

Ohio's current agreement is very mature and likely due for revitalization.²¹ Currently, there's a lot to praise in regards to Ohio's efforts with managed care, particularly as ODM has aggressively and effectively pursued value-based reimbursement in the wake of a fee-for-service system agnostic to the state's financial risk.

This proposal is also very ambitious and fundamentally changes the way the state delivers Medicaid benefits. By segmenting major business functions of the plans into separate contracts, the details around interoperability and coordination must be worked out for the agreement to be effective. Where there was once accountability for all of these business functions within the plans themselves, there is now segmentation. This could lead to confusion and complexity, depending on how these things are executed, which is why the readiness review period will be so critical. However, as the preponderance of evidence from the MCOs' own reporting shows, more can and should be done.

In very clear and obvious ways, we could be doing better. Ohio providers, both large and small, face a dizzying set of business requirements and hurdles that add to the administrative expense of the state in the form of managed care's capitation. We are not achieving the value we could, especially when compared to other states, particularly in the areas of managing chronic disease, addressing social needs and, regrettably, in ensuring children are able to rightfully access medically necessary care. And while MCOs do present the opportunity to leverage the market-based principles of competition and innovation to achieve value, the billions we spend in taxpayer resources could be better used to force the issues of collaboration, quality and cost control. This procurement effort is not disruptive to the people it serves. Instead, this RFA seeks to heal the disruption that the current system has created. Putting people before the business of managed care will go a long way to ensure Ohioans, particularly kids, get a managed care program that is competitive, high quality, easier to use and economically efficient.

²¹ State MCO Contract Amendments. (2019, November 06). Retrieved October 04, 2020, from <https://coveragetoolkit.org/medicaid-mcos/medicaid-mco-contracting/state-mco-contract-amendments/>

