

# MEDICAID INNOVATION: PREPARING STATE PROGRAMS FOR THE FUTURE



**Myers and Stauffer is a leader in providing solutions to state and federal government agencies in the design, implementation, operation, and evaluation of government-sponsored health care programs.**



**MYERS AND  
STAUFFER<sub>LC</sub>**

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# Medicaid Innovation: Preparing State Programs for the Future

With more than four decades of experience in government health care, Myers and Stauffer is a market leader in advancing health care delivery system and payment transformation strategies. We leverage our extensive knowledge of Medicaid policy and program operations to support improvement of population health outcomes and to ensure efficient health care spending. We provide extraordinary client service and an unwavering commitment to quality. Myers and Stauffer consultants are trusted advisors to our clients, following our time-honored approach to consistently consider the experience of the consumer, provider, and other stakeholders to ensure the efficient use of scarce health care resources to maximize quality and outcomes. We provide thoughtful and sustainable solutions tailored to the client's needs.

The health care environment continues to evolve rapidly, with innovations changing how health care services are delivered and financed. Many of those innovations have their roots in government-sponsored health care. The Centers for Medicare & Medicaid Services continue to test new innovations in delivery and financing, with a myriad of pilot programs either now in place or in the planning phase to shape the Medicaid of the future. States and Medicare programs are the testing grounds for these new innovations, and commercial health plans continue to test and implement their own innovative models, creating a dynamic environment for health care stakeholders.

## KEY MEDICAID PROGRAM INNOVATIONS FALL IN A NUMBER OF AREAS:

- **Population health.** Medicaid agencies are increasingly adopting new delivery system and payment approaches and partnering with entities such as managed care organizations to promote population health.
- **Medicaid managed care.** The Medicaid Managed Care rules have updated standards, bringing managed care to Medicaid beneficiaries that looks like managed care in the commercial sector. States are also carving in new programs and beneficiaries to better integrate care, and are providing greater oversight of managed care implementation and contract monitoring.
- **Alternative Payment Models (APMs).** Medicaid programs are increasingly introducing APMs to promote smarter spending, better care, and healthier people. These APMs include value-based payment (VBP) features that reward quality and outcomes, and introduce financial risk into the program. Well-implemented APM reforms consider and synergize with broader state efforts to effectively transform health care delivery.
- **Integrated Care.** The integration of physical and behavioral health services can improve outcomes while reducing costs. Key components include the use of multi-disciplinary teams, evidence-based practices, care management and care coordination, patient-centered planning, use of health information technology, and quality measurement and improvement.

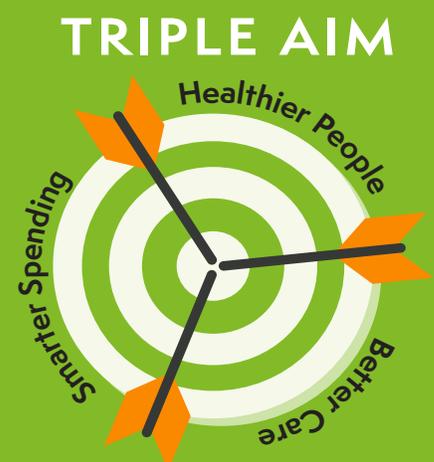
- **Social Determinants of Health (SDoH).** To improve population health, states are recognizing and addressing SDoH such as safety, food insecurity, homelessness, economic resources, education, and transportation. Health care delivery system transformation must recognize the role SDoH play in improving health outcomes, changing patient behaviors, and preventing unnecessary costs.
- **Enhanced home and community-based services (HCBS) arrangements.** States are writing new state plan language, creating new waivers, combining some waivers, to expand community-based care, and are revising their reimbursement methodologies to incent community services.
- **Organizational Design.** States understand that innovation requires changes to their organizational structures. New technologies, new analytics, emphasis on outcomes, and greater transparency require states to make changes in technologies and operations, which can be daunting tasks.
- **Program Integrity.** States are proactively identifying risk areas during the design phase of their delivery system and payment transformation initiatives. Strong contract compliance monitoring is critical to ensure applicable requirements are properly honored.
- **Health Information Technology.** The sharing of data between health care providers, payers, and appropriate state agencies is a critical component of system transformation which relies heavily on the ability to have and exchange complete and accurate clinical, quality, and financial data.

## CMS' Triple Aim works to ensure Medicaid beneficiaries have access to high-quality care that produces optimal health outcomes.

Better Care incorporates access to care, quality of care received by individuals, and the individual's experience with the health care delivery system.

Healthier People requires identifying common population health issues, evidence-based clinical practice guidelines, approaches to address social determinants of health, and mechanisms to measure change or improvements in population health.

Smarter Spending creates incentives for strategic investments in the health care delivery system and paying for value and outcomes over merely the volume of services provided.



## WHY MYERS AND STAUFFER?

Myers and Stauffer understands the call to action for government health care payers to transform their Medicaid health care delivery and financing systems to achieve the highest quality and improved health outcomes. We are problem solvers – prepared to support Medicaid programs as they continue to evolve, with all phases of program transformation, from strategic planning, program design, implementation and evaluation, to program monitoring and oversight. With years of experience working with Medicaid programs across the country, we support the development of new organizational structures and the optimal administrative arrangements to make new programs work most effectively.

We bring years of government health care experience to our clients, including:

**1. Strategic Planning and Design.** Myers and Stauffer recognizes the importance of an inclusive, transparent, and unbiased facilitation process to advance public policy opportunities and address public policy concerns. We respect the importance of understanding the goals, needs, and perspectives of each of the impacted stakeholder groups as an important ingredient in creating strategies for transformation initiatives.

**2. Program Design, Implementation, and Evaluation.** Myers and Stauffer turns design into reality for states. We support our clients in the implementation of their transformation initiatives by assisting with their procurement and contracting efforts. We also develop and deploy a strong evaluation framework to provide critical feedback and adjustment to meet programmatic goals as efficiently and successfully as possible.

**3. Program Oversight.** We work with our clients to ensure the ongoing success of transformation efforts, supporting readiness testing, program and contract monitoring, quality reporting and review, and remediation where necessary. We have a full suite of readiness and contract monitoring tools. We have experience applying quality improvement science and supporting clients through a variety of quality initiatives.

**4. Organizational Effectiveness.** We recognize that transformation is not complete without creation of an organizational structure to complement the new design of programs that transform health care delivery and financing. Myers and Stauffer works with state agencies to assess their readiness to implement and operate new initiatives and make recommendations for organizational realignment as necessary.

If you are interested in more information on Medicaid innovation and how Myers and Stauffer can help you, please contact us.

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