

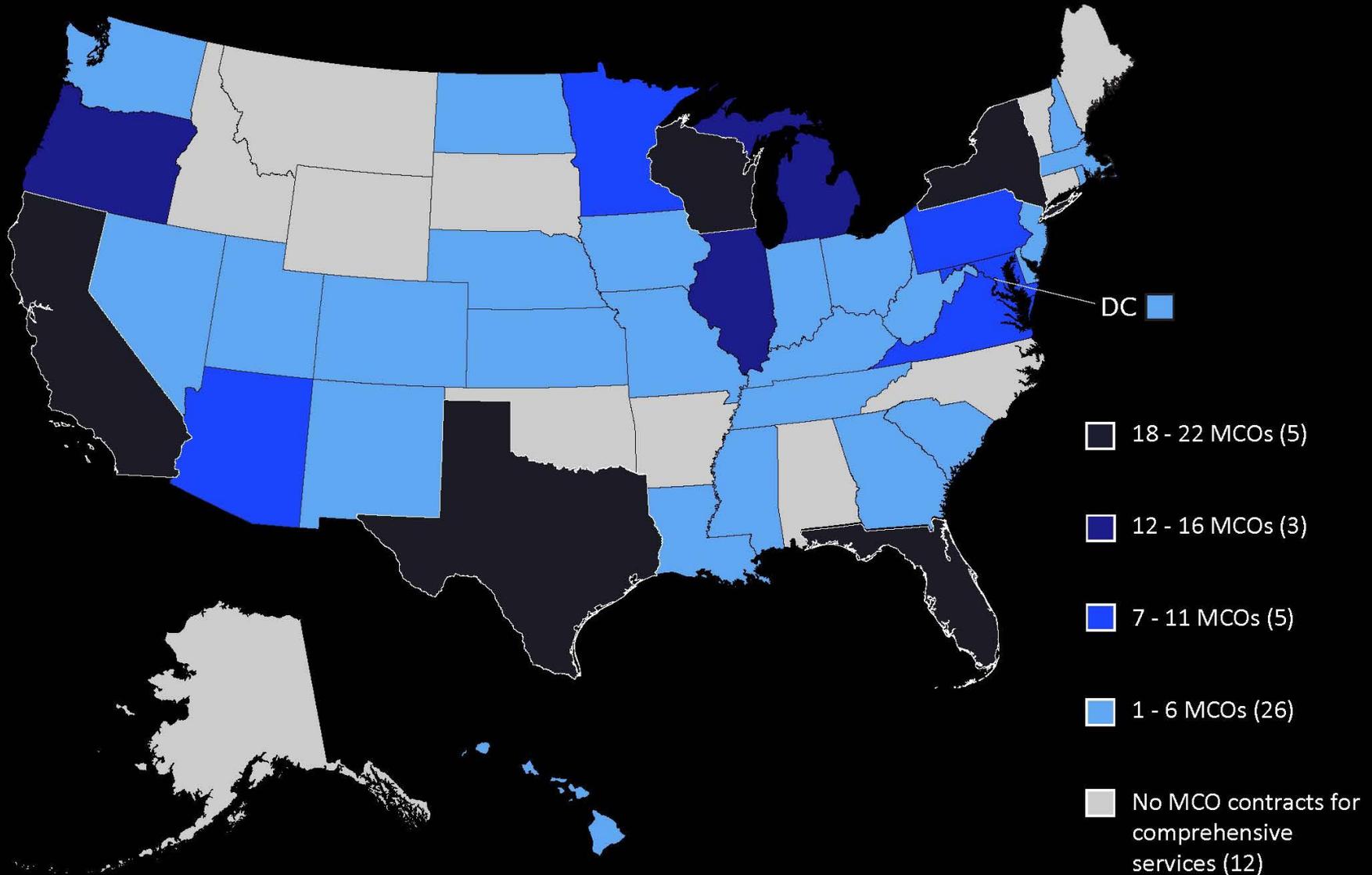
Medicaid Peer-to-Peer

October 2015

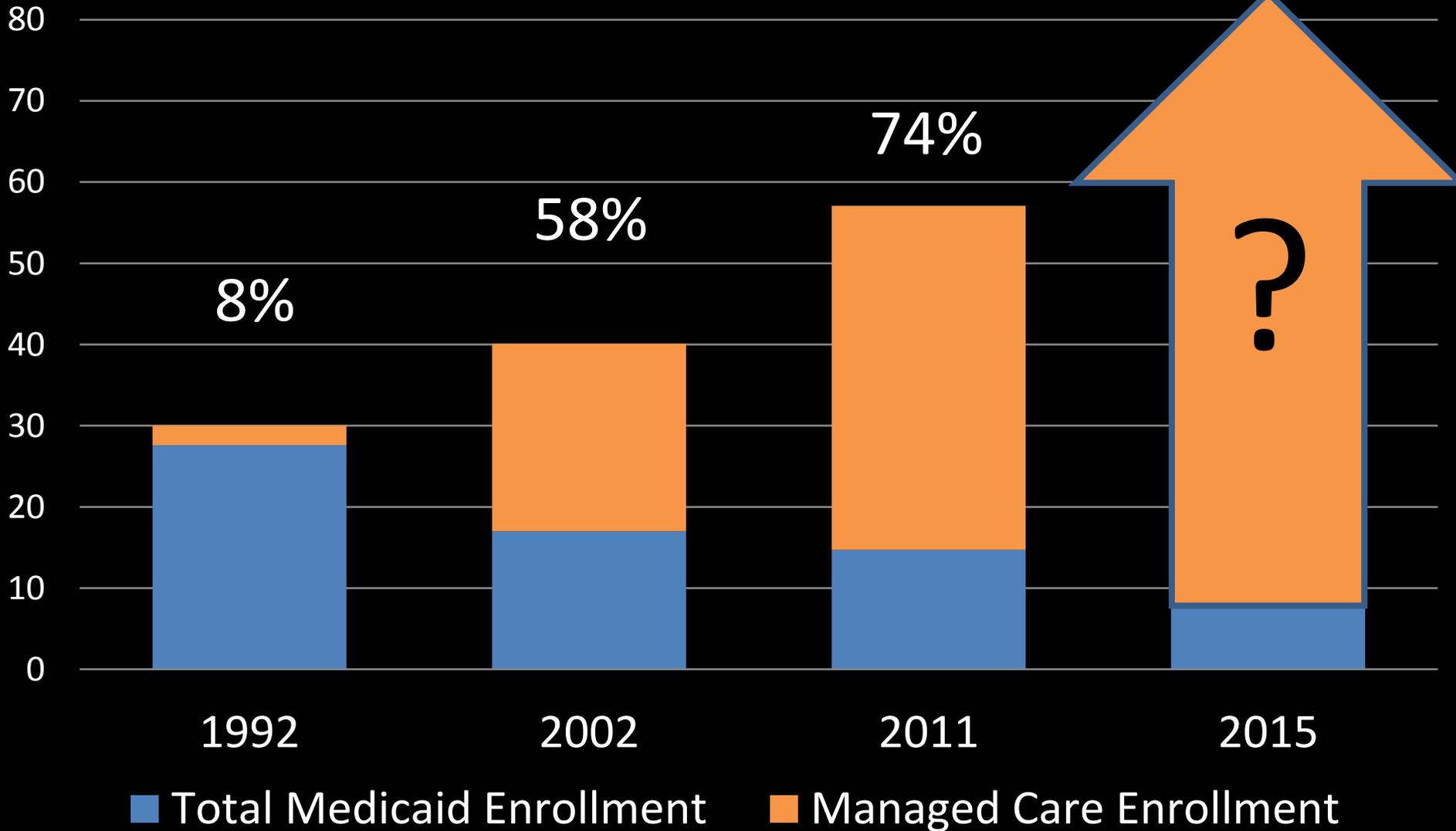
Medicaid Managed Care

Medicaid Managed Care Organizations (MCOs)

as of March 2015



Medicaid Managed Care Enrollment (in Millions)



Medicaid Managed Care Regulations

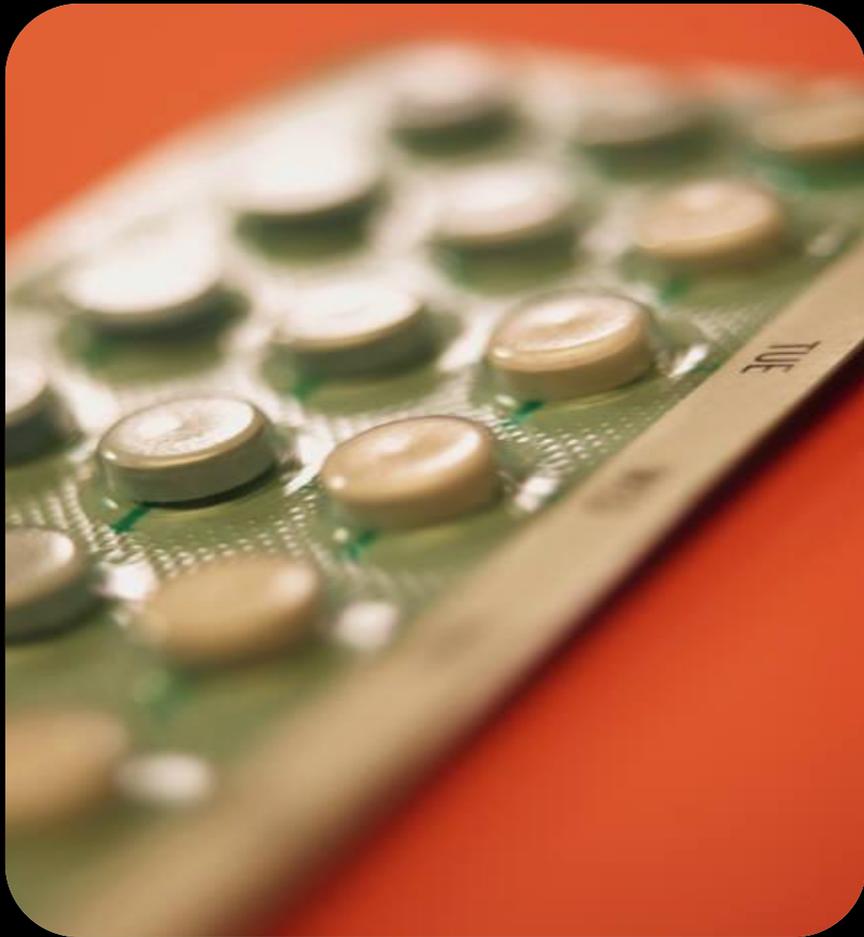
- Out-of-network family planning services
- Utilization controls
- Network adequacy for family planning services
- Confidentiality protections

Out-of-Network Services Asks

- Affirm enrollees' right to seek services from out-of-network provider of their choice, for any reason, without referral
- Timely and adequate reimbursement
- Notification



Utilization Controls Asks



- Clarify plans may not impose utilization controls on any FDA-approved method
- No utilization controls within method types
- Limit use of medical necessity criteria

Network Adequacy Asks

- Specifically include family planning providers
- Ensure timely access to full range of providers
- Require plans solicit contracts with all ECPs
- Provider anti-discrimination



Confidentiality Asks



- Provide all enrollees ability to redirect plan communications
- MCOs must make clear to enrollees key information about communications that plans will use

Questions?



Discussion

Contracting

Provider discrimination

Freedom of choice

Out-of-network
reimbursement

Confidentiality



Medicaid Peer-to-Peer

October 2015

Medicaid Reimbursement



Discussion

Rate setting

Formularies

FFS v. MCO

Bundled payments

Negotiating strategies and
rationales

Impact of rates on services

Use of 340B drugs

State budget constraints



Medicaid Peer-to-Peer

October 2015