S.B. 164 - Access to Health Care Amendments - Sponsor: Shiozawa

Performance Note Report

Funding For:

New Agency

New Services or benefit

Serving a new or larger population

Public Benefit

purpose : Pay for health care provided to adults ages 19-64 - many of them are currently uninsured. Provide coverage through private health plans to the extent possible.

Services : Medical care provided in an inpatient and outpatient hospital setting, care provided by physicians or other medical professionals, pharmaceutical products and other medical services.

Expected Outcome : By FY 17, it is expected that 95,000 adults will be enrolled in the new program. This coverage is expected to provide services to newly enrolled adults (primarily through private health plans) and reduce uncompensated care.

Implementations and Resources : UDOH will add newly eligible adults to the Medicaid program. Eligibility determination and case management will be handled by DWS through eREP. Private plan selection and enrollment will be handled through Avenue H. Generally claims payment will be made by the private health plans. Claims payment for the medically frail, individuals on the bridge plan, and woodwork individuals will generally occur through MMIS (and then PRISM when it is implemented).

How : When DWS accepts and approves applications, newly eligible adults will be enrolled in Medicaid. When private plans or UDOH pay claims, medical providers will receive reimbursement for services provided to newly eligible adults. When medical providers are reimbursed for services that previously had been provided as uncompensated care, uncompensated care will be reduced.

Performance Measures

Goal

Title : Increased Medical Coverage for Adults

Description : Newly eligible adults ages 19-64 enrolled in the new program

Collection Method : New category of aid codes will be created for the newly eligible adults. Managers will be able to count the number of adults in the new aid codes.

	FY 2013	FY 2014	FY 2015
Target or BenchMark **85%**		72500	95000
Target or BenchMark			

Goal

Title : Utilization of Private Health Plans

Description : Beginning January 2016, percent of newly eligible adults that are enrolled in a private health plan (qualified health plan or employer sponsored coverage)

Collection Method : New category of aid codes will be created that differentiate between coverage under the traditional Medicaid system, qualified health plans, and employer sponsored coverage. Managers will be able to calculate the percent of new adults in the different groups.

	FY 2013	FY 2014	FY 2015
Target or BenchMark **% Adults**		85	85
Target or BenchMark			