Administrative Layers in Both Health Systems

Policy #	Policy Recommendations	Required Change/ Recommended Action	Due Date	FY18 Progress Report	Progress Clarification
11.1	MDHHS should complete an assessment of the existing administrative layers in the public behavioral health and physical health system to identify redundancies and duplication of oversight in the administration of Medicaid services. The assessment will serve as the basis for developing an administrative model that provides a service system that is person-centered, effective and efficient; reduces redundancy; and supports coordination across all layers of the behavioral and physical health system including regulatory requirements from the consumers to the providers, payers and up to the state level.	1) MDHHS will examine reporting and administrative requirements and efficiency as part of the 298 pilot(s) and demonstration project. 2) MDHHS will complete a full evaluation report of pilots to include identified efficiencies and savings reinvested resulting from savings.	3.31.18 6 months after the end of 298 pilots and demonstration projects	Partially Complete Other	1) MDHHS and MPHI have completed an internal review of all of the reporting requirements related to the pilots. MDHHS and MPHI have shared the results of this analysis with the Reporting Sub-Workgroup under the Leadership Group, and the Reporting Sub-Workgroup is now working on reviewing the analysis, examining the elements of each report, and developing plans for implementing these requirements within the context of the pilots. 2) This report will not be published under early 2022.
11.2	MDHHS should develop uniform and consistent standards for the provision of behavioral health and physical healthcare services, including substance use disorder services, to support the efficient administration and effective service delivery for all individuals who receive Medicaid services. The standards will include, but are not limited to, common contract language, consistency and reciprocity of training requirements and expectations, quality measurement and performance metrics, financial and program audits, simplification and consistency of billing procedures, credentialing of providers and standard member benefits.	3) Pilot evaluator will establish methods for stakeholders to provider input on evaluation criteria, outcomes and opportunities for improvement. 4) More broadly, MDHHS will continue to regularly evaluate administrative burden through ongoing policy and contract review.	3.31.18 Ongoing	Partially Complete Complete and Ongoing	3) MDHHS, MPHI, and U of M have solicited input from the pilot participants and other key stakeholders about the evaluation process. MDHHS, MPHI, and U of M will be conducting further outreach to solicit additional input in early 2019, and MDHHS will also execute a survey to solicit feedback on potential performance metrics for the pilots. 4) This is an ongoing activity. BHDDA and Financial Operations has also launched a new effort to review the PIHP contract and align the contracting process with other contracting processes within the department.
11.3	MDHHS should convene a workgroup of stakeholders to evaluate the efficacy of administrative structures, regulatory requirements, and associated costs necessary to support efficient, effective, integrated, person-centered service delivery across payers and providers.				