### **Update to the Maine State Legislature Committee on Appropriations and Financial Affairs**

### Benjamin Mann, Deputy Commissioner Michelle Probert, MaineCare Director September 23, 2020



# MaineCare Response to COVID-19

#### **MaineCare Members** • COVID-19 testing, diagnostic, and treatment services for Coverage MaineCare and Emergency MaineCare; and testing and diagnostic services for uninsured. Member • Waiving copays and extending Prior Authorizations (PAs). Access • Ensuring safe utilization of Non-Emergency Transportation (NET). • Allowing early Rx refills and 90-day refill for appropriate medications. • Encouraging telehealth as a mode of service delivery, including a comprehensive telehealth member public awareness campaign • Conducted a comprehensive outreach campaign to reach individuals who may have become eligible for MaineCare as a result of changes in employment/insurance coverage status. • Allowing mid-level professionals (vs physicians) to certify home health and personal support services.

# MaineCare Response to COVID-19

#### **MaineCare Providers**

- Temporary rate increases to congregate care facilities and waiver providers, Payment Supports & March-May. Incentives • Enhanced rates for facilities experiencing outbreaks, June through PHE. Increasing number of bed hold days for which NFs may be reimbursed. One-time supplemental payment to hospitals. Early implementation of rate increases for personal support services, medication management, and certain children's behavioral health services. • Per Member Per Month (PMPM) payments to providers of targeted behavioral health services, including day treatment, community supports, and schoolbased services, July-August. • PMPM child health incentive payments to primary care and dental providers to encourage access to preventive services, September-December. Service • Robust stakeholder engagement and guidance across DHHS. Addition of telehealth codes to support triage, screening and evaluation, for Delivery physician offices and dental care. • Created a temporary streamlined provider enrollment process. • Allowing services to be provided in alternative settings.
  - Allowing congregate care to have joint isolation units across facility types

## MaineCare COVID-19 Financial Response

In response to the pandemic, certain health care providers have received direct assistance from the state, as detailed below:

Provider	All funds	State funds
Hospital supplemental payment	\$10.0M	\$3.0M
Waiver programs (App K) temporary increases	\$12.8M	\$3.8M
Nursing Facilities temporary increases	\$8.8M	\$3.0M
Non-NF congregate care (PNMI, ICF) temporary increases	\$11.0M	\$4.8M
COVID congregate care outbreak rates	\$0.9M+	\$0.3M+
Behavioral Health PMPM	\$4.0M	\$1.2M
Child Health Incentive PMPM	\$3.6M	\$1.0M
Early implementation of rate increases (Section 12, 19, 96, and Section 65)	\$6.1M	\$1.8M
Total	\$57.2M	\$18.9M

The above table does not include the \$200M Maine Economic Recovery Grant Program funding

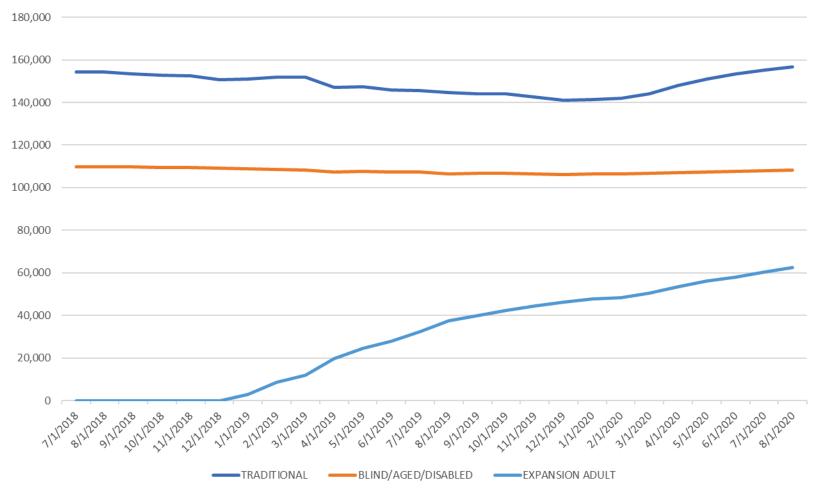
## MaineCare COVID-19 Financial Response

In response to the pandemic, certain health care providers have received direct assistance from the federal government or assistance as part of broader Maine programs:

Funding Source	National Total (Maine)	Methodology / Eligibility
<ul> <li>Provider Relief Fund</li> <li>General distribution – Phase 1</li> <li>General distribution – Phase 2</li> <li>Targeted distributions</li> <li>Remaining unallocated</li> </ul>	\$175B \$50B (\$145M) \$18B (TBD) \$55B (\$251M) \$50B+ (TBD)	Medicare FFS Medicaid FFS Hospitals/NFs TBD
Paycheck Protection Program	\$659B (\$2.3B)	Generally, any business with fewer than 500 employees
FEMA reimbursement	N/A	COVID-related costs for private non-profits
<ul><li>Coronavirus Relief Fund</li><li>Economic Recovery Grant Program</li></ul>	(up to \$200M)	Relief based on revenue losses or COVID expenses

## MaineCare Enrollment





# Enrollment Drivers

#### Expansion

- Continued growth expected through end of the calendar year:
  - Anticipated growth associated with expansion, intensified by unemployment and coverage needs due to COVID-19

#### Maintenance of effort

• Required to retain coverage for MaineCare members for duration of declared Public Health Emergency

#### **Economic/pandemic considerations**

- MaineCare application volume on average is higher than before the pandemic, indicating increased demand
- Nationally, each percentage-point increase in the unemployment rate is expected to increase the share of people eligible for Medicaid by 0.77 percentage point

# FY21 Initiatives

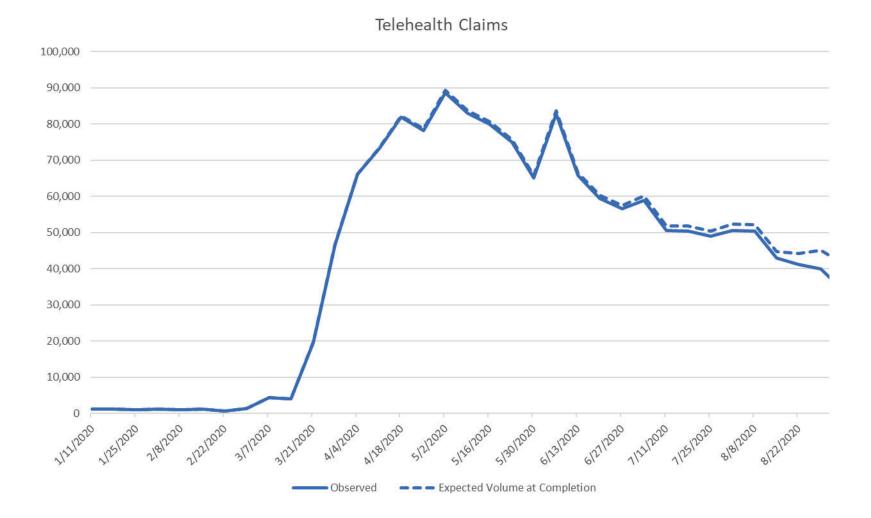
### Initiatives involving rate changes or new services

- Implement rate changes for Sections 18 & 20 necessary for waiver renewals and corresponding services in 21 and 29
- Nursing Facilities and RCFs receive COLA, Supplemental Wage Allowance, and rebasing
- Personal Support Services rate increases & adoption of rates for evidence-based services in children's behavioral health

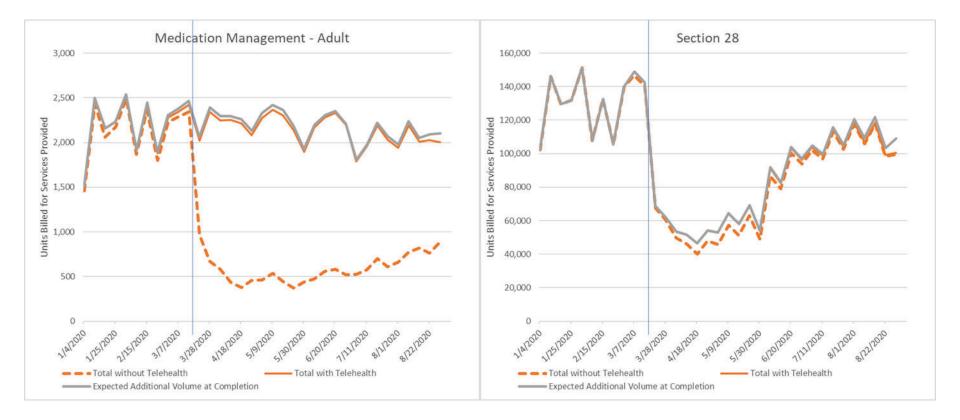
### Hospital Utilization Trends Using HealthInfoNet Electronic Health Record Data

Acute Inpatient Hospitalizations 317/2020 A1A12020 9/19/2020 A128/2020 21812020 212212020 71121202 71251202 8181202 81221202 91512020 Expected Volume at Completion Observed

### Telehealth Utilization Trend Using MaineCare Claims w/ Telehealth Modifiers



### Behavioral Health Utilization Trend Examples Using MaineCare Claims and Telehealth Modifiers



Department of Health and Human Services

# MaineCare Costs and Forecast

### FY 2020

- End of year balance comprised of 6.2% FMAP increase, FY 2019 carrying balance, reduced utilization due to COVID-19
- Using \$100M of existing balance to help manage state budget shortfall

### FY 2021

- Planning for considerable uncertainty and volatility in FY21
- Federally required maintenance of effort enrollment gains and worsening economy driving up enrollment and costs
- Continuation of FY21 FMAP increase (currently scheduled to expire end of Q2 FY21)
- Curtailed \$74M from current year FMAP increase to help manage state budget shortfall
- Continue to examine MaineCare rates (see following slide)

## Comprehensive Rate System Evaluation

- Comparison of MaineCare's current payment rates and methods to those for other state Medicaid programs, Medicare, and private insurance
- Opportunities to introduce additional Alternative Payment Models to incent high-quality and efficient services
- Prioritization of services in need of rate assessment
- Recommendations, workplan, and cost estimate to rationalize and streamline system



### Resources

### **COVID-19** Online Resources

Maine CDC: https://www.maine.gov/dhhs/mecdc/infectious-disease/epi/airborne/coronavirus.shtml

- Daily data reports, testing guidelines, COVID-19 FAQs, translated materials

Maine DHHS Services: https://www.maine.gov/dhhs/coronavirus-resources

- Includes translated materials about accessing DHHS programs

Daily Press Briefing livestream: <u>https://www.maine.gov/covid19/cdc-livestream</u> Behavioral Health Resources: <u>https://www.maine.gov/dhhs/samhs/coronavirus.shtml</u>

Office of Child and Family Services: https://www.maine.gov/dhhs/ocfs/COVID-19-response.shtml

- Child Welfare, Foster Parents, Children's Behavioral Health, and Child Care Meeting Basic Needs: <u>https://www.maine.gov/dhhs/ofi</u>

- Food Supplement/SNAP, MaineCare, TANF, Pandemic EBT, General Assistance

