

## **Minnesota Value of Managed Care Questions to Consider**

- Does this MCO take steps to distinguish itself in order to gain market share in the Medicaid population? How does this MCO do that?
  
- What do you consider to be the results of requirements that all MCOs be non-profits? Do you think this benefits or hurts the market in terms of participation, coverage options, and access to services?
  
- How do you see your organization changing with the introduction of a state health insurance exchange?
  - Would you be interested in offering a plan on the Exchange?
  
- How do you see your organization changing with the introduction of Medicaid expansion?
  - Do you have the capacity to manage care for a large influx of new Medicaid eligibles?
  - What steps are MCOs taking to prepare for the expansion?
  
- Rule 101 requires all MCOs that offer state employee plans to also offer a plan on Medicaid. Do you believe this requirement deters some plans from entering Minnesota? If the requirement were to be removed, how would this change the current landscape?
  
- What additional services do you offer in addition to current Medicaid required services?
  - Are some of these services included in the EHBs, and will be required post-2014?
    - If so, how will you distinguish yourself in the market?
  
- What care coordination activities/services do you currently provide?
  
- Are you currently planning to expand your care coordination and disease prevention services?

- Are there certain areas in Minnesota that you have tried to cover but have been unsuccessful? Are there areas that you are looking to expand to?
  - What are the challenges you are facing in expanding in these areas?
  
- Have you had difficulty securing an ample provider network? What strategies have helped to enlist specialists as providers?
  
- How, if at all, do you see the Accountable Care Organization model integrating with the present MCOs?
  
- How do you feel about the number of Medicaid health plans in Minnesota? Do you think the state would benefit from more/less plan options?
- What changes/recommendations would you make for Minnesota's current capitation rate setting process?
  
- Do you feel that the anticipated care coordination benefits of managed care are being realized?
  
- What are the major issues with ensuring access to care? Is it contracting with providers? Wait times? Location issues?