

MEDICAID FINANCIAL STRATEGIES – INFORMATION REQUEST

INSTRUCTIONS

OHA is working closely with CCOs to react to the health emergency and economic crisis occurring in Oregon due to the COVID-19 pandemic. At an April 14 CEO meeting, OHA agreed to request information of CCOs to facilitate collaboration on provider payment and other financial strategies.

Please fill out this form and return it to actuarial.services@dhsoha.state.or.us by **4/27/2020**. All the information provided in this questionnaire will be shared publicly.

CCO Name: Trillium Community Health Plan
Primary Contact Person at CCO: Justin Lyman, VP of Finance
Primary Contact Person's email: Justin.T.Lyman@CENTENE.com

Describe your CCO's efforts to evaluate the financial need of *providers who have experienced or are expected to experience a sharp decline in revenue ("Affected Providers")* from your CCO since public orders limiting non-urgent care were adopted. What approaches have you taken, and what have you learned? (limit to 2 pages)

CCO Quality Pool

OHA is releasing 60% of the quality pool funds early to CCOs, in April rather than at the end of June. Trillium will distribute the early release funds we'll be receiving to providers, in accordance with our CCO Metrics Methodology, calculating performance at the practitioner level and paying out to the organizations. Of the \$9.4 million payout to providers at the end of April (rather than September, as is customary), 80% will go to primary care, 15% to behavioral health, 3% to specialty care and 2% to dental care organizations.

Suspension of Withhold

Normally, OHA withholds 4.25% of CCO funds but will be suspending that withhold temporarily. After taxes and administrative costs, Trillium Community Health Plan's Board of Directors has agreed to make 80% of the withhold immediately available to providers who are currently contracted with Trillium, based on the percent of the quality allocation that those providers earned in 2019, adjusting for differences in membership assignment between 2019 and 2020.

The Board of Directors voted to make the remaining 20% available each month to providers who are currently in need of COVID-related assistance. TO receive funds, providers must apply to Trillium for COVID-related assistance. Applications will be available online. Trillium's management team will meet to review each application to expedite approvals. Once a request is approved by the management team, it will be submitted to the Trillium Board for final approval.

Evaluation/Analysis

Trillium is pulling data on claims volume and confirming findings with providers. Our drastic change in membership has been a challenge to determining whether decreases in claim volume are due to membership changes or COVID-19. Also, once the payouts listed above have gone out, we will communicate the availability of funds so that providers still in need can apply for assistance. This will be a subject at our Board of Directors and Clinical Advisory Panels each month for the duration of the need.

Describe your CCO's payment strategies to Affected Providers. Select all that apply. Have you:

- Offered advance payments based on average historical monthly payments (per member per month (PMPM) with required quality metrics
- Offered advance payments based on average historical monthly payments PMPM without required quality metrics
- Pre-paid incentive dollars that were originally associated with quality metrics performance
- Relaxed quality metrics performance requirements
- Modified existing risk-sharing payment arrangements
- Eliminated risk-sharing (while maintaining the shared-savings)
- Implemented other payment approaches, please describe: We have entered into capitated value-based agreements impacting 20% of our membership.

Provide details regarding the terms and timing of your CCO's proposed alternative payment methods to Affected Providers, such as advance or capitated payments, risk-sharing, reconciliations, and quality or other bonuses:

We implemented April 1, 2020

Describe how any new payment arrangements to Affected Providers vary by provider type or other circumstances (e.g. behavioral health provider or regional differences).

Trillium has remained flexible as we evaluate the needs of our providers and while our payment arrangements affect primary care, behavioral health and specialty providers, we are working with individual providers to address needs outside of typical payment arrangements, such as through the use of flexible funds.

Describe your CCO's strategies to engage Affected Providers about moving to value-based payments. Are the proposed moves for a limited time (e.g. 2020 only in direct response to the COVID-19 emergency), or are these efforts linked to your ongoing efforts to meet VBP targets per CCO contractual requirements?

We are analyzing claims data and continuing to assess additional candidates for VBP agreements and have a VBP Committee with community partners to assess implementation. The VBP committee meets monthly. Trillium has expanded on primary care quality value-based agreements. We now have a VBP with a large Primary Care group in place, which will continue beyond the COVID-19 crisis. We are also evaluating opportunities with behavioral health and specialty groups.

OHA is seeking to provide advance payment to open card Affected Providers in 2020, subject to some extent of reconciliation that depends on policy decisions, logistics, and CMS guidance. How do you think your CCOs' provider engagement and payment strategies could integrate with OHA's open card efforts?

Trillium is interested in understanding efforts and could potentially provide input on methodologies for pre-payment agreements.

If your organization has a commercial line of business, are you making similar changes identified above in your commercial plans? What differences in strategies do you expect? What barriers to you anticipate?

Yes, although it is limited. Barriers include the size of our commercial plan (small).

What suggestions do you have to engage and encourage commercial health plans to play a part in providing financial support to providers affected by steep declines in FFS revenue?

Along with other commercial carriers, we agreed to support providing a grace period on premiums for two 30-day periods. However, there needs to be caution due to business closures, unpaid premiums, etc.; there are financial considerations on the commercial side that are not on the Medicaid side.

What other actions would you suggest OHA consider to address Affected Providers payment and financial strategies?

We would suggest OHA utilize the resources being provided by the federal government to the greatest extent possible. The state should ensure that, as these funds become available, they are quickly distributed to the providers in need. Additionally, OHA should consider suspending the quality withhold for the remainder of the year so that plans can direct payments to providers in need. The OHA can also request authority to further incentivize payments to underutilized providers, as allowed under 42 CFR 438.6(b) or the state can request authority to make directed payments to providers using 42 CFR 438.6(c) and request 1115 waiver in order to direct payments prior to CMS approval. The state may also consider implementing risk corridors to mitigate directed payment risks. During the April 10, 2020 call that CMS and Office of the Actuary (OACT) had with the states and state actuaries to discuss considerations for states regarding Managed Care Medicaid, CMS and OACT provided State Directed Payments as an option for States to provide cash flow to providers. OACT indicated that they would be working towards an expeditious process and streamlined, global process to help providers with the cash flow issues.

What financial or operational actions is your CCO taking to prepare for a potential increase in Medicaid enrollment? What areas present the greatest vulnerability to access to care and network adequacy as a result of increasing member enrollment? To the extent possible provide reference to geographic, technical, and provider type.

Trillium is part of a large Medicaid organization nation-wide and has resources to address local expansion and corresponding access, including primary care and behavioral health expansion. We are assessing staffing ratios for potential membership increase. We have contracted with providers such as naturopaths and traditional health workers to offset member services.

In the Lane County region, we have capacity in our network to take on additional membership. We are in the process of seeking approval to expand into the Tri-County region with a network that adds capacity to take on

existing and new OHP members. Our network will expand access for members beyond that of the existing options in the area. We are prepared to take on a significant number of members in this region by July 1, 2020.

Some of the most vulnerable areas around access to primary care is that not all providers take Medicaid patients, and if people are moving from commercial plans to Medicaid, there may be access to care issues. Rural areas typically face the greatest disparities to accessing care, and recognize that funds are needed for network expansion.

What requests do you have for OHA regarding modeling of potential enrollment and budgetary impacts resulting from COVID-19?

We understand that the potential increase in enrollment coupled with the enrollment stipulations required by the FMAP increase, could result in eligibility and enrollment errors. We are happy to work with the OHA to develop a reconciliation process to mitigate the potential for recoupment and ensure we continue to work together to be good stewards of taxpayer dollars.

Please summarize your strategies for Affected Providers to 1-2 paragraph that could be broadcasted to the public and help providers understand how to engage with your CCO. (This answer will be added to a summary by CCO and posted to a website quickly)

While we understand that CCOs have had a decrease in claims due to social distancing, we expect a bolus of claims to come in once the crisis is over. Further, cost of testing could increase tremendously as State of Oregon opens up post-crisis. However, funding during the crisis will be available to providers who are currently in need of COVID-related assistance. At this time, Trillium is taking provider requests for COVID-related assistance. Trillium's management team will meet to review each request to expedite approvals. Once a request is approved by the management team, it will be submitted to the Trillium Board for final approval. Please send requests to PublicComments@TrilliumCHP.com.

We also have engaged in several activities aside from compensation models to help providers, including in-kind PPE donation, advocacy for safety net providers, partnerships with FQHCs, investments in SDOH, and temporary housing. See list below.

- Trillium has provided an OBGYN office with 105 blood pressure cuffs so pregnant moms can check blood pressure at home and not have to go into the office.
- Trillium provided 5,000 N95 masks, 96 face shields and 150 gowns to Lane County Public health for distribution county-wide via our corporate procurement team.
- Trillium provided 10,000 N95 masks to Lower Umpqua Hospital via our corporate procurement team.
- Trillium provided \$1,200 to Carry It Forward for tents, supplies and assistance to individuals who are homeless.
- We have had requests to fund hotel stays for members who need to quarantine post-discharge or prior to residential treatment and are working through flex funds on a case-by-case basis.

COVID-19 Medicaid Financial Strategies

4/20/2020 – Request to CCOs

- Trillium is providing \$5,000 to FOOD for Lane County Virtual Fill the Truck Food Drive. As of Monday, 4/20 Food for Lane County has raised \$11,038 and has nearly met its goal of \$15,000. Trillium's match of the first \$5,000 was instrumental in helping the organization get this far.
- 80% of each month's quality withhold will be paid out to providers based on performance and 20% particularly for providers in need due to COVID. Each case will be reviewed by leadership and funds will be approved by the board.
- We have a program to community partners about our new COVID-19 support program to assist providers with grant writing and small business loan applications.
- There is also Centene program to fund community SDOH needs, particularly food, improving connectivity and providing key health and educational products to those in need.
- Trillium through Centene COVID-19 Community Relief Fund will be donating \$17,500 in the form of 500 \$35 Walmart gift cards to organizations that provide assistance to individuals who do not have homes.
- Trillium through Centene COVID-19 Community Relief Fund will be donating \$40,000 to organizations that provide food for people in need, such as Food for Lane County and Project Blessing in Reedsport.