
Advancing Consumer Experience

Medicaid Advisory Committee (MAC)
Consumer Voice Subcommittee Recommendations

November 8, 2021

Lavinia Goto
Kärun Virtue
Jackie Wetzel

The logo for the Oregon Health Authority. It features the word "Oregon" in a smaller, orange, serif font, positioned above the word "Health" in a larger, blue, serif font. Below "Health" is the word "Authority" in a smaller, orange, serif font. A thin blue horizontal line is positioned below the word "Health".

Oregon
Health
Authority

Outline

Overview of:

- Medicaid Advisory Committee (MAC)
- MAC consumer voice subcommittee:
 - background and goals
 - early findings
 - recommendations

Discussion

Medicaid Advisory Committee

Oregon's MAC:

- is required by federal and state statute
- advises the OHA and the OHPB on Oregon's Medicaid program from a consumer and community perspective
- includes up to 15 Governor-appointed members
- welcomes public comment at every meeting
- is accepting applications for new members 😊

Current work focus (in addition to requirements):

- monitoring CCO 2.0 implementation from a consumer perspective
- review the 1115 waiver renewal thru a consumer lens

Consumer Voice Subcommittee

Subcommittee Background & Goals

Formed in late 2020 with goals of:

- Understanding consumer challenges
- Identifying opportunities to improve consumer experience (CX), including but not limited to challenges:
 - due to benefits/services that are siloed across different agencies
 - that arise when coordination responsibility is unclear, or roles are shared by multiple organizations
 - related to complex medical or psychosocial needs
 - that are frequent sources of frustration

Key Findings



Many consumers experience challenges related to communication.



Care coordination (CC) has the potential to address many consumer pain points, but consumers experience barriers to CC services.



Care transitions are challenging, with missed opportunities for planning a smooth transition to maintain access and address consumer needs proactively.



Visibility into consumer experience (CX) is limited. Unfiltered consumer voice is essential to achieving equity.

Many challenges fall into more than one category, and several CX areas require more work to fully understand and develop recommendations.

Recommendation Categories

1. Consumer challenges that are:
 - a. Easier to address
 - b. More difficult and need more work to address
2. Consumer challenges that could be improved through the 1115 waiver renewal

Recommendations for Near Term Opportunities to Improve Consumer Experience (CX)

Recommendations: Communication



Priority areas for improving communication include:

- provider search tools
- denial notices (work is in progress)
- health-related services/flexible services information
- care coordination

Recommendations:

- develop standardized consumer materials for areas above
- allow for CCO-specific details
- involve consumers in the work and co-create in multiple languages

Recommendations: CCO & FFS care coordination and communication



To improve CX related to care coordination (CC):

- develop standard language that clarifies the differences between CC and intensive CC (ICC).
- create materials for consumers that describe in plain language what care coordination is and how these services can help.
- create a clear path for consumers to access CC services.



“In trying to discharge a pediatric patient with complex needs - it took 10 calls and an OHA senior administrator to get access to a complex care coordinator. Why was this so difficult?”

Recommendations: Care coordination and complex needs



Consumers with complex needs face challenges finding providers.

To improve access to care and CX for these consumers:

- engage CC services early to link consumer with appropriate providers (culturally and linguistically appropriate with specialized skills).
- develop a method to track wait times by provider specialty
- engage the MAC in monitoring wait times.
- develop standards and escalation policy to improve access.

Recommendations to improve the transition from pediatric to adult care



To improve CX in the transition from pediatric to adult care for children and youth with special health needs (CYSHN):

- adopt standard transition planning policies that are offered to OHP consumers early and often as they approach 18.
- engage CC services early to link consumer with appropriate provider (culturally appropriate with specialized skills)
- leverage existing evidence-based tools from the HRSA-funded National Alliance to Advance Adolescent Health (Gottransition.org)



Recommendation: Increase focus on consumer experience



- Explicitly acknowledge consumers as primary stakeholders in the care delivery system
- Improve visibility into consumer experience (CX) and voice by prioritizing CX as a body of work across OHA
- Ensure visibility into CX differences by race, ethnicity, preferred language, and disability status to advance equity
- Include OHP consumers in the work to design an inclusive CX strategy

Discussion

- What opportunities do you see for CAC & MAC collaboration to:
 - elevate consumer voice?
 - improve Oregon's care delivery system?
- Do any of the subcommittee findings surprise you?
- What is the biggest area or improvement opportunity that the subcommittee missed?

Thank You

Health
Oregon
Authority