



The Hilltop Institute

analysis to advance the health of vulnerable populations

Maryland Department of Health and Mental Hygiene FY 2012 Memorandum of Understanding Annual Report of Activities and Accomplishments *Highlights*

A Nationally Recognized Partnership

Hilltop was founded on July 1, 1994, in partnership with the Maryland Department of Health and Mental Hygiene (the Department), which administers the Medicaid program in Maryland. Since its inception, Hilltop's work with Maryland Medicaid has been supported through an annual Memorandum of Understanding (MOU) with the Department. This report discusses activities and accomplishments under the fiscal year (FY) 2012 MOU. Below are the highlights.

Medicaid: Program Development and Policy and Financial Analysis

- Prepared the eleventh annual report for the Maryland Legislature on the Reimbursement Rates Fairness Act.
- Conducted a number of analyses on physician fees.
- Continued to support the Department in its efforts to expand eligibility for Medicaid to uninsured children and their families and to expand the benefits in the Primary Adult Care (PAC) program by analyzing various characteristics of those enrolled in the programs.
- Concluded its work on its study to evaluate the outreach process of the Kids First Act to determine whether the use of tax forms is effective in identifying and enrolling children who are uninsured but eligible for Medicaid or the Maryland Children's Health Program (MCHP). Hilltop prepared all the final reports for the project, including a report on the final evaluation results.

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- Hilltop assisted the Department with providing enrollment and retention data to Mathematica Policy Research, Inc. so that it could proceed with the CHIPRA-mandated evaluation of Express Lane Eligibility.
- Reported on Medicaid and MCHP enrollment and service utilization by pregnant women, infants, and children to assist the Department with both its 2012 and 2013 applications for the Maternal and Child Health Block Grant.
- Provided the Department with the number of Medicaid enrollees in Maryland who received hemodialysis or peritoneal dialysis in calendar year (CY) 2010 and CY 2011.
- Performed an analysis of Medicaid expenditures for enrollees during their last six months of life.
- Matched data from the Maryland Health Care Commission with the Medicaid Management Information System (MMIS2) to identify the length of Medicaid enrollment for each individual in FY 2010 and FY 2011
- Performed a number of studies on service utilization by various coverage groups.
- Matched Title X family planning clinic records from CY 2008 through CY 2010 with Medicaid enrollment and claims records from CY 2006 through CY 2010 for a study of family planning services rendered to clients of Title X-funded family planning clinics and Medicaid enrollees.
- Evaluated the Emergency Department Diversion Project by: reviewing the subgrantees' data and intervention evaluations; comparing the interventions; analyzing the data as a whole as well as comparing subgrantees' data against MMIS2 data and data on uninsured individuals from the Maryland Health Services Cost Review Commission (HSCRC); and reporting key findings.
- Conducted an analysis of the Basic Health Plan option of the Affordable Care Act that addressed the policy issues and financial feasibility of implementing a Basic Health Plan in Maryland.
- Continued to calculate the reimbursement rates from the Trauma and Emergency Medical Fund on a monthly and annual basis.
- Improved the Decision Support System (DSS) by identifying new content areas to add, increasing functionality, adding new reports, and using WebFocus to develop new DSS applications, such as the Managed Reporting Environment, which is a user-friendly point and click graphical interface that has access to MMIS2 detail data.
- Added new mapping capabilities for the DSS with the acquisition of InstantAtlas, a software product that supports interactive dashboards that include maps, data tables, and charts and graphs.

HealthChoice: Program Support, Evaluation, and Financial Analysis

- Prepared the HealthChoice §1115 Waiver annual evaluation, which was structured based on the HealthChoice program goals set forth by the Department in the following areas: coverage and access to care under HealthChoice; the extent to which HealthChoice provides a medical home and continuity of care; the quality of care delivered to enrollees; program financing and budget neutrality; special topics, including dental services, reproductive health services, mental health care, substance abuse treatment services, and racial/ethnic disparities in utilization; and access and quality of care under Maryland's signature PAC program.
- Continued to produce detailed financial analyses, which assisted the Department in the development of Medicaid financial policy, fiscal notes, and rate setting.
- Developed risk-adjusted capitation payments for MCOs participating in HealthChoice; staffed the Department's MCO Rate Setting Committee; provided consultation to the MCOs; and supported the HSCRC in its review of providers.
- Analyzed MCO performance and prepared the HealthChoice Financial Monitoring Report; compared the performance of provider-sponsored organizations (PSOs) to non-PSOs; analyzed specific variances in membership, premium income, and cost of medical care between CYs 2007 and 2008; and prepared a complete financial report package analyzing MCO underwriting.
- Continued the development of a rate methodology for benefits in the PAC program.
- Estimated payments to federally qualified health centers for services provided to PAC program enrollees with retroactive HealthChoice eligibility.
- Prepared quarterly analytic reports and an annual trends report for the Rare and Expensive Case Management (REM) program.
- Analyzed the utilization of EDs by Medicaid enrollees in CY 2010 as well as an analysis of ambulatory care utilization by Medicaid enrollees who visited the emergency department.
- Performed a completeness review of an MCO application and assisted the Department in drafting its response to the MCO.
- Performed a number of special analyses as background to better understanding Medicaid beneficiaries' need for and utilization of mental health and substance abuse services by: providing the Department with monthly data on Buprenorphine utilization by Medicaid enrollees identified persons in Medicaid with a mental health disorder or substance use disorder (SUD) as well as the total number of Medicaid services used by these enrollees for FY 2008, FY 2009, FY 2010, and FY 2011.
- Conducted a number of analyses on MCO SUD expenditures.

- Performed an analysis of dental service utilization for children in foster care during calendar year (CY) 2005 through CY 2011.
- Performed an analysis to assist the Department in monitoring enrollment compliance of the MCOs.
- Conducted a number of analyses to assist the Department in learning more about dental service utilization.
- Conducted a number of analyses to assist the Department in preparing its *Annual Report to the General Assembly on Dental Care Access in HealthChoice*.
- Verified the completeness, correctness, and reliability of encounter data through monthly, quarterly, and annual reports to the Department and MCOs, and regularly reviewed the data to ensure its validity.
- Prepared quarterly childhood lead level reports to assist the Department in reporting results of lead tests to the Maryland Department of the Environment (MDE) and the MCOs. Also prepared the annual county-based analysis of lead testing results for HealthChoice children aged 12 to 23 months and 24 to 35 months, which was sent to MDE.
- Prepared the HealthChoice value-based purchasing targets for CY 2012.
- Analyzed the number of avoidable asthma and diabetes inpatient claims and avoidable hospital admissions, and prepared lead testing and racial disparities measures for the Managing for Results initiative.

Long-Term Services and Supports: Program Development, Policy Analysis, and Financial Analytics

- Began working with the Department in support of the structural changes needed to implement the Balancing Incentive Payment Program.
- Continued to assist the Department in the development and implementation of its statewide Medicaid Money Follows the Person (MFP) Demonstration.
- Designed a pilot study to compare the “level of care” determinations of the interRAI assessment tool with the determinations made by Maryland’s current tool.
- Continued to develop linked Medicare and Medicaid data to assist in the analysis of the needs of Medicare-Medicaid enrollees to explore how coverage by both Medicare and Medicaid impacts the utilization, delivery, and costs of services.
- Continued to produce semi-annual reports for the Centers for Medicare and Medicaid Services (CMS) on the state’s progress in achieving MFP benchmarks.

- Provided monthly point-in-time (June) data on individuals enrolled in waiver programs, MFP, and nursing facilities for 2008 through 2012.
- Released a third series of chart books entitled *Medicaid Long-Term Services and Supports in Maryland*, which summarize demographic, service utilization, and expenditure data for state FYs 2007 through 2010.
- Examined a sample of Statewide Evaluation and Planning Services assessments to determine whether the authorized service level matched actual Medicaid claims and whether deficiencies in activities of daily living and instrumental activities of daily living were related to authorized service levels.
- Continued the development of reimbursement rates for nursing homes, the Program for All-Inclusive Care for the Elderly, and the Trauma and Emergency Medical Fund.
- Performed a number of analyses on services for persons with traumatic brain injury (TBI).
- Continued to conduct analyses and produce reports on the Medicaid home- and community-based services waivers on service utilization, enrollment, and demographics of waiver populations.
- Produced the FY 2010 CMS 372 reports for the Older Adults Waiver, Living at Home Waiver, TBI Waiver, Community Pathways Waiver, New Directions Waiver, Autism Waiver, and Model Waiver.
- Produced monthly updates for Maryland's StateStats website on cumulative enrollment.
- Conducted a number of analyses to assist the Department in its efforts to learn more about recipients of services from the Developmental Disabilities Administration.
- Continued development of the *MFP Tracking System*, a web-based system used statewide to manage MFP business processes.
- Continued developing the integration of the nursing facility Minimum Data Set (MDS) data submission process with the MFP tracking system.
- Maintained and modified waiver tracking systems by adding a new activity tracking module, developing a new error reporting tool, developing several new reports, and improving the system's security.
- Supported, maintained, and provided on-going system modifications for the Quality Care Review Tracking System.
- Continued and expanded its role in support of the Department's creation of an integrated long-term services and supports (LTSS) information system.

- Conducted system requirements analysis for the new integrated system; created a single user interface for the existing tracking systems; and developed an algorithm for a new Core Standardized Assessment for persons seeking LTSS.
- Coordinated the development of a sub-contract with the software development company that will develop and install the platform for the integrated system; developed a project plan, and coordinated the activities among the Department, Hilltop, and the software company.

Data Management and Web-Accessible Databases

- Maintained and managed all of Maryland's Medicaid data, processing 12 million records monthly and creating yearly databases in excess of 150 million records.
- Maintained HSCRC hospital data from 2006 through 2012.
- Maintained MDS data from nursing homes for all residents.
- Continued the refinement of the MCO reporting on DSS site with reporting on both MCO and PAC usage.
- Updated and expanded the *Eye on Medicaid* site.
- Continued to maintain Maryland Medicaid eHealth Statistics, a public website providing a subset of the data available on the DSS, which allows researchers, community leaders, practitioners, and the public at large to access Maryland Medicaid health statistics.
- Prepared hundreds of ad hoc data reports to support the work of the MOU.

IT Architecture and Platform

- Provided a protected information technology (IT) architecture and platform to insure adherence to the Health Insurance Portability and Accountability Act of 1996 regulations regarding electronic security.
- Utilized a three-tiered electronic defense and surveillance system that protects the information and data from outside UMBC, outside the Hilltop network, and within the Hilltop network.
- Utilized a Virtual Private Network (VPN) device to allow for remote access for both work-at-home scenarios and disaster recovery operations, as well as for increasing the protection of web-based applications that collect protected health information.
- Improved security by isolating WebFocus, the waiver tracking systems, and remote access from the Internet via the VPN.
- Migrated Hilltop's data warehouse to the new Storage Area Network.

- Further strengthened data security with the addition of a new security information and event management system.
- Added the *LTSSMaryland* website used for tracking applications to Maryland's Medicaid waiver programs.



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