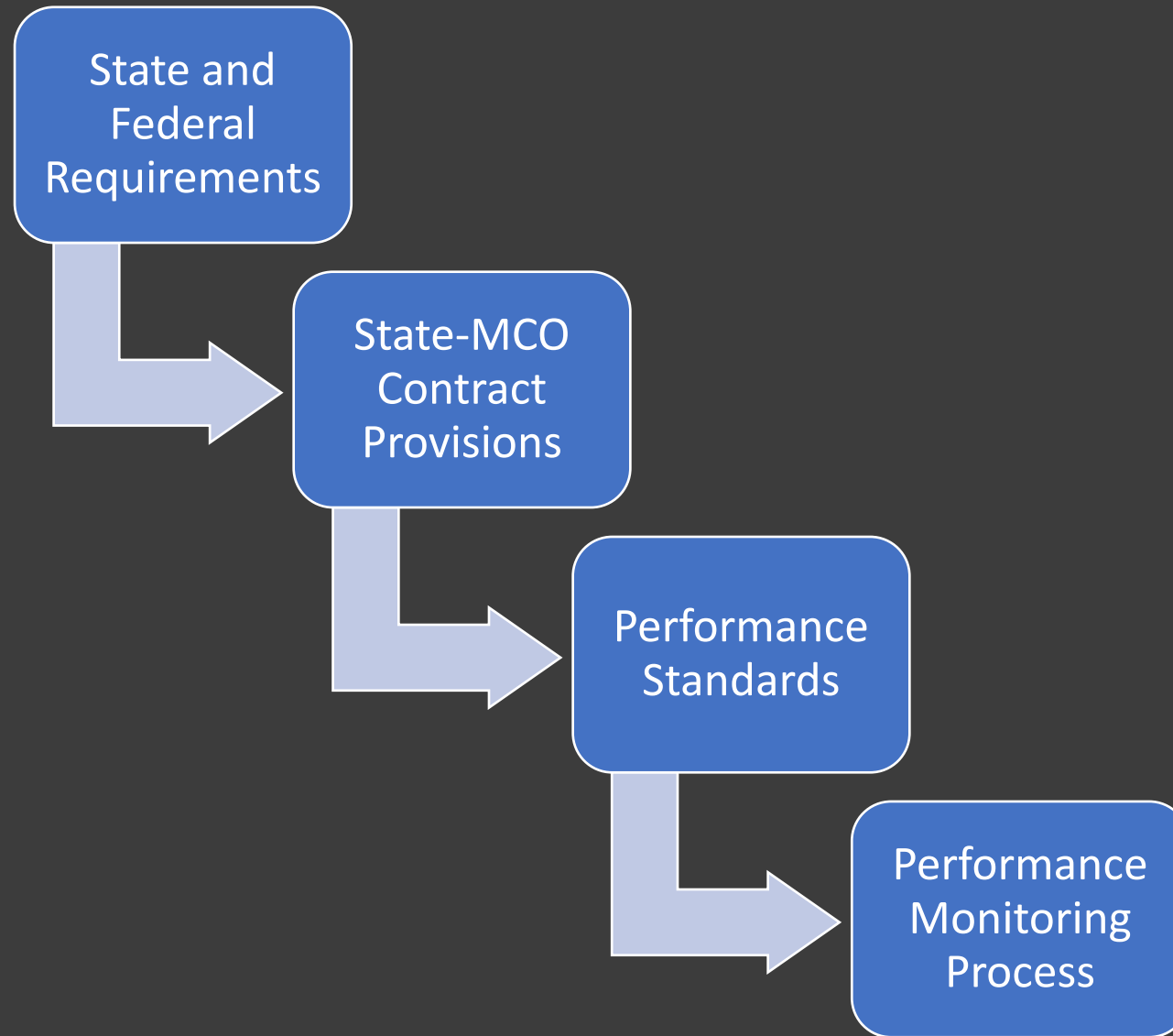


MCO Performance Standards for Contracting, Engaging, and Providing Access for American Indian/Alaska Natives and Indian Health Care Providers

10-21-2020



State-MCO Contract Language

- Network Adequacy
- Restriction on AI/AN Enrollment in Managed Care
- Payment for Services for Non-Participating Providers and IHCPs
- Network Capacity
- Provider Nondiscrimination
- Maintenance of the AI/AN IHCP Medical Home
- Authorization of Services
- MCO Training
- Crisis Coordination
- IHCP Addendum
- IHCP Engagement

Performance Standards and Monitoring System

- Reference the corresponding state or federal requirements and/or contract provisions
- Define compliance (“passing grade”)
- Identify quantitative indicators (data elements)
- Provide process for monitoring and reporting compliance (quarterly, annual, tribal input)



Indian Healthcare Provider Evaluation of MCOs

Washington State, June 2019

Instrument Design

- Voluntary workgroup
- Representatives from 5 Tribes and 2 UIHPs
- Workgroup met 4 times
- Recommended, edited and approved evaluation questions
- Online survey



Completion Rates

- 11 of 29 Tribes (38%)
- 2 of 2 UIHPs (100%)

Evaluation Results

ACCESS TO CARE AND PROVIDER NETWORK

- 81% indicate prior authorization requirements cause delays to care
- 51% indicate MCOs fail to provide access to culturally competent care
- 41% indicate their Tribe or UIHP had to cover costs for care denied or delayed

Evaluation Results

CARE COORDINATION

- 32% indicate MCOs have never met with their IHCP
- Only 41% indicate MCOs met with their IHCP at least once per year
- 56% indicate that MCOs are not coordinating care with IHCP on inpatient discharge planning
- 45% indicate MCOs are not coordinating care at all with IHCP on outpatient care

Evaluation Results

MCO CONTRACTING WITH IHCPs

- 100% of respondents who had ended contracts with MCOs attributed it to: “Case management services lacked cultural competency” and “Poor coordination between non-IHCP services and IHCP services”
- Reasons for not entering into contracts with MCOs:
- “Customer service representatives do not fully understand issues specific to the Indian healthcare delivery system and/or benefits and legal protections that apply to American Indians and Alaska Natives”
- “Don't see a clear benefit to our IHCP from contracting”
- “We do not have the capacity to provide Behavioral Health services to non-Native clients - a contract would require us to provide Behavioral Health services to any individual enrolled in the plan”

Evaluation Results

MCO ENGAGEMENT WITH IHCPs

- 44% indicate MCOs have not provided IHCPs a specific contact for communication and service coordination
- 32% indicate MCOs have not offered timely and competent assistance
- 59% indicate MCOs have poor understanding of Indian healthcare delivery system and benefits and legal protections that apply to AI/AN
- 71% indicate MCOs have not included IHCPs in development of coordination of care and services
- 71% indicate MCOs have not provided effective process for IHCPs to suggest how the MCO could serve them better



In Sum

Clear need for a system to:

- Define performance measures
- Monitor performance
- Provide accountability

Report Available

<https://protect2.fireeye.com/url?k=4980bf3c-15d5b62f-49808e03-0cc47adb5650-0b2d19250da420d4&u=https://protect2.fireeye.com/url?k=7aac08ca-26f821e1-7aac39f5-0cc47a6d17cc-fdc23d9158ae78b4&u=https://aihc-wa.com/managed-care-organizations/>



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