

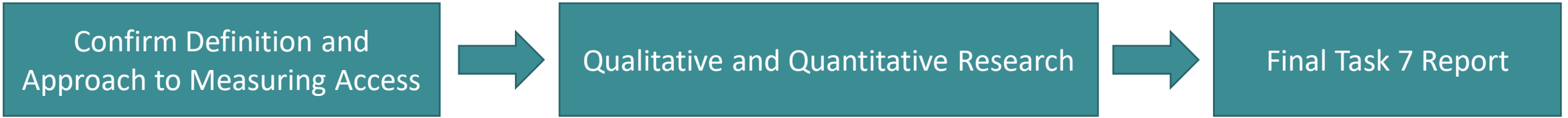
Revised OHIC Rate Review Task 7 Access Study Methodology Discussion

Updated as of June 19, 2023

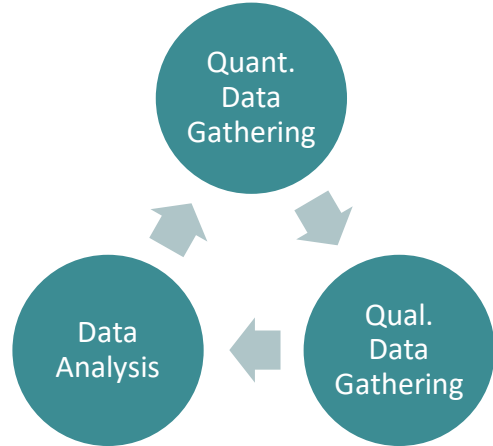
Faulkner is a sub-contractor working in collaboration with Milliman on Task 7 of the Rhode Island Social and Human Services Review.



Task 7 - Summary Methodology



- Confirm selected service categories/services
- Matrix services against access criteria to confirm inclusion/exclusion and further define analytic methods
- Identify quantitative and qualitative data sources
- Obtain feedback from OHIC & Program Review Advisory Council on approach



Evaluate services for barriers:

- Provider capacity/ Network
- Service limitations
- Geographic
- Equity: cultural, racial, language, deaf and hard of hearing, blind and visually impaired, LGBTQ
- Public policy
- Cost
- Eligibility

- Summarize findings and recommendations by service category
- Deliver final report assessing access limitations

Service Category	Provider Capacity/ Network Barriers	Service Limitations	Geographic Barriers	Equity Barriers	Public Policy Barriers (e.g. Statutory, Regulatory, Administrative)	Cost Barriers	Eligibility Barriers
	Assess provider network sufficiency; network limitations.	Review service definition for access barriers – e.g. benefit limits, service exclusions	Assess list of licensed, Medicaid enrolled providers including geo-mapping where feasible.	Access related issues related to cultural, racial, language, deaf and hard of hearing, blind and visually impaired, LGBTQ	Assess concerns raised related to statutory or regulatory constraints; administrative requirements that may make providers reluctant to provide services	Any identified member cost sharing, copays for services? Provider cost related barriers to offering services?	Are members who need services eligible? Eligibility determined timely? Eligibility process challenges?

List of Services

Child/Adolescent Behavioral Health

- 1 Counseling, psychotherapy, and diagnostics
- 2 Enhanced Intensive outpatient and SUD outpatient
- 3 Crisis behavioral health, including mobile crisis
- 4 Residential mental health
- 5 Residential SUD treatment
- 6 Intensive Behavioral Health services including DCYF

Adult Behavioral Health

- 1 Counseling, psychotherapy, and diagnostics
- 2 Intensive outpatient (including SUD outpatient)
- 3 Crisis behavioral health, including mobile crisis
- 4 Residential mental health
- 5 Residential SUD treatment

Home Care and Community Based Services

- 1 Personal care
- 2 Private duty nursing
- 3 Adult day
- 4 Assisted living
- 5 I/DD services for children & adults

Other

- 1 Non-emergency medical transportation
- 2 Traumatic brain injury day services
- 3 Early intervention services (children under 3)

Quantitative Data Sources

These are the sources of quantitative data that we have identified for review. What other sources are we missing?

		State Specific Assessment <i>Priority 1</i>		Supplemental Analysis <i>Where Available</i>	
	Service Categories	Example Data Point(s)	Data Source	Equity Lens	Other state Benchmarks
1	Behavioral Health	<ul style="list-style-type: none"> #/% of members receiving services by payer # of providers and split 	<ul style="list-style-type: none"> All Payer Claims Database (APCD) 		
		<ul style="list-style-type: none"> Identified access issues, including psychiatrists per capita 	<ul style="list-style-type: none"> Behavioral Health Study 		
		<ul style="list-style-type: none"> # of members referred and length of time waiting for services 	<ul style="list-style-type: none"> State Maintained Waitlists 		
		<ul style="list-style-type: none"> # of members on list and length of time on waitlist 	<ul style="list-style-type: none"> Provider/payer-maintained data (to be requested) 		
2	Home Care and Community Based Services	<ul style="list-style-type: none"> # of members referred and length of time waiting for services 	<ul style="list-style-type: none"> Fee For Service (FFS) Home Care Data 		
		<ul style="list-style-type: none"> Date of authorization of services vs date of first service 	<ul style="list-style-type: none"> Claims & Home Care Data 		
		<ul style="list-style-type: none"> Service hours authorized vs. service hours delivered Consistent staff assignment 	<ul style="list-style-type: none"> Long Term Services and Supports (LTSS) Alternative Payment Model (APM) Measures (not yet public) 		
		<ul style="list-style-type: none"> # of members on list and length of time on waitlist 	<ul style="list-style-type: none"> Provider/payer-maintained data (to be requested) 		
3	Early Intervention	<ul style="list-style-type: none"> Utilization of services across commercial and Medicaid 	<ul style="list-style-type: none"> APCD 		
		<ul style="list-style-type: none"> # of members in need of services and length of time from referral to services delivery, by Early Intervention service type 	<ul style="list-style-type: none"> Provider/payer-maintained data (to be requested) 		
4	TBI	<ul style="list-style-type: none"> % of TBI service utilization that goes out of state 	<ul style="list-style-type: none"> Medicaid Claims data 		
		<ul style="list-style-type: none"> # of members in need of services and length of time from referral to services delivery 	<ul style="list-style-type: none"> Provider/payer-maintained data (to be requested) 		
5	NEMT	<ul style="list-style-type: none"> Scheduled and occurring trips Trips conducted by destination (ie- PCP; chemo) Complaints analysis 	<ul style="list-style-type: none"> NEMT Dashboard Data 		4

Where feasible/available

- Compare these metrics to other states, national benchmarks
- Detail these measures by REL, SOGI where available or identify data requirements for future assessment

Next Steps

1. Conduct interviews with
 - a. Providers and Community Groups (including advisory group members)
 - b. Advisory group members identified for individual discussions
2. Collect quantitative data
3. Analysis of quantitative and qualitative data

Appendix

Stakeholder Engagement Schedule

Date	Time	Group	Adv Member
6/21	12-1	Assisted Living (grp 2)	Jim Nyberg
	2-3	I/DD (grp 4)	Tina Spears and Carrie Miranda
6/23	11-12	Adult Day (grp 3)	Jim Nyberg
6/26	9:30-10:30	EI & Child/Adolescent BH (grp 5)	Margaret Holland McDuff & Tanja Kubas-Meyer
	12-1	TBI (grp 6)	N/A
	1-2	Adult & Child/Adolescent BH (grp 7)	Laurie-Marie Pisciotta
6/27	1-2	SUD (grp 8)	Laurie-Marie Pisciotta & John Tassoni
6/29	10-11	MCOs	Molly McClosky
	2-3	PDN & Home Care (grp 1)	Nicholas Oliver

Quantitative Data Sources – Provider Timelines and Processes

Many of these services do not have formal waitlists, but rather timelines and processes for referrals, authorizations, and service delivery. As part of the provider interviews, we will ask them to share data about these timelines and processes wherever available.

	Data Points to be Requested During Interviews
1	Average length of time a member is awaiting services before receiving services and how you track those who receive some but not all the services, they are eligible for receiving
2	Average number of members awaiting services per year
3	Number of members in need of services who drop off before receiving services
4	Any available data regarding members awaiting services broken down by geography
5	Practice process for selecting members in need of services once the services become available (i.e. Longest on list first; in order of highest medical urgency)
6	Number of clients served – broken down by payor
7	Drivers creating an inability to access services
8	Other access considerations

Note - will ask providers to define what it means for patients to be waiting for services and when patients receive those services

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