

2019 Colorado Access Monitoring Review Plan

Presented by:

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December 3, 2020

Our Mission

Improving health care access and outcomes for the **people** we serve while demonstrating sound stewardship of financial **resources**

Federal Access Requirements

- *Methods for Assuring Access to Covered Medicaid Services* (80 FR 67575)
 - Requires states to consider whether access to health care services will be impacted when provider fees are lowered or rebalanced (exceptions apply).
 - Also requires states to draft an Access Monitoring Review Plan (AMRP) every three years to evaluate access broadly.

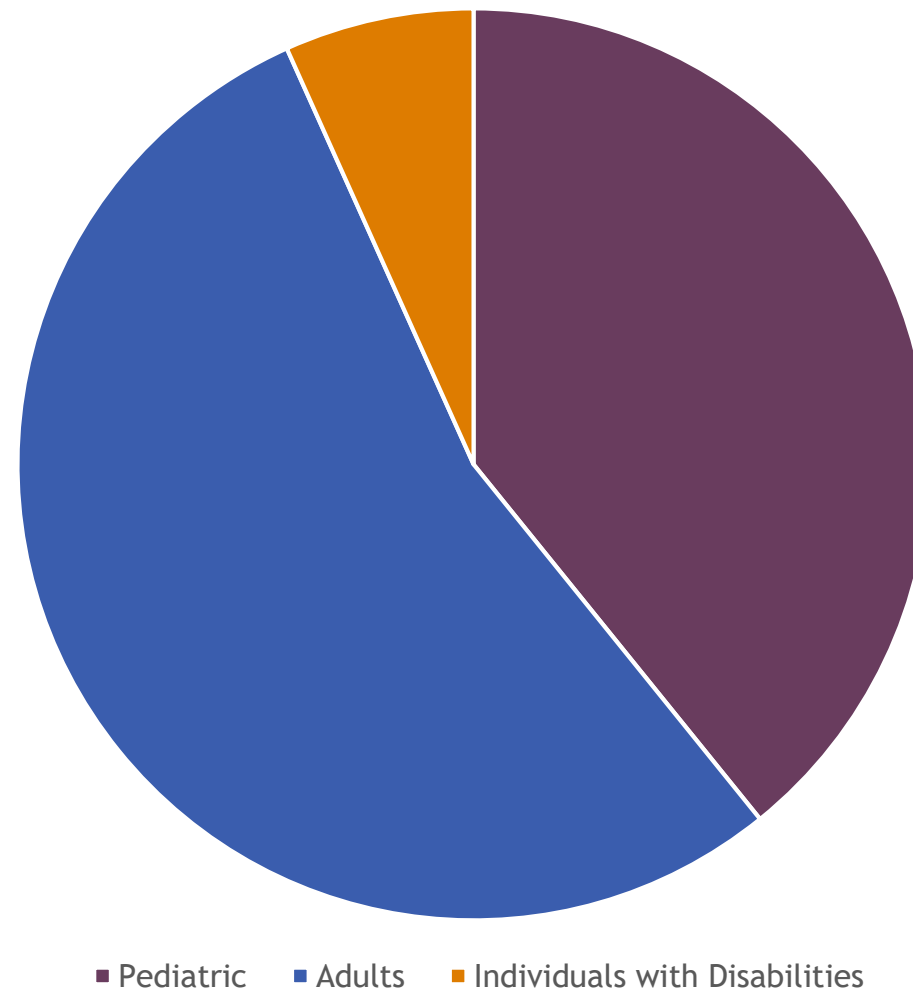
Access Monitoring Review Plan

- The AMRP reports on access to five broad categories of services:
 - primary care
 - physician specialists
 - fee-for-service behavioral health
 - pre- and post-natal obstetrics (including labor and delivery)
 - home health services

2019 AMRP Findings

Medicaid in Colorado

- Health First Colorado (Colorado's Medicaid Program) provides coverage to more than 23.4% of the State's population



Primary Care

Primary Care

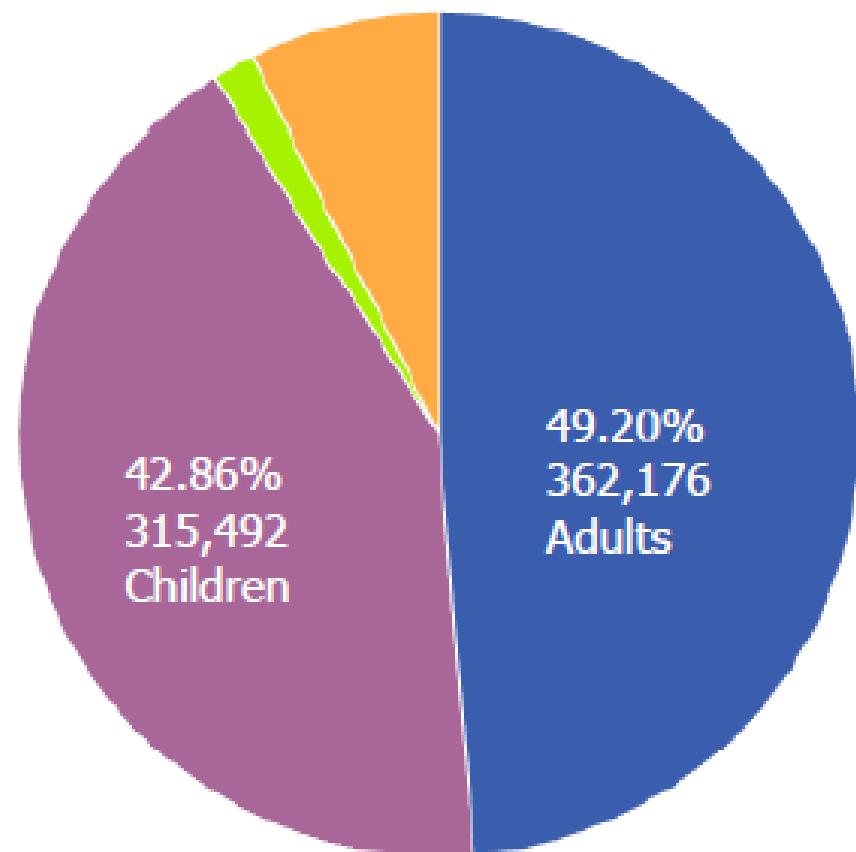


Figure 9 – Utilizers by Demographic Groups

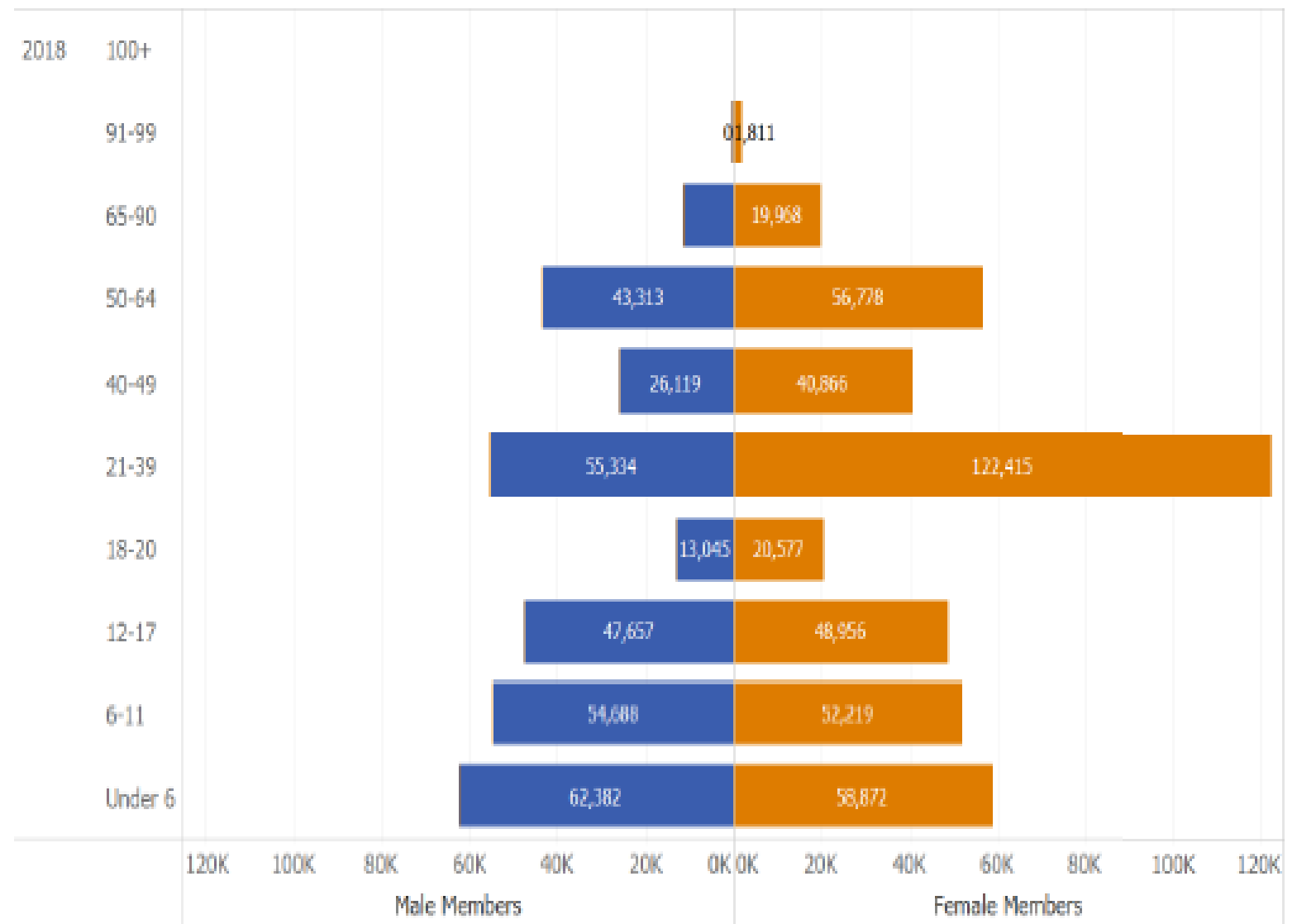
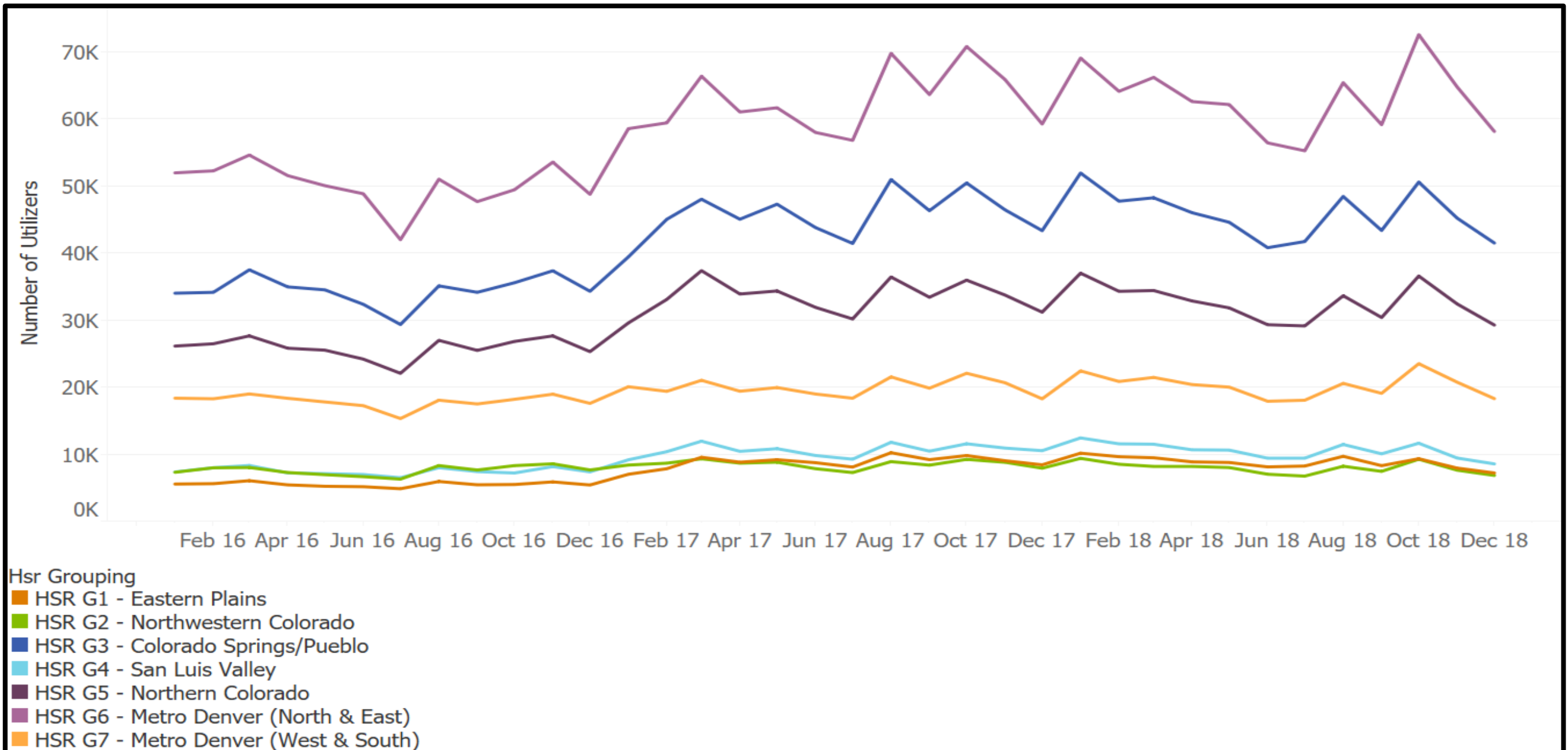


Figure 10 – Utilizers by Gender and Age

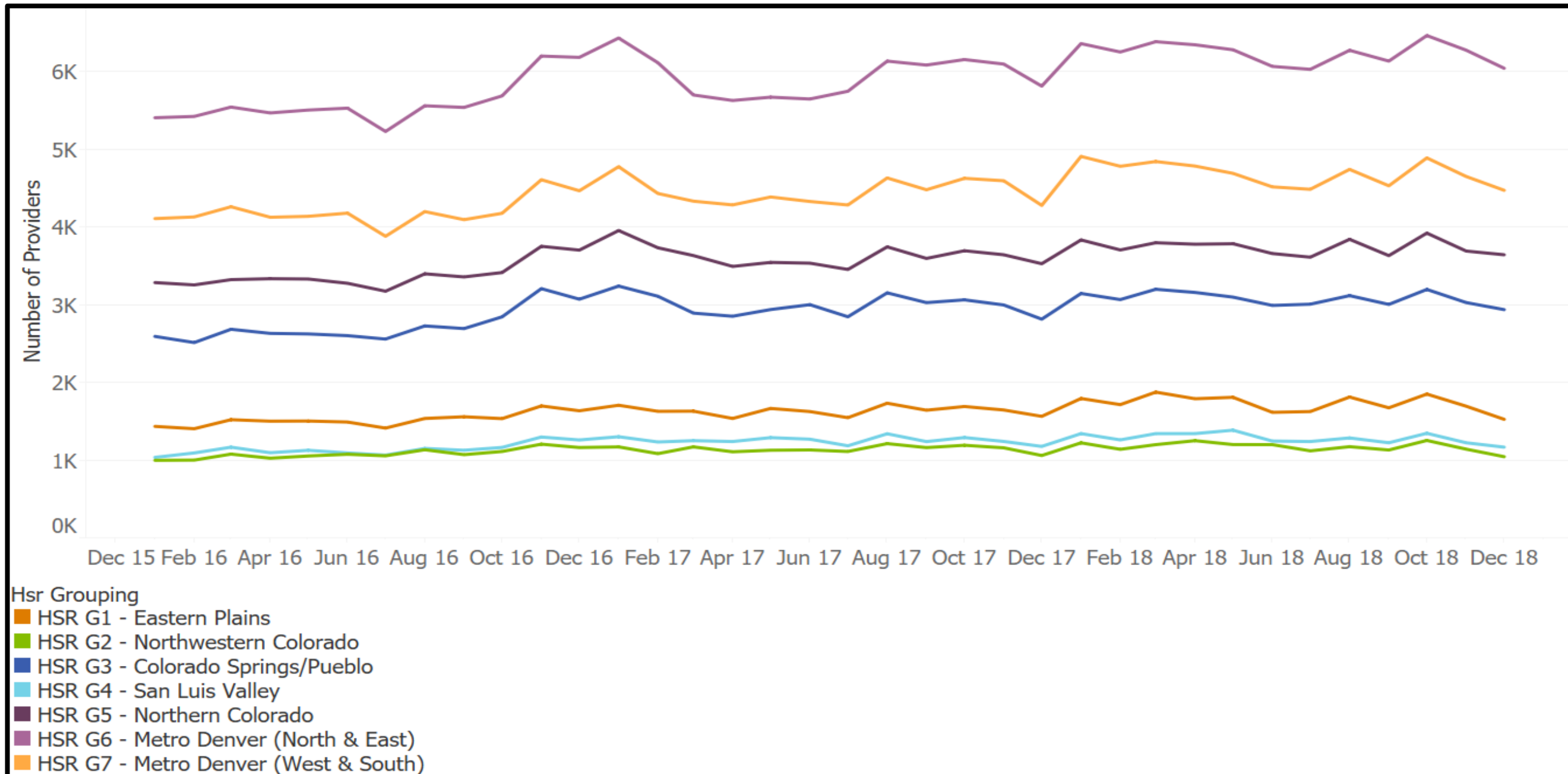
Utilizers

Primary Care



Utilizers

Primary Care



Providers

Primary Care

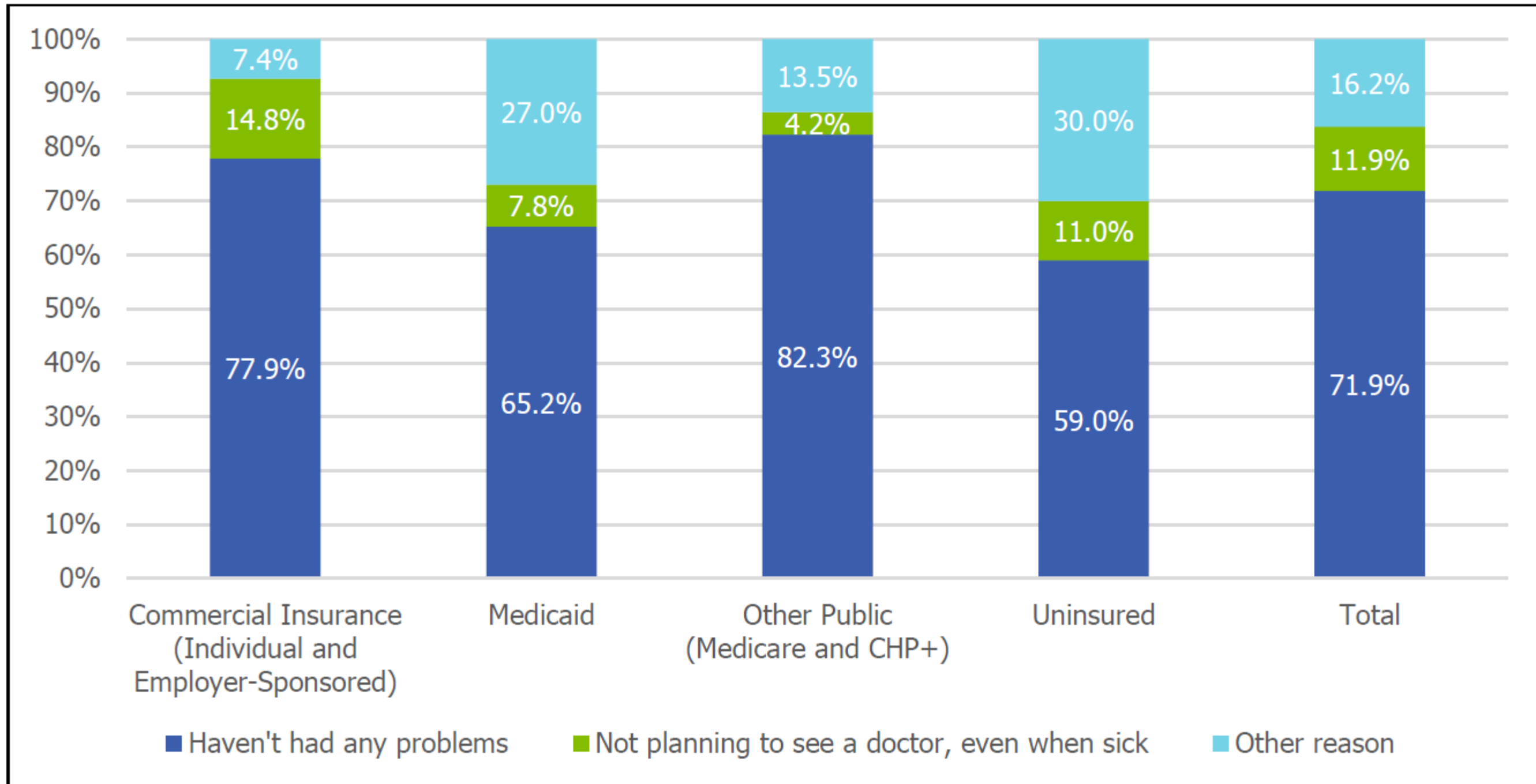
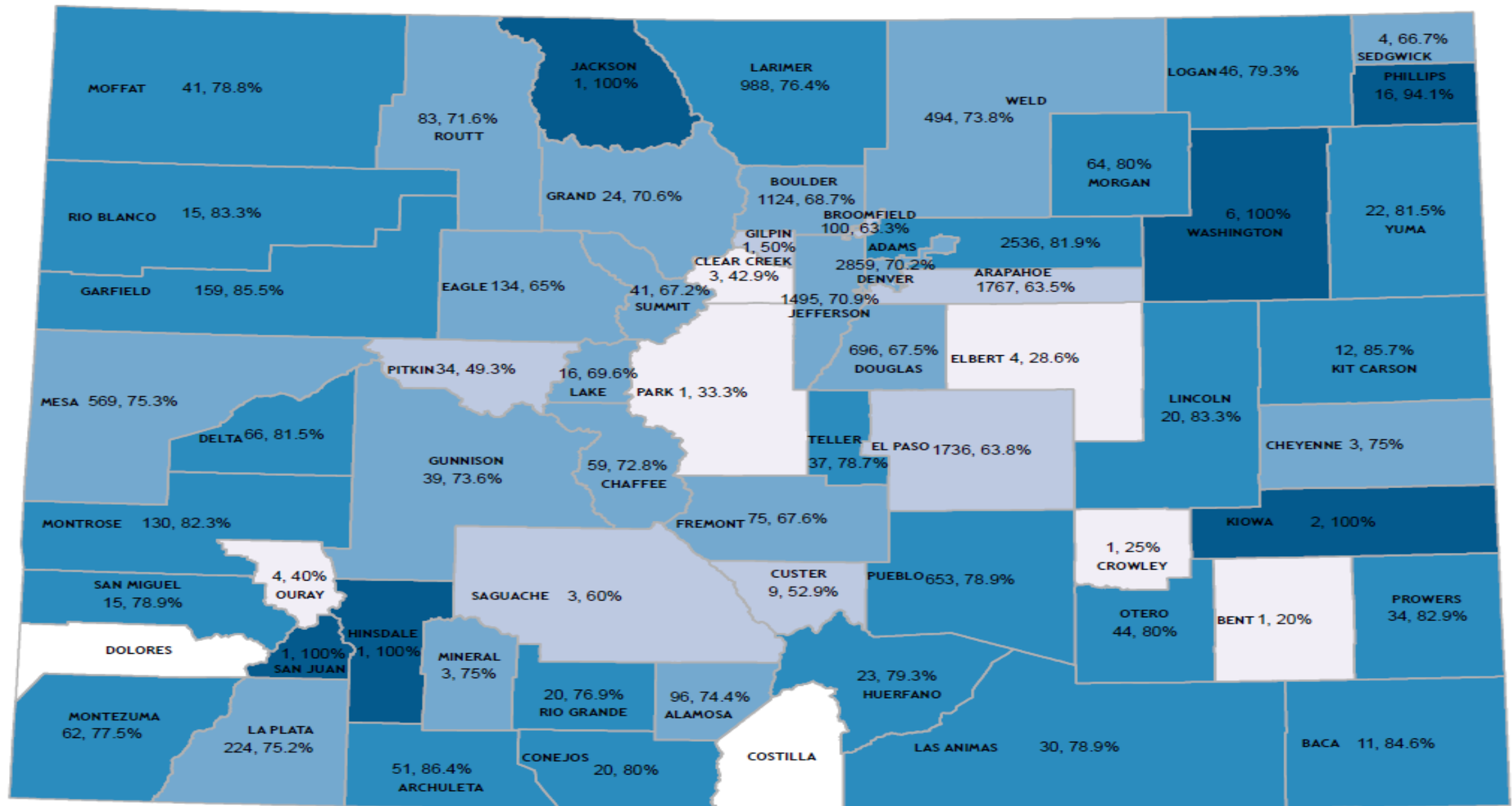


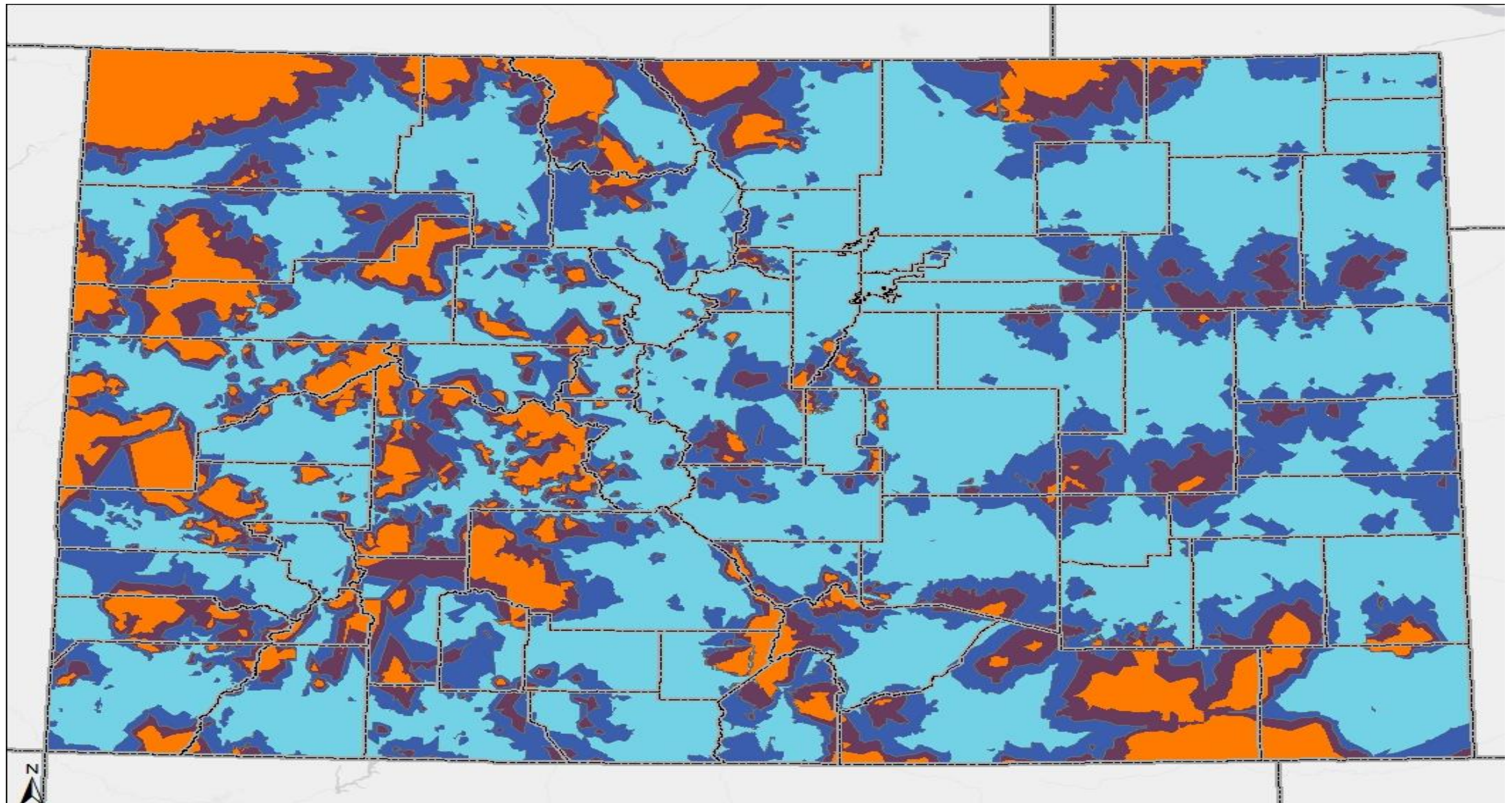
Figure 17 – Reasons for not Having a Usual Source of Care, 2017, by Insurance Type

Primary Care



Providers

Primary Care



Drive Time

Rate Comparison

Reimbursement Type	Aggregate Percentage Primary Care Medicaid Rate Comparison
Medicare	78.70%
Arizona Medicaid	98.24%
California Medicaid	147.14%
Wyoming Medicaid	81.92%

Stakeholder Feedback

- Wait times in certain locations are longer than the wait times reported in the CHAS.
- The Department should further explore the reasons behind why members may not be seeking preventive care.
- Future analysis should be done on the use of emergency rooms for non-emergent reasons.

Analysis

The Department's analysis suggests that Primary Care Services are sufficient to meet the needs of Health First Colorado members.

The Department plans to undertake additional access analysis on the following:

- Increased self-reported usage of the emergency room for non-emergent reasons in Northwestern and Northern Colorado
- Access to primary care services in the San Luis Valley region, including utilization and barriers to care.



Questions?

Specialty Care

Specialty Care

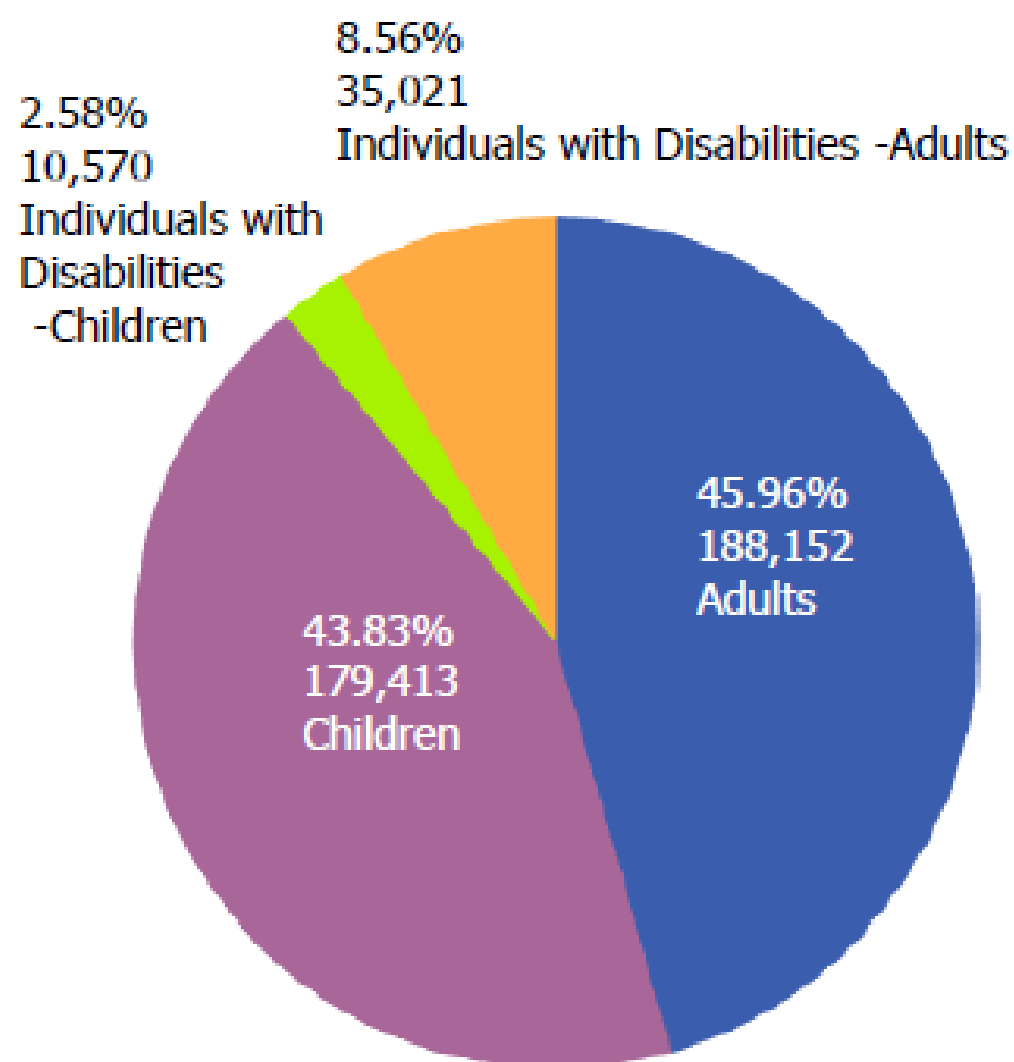


Figure 27 – Physician Specialist Utilizers by Demographic Groups

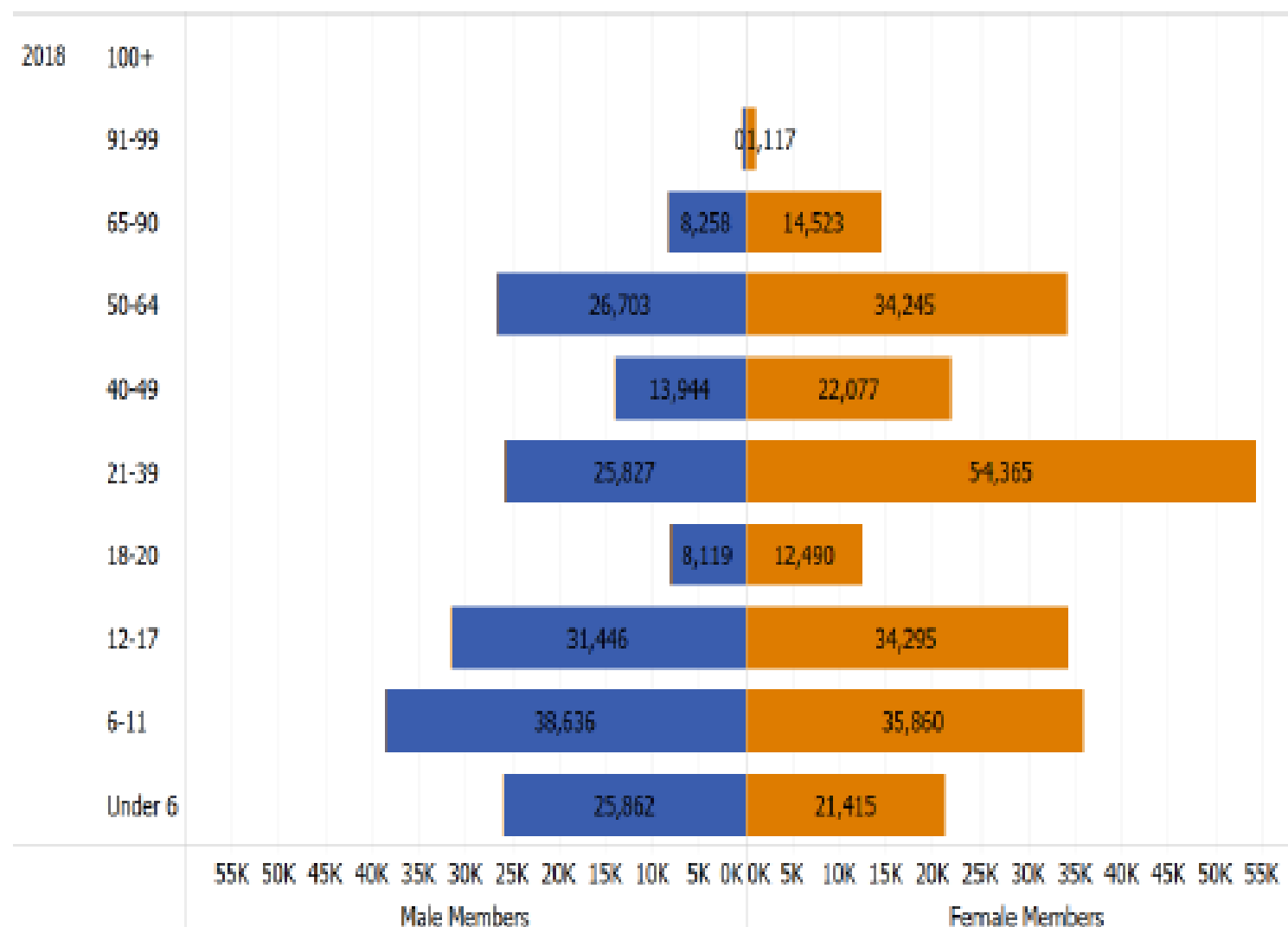
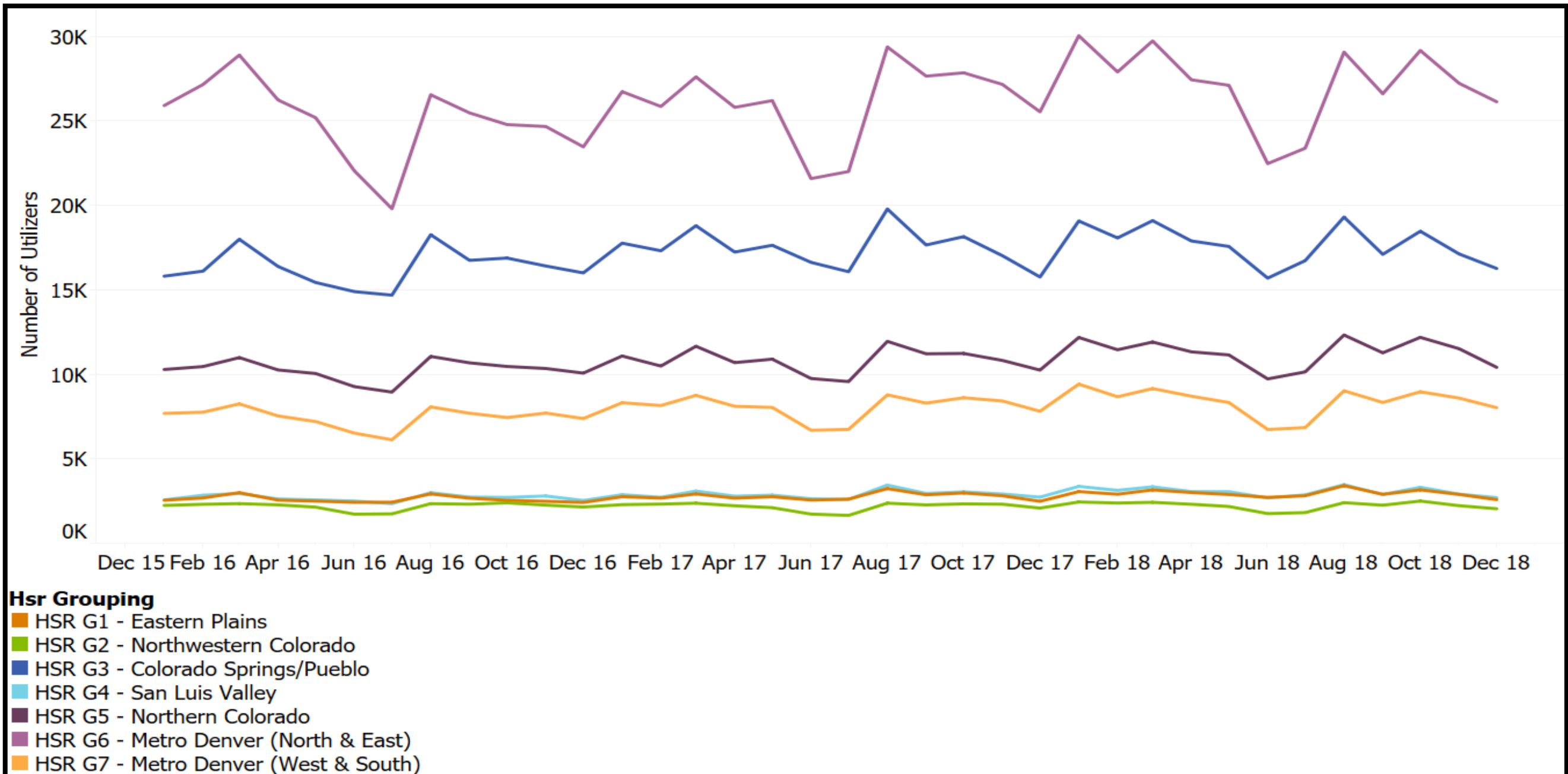


Figure 28 – Physician Specialist Utilizers by Gender and Age

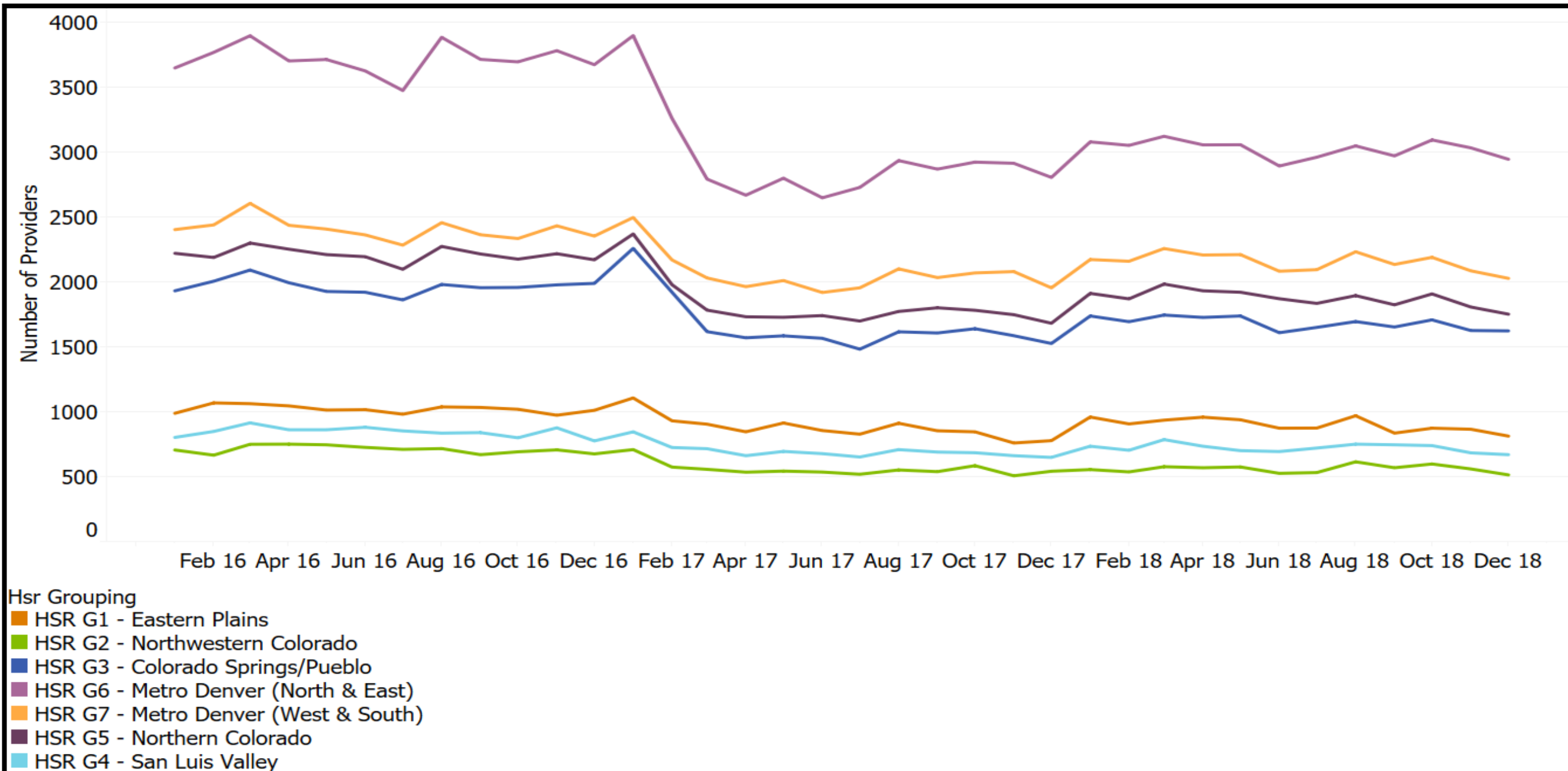
Utilizers

Specialty Care



Utilizers

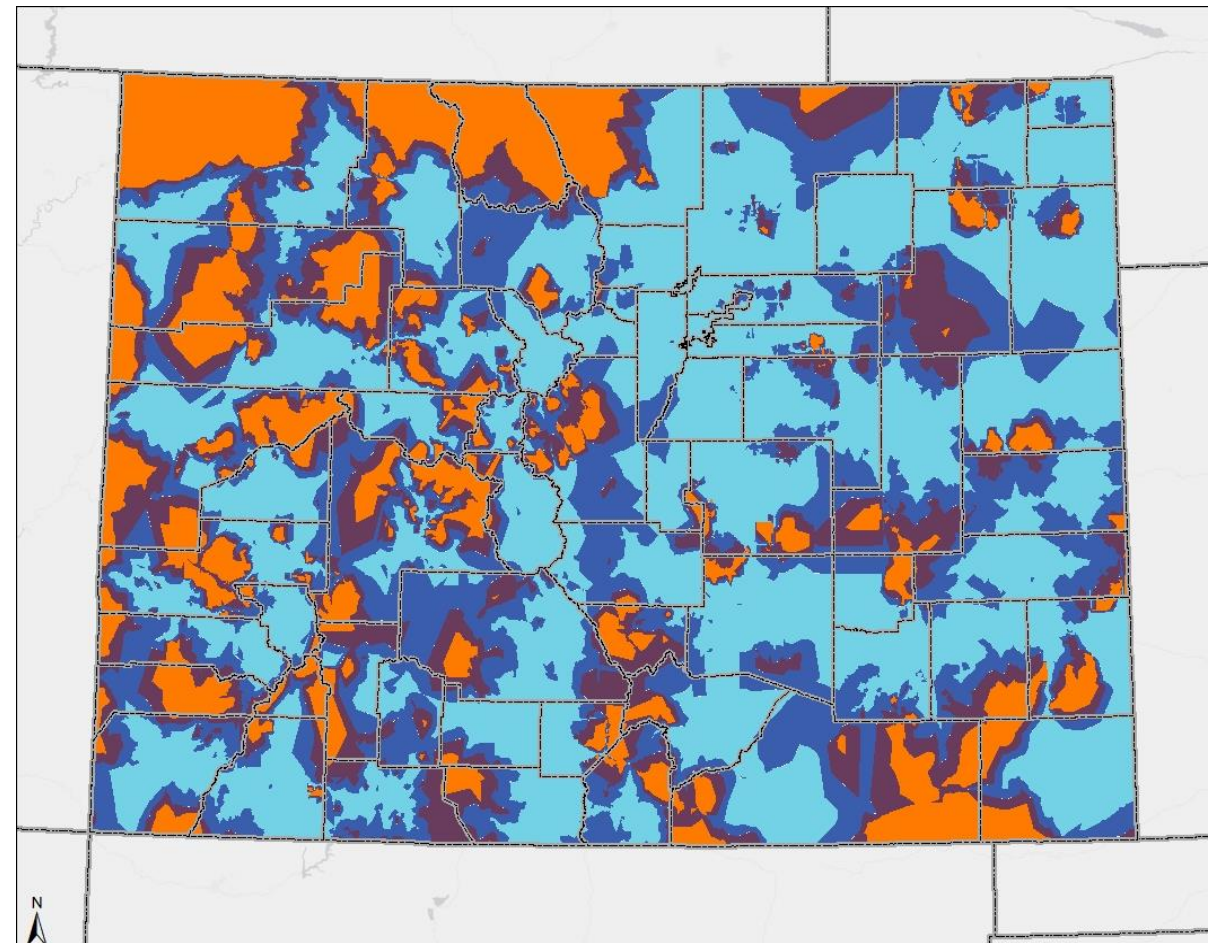
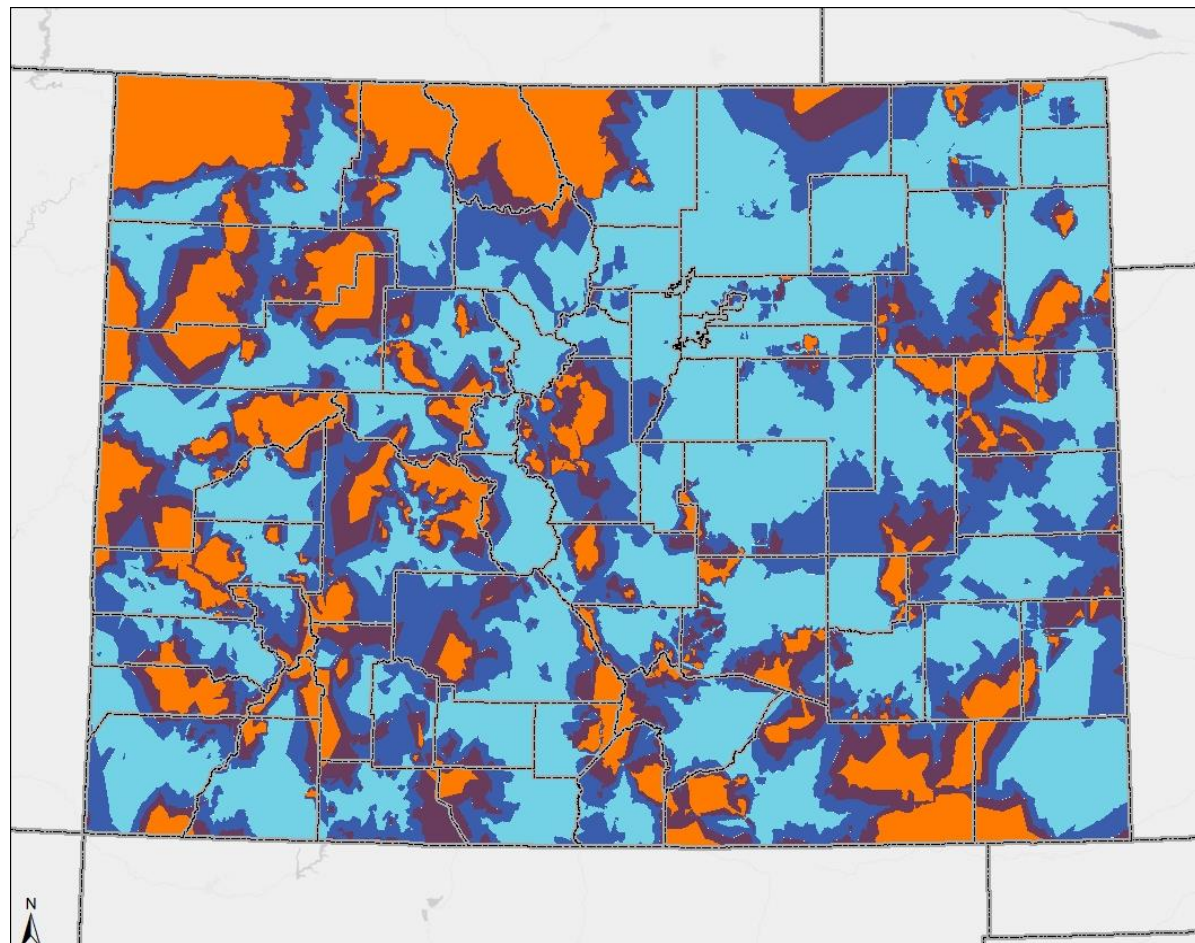
Specialty Care



Providers

Access Monitoring Review Plan

Specialty Care



Drive Time

Rate Comparison

Reimbursement Type	Aggregate Percentage Specialty Care Medicaid Rate Comparison
Medicare	64.05%
Arizona Medicaid	73.12%
California Medicaid	107.15%
Wyoming Medicaid	67.69%

Stakeholder Feedback

- Need to explore reasons beyond rates for why providers may not accept Medicaid patients
- Issues with referrals to specialists - including referrals not being made, not followed up or taking a long time to occur
- Lack of utilization of telemedicine and e-Health should be addressed

Analysis

The Department's analysis suggests that Physician Specialist Services are sufficient to meet the needs of Health First Colorado members

The Department plans to undertake additional access analysis on the following:

- Access to physician specialist services in the San Luis Valley region, including utilization and barriers to care.
- Investigate ways in which it can track and measure unmet referrals for physician specialist services.



Questions?

Behavioral Health (FFS)

Behavioral Health (FFS)

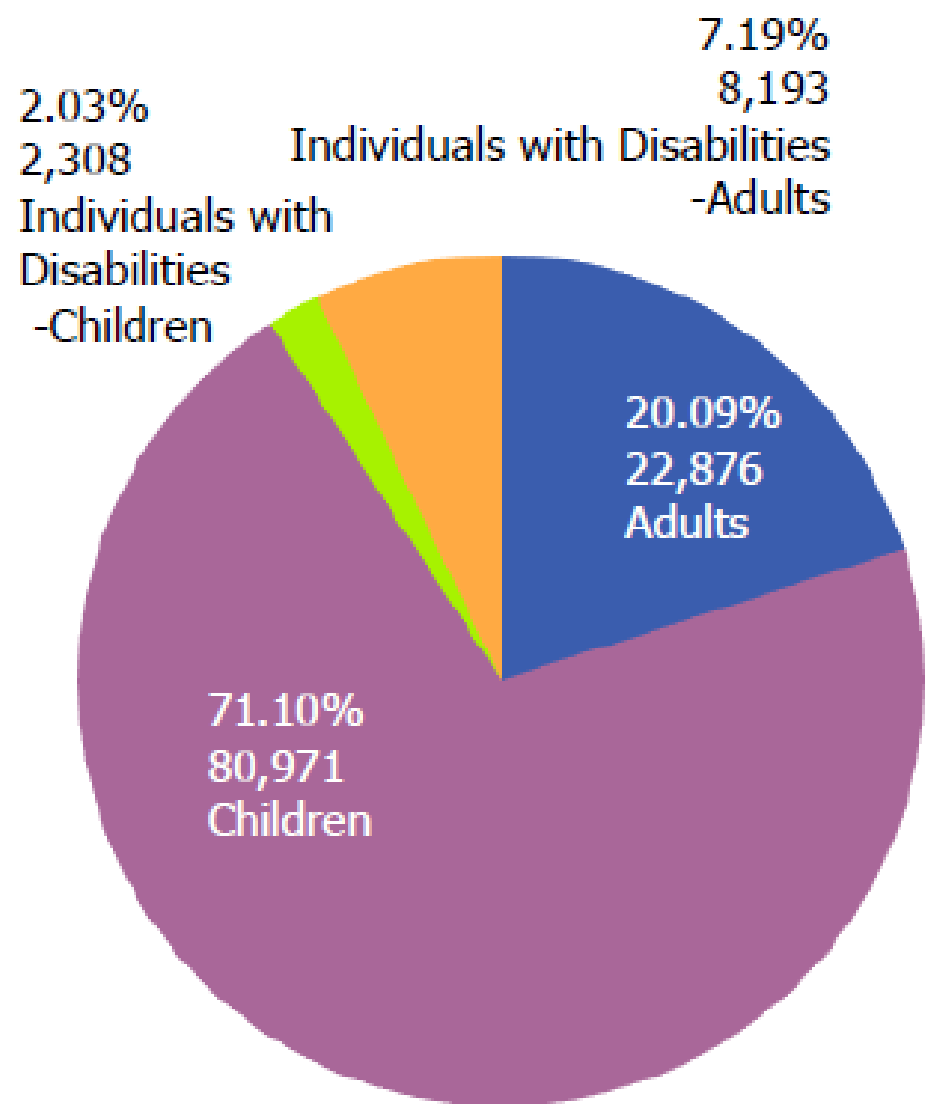


Figure 37 – Behavioral Health Utilizers by demographic groups

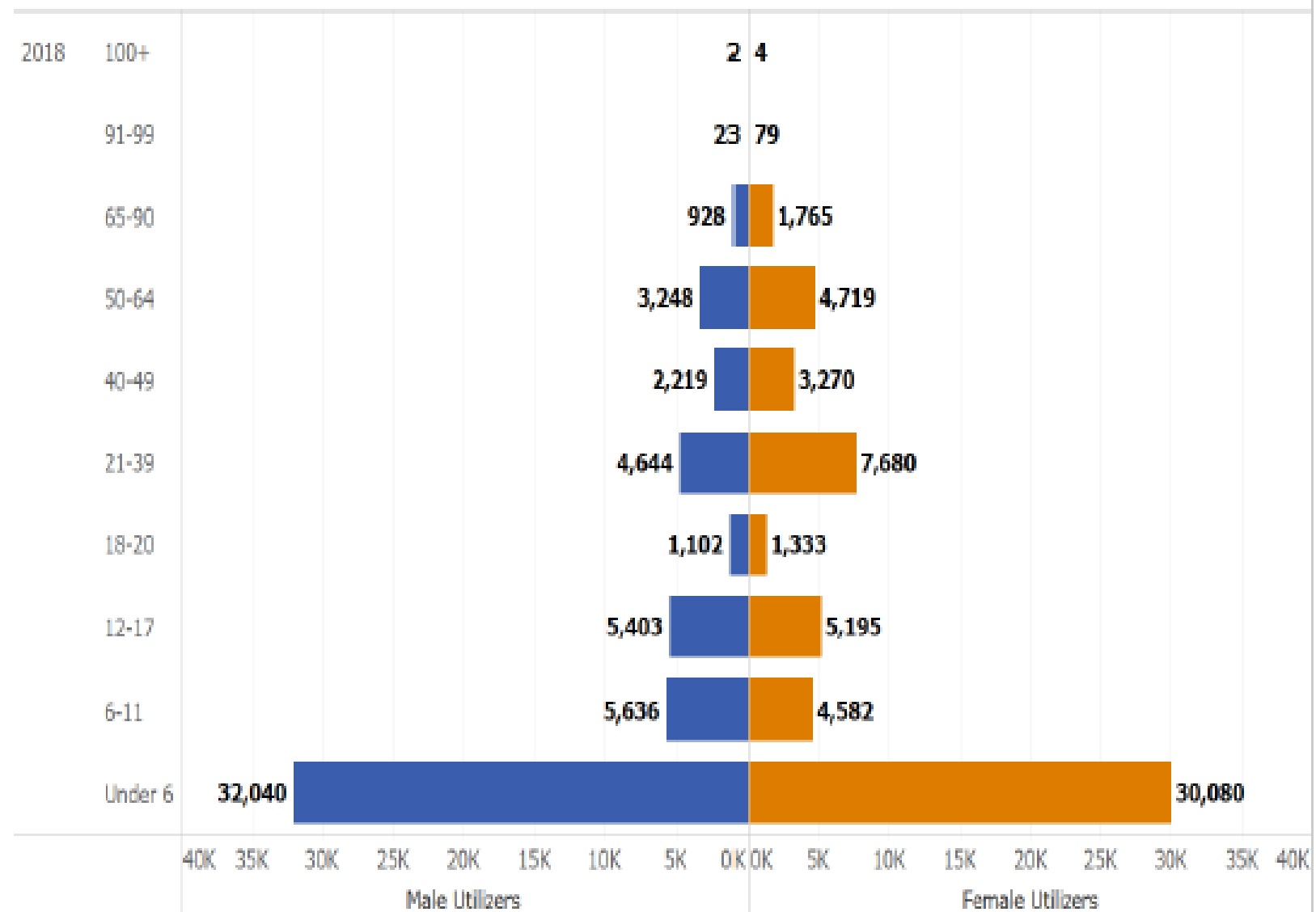
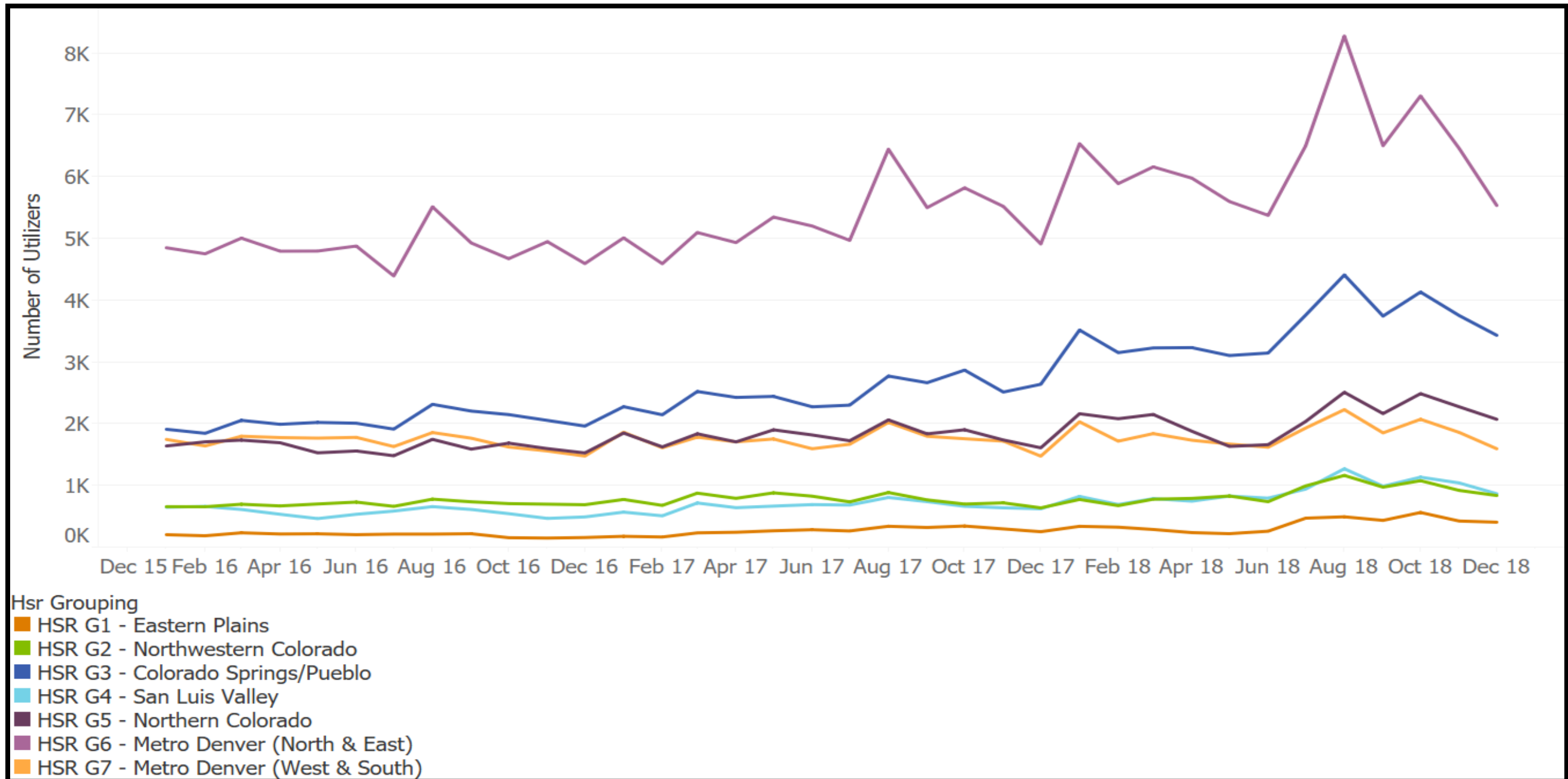


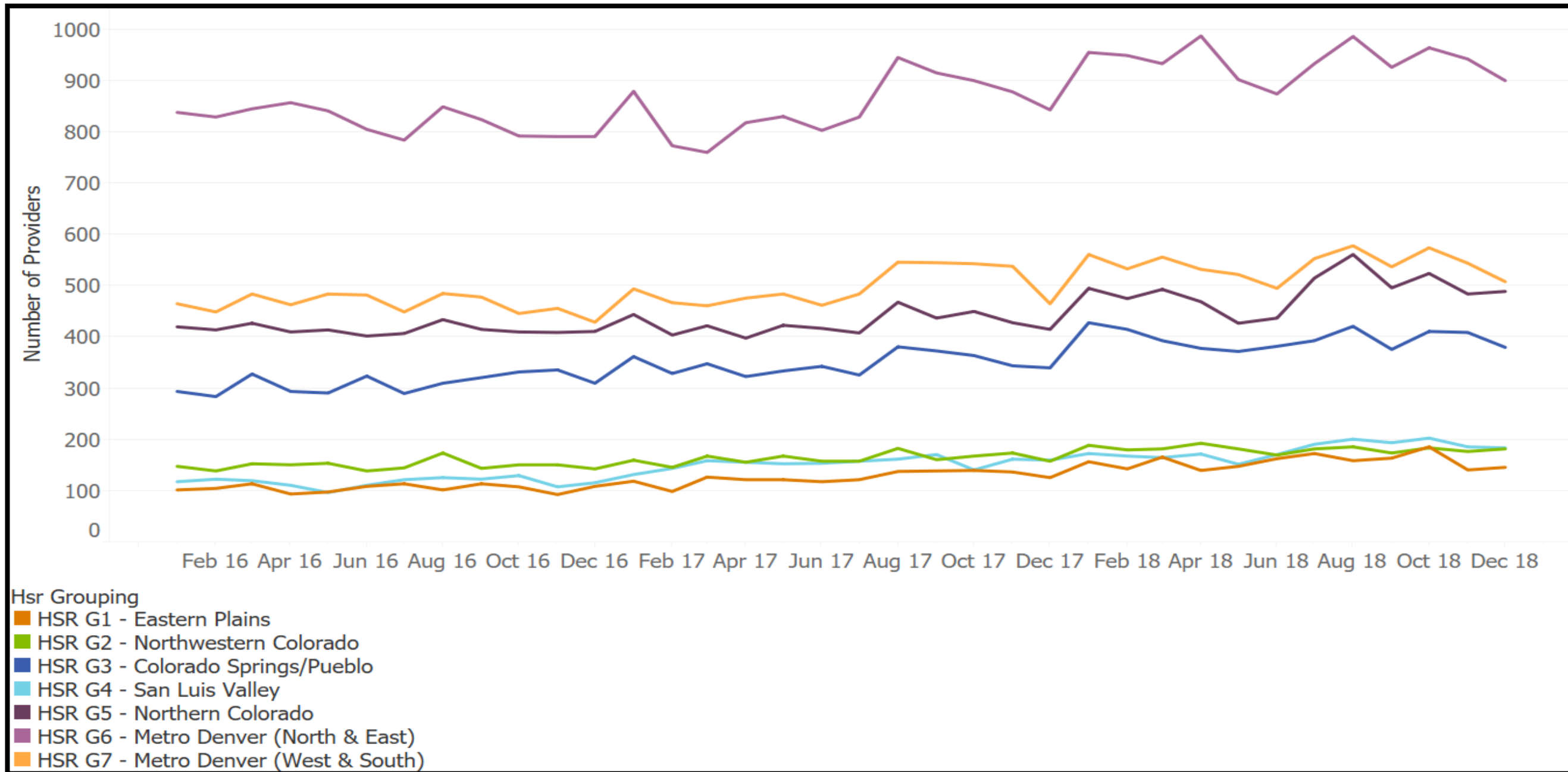
Figure 38 – Behavioral Health Utilizers by gender and age

Behavioral Health (FFS)



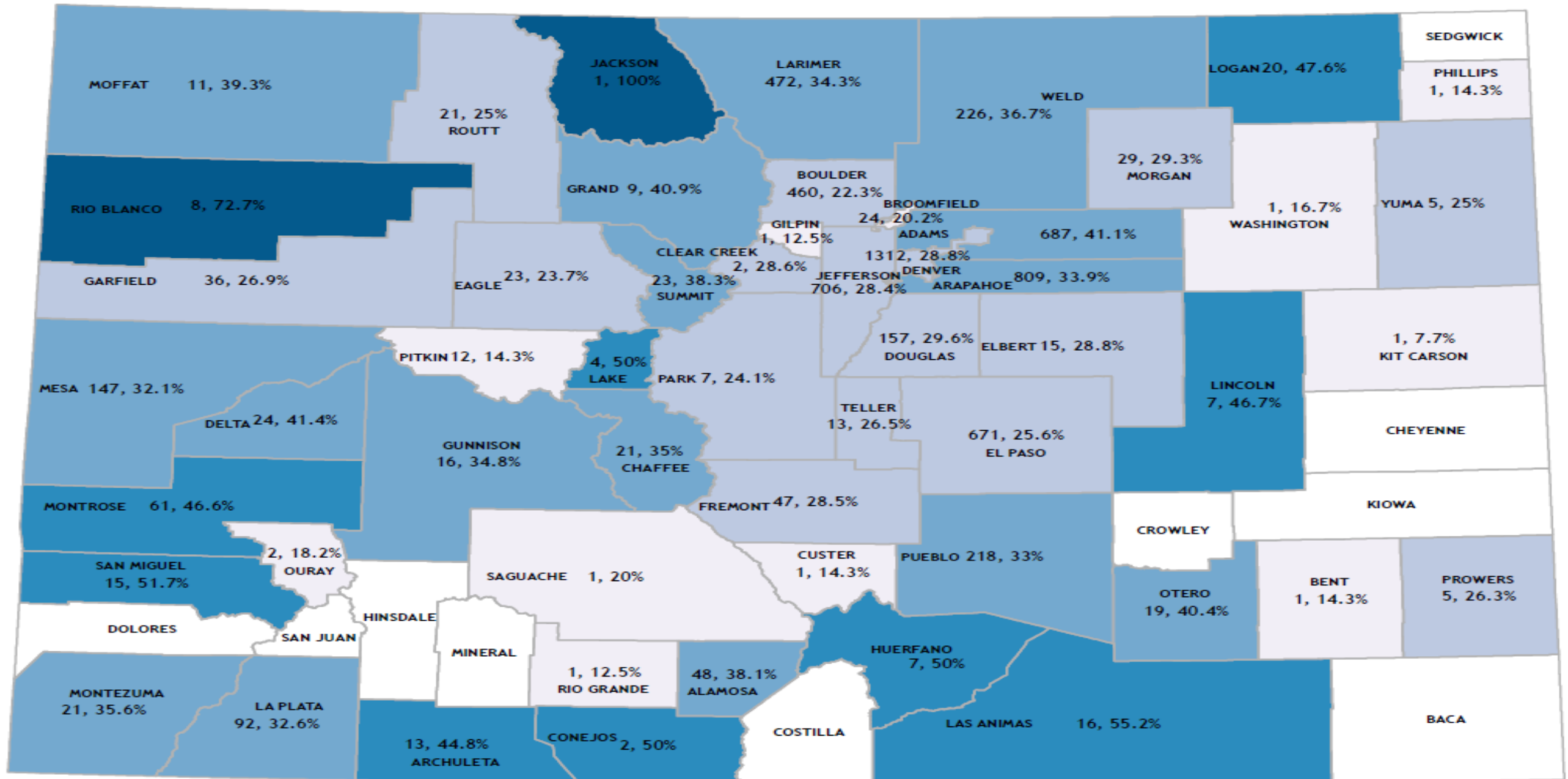
Utilizers

Behavioral Health (FFS)



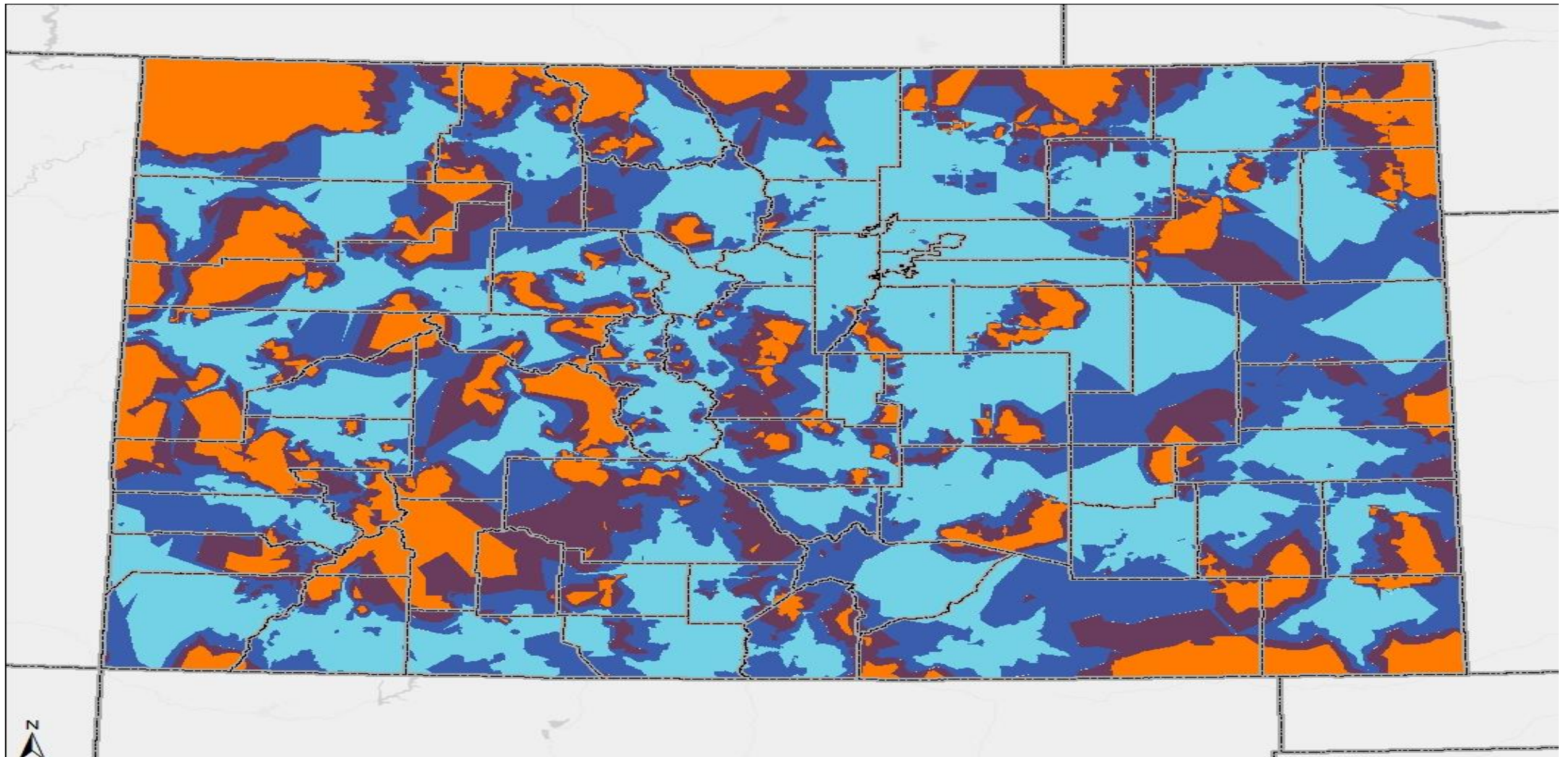
Providers

Behavioral Health FFS



Providers

Behavioral Health FFS



Drive Time

Rate Comparison

Reimbursement Type	Aggregate Percentage FFS Behavioral Health Medicaid Rate Comparison
Medicare	60.10%
Arizona Medicaid	70.70%
California Medicaid	75.93%
Wyoming Medicaid	55.90%

Stakeholder Feedback

- Concerns with inpatient mental health services and a lack of beds in the state
- Community mental health centers have longer wait times for both initial and follow-up appointments.
- Continuity of care is a concern when members have to see different providers at every appointment.

Analysis

The Department's analysis suggests that Behavioral Health (FFS) Services are sufficient to meet the needs of Health First Colorado members

The Department plans to undertake additional access analysis on the following:

- ongoing analysis of the impact of the July 2018 policy change (allowing the first six behavioral health services to be billed fee-for-service), which increased fee-for-service behavioral health utilization, to ensure that members are able to appropriately access behavioral health services in a timely manner.



Questions?

Pre- and Post-Natal Obstetrics

Pre- and Post- Natal Obstetrics

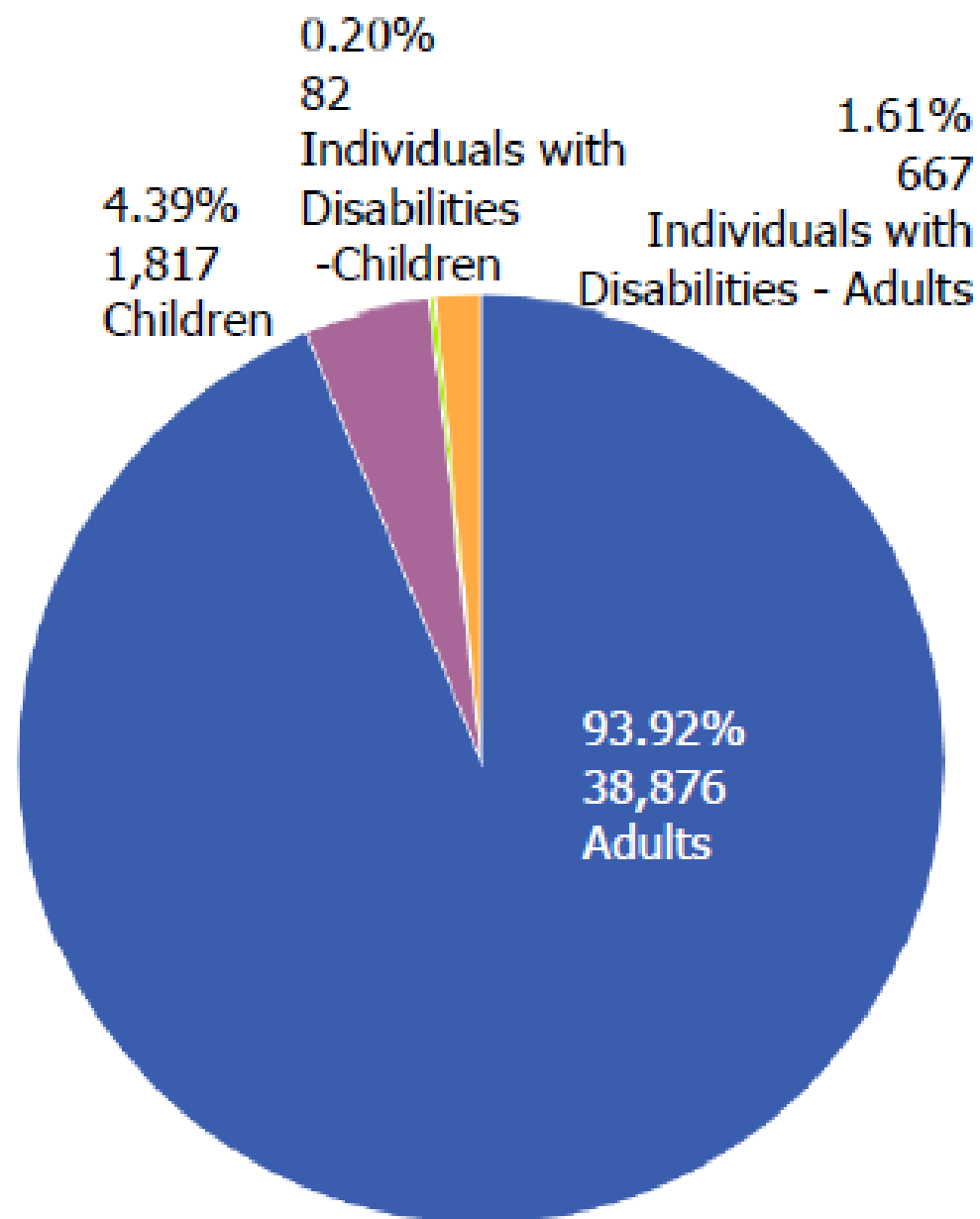


Figure 46 – PPNO Services Utilizers by Demographic Groups

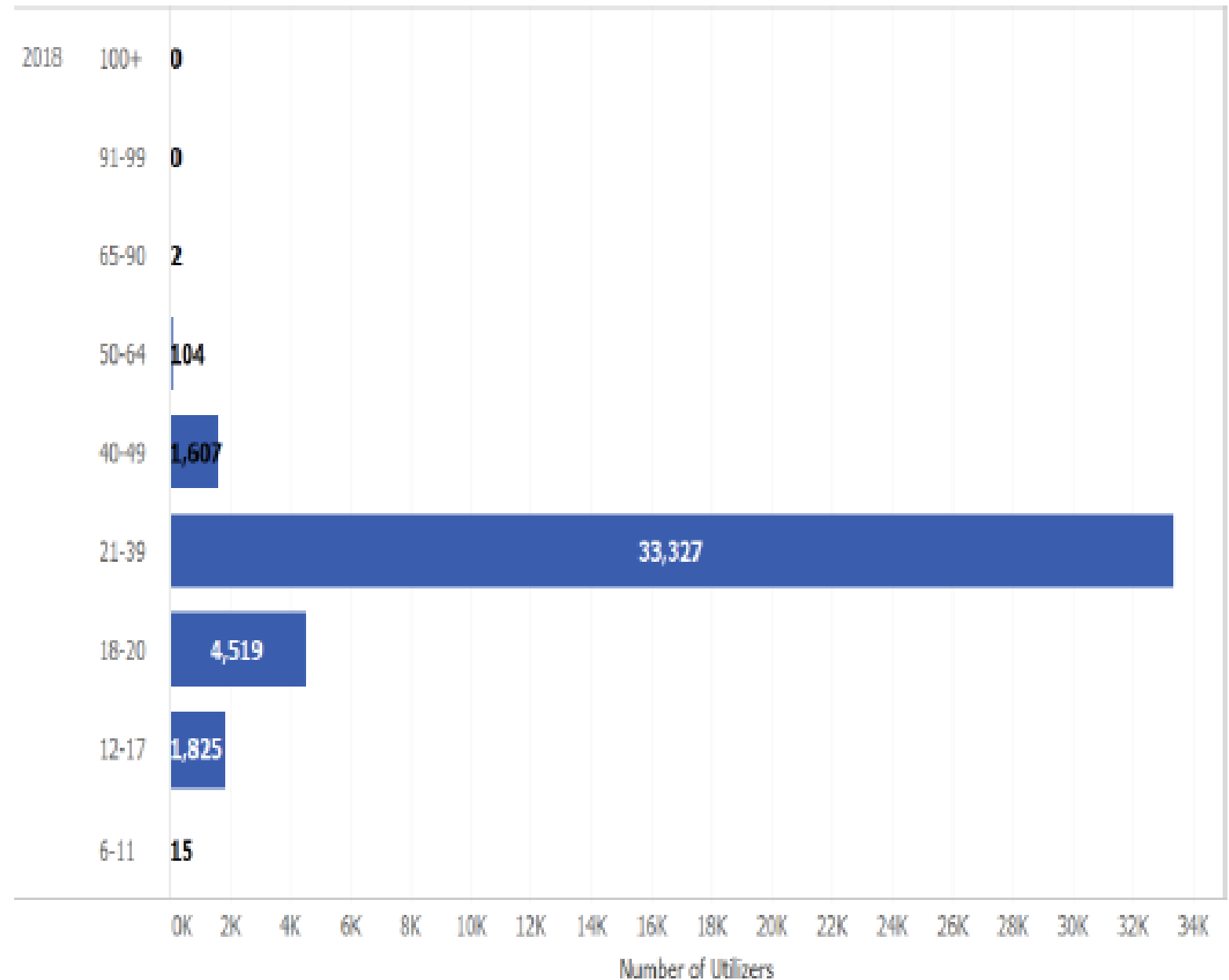
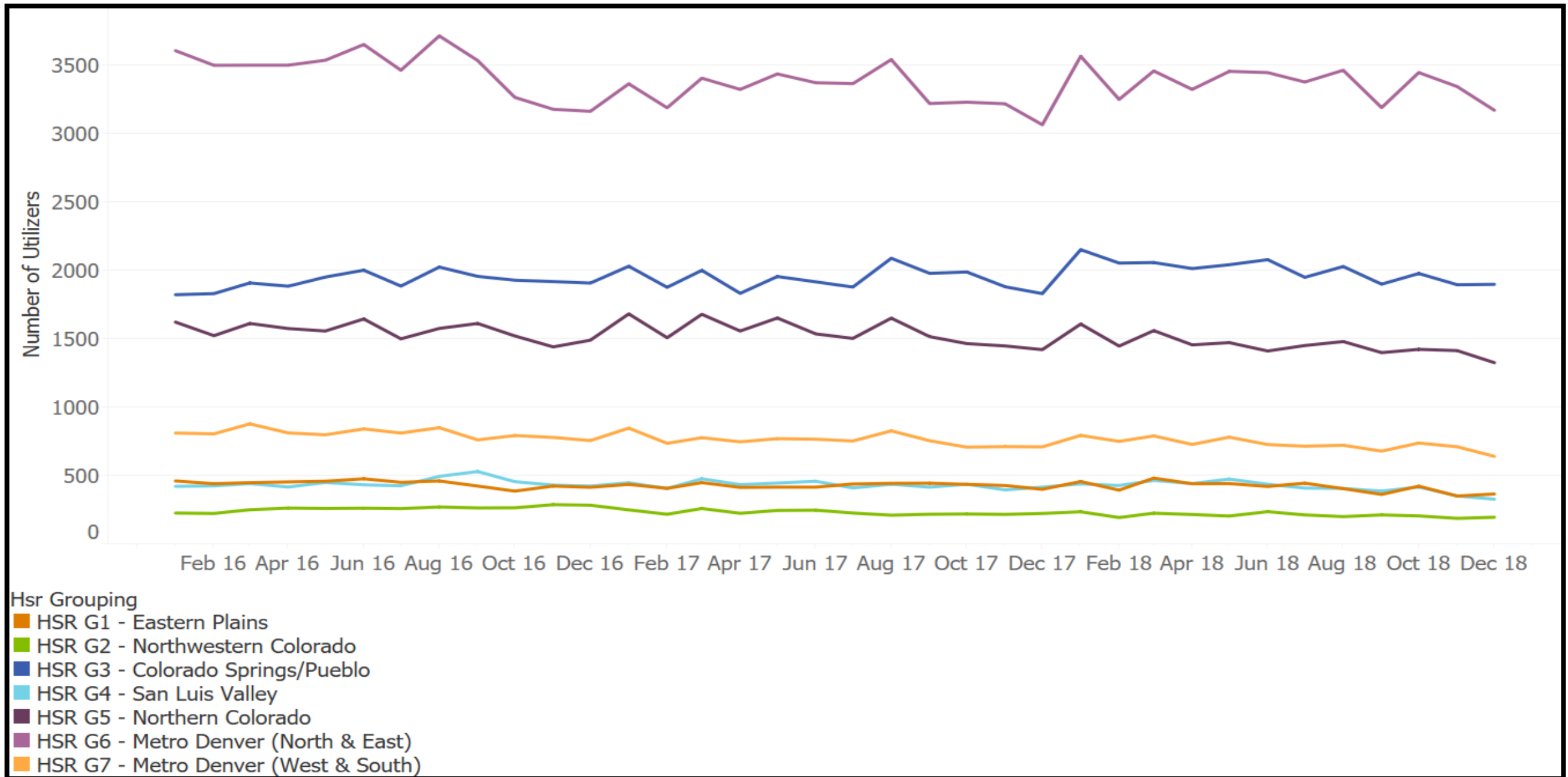


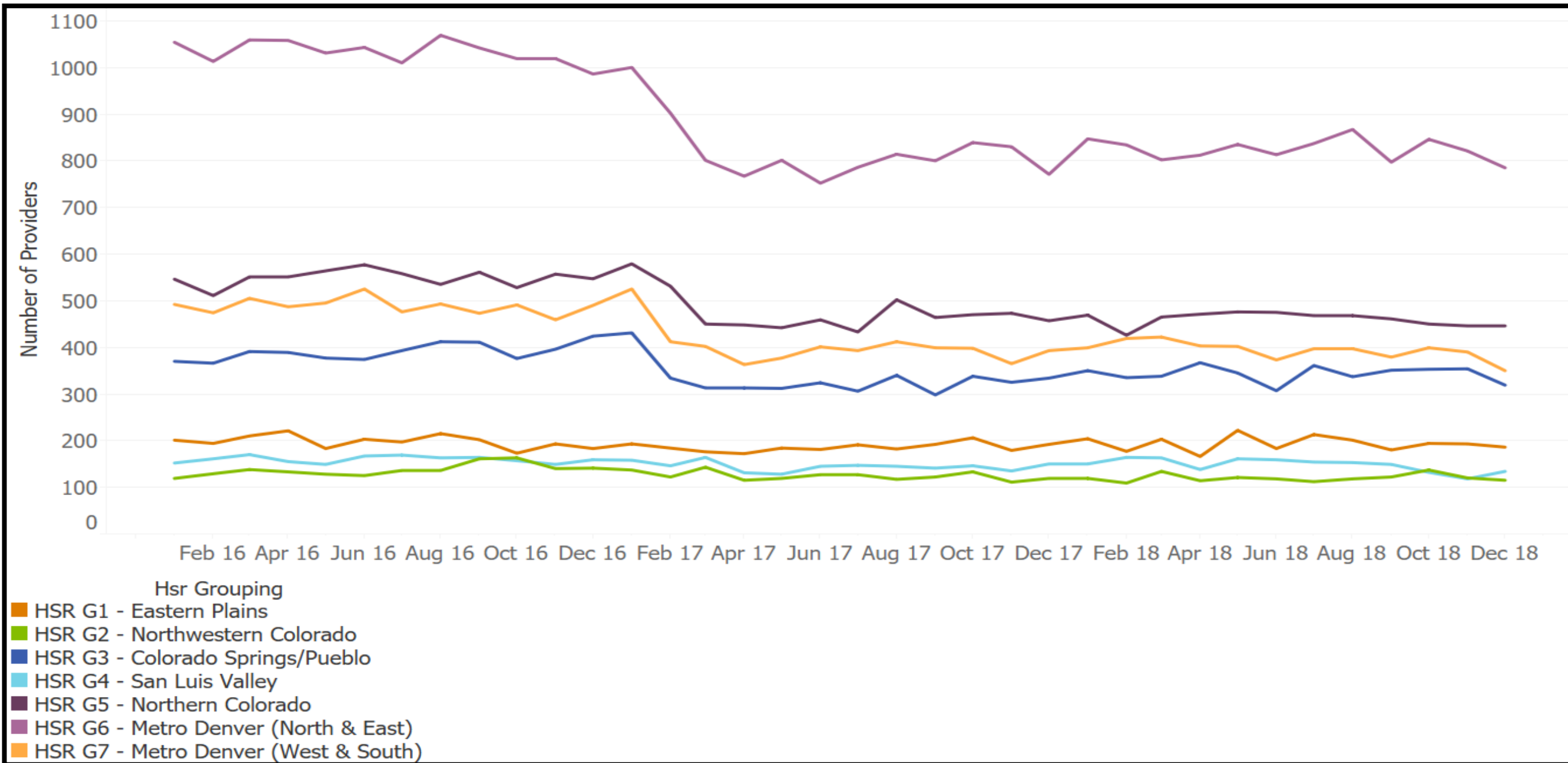
Figure 47 – PPNO Services Utilizers by Age

Pre- and Post- Natal Obstetrics



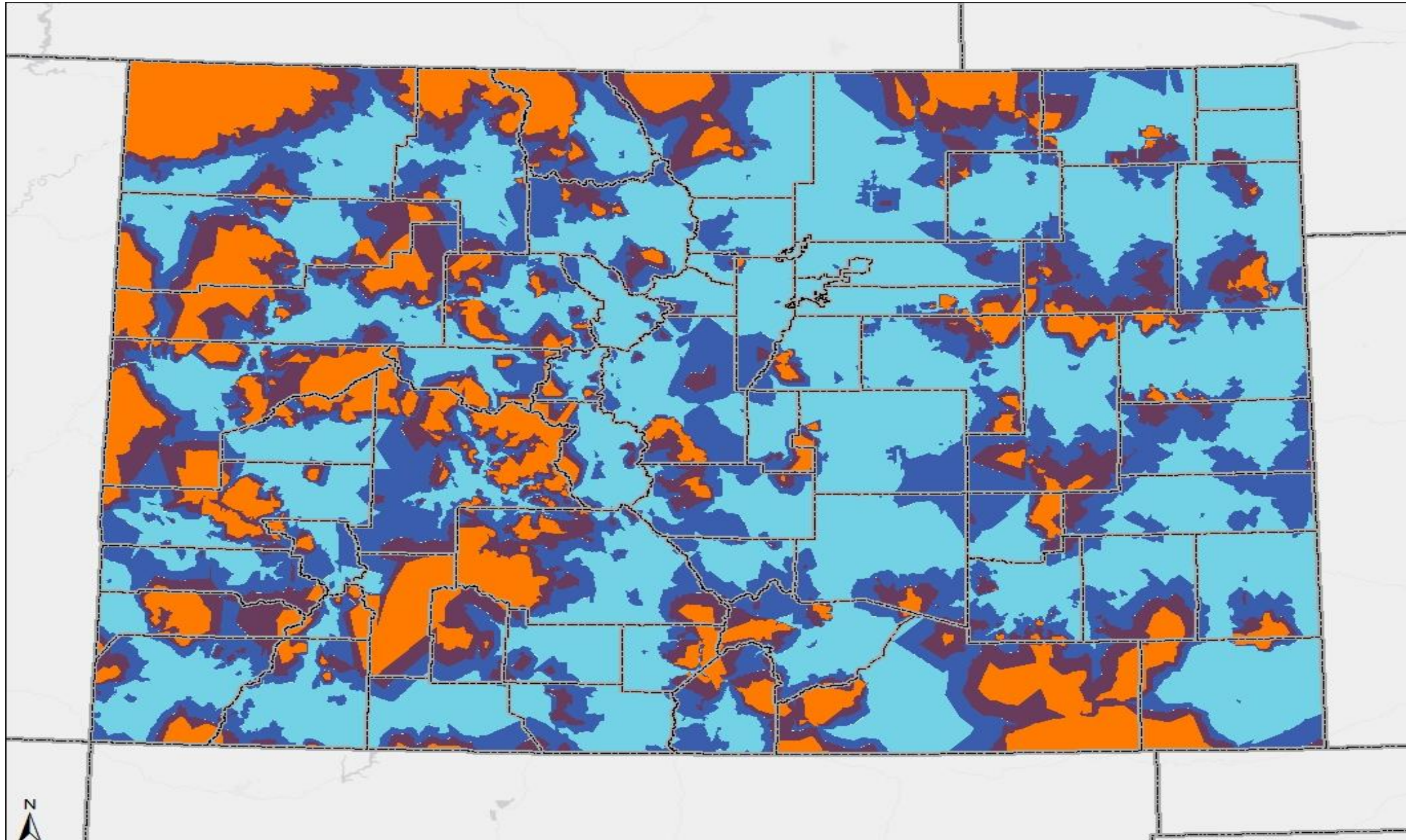
Utilizers

Pre- and Post- Natal Obstetrics



Providers

Pre- and Post-Natal Obstetrics



Drive Time

Rate Comparison

Reimbursement Type	Aggregate Percentage Pre- and Post-Natal Obstetric Services Medicaid Rate Comparison
Medicare	65.87%
Arizona Medicaid	74.33%
California Medicaid	106.92%
Wyoming Medicaid	64.57%

Stakeholder Feedback

- Concerns with the preterm birth rate in Colorado, particularly for women of color, and suggested that it could form the basis for a potential population-specific analysis for the Department.

Analysis

The Department's analysis suggests that Pre- and Post-Natal Obstetric Services are sufficient to meet the needs of Health First Colorado members

The Department plans to undertake additional access analysis on the following:

- Value-based payment models for improving quality of pre- and post-natal obstetric care (including labor and delivery)
- Provider availability by insurance type in HSR 9 (with CDPHE)

The Department is also planning to investigate maternal mortality trends in Colorado and whether access to care is contributing to current maternal mortality data



Questions?

Home Health Services

Home Health

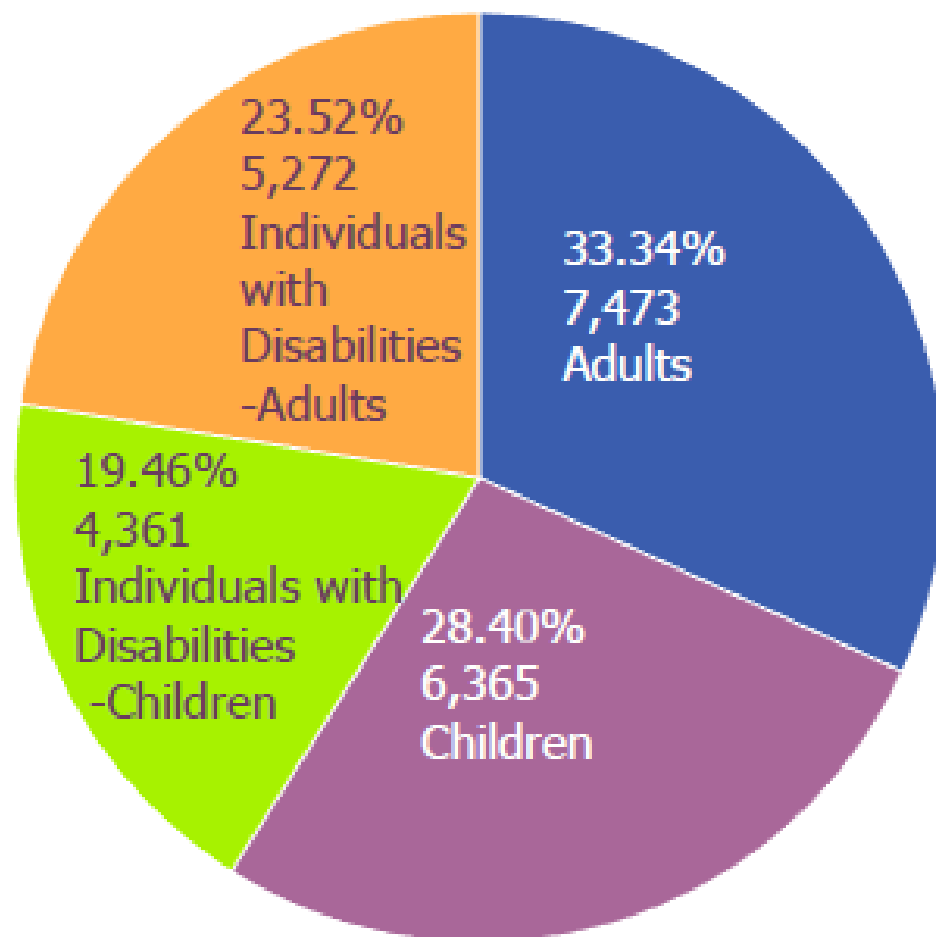


Figure 52 – Home Health Utilizers by Demographic Groups

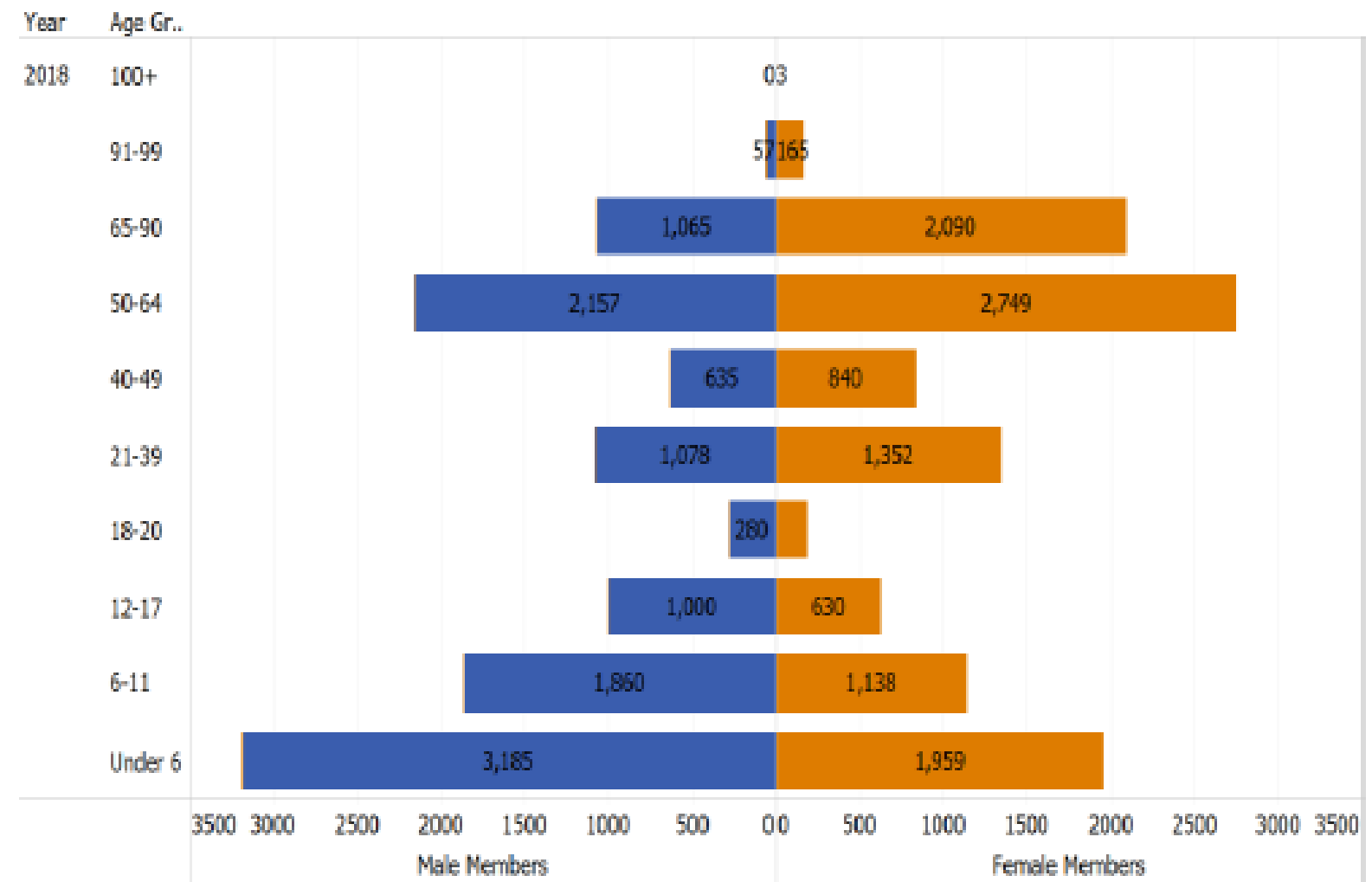
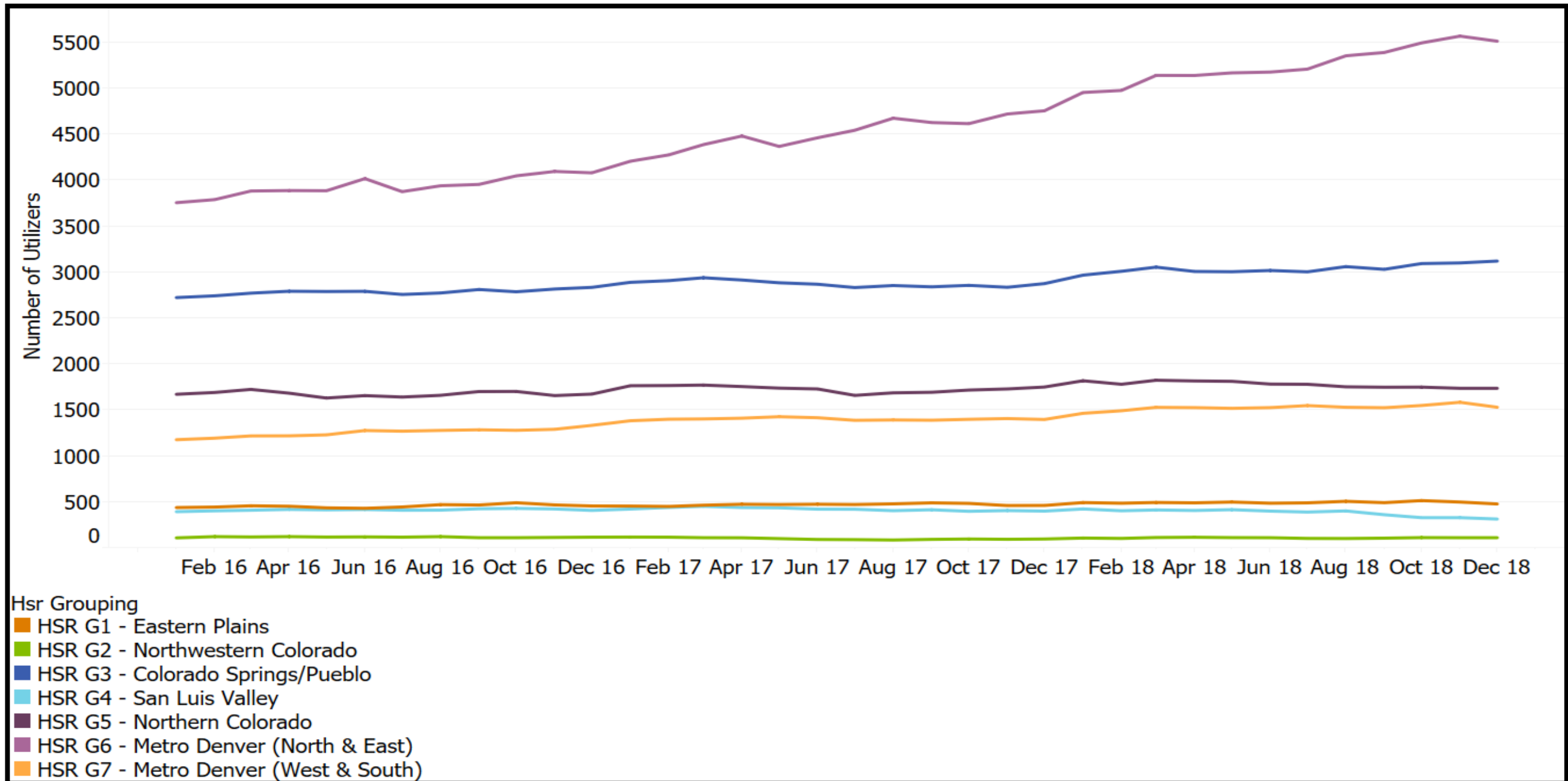


Figure 53 – Home Health Utilizers by Gender and Age

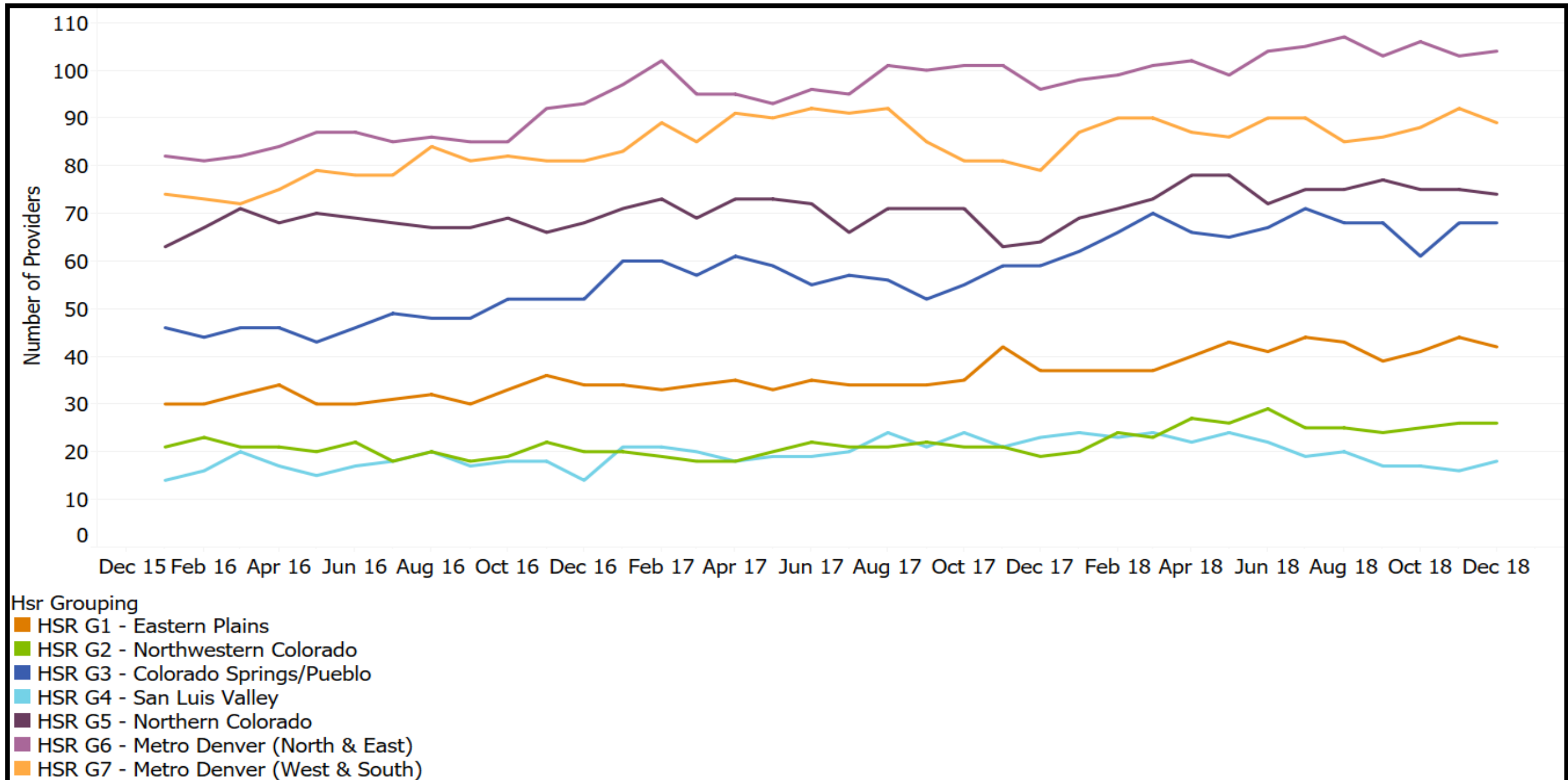
Utilizers

Home Health



Utilizers

Home Health



Providers

Rate Comparison

Reimbursement Type	Aggregate Percentage Home Health Medicaid Rate Comparison
Arizona Medicaid	122.64%
California Medicaid	104.59%
Wyoming Medicaid	81.91%

Stakeholder Feedback

- When home health rates are reviewed in 2020 consideration should be given to adjusting the Nurse Practice Act.
- Rate increases should be focused at the lowest paid workers, personal care and homemaker.
- The Department should look at moving to a model of having personal care in the state plan so that people who do not want to enroll in a waiver are not forced to use higher cost services to get in home care.

Analysis

The Department's analysis suggests that Home Health Services are sufficient to meet the needs of Health First Colorado members.

The Department plans to undertake additional access analysis on the following:

- Access to home health services in the San Luis Valley region, including member utilization and provider counts.
- Home Health service rates through the 2020 Rate Review process



Questions?

Future of the AMRP & Access Work



Questions?

Contact Details

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Thank You!