



Health Center Policy and Operations Committee

April 17, 2008

9:30 - 11:30 am

I. Attendance:

Jose Aponte, Unity Health Care
Sharon Baskerville, DCPCA
Don Blanchon, Whitman-Walker Clinic
Libbie Buchele, Unity Health Care
Enrique Cobham, La Clinica del Pueblo
Rhonique Harris, Children's Health Project of DC
Basil Henderson, Family Health and Birth Center
Pat Hawkins, Whitman-Walker Clinic
Katrina Jones, Carl Vogel Center
Kate Kellenberg, DCPCA
Ruth Lubic, Family Health and Birth Center
Karen Nathan, Bread for the City
Hope Rhodes, Children's National Medical Center
Alvaro Simmons, Mary's Center for Maternal and Child Care
Mariama Samba-Koroma, Community of Hope
Flora Terrell Hamilton, Family and Medical Counseling Service
Jane Thompson, DCPCA
Eric Vicks, DCPCA

Guests:

Dave Chandra (EOM)
Jennifer Dziedzic Leonard, The George Washington University
John McCarthy (DOH/MAA)

II. Agenda

- Welcome and Introductions
- Brief Update on Medicaid/Alliance MCO Transition
- Discussion: General Introduction to Negotiating Strategies

III. Brief Update on Medicaid/Alliance MCO Transition

Jennifer Leonard, John McCarthy and Dave Chandra presented the following update:

Background:

Leaving the DC MCO market: AMERIGROUP

Current MCO contractors: DC Chartered Health Plan, Health Right, Unison

Enrollment Broker, Houston Associates, Inc. (HAI) will send letters about the enrollment process the week of April 20th to all Medicaid and Alliance members.

May 1 is the contract effective date for all current contractors.

All current enrollees including homeless patients must be enrolled, or elect to re-enroll, or will be subject to auto-enrollment.

EFFECTIVE DATES SHOWN BELOW WERE EFFECTIVE AS OF THURSDAY, APRIL 17, 2008, AND REMAIN SUBJECT TO CHANGE.

AMERIGROUP

- AMERIGROUP will leave the DC market, with an expected end date of June 30th. AMERIGROUP will continue to do business in other markets and will honor claims for services incurred by current AMERIGROUP members in DC through that date. AMERIGROUP members will need to choose a new MCO (Chartered Health Plan, Health Right, or Unison -- the new MCO entering the DC market).
- All AMERIGROUP members must select a new MCO by June 2nd. Those patients who have not selected a new MCO by June 2nd will be auto assigned to one of the three remaining contractors.

Chartered Health Plan, Health Right

- Members of Chartered Health Plan and Health Right will have the option to change health care plans if they elected to do so and may select the new plan, Unison, as their MCO. If Chartered and Health Right members do not choose a new plan, they will remain with their current plan.

Unison

- Unison will enter the market on May 1st when their new contract begins.

Every attempt will be made to keep families together in receiving care through the same MCO.

Medicaid

- Medicaid patients will have from the time letters are mailed by HAI the week of April 20th until June 2nd to select a new plan. If a Medicaid patient belongs to Chartered or Health Right and does not select a new plan, he/she will remain in their current plan.
- If a Medicaid patient is an AMERIGROUP patient and s/he does not select a new plan by June 2nd, they will be auto-assigned to a new plan effective July 1st.

Alliance

- Alliance patients will have from the time letters are mailed by HAI the week of April 20th until July 1st to select a new MCO if a patient wants to change his/her MCO. If an Alliance patient does not select an MCO by June 30th, s/he will be auto-assigned to an MCO effective August 1st.

It is expected, eventually, that each of the three remaining MCOs (Chartered, Health Right, Unison) will hold approximately one-third of the total market share apiece.

In order for your patients to keep their medical home at your health center, with your physicians, they must choose one of the plans with whom you have a contract.

What You Can Do To Ensure Quality Care For Your Patients:

- Negotiate contracts with MCOs.
- Inform all of your patients of the current MCOs with whom you have contracts.
- Assist your patients in filling out their required enrollment forms.
- Direct your patients to community forums. (We will send you a list of events as they are scheduled.)
- Each CHC must designate one person at each site to be the single point of contact for broker HAI. **This person will have to fill out additional HIPAA forms and be required to track the number of applications being sent to HAI.**
- Please forward the HAI designee's contact information to Eric Vicks at evicks@dcpc.org
- DCPCA will provide you with an advance copy of the letters to be mailed to Medicaid and Alliance members and additional materials as these are made available. You may receive ongoing updates about upcoming activities and any changes that occur throughout this process. DCPCA is committed to alerting you to the latest information and actions you need to take to provide the best possible care and service to your patients.

IV. Talking Points, General Introduction to Negotiating Strategies

For general talking points developed by Don Blanchon, Whitman-Walker Clinic, please [click through this link](#).