Care Record currently exists only in Montgomery County. Children and Elderly were chosen to pilot this concept because they are the most represented populations within Medicaid.

**MEDICAID TRANSFORMATION GRANT PROPOSAL**

**Ohio Medicaid Concept Three: CMS Neonatal Outcomes Improvement Project**

**STATE OF OHIO  
Ohio Department of Job and Family Services  
Ohio Health Plans**



**June 13, 2007**

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## **Ohio Medicaid Concept Three: CMS Neonatal Outcomes Improvement Project**

### **ABSTRACT**

An Ohio partnership of state agencies, neonatal/obstetrical providers, professional organizations and a center with expertise in quality improvement together will measurably improve pregnancy outcomes for Medicaid beneficiaries in Ohio through a Centers for Medicaid and Medicare Services (CMS) sponsored transformation effort. This partnership, the Ohio Perinatal Quality Collaborative (OPQC), is poised to address issues of prematurity. Participation in the CMS collaborative will provide the needed framework to accelerate success.

Ohio Medicaid wants to measurably improve outcomes for the 148,000 births per year in Ohio, focusing on the 40% who are Medicaid beneficiaries and known to be high risk, by increasing transparency and enhancing the value of health care services paid for through Medicaid (and SCHIP). The fact that outcomes are poor compared to other states points to opportunities for improvement. The Ohio Department of Health has developed a data management infrastructure that allows timely measurement of pregnancy risks, prematurity rates and infant mortality. Twenty-five Ohio maternity and children's hospitals have invested in participating in the Vermont-Oxford Network very low birth weight care and outcomes registry. This project will build on a foundation for improvement and strong methodologic expertise. In March, 2007, Ohio providers expressed a strong desire to work together to improve prematurity-related outcomes by formally creating the OPQC. This effort is facilitated by consultation and collaboration with the California Perinatal Quality Care Collaborative, the Perinatal Quality Collaborative of North Carolina and the Center for Health Care Quality at the Cincinnati Children's Hospital and the University of Cincinnati.