

ODH Payer Programs

Rick Hodges Director of Health

Joint Medicaid Oversight Committee November 19, 2015

Mathematica Policy Research Consulting Services for the Affordable Care Act December 30, 2014

- Immunization Program
- Ryan White HIV/AIDS Part B Program
- Breast and Cervical Cancer Project
- Mothers and Children Safety Net
- Children with Medical Handicaps Program





Immunization Program

Coverage Works

Local Health Department Immunization Billing

- 106 LHDs previously received GRF vaccine.
- 55 LHDs applied and were approved for seed inventory and/or billing resource support.
- 97 LHDs estimated on track to bill January 1.

Note: Funding changes do not affect the Vaccines for Children (VFC) Program.



HIV Care Services Program

HIV Care Services Program Overview

- Provides medical case management, and payment for medical services, insurance premiums, co-insurance/co-pays and a formulary of medications.
- Ohioans are eligible for the program if they live in a household with an income at or below 300% of the Federal Poverty Level.



HIV Care Services Program Overview – Ohio HIV Diagnoses by Year

Prevalence of Ohioans Living with Diagnosis of HIV Infection		Current Disease Status	
YEAR	NUMBER of CASES	HIV (Not AIDS)	AIDS
2014	21,612	10,930	10,682
2013	20,679	10,223	10,456
2012	19,636	9,478	10,158
2011	18,613	8,785	9,828
2010	17,593	8,115	9,478

	Incidence	
YEAR	NEW DIAGNOSIS	Rate per 100,000
2014	950	8.2
2013	1,060	9.1
2012	1,026	8.8
2011	1,043	9.0
2010	979	8.4

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YEAR OF DEATH AMONG PERSONS WITH A DIAGNOSIS OF HIV INFECTION

2014	178
2013	239
2012	298
2011	277
2010	271



HIV Care Services Program Overview

- Subgrants (7)
 - Subrecipient agencies provide case management services

Non-Medical Case Management Services that provide advice & assistance to clients in obtaining medical, social, housing, legal, financial & other needed resources to prevent clients from falling out of care	
enefits/entitlement counseling & referral activities to assist ents in obtaining access to public & private programs for hich they may be eligible ase management encounters & communications ransitional case management for incarcerated persons reparing to exit the state corrections system	
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- Providers (158)
 - Medical Care
 - Dental Care
 - Mental Health
 - Diagnostic/Lab Services



OHDAP Enrollment History



■ Formulary ■ Medicare ■ PrivateInsurance ■ Medicaid



OHDAP Program Enrollment by Month





Ohio Breast & Cervical Cancer Project (BCCP)

ODH Breast & Cervical Cancer Project Overview

- Provides breast and cervical cancer screening, diagnostic testing and case management services at no cost to eligible Ohio women.
- Regional Enrollment Agencies (11)
 - Enroll eligible women in BCCP
 - Refer women to Medicaid & the ACA Marketplace
 - Provide case management (appointment scheduling, navigation post-abnormal findings, education and outreach, quality improvement of providers)
- Providers (700)
 - Screenings (clinical breast exams, mammography, pelvic exams, pap tests)
 - Diagnostic services (as follow up to abnormal screening results)





ODH Breast & Cervical Cancer Project Eligibility

Ohio women are eligible for BCCP services if they:

- Live in a household with income at or below 200% of the Federal Poverty Level (income calculated using MAGI).
- Do not have health insurance.
- Are age 40-64 to receive clinical breast exams and Pap tests.
- Are age 50-64 to receive mammograms (women age 40-49 may qualify for mammograms when family history or results of a clinical breast exam indicate a need).
- Women who receive a cancer diagnosis through ODH BCCP qualify for BCCP Medicaid coverage for the duration of their cancer treatment. (OAC 5160:1-5-02)
 - 100-160 women are diagnosed annually.



Coverage Works

Ohio Breast & Cervical Cancer Project Enrollment History



Ohio Breast & Cervical Cancer Project Post-Affordable Care Act

- **CDC & ODH** are shifting to population-based activities
 - Policy, systems and environmental changes that encourage screening and reduce or remove obstacles to obtaining screenings.
 - Reminder/recall activities to remind clients of screening appointments and to reschedule missed appointments.
 - Quality improvement programs for physicians.
 - Provider and public education and outreach.
 - Mobile and community screening events to increase access to mammography for all Ohio women.
- Screening and diagnostics continue as a smaller part of the program.
- Plan for realignment of enrollment regions and adding population-based interventions in the next grant cycle (begins June 2016).





Mothers and Children Safety Net

Child & Family Health Services (CFHS) Program Overview

CFHS Components

- Community Health Assessment & Planning
- Child & Adolescent Health
- Perinatal Health
- Ohio Infant Mortality Reduction Initiative (OIMRI)
- Ohio Institute for Equity in Birth Outcomes (OEI)

Population Served

- Low-income women and children in socio-economic, racial and ethnic groups who are disproportionately affected by poor health in geographic areas and populations of highest need.
- Direct care component serves 15,000+ women and children annually.
- CFHS funds 60 projects for work in all program components in 63 Ohio counties.





Child & Family Health Services Program Services

Public Health Services for MCH Populations: The Title V MCH Services Block Grant

Direct Reimbursable MCH Health Care

(Payment for direct services not covered by public or private insurance)

> Non-Reimbursable Primary and Preventive Health Care Services for MCH Populations

Public Health Services and Systems for MCH Populations MCH Essential Services/Public Health Standards

> Provide Access To Care

Investigate Health Problems Inform and Educate the Public Engage Community Partners Promote/Implement Evidence-Based Practices

Assess and Monitor MCH Health Status Maintain the Public Health Work Force Develop Public Health Policies and Plans Enforce Public Health Laws Ensure Quality Improvement



Mothers and Children Safety Net

Reproductive Health and Wellness Program Overview





Children with Medical Handicaps (CMH) Program

Children with Medical Handicaps Program Overview

 The mission of the Children with Medical Handicaps (CMH) Program is to assure, through the development of high quality, coordinated systems, that children with special health care needs and their families obtain comprehensive care and services which are family-centered, community-based and culturally competent.

CMH PROGRAM COMPONENTS

DIAGNOSTIC

Ohioans, under age 21, can receive diagnostic services from CMH-approved providers for up to six months, regardless of financial status. Diagnostic services are to determine the presence or absence of a special health care diagnosis, or to establish a treatment plan.

TREATMENT

Ohioans, under age 21, can receive services from CMHapproved providers, for treatment of an eligible medical condition. Family financial eligibility is required & is certified annually.

SERVICE COORDINATION

Ohioans, under age 21, with certain diagnoses (i.e. Cystic Fibrosis, Hemophilia, Spina Bifada, Cranio-facial, those in Palliative Care) can receive assistance from a multi-disciplinary team located in a tertiary care center to locate and coordinate services. No financial eligibility required.

ADULT PROGRAMS

Ohioans, ages 21 and older with Cystic Fibrosis diagnosis, can receive limited treatment services from CMH-approved providers. Adults with Hemophilia diagnosis can receive assistance with insurance premium payments. Financial eligibility is required & is certified annually.



Children with Medical Handicaps Medical Eligibility

• Ohio Administrative Code 3701-43-15 establishes CMH medical and financial eligibility.

CMH-ELIGIBLE CONDITIONS

- Burns
- Cleft Lip/Palate
- Congenital Anomalies (of the Eye/Ear/Face/Neck, and Respiratory, Central Nervous, Genito-Urinary, Heart/ Circulatory and Musculoskeletal Systems)
- Cystic Fibrosis
- Dentofacial Anomalies
- Diabetes
- Diseases (Kidney, Blood, and Musculoskeletal, Heart/Circulatory, Endocrine, Nervous Systems)
- Disorders (Eye, Ear, Digestive, Metabolic, Respiratory)
- Epilepsy
- Hemophilia
- Cerebral Palsy
- Infectious Diseases
- Neoplasms
- Respiratory Distress Syndrome
- Juvenile Rheumatoid Arthritis
- Sickle Cell Anemia
- Spina Bifida



Children with Medical Handicaps Financial Eligibility

• Families with income calculated at or below 185% of the Federal Poverty Level are eligible for the CMH Treatment Program. Families whose income exceeds the eligibility threshold have the option to participate in Cost-Sharing in order to become financially eligible.



Children with Medical Handicaps Enrollment History





Better Coordination of Services and Payer Alignment to Ensure Continued Access for Vulnerable Populations

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Rick Hodges Director of Health (614) 466-2253