

## Rothermel, Paul J (DHS)

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**From:** Leitz, Scott D (DHS)  
**Sent:** Wednesday, March 06, 2013 2:03 PM  
**To:** Golden, James I (DHS)  
**Subject:** mco study

So I'm looking at the language from last year on the MCO/FFS study. It says we're supposed to produce a preliminary report by 2/15/13. Was that what the report you sent me was intended to do?

### Sec. 31. **STUDY OF MANAGED CARE.**

(a) The commissioner of human services must contract with an independent vendor with demonstrated expertise in evaluating Medicaid managed care programs to evaluate the value of managed care for state public health care programs provided under Minnesota Statutes, sections 256B.69, 256B.692, and 256L.12. Determination of the value of managed care must include consideration of the following, as compared to a fee-for-service program:

- (1) the satisfaction of state public health care program recipients and providers;
- (2) the ability to measure and improve health outcomes of recipients;
- (3) the access to health services for recipients;
- (4) the availability of additional services such as care coordination, case management, disease management, transportation, and after-hours nurse lines;
- (5) actual and potential cost savings to the state;
- (6) the level of alignment with state and federal health reform policies, including a health benefit exchange for individuals not enrolled in state public health care programs;  
and
- (7) the ability to use different provider payment models that provide incentives for cost-effective health care.

(b) The evaluation described in paragraph (a) must also consider the need to continue the requirement for health maintenance organizations to participate in the medical assistance and MinnesotaCare programs as a condition of licensure under Minnesota Statutes, section 62D.04, subdivision 5, and under Minnesota Statutes, section 256B.0644, in terms of continued stability and access to services for enrollees of these programs.

(c) A preliminary report of the evaluation must be submitted to the chairs and ranking minority members of the health and human services legislative committees by February 15, 2013, and the final report must be submitted by July 1, 2013.

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