



# MEDICAID MANAGED CARE PROCUREMENT TOWN HALL MEETING



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# AGENDA

- 1** **Background**  
*Let you know what we are doing and why*
- 2** **Program Priorities**  
*Discuss DMMA's priorities for the next managed care organization procurement*
- 3** **Key Procurement Dates**  
*Share anticipated procurement schedule*
- 4** **Gathering Your Feedback**  
*Discuss ways to share your feedback and stay informed*
- 5** **Next Steps**  
*Provide next steps*



# BACKGROUND: MEDICAID MANAGED CARE

## 240,000

Over 240,000 Delawareans (almost 25% of the State population) are enrolled in Medicaid and the Children's Health Insurance Program (CHIP).

## Services

Provides physical health, behavioral health, and long-term services and supports to individuals, families, children, and seniors.

## 2 MCOs

Medicaid managed care organizations:

- AmeriHealth Caritas Delaware
- Highmark Health Options



# BACKGROUND: MANAGED CARE PROCUREMENT

## December 2022

DMMA's current MCO contracts end December 31, 2022.

## January 2023

DMMA will procure MCOs that will start serving members on January 1, 2023.

## Opportunities

The procurement is an opportunity to:

- Solicit feedback from stakeholders.
- Introduce new initiatives and contract enhancements.
- Advance our vision for Medicaid.



# PROGRAM PRIORITIES



## Member focus

Medicaid innovation should improve quality and outcomes for members and advance health equity.



## Accountability

MCOs will have increased accountability to the Delaware Department of Health and Social Services (DHSS) for program costs, performance, and creativity.



## Lead by example

Medicaid and the MCOs will lead by example when it comes to innovation across Delaware's health care system.



## Promote program evolution

DMMA will use the procurement as an opportunity to build upon the existing contract and successes.



## Cross-agency collaboration

DMMA will look for ways to align with other DHSS programs and state initiatives.





# KEY PROCUREMENT DATES\*



\*Dates provided are subject to change.



# FEEDBACK SESSION



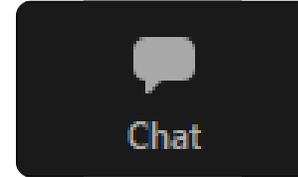
# HOW TO PROVIDE FEEDBACK

Today we will be prioritizing feedback from members.  
Please limit your comments to two minutes so we can hear from as many people as possible.



If you would like to speak, use the 'Raise Hand' button in the 'Participants' panel and we will unmute your line.

- Remember to unraise your hand when you are done speaking.



You can also provide written comments in the chat or through the Q&A feature in Zoom.

Specific questions/concerns with current MCOs/providers can be directed to  
[MedicaidInfo@Delaware.gov](mailto:MedicaidInfo@Delaware.gov).



# CONSIDERATIONS



What can DMMA and/or MCOs do to enhance Medicaid for members?



What ideas do you have to:

- Improve access to care?
- Integrate behavioral and physical health care?
- Increase community engagement?
- Support and expand primary care?
- Increase opportunities for members to live the healthiest life possible?
- Advance long term services and supports?



What additional priorities should DMMA consider?



What other thoughts or ideas do you have for us?



# NEXT STEPS



# NEXT STEPS



Email us with any additional feedback you have at:  
[DMMA\\_RFP@delaware.gov](mailto:DMMA_RFP@delaware.gov).



All feedback received by August 15, 2021 will be considered as we develop the new MCO contract and RFP.

*Any later feedback will be considered for future program changes.*



DMMA will periodically post new information on our website:  
<https://dhss.delaware.gov/dhss/dmma/>.