

Medicaid ACR

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5/20/2019

Midterm 2018 Elections and Medicaid

Ballot Indicatives Passed: Idaho, Utah, Nebraska

Governor Elect Supports Implementation of Medicaid Expansion: Main

Governor-Elect Supports Medicaid Expansion: Kansas, Wisconsin

Montana Ballot Initiative Failed

Idaho

Idaho Proposition 2

- Requires state and Idaho Department of Health and Welfare to submit amendment to CMS to **expand Medicaid expansion** no later than 90 days
- Endorsed by Outgoing Governor Otter and Gov Elect (R) Little will implement.

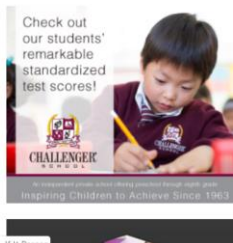
Brad Little, Idaho's GOP Gubernatorial Candidate, Will Support Medicaid Expansion – If It Passes

By MATT GUILHEM • SEP 26, 2018



Incumbent Lt. Governor Brad Little, who's running for governor, says he'll enforce the will of the people should voters pass an expansion of Medicaid coverage this November. A Republican, Little's party generally opposes broadening Medicaid.

In November, Idaho voters will head to the polls to decide on whether or not Medicaid coverage should be expanded to include some 51,000 people who currently don't



1/2Fwww.idahotribune.com/2Fv7oo078a&text=Brad Little%2C Idaho%27s GOP Gubernatorial Candidate%2C Will Support Medicaid Expansion – If It Passes



Governor Butch Otter Gives Thumbs Up To Idaho Medicaid Expansion

By JAMES DAWSON • OCT 30, 2018





On Monday, January 7, Gov. Brad Little gave his first State of the State Address focusing on education, health care, public safety, transportation and more. BY IDAHO PUBLIC TELEVISION

- Idaho Gov. Brad Little has signed a bill that adds work requirements and other controversial sideboards to Idaho's **Medicaid expansion**.
- Voters approved the expansion — giving Medicaid health insurance to all low-income adults in Idaho — with a 61 percent vote in November.

Montana

- Montana I-185 voted down
- Most expensive ballot rate in Montana history
- Raise taxes on tobacco products (e-cigarettes and vaping products)
- Revenue to fund Medicaid, Veteran's Services, smoking prevention, long term care for seniors, people with disabilities
- Eliminated June 30, 2019 sunset date
- Tobacco companies spent \$17 million on advertising to oppose,
- Support spending by Montana Hospital Association \$8 million

Record Spending Against Montana's I-185 Tobacco Tax

By ERIC WHITNEY • OCT 28, 2018



- Medicaid expansion in Montana was initially approved through June 2019. **Montana voters** rejected an initiative in 2018 that would have permanently expanded Medicaid in the state and imposed a tobacco tax to fund the state's portion of the cost.
- **In 2019, Montana enacted legislation that extends Medicaid expansion in the state for another six years**, albeit with a work requirement that will need federal approval in order to be implemented.

- **H.B.658, which calls for a six-year extension of Medicaid expansion** along with a Medicaid **work** requirement, passed and was signed into law by Gov. Steve Bullock in May 2019.
- Enrollees who aren't in compliance with the work requirement will have 180 days to come into compliance.
- After that, their coverage would be suspended, but they would have an opportunity to re-enroll after 180 days.
- And if they can demonstrate that they've been in compliance with the work requirement for at least 30 days, they'd have an opportunity to re-enroll before the 180 waiting period is up, subject to "heightened monitoring" for the remainder of the 180 days.
- **If more than 5 percent of Medicaid expansion enrollees lose their coverage under the work requirement rules, it would trigger an audit. If the audit determines the more than 10 percent of the people in the audit sample lost their coverage erroneously, coverage suspensions under the work requirement would cease** until the end of the next legislative session, giving lawmakers a chance to revisit the issue

Nebraska

- Nebraska Initiative 427 passed
- Requires Nebraska to submit state plan amendment for approval to CMS before April 1, 2019 for Medicaid Expansion
- Governor Ricketts re-elected for second term was opposed to expansion.

POLICY-ISH

Nebraska May Join Utah, Idaho in Putting Medicaid Expansion Before Voters

July 6, 2018 · 12:50 PM ET

FRED KNAPP

FROM  met
Nebraska PBS & NPR Stations

Voters in Nebraska may get to decide whether their state expands Medicaid this November.

Supporters of Nebraska's Medicaid expansion campaign, Insure the Good Life, turned in petitions bearing more than 133,000 signatures to the secretary of state Thursday. If 85,000 are validated, the issue will appear on ballots this fall.



- An estimated 94,000 low-income Nebraskans will have to wait until Oct. 1, 2020, to get the Medicaid coverage approved by voters last year.
- **Under a plan announced April 1, 2019 those newly eligible Nebraskans will have different benefits and requirements than others on Medicaid.** To get full coverage, they would have to work, care for a family member, volunteer, look for work, or attend college or an apprenticeship.

Utah

- Utah Proposition 3 passed
- Expand Medicaid April 1, 2019
- Prohibits future changes to Medicaid and CHIP reductions below the January 1, 2017 rates
- Proposition 3: 0.15% rate increase from 4.7% to 4.85% of sales tax expect groceries to finance expansion

Gov. Gary Herbert split on voter initiatives — opposes Medicaid expansion and medical marijuana, backs two aimed at election laws



- Utah voters decided to expand Medicaid under the Affordable Care Act in November. But the Republican legislature is scaling back the voter-approved plan.
- **The Republican legislature has passed legislation that would, in effect, replace the voter-approved Medicaid expansion with a more limited version that would actually cover fewer people while spending more money in the first few years.**
 - The bill passed both chambers with a two-thirds majority.
- It now heads to Republican Gov. Gary Herbert, who is expected to sign it.



Supporters of a voter-approved measure to fully expand Medicaid gather at the Utah State Capitol January 28, 2019, in Salt Lake City.

Key Governor Races with Implications for Expansion

Kansas

- Dem Gov (elect) Kelly promised to advocate for and sign a bill to approve Medicaid Expansion during her first year
- Prior Governor Brownback had **vetoed** Kansas House and Senate proposal of expansion, fell 3 votes shy (81-44) to override Governor's opposition.



Kansas May 1, 2019

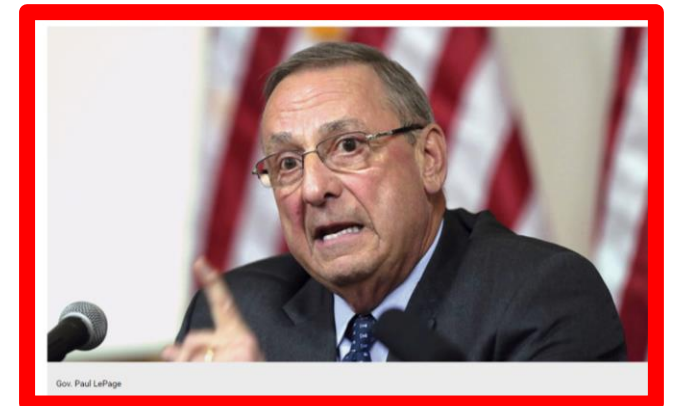
- The Kansas Senate fell one vote short of forcing a Medicaid expansion bill on to its calendar Wednesday, leaving the issue dead for another year unless supporters can find a new way to advance it.
- The vote represents a significant **defeat for Democratic Gov. Laura Kelly**, who made expansion one of her top priorities.
- Democrats tried to use a procedural motion to override Senate leaders and keep expansion alive in the waning days of the legislative session. But the 40-member chamber needed 24 votes and the motion failed 23-13 after Senate majority leader Jim Denning, a Republican from Overland Park, voted “pass” rather than “aye” or “nay.”

Key Governor Races with Implications for Expansion

Maine

- New Dem Gov (elect) Mills **supports** Medicaid Expansion
- Democrats won control of Maine's Senate giving party control of both houses of Maine Legislature
- The main November 2017 ballot initiative to expand Medicaid, opposed by Gov LePage, complied with Maine's supreme Court order to submit State Plan Amendment to CMS but Gov LePage had requested CMS to reject the plan

- New **Democratic Gov. Janet Mills** signed an executive order Thursday implementing Maine's Medicaid expansion, which was **overwhelmingly approved** by the state's voters in 2017.
- The previous governor, **Republican Paul LePage**, had **strongly resisted** the expansion, resulting in a court battle that dragged through most of last year and ended with a judge ordering him to move forward with the Medicaid changes. In previous years, he vetoed five bills passed by the legislature to expand the program.
- December 2018 CMS approved the LePage administration's request for a Medicaid waiver requiring traditional Medicaid beneficiaries to participate in **work activities** to receive benefits.
- The Mills administration likely would have to submit a new waiver request to include the expansion population in that work requirement. But it's uncertain whether Mills would make that request, or even allow the current waiver to take effect.



Key Governor Races with Implications for Expansion

Wisconsin

- New **Dem Gov Evers** over incumbent **Gov Walker** may increase prospects for expansion
- Both houses in Wisconsin are under republican control so Medicaid expansion through State Legislature may be difficult
- Wisconsin Republicans open to a possible compromise with Democratic **Gov. Tony Evers** on Medicaid expansion are looking at ways to accept the federal funding while not appearing to cave in on the issue, even as GOP leaders remain steadfastly opposed.

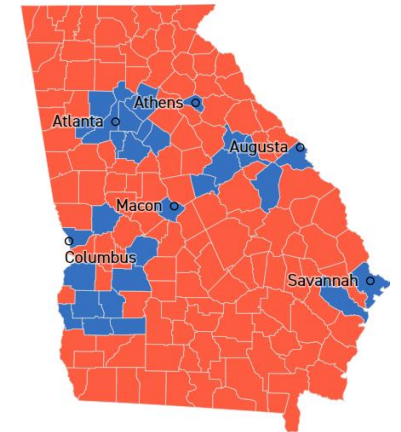
Key Governor Races with Implications for Expansion

Georgia

- 2014 State Law prohibits Georgia governor from expanding Medicaid without legislative approval
- Both houses in remain in Republican control
- Close race with Dem Stacy Abrams advocate for Medicaid Expansion

Election results

Map	Percent	Candidate	Party	Votes	Winner
●	50.2%	Brian Kemp	GOP	1,978,408	✓
●	48.8%	Stacey Abrams	Dem	1,923,685	
●	0.9%	Other		37,235	
100% of precincts reporting (2,634/2,634)					
3,939,328 total votes					



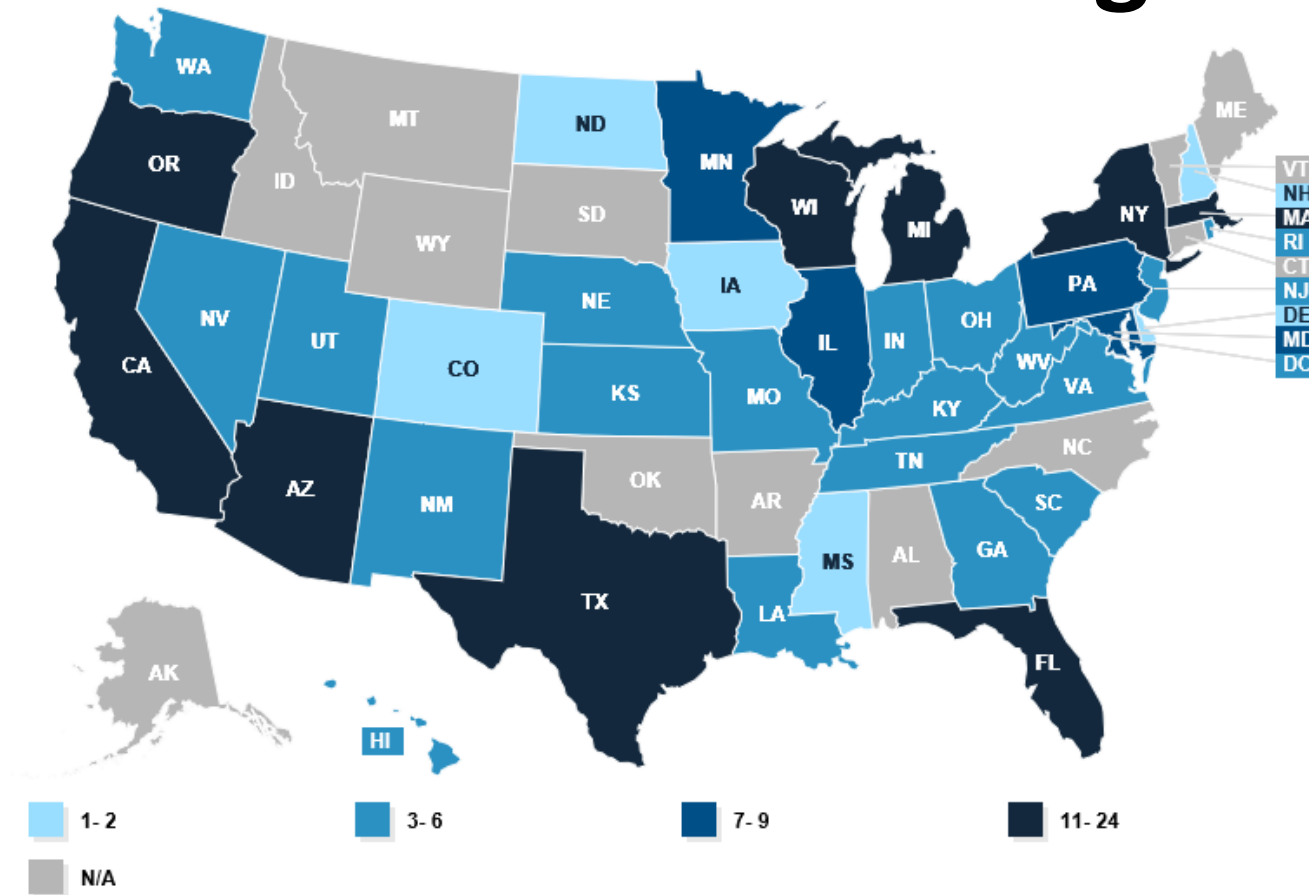
On July 30, 1965, President Johnson signed the Social Security Amendments promising that they would "improve a wide range of health and medical services for Americans of all ages."



In 1982 states began to address actuarial soundness by contracting with private health insurance companies and capitated contracts with what became known as Medicaid Managed Care Organizations (MCOs).

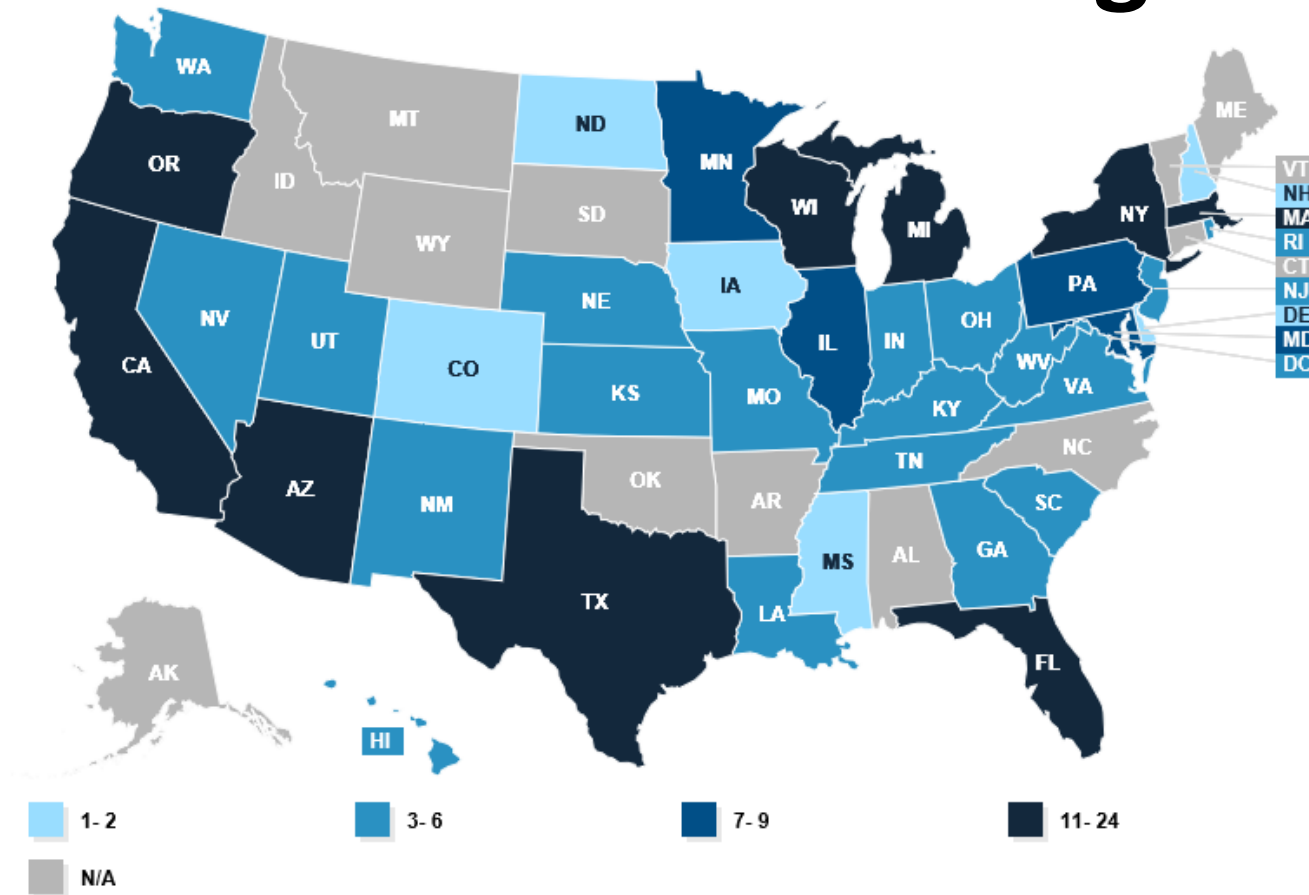
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281 Medicaid Managed Care Organizations



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281 Medicaid Managed Care Organizations



As of July 2016, at least **75%** of all Medicaid beneficiaries were enrolled in MCOs.

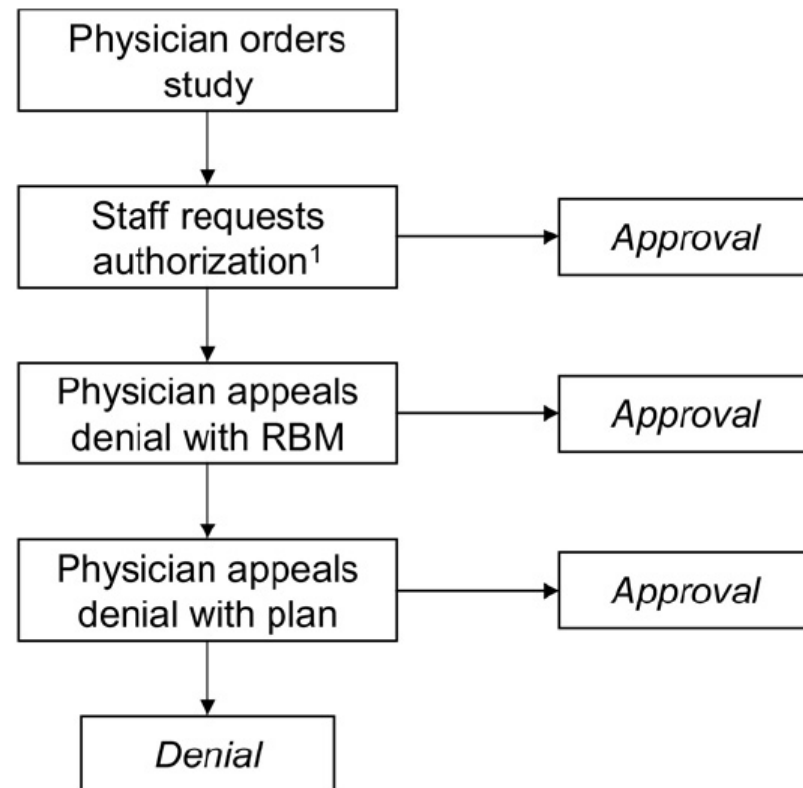
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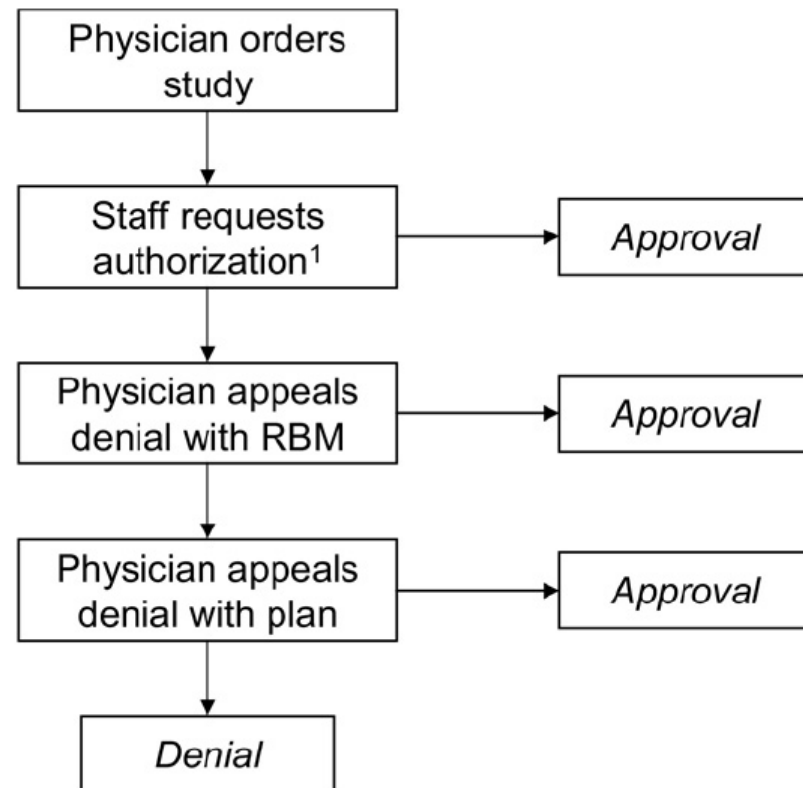
Health plans must have monthly rates paid to maintain obligations and reserves to meet “**actuarial soundness.**”

Radiology Benefits Management Companies

Radiology benefits management companies developed in response to a need among commercial payers to deal with actuarial soundness and rapid imaging costs.



2012 Potential Savings from Radiology Benefits Management Programs

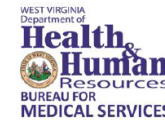


The projected radiology benefit management program savings are \$13-\$24 billion in Federal budget expenditures and patient cost sharing over a 10 year period.

The projected radiology benefit management utilization advantage over unmanaged populations is 20%.

West Virginia Medicaid

In West Virginia Medicaid prior authorization is required before imaging is rendered regardless of the place of service unless medically necessary during an emergent visit at an emergency room by the Utilization Management Contractor for medical necessity determination.



528.1 RADIOLOGY SERVICES

BACKGROUND

West Virginia Medicaid covers diagnostic and therapeutic radiology and nuclear medicine services. Prior authorization is required for specific services. If the radiology service is a covered service and requires prior approval, the prior authorization is required before the service is rendered regardless of the place of service unless medically necessary during an emergent visit at an emergency room. A referring/treating provider must order all covered services. The treating provider is the provider responsible for the management of the member's specific medical problems.

POLICY

528.1.1 COVERED SERVICES

Services must be performed under the supervision of a licensed physician or other authorized, licensed provider within the scope of his or her licensure and must be medically necessary. Generally accepted professional standards of care must be followed by all personnel.

2014 West Virginia Medicaid entered into a radiology benefit management agreement

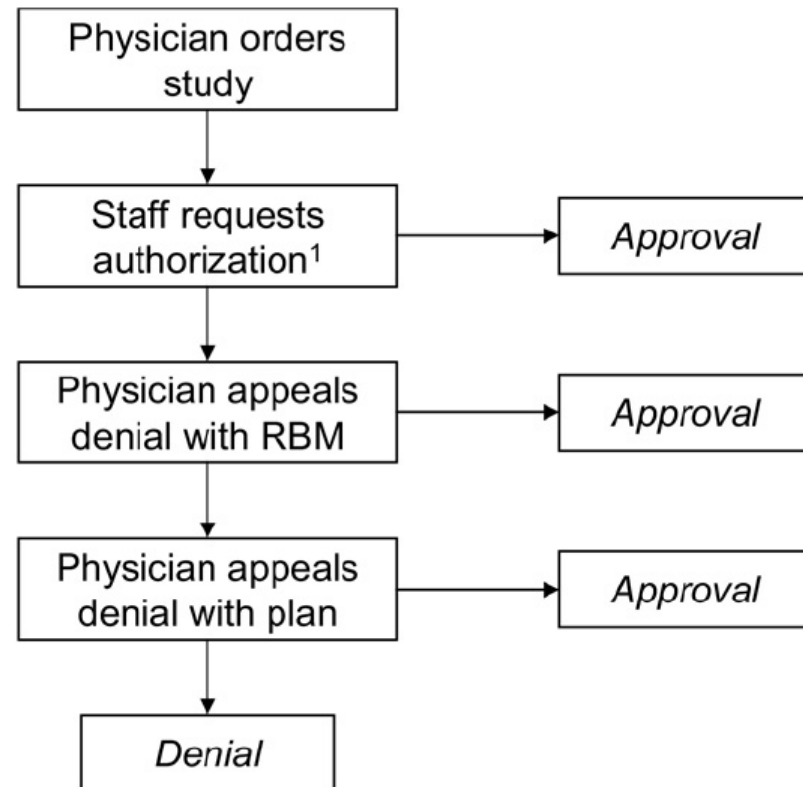


December 1, 2014

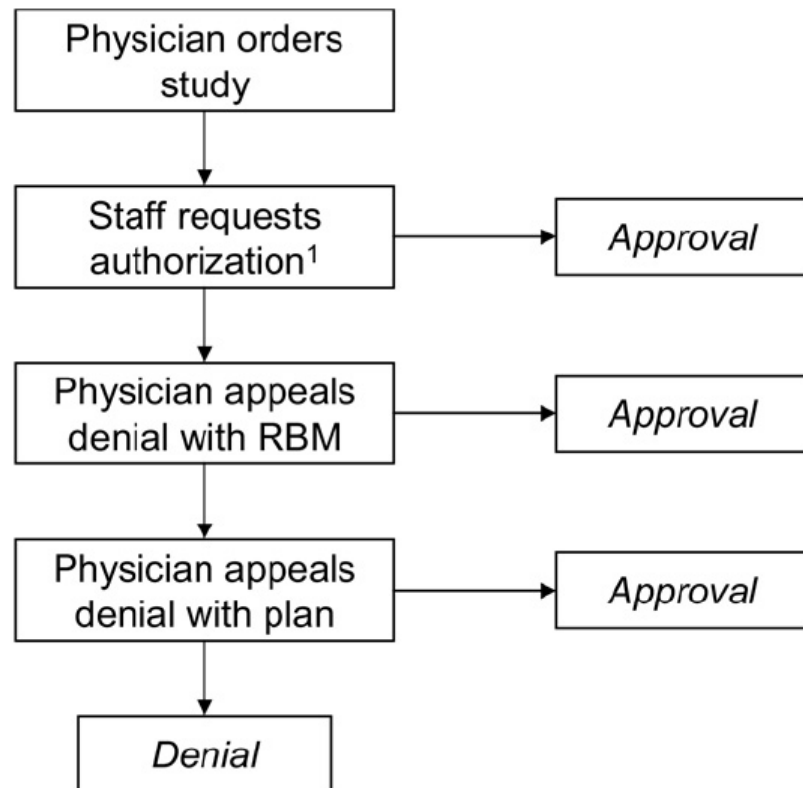
Dear Provider:

Highmark Blue Cross Blue Shield West Virginia and West Virginia Family Health Medicaid are committed to promoting continuous quality improvement for services provided to West Virginia Family Health Medicaid members. West Virginia Family Health has entered into an agreement with **National Imaging Associates, Inc. (NIA)** to implement a radiology benefit management program of non-emergent, advanced, outpatient imaging services beginning February 1, 2015. This decision is consistent with industry-wide efforts to ensure clinically appropriate quality of care and to manage the increasing utilization of these services.

To Control Costs, Benefits Management Firms Contacting Employees



The radiology benefits management company may select the imaging provider by placing telephone calls to [health plan] members when their scan is approved to help them pick a lower-cost site within their plan.



In 2015 6 major firms known to provide radiology benefit management services nationally covered nearly 88 million people,

Per member per month RBM costs ranged from \$0.15 to \$0.32,

The RBMs cost shifted the savings to providers.



The 10 Essentials of Medicaid



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Key Activities

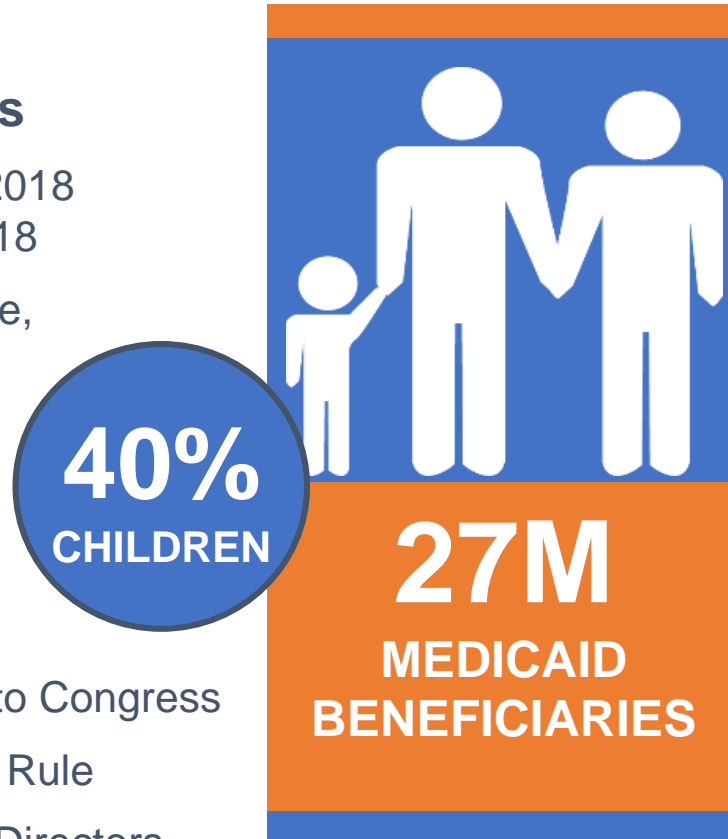
MEDICAID NEEDS ACR

Conferences / Meetings

- Medicaid Network ACR 2018 Annual Meeting, May 2018
- MHPA Annual Conference, September 2018
- MACPAC Meetings

Review of Rules & Other Key Reports

- MACPAC March Report to Congress
- Medicaid Managed Care Rule
- Letter to State Medicaid Directors – Dual Eligible Models



Key Issues Brought to Network

- Digital Breast Tomosynthesis Non-Coverage in Oklahoma
- Idaho's Medicaid Expansion
- ACR Summary of Medicaid Managed Care Proposed Rule
- MACPAC Letter to HHS Secretary Regarding Work Requirements
- ALA Asks for NLCRT Member Support
- Planning for Medicaid Expansion Initiatives – How Can Radiologists Prepare?
- Medicaid Innovation Accelerator Program (IAP)
- CMS Quality Conference
- Medicaid Quality Measure Reporting: Moving Beyond Claims
- Performance Measurement for Accountability and Quality Improvement – an Update on the Medicaid and CHIP Scorecard and Core Sets



Medicaid Articles of Interest posted weekly.
Over the last year there have been 52 posts to the ACR Engage website,
under the ACR Medicaid Network community page.



