



Private Coverage Organization (PCO)

Physical and Behavioral Health Services RFA 04-14 Statewide Pre-Application Conference

May 15, 2014

10:00-2:00pm

Welcome/Opening Remarks



Leesa Allen

Office of the Secretary

Executive Medical Assistance Director

Program/Process Overview



Jolene Calla

Office of Medical Assistance Programs

Director

Bureau of Managed Care Operations

Conference Agenda



Welcome/Opening Remarks

Leesa Allen, Executive Medical Assistance Director, Office of the Secretary

Presentations

- Program/Process Overview
 Jolene Calla, Director, Bureau of Managed Care Operations
- Solicitation Overview
 Barry Bowman, Bureau of Managed Care Operations
- Pennsylvania Insurance Department
 Peter Camacci, Director of Life, Accident and Health Insurance
- Financial Overview
 Allen Fisher, Bureau of Managed Care Operations
- Data Overview
 Scott Brady, Bureau of Data and Claims Management
- Behavioral Health Overview
 Dennis Marion, Deputy Secretary, Office of Mental Health and Substance Abuse Services

Applicant Questions

Closing Remarks

Matthew O'Donnell, Deputy Director of Policy and Planning, Office of the Governor

PCO Timeline



May 08: Solicitation (RFA 04-14) Posted

May 13: Initial Deadline for Written Questions

May 15: Pre-Application Conference

May 28: Answers Posted for all Questions Received

June 10: Applications Due

June 11-19: Application Review

June 20: Acceptance/Rejection Letters

June 30-July 11: Negotiations

July 14-16: Final Agreements

August 1: PCO Signs Agreement

PCO Timeline



August 4: PCO Certificates of Authority and County Operational Authority for Applicable Regions Due

August 5: PCO information is sent to Maximus

August 5-November 30: Readiness Review

August 6-September 26: Agreement Approval/Full Commonwealth Signature Process

December 1: Formal Open Enrollment Begins

January 1: PCO GO-LIVE

Enrollment Broker



Maximus will help beneficiaries select a PCO.

- Two-way connectivity is required.
- Files will be transmitted to PCOs in a format and frequency specified by the Department.

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Questions



Process to submit questions from applicants:

HealthyPA-PCO@pa.gov

Solicitation Overview



Barry Bowman

Bureau of Managed Care Operations

Division of Program Initiatives,
Contract Management, and Communications

Financial Overview



Peter Camacci

Pennsylvania Insurance Department

Director of Life, Accident and Health Insurance

Financial Overview



Allen Fisher

Bureau of Managed Care Operations

Financial Analysis Division

pennsylvania Healthy PA Regions DEPARTMENT OF PUBLIC WELFARE **Erie** Susquehanna Warren McKean **Bradford** Tioga Potter Crawford Wayne 3 Wyoming **Forest** Elk Cameron **Sullivan** Lackawanna Venango Pike Mercer Clinton Lycoming Luzerne Clarion Jefferson columbia Monroe Lawrenc Clearfield Montour Union Butler Centre Carbon Armstrong 5 Northumberland **Snyder** Northanpton Beaver . Viifflin Indiana Schuylkill Lehigh Cambria aniata **Allegheny** Blair **Berks** Dauphin Bucks Perry Lebanon Westmoreland Montgomery Washington Cumberland Lancaster Chester **Philadelphia Bedford Fayette Somerset** York Delaware Greene Fulton **Adams** Franklin **ACA Rating Region 1** ACA Rating Region 6 **ACA Rating Region 2** ACA Rating Region 7 ACA Rating Region 3 **ACA Rating Region 8** ACA Rating Region 4 ACA Rating Region 9 ACA Rating Region 5

Financial Overview



Potential Rates

- Risk Adjustment
- Risk Corridor

Reinsurance

Health Insurance Providers Fee (HIPF)

Financial Overview



- Payment of Capitation
- Federally Qualified Health Centers (FQHCs) and Rural Health Centers (RHCs)

Net Worth

 Schedule for Negotiations and Signed Agreements

Data Overview



Scott Brady

Bureau of Data and Claims Management

Division of Managed Care Systems Support



- Data Files are transferred via secure FTP; PCO must use a product that is compatible with DPW's product
- X12 HIPAA Transactions:
 - 834 Daily and Monthly Files The daily file reflects changes that were applied to the Client Information System (CIS) that day for their beneficiaries; the monthly file will contain one record (the most recent) for each beneficiary who is eligible at some point in the following month.
 - 820 Capitation File (Monthly) provides each Health Plan with payment data sufficient to reconcile their PCO membership to their accounts receivable file
 - Capitation Payment 36 Month Summary File (Monthly/Proprietary) - a summary of all capitation payments and adjustments for the most recent 36 months.

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X12 HIPAA Transactions (continued):

- 837 Encounters by Claim Type
 - 837 Institutional (Inpatient, Outpatient, and LTC)
 - 837 Professional
 - 837 Dental
 - 837 Professional Drug
 - 837 Institutional Outpatient Drug
 - NCPDP
- Encounter Response Files
 - U277 (Unsolicited) Batch Claim/Encounter Status
 - NCPDP response
 - Translator Files:
 - ZZZ Full File Reject Report
 - 999 Formatting Reject Report
 - TXN Record Accept/Reject Report
 - EXT Record Accept/ Reject flat file



Examples of Proprietary Files:

- Alert File (Weekly) File sent by the PCO containing newborns, returned mail, pregnancy and death alerts.
- Weekly Reconciliation File File returned to the PCO on with the disposition of each alert, and enrollments from Maximus.
- Service History Files (Weekly) Four separate files
 (Inpatient, Revenue, Medical, and Pharmacy) containing
 12 months of service history for beneficiaries.
- PCP File (Weekly) File sent to DPW of PCP assignment information for each beneficiary.
- TPL File (Monthly) File sent to the PCO containing TPL information for each beneficiary.

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Examples of Enrollment Broker Files:

- Automated Provider Directory File (Weekly) File sent by the PCO to Maximus containing a complete snapshot of the plan's current provider directory.
- Weekly Pending Enrollment File File sent by Maximus to the PCO containing all enrollments that were submitted to DPW in the Enrollment Broker's Weekly Enrollment/Disenrollment File.

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Behavioral Health Overview



Dennis Marion

Office of Mental Health and Substance Abuse Services

Deputy Secretary

Behavioral Health Overview



- The applicant HMO must indicate how it intends to provide Behavioral Health Services by illustrating whether the behavioral health network of providers will be included in the Applicant's own provider network, be part of a subcontract approach, or be part of some other model to deliver behavioral health services.
- The PCO and its Network Providers must comply with applicable Federal and State laws that pertain to Member/Beneficiary rights and protections.

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Behavioral Health Overview



 The PCO is responsible for coordination of care for individuals enrolled in the Healthy PA Program. The PCO must provide effective coordination of care across a continuum of behavioral health and physical health care with a focus on improving individual health outcomes.

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5/15/2014



Applicant Questions

5/15/2014

Closing Remarks



Matthew O'Donnell

Office of the Governor

Deputy Director of Policy and Planning



Thank you!