

# State Medicaid Director Update

Medical Care Advisory  
Committee

Tracy J. Plouck

January 28, 2010

**Ohio**

Department of  
Job and Family Services

# Overview

- FY 10/11 budget initiatives
- Funding for Medicaid optional services
- OHP reorganization
- MITS progress
- MCAC membership
- MCAC member involvement
- Questions and discussion

# FY 10/11 Budget Initiatives

- FY 2010 caseload & budget YTD actuals
- Recent milestones
  - CMS filings
  - Administrative Code changes
- Update on managed care tax changes
- Tobacco funding for Medicaid optional services

# Optional Services

- Funding strategy
- Messaging/Communications
- Observations from the MCAC...?

# OHP Reorganization

- Follow-up to last reorganization (2008)
- Creates a functional table of organization
  - More opportunity for teaching/learning
  - Better aligned for MITS
- No job abolishments or demotions
- With a few exceptions, OHP staff members' duties remain basically the same
- Effective December 21, 2009

# MITIS Progress

- Implementation scheduled for December
- Some specific features will be deferred & released after December in order to meet target date within resource parameters
  - Schedule re-negotiated with HP
  - Release schedule for deferred items available by early March
  - Updated budget to CMS: February 1



# Scope Deferrals

<b>Deferred Item</b>	<b>Impact</b>
MITS Web Portal	Continue to use JFS Web Portal for Eligibility Inquiry, Claim Submission, Remittance Advice Display with MITS
Electronic Document Management	Most functions deferred except Claims Entry and Operational Report Distribution
Contact Tracking Management	Continue to use existing contact tracking procedures and tools (e.g. email, paper files, excel spreadsheets)
Programs Subsystem	Continue Waiver Management and related functions as done today

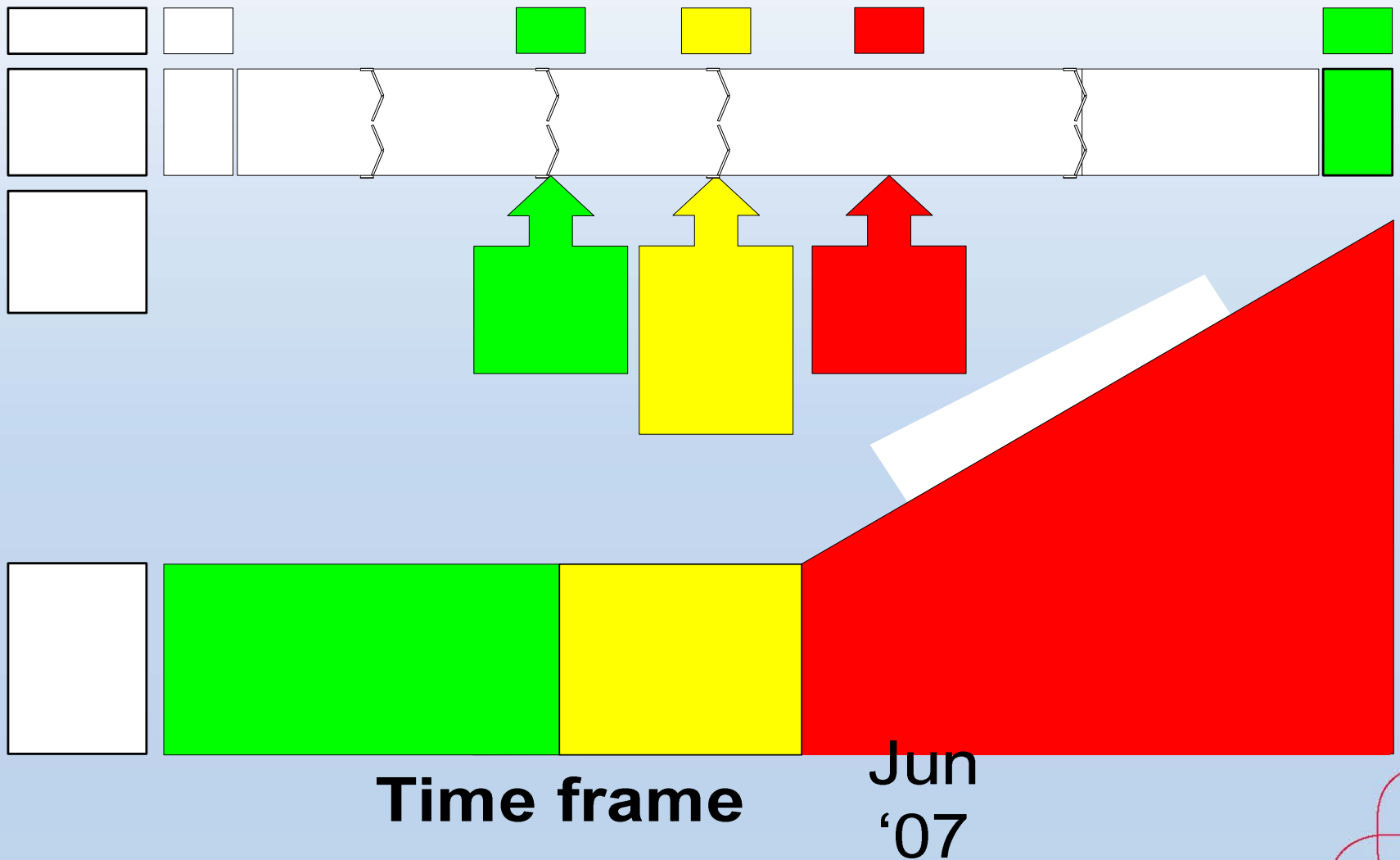
# Scope Deferrals, 2

<b>Deferred Item</b>	<b>Impact</b>
Special Enrollment for Hospice	Use the existing processes and tools, including the IVR, for Hospice enrollment
Two Way Eligibility Interface	One-way interfaces from CRIS-E to MITS and SACWIS to MITS
"Smart" Prior Authorization	Prior Authorization management will continue existing procedures
Managed Care Removal from CRIS-E	Managed Care enrollment information will continue to display for County Caseworkers in CRIS-E

# OHP, MITS and CY 10

- Very demanding schedule for staff
  - Balance the project with other priorities
  - Some full time dedicated; others will move in & out as necessary
- Internal and external communication is key
  - Expectations
  - Constraints: new work & the blackout period

# MMIS and MITS Blackout Period



# MITTS Value to Ohio Citizens

## Providers

- Increased Access
  - 24/7 access via internet
  - Claims can be entered, adjusted or viewed on the MITTS Web Portal
- Improved Quality
  - Fewer processing errors & improved accuracy
  - Improved built-in error checking, data validation
  - Online edits identify many common claim errors allowing immediate correction & successful claim submission
- Increased Efficiency
  - Paid claims can be copied & modified to create a new claim, saving data entry time
  - Promotes efficient, timely & accurate payment of claims & adjustments

## Stakeholders

- Better Information Availability
  - General information will be available on the public site, including:
    - ODJFS Publications targeting Consumers & Providers
    - Public Reports
    - Provider Directory
    - Provider Services (Training dates, other public information)
    - FAQs
    - Links to other pertinent Medicaid-related web sites
    - Data is frequently updated providing accurate, current information
- Improved Use of Taxpayer Funds
  - Greater efficiency
  - Faster adoption of changing laws & policies
  - Improved fraud detection & prevention

## Staff

- Greater Efficiency
  - Fewer stand-alone databases & spreadsheets
  - Workflow logic prompts workers to take action in Provider Enrollment & Prior authorization
  - Improved tools
  - Benefit plans are configured & updated by non-technical staff greatly reducing the amount of information technology (IT) needed to implement changes in the system
  - Increased Worker Satisfaction
  - Spend less time on administrative tasks & more time helping customers

# MCAC Membership

- Length of service:
  - 2 year terms ending January 2010
  - 3 year terms ending January 2011
  - Medicaid Director & Medical Director have continuous terms
- Next steps

# Terms Expiring January 2010

## **EXECUTIVE COMTE**

- Eugene King, JD
- Phillip Darrow
- Brian Bachelder, MD
- Greg Hall, MD
- Janet Smith

## **OTHERS**

- Kathryn Burns, MD
- Craig Carns, MD
- Beverly Laubert
- Joseph Mudra
- Carolyn Slack
- Mary Wachtel
- Hugh Wirtz

# Terms Expiring January 2011

## EXECUTIVE COMTE

- Mary Butler
- Nick Lashutka
- Randy Runyon
- Anissia Goodwin

## OTHERS

- J. Thomas Hardy, MD
- Jennifer Grow, MD
- Craig Strafford, MD
- Ravi Elluru, MD
- Maria Matzik
- Michael Wascovich
- Jack Cera (resigned)

# MCAC Member Involvement

- Support CHIPRA work
- Pre-clearance concept review of rules
- Federal reform concepts
- Review & comment on provider communication for MITS before it is public
- Other?

# Member Involvement, 2

- Please indicate your area(s) of interest at today's meeting
- Involvement will begin immediately as action items arise