

Fact Sheet

About the Request for Information on Managed Care for Medicaid special needs populations

Including Medicaid clients with Behavioral Health needs, Intellectual and Developmental Disabilities, and the Aged, Medically Frail, and Physically Disabled

Arkansas is launching a **Request for Information (RFI)** on potential opportunities for managed care to improve services for Medicaid clients in the following special needs areas: Behavioral Health Services (BH), Developmental Disabilities Services (DD), and care for the Aged, Frail and Physically Disabled (collectively referred to as Long-Term Services and Supports, or LTSS).

Context

Q: Why is Arkansas exploring managed care for special needs populations in its Medicaid Program?

A: Arkansas has a longstanding commitment to improving the delivery of services for its Medicaid populations on quality, access, and cost. In his Healthcare Address on January 22, 2015, Governor Hutchinson directed DHS to consider opportunities to reform Medicaid services to better serve high-cost, high-needs populations. Contracting with managed care organizations is one potential option for Arkansas to achieve these aims.

Q: Which sets of clients and services would an RFI address?

A: The RFI will consider the areas of Behavioral Health Services, Long-Term Services and Supports (including care for the aged, medically frail and physically disabled), and Intellectual and Developmental Disabilities Services. Potential vendors are instructed to provide responses on the specific populations that would be most feasible for them to serve. The fact-gathering process for special needs populations is targeted only toward these populations, and not the broader Medicaid population.

Q: What questions will the State ask as part of this exploratory RFI?

A: The State is exploring whether managed care could help to address the unique challenges and opportunities facing special needs populations in its Medicaid Program. The RFI will explore areas including the level of interest from managed care organizations, perspectives on approach and program design, opportunities for innovation in the current system, and the potential timeline for implementation. Specific topics that the RFI could ask about include:

- **Program design and scope:** What populations and services would a managed care organization potentially propose to cover and what is the organization's depth of experience and capabilities in implementing similar programs in other settings?
- **Innovation:** What experience and capabilities would a managed care organization bring to bear in achieving the objectives and aims that the State of Arkansas has set forth in improving service delivery in its Medicaid program for the included populations?

- **Patient choice:** What are the challenges and opportunities for patients, providers, managed care organizations, and the State in contracting with multiple vendors for a given population to instill patient choice and competition between managed care plans?
- **Quality improvement:** What opportunities exist for measuring, reporting and ultimately improving quality for the populations/services covered in your response? What are the obstacles to doing so and how can these obstacles be addressed?

Support for client and provider interests

Q: How is the State considering client interests as part of this exploratory phase?

A: The RFI is intended to ensure that any new program would have all the characteristics required to achieve the goals Arkansas maintains in caring for the included populations, such as transparent and effective communication, member choice throughout the system, and care that is appropriate and provided in a manner that is best matched to client need.

Q: How is the State considering provider interests as part of this exploratory phase?

A: Similarly, the State is using this phase of the process to gather information to assess any potential vendor's fit, covering areas including the ability to work effectively with Arkansas providers, capabilities and experience working with providers in the implementation of similar programs, and alignment with Arkansas' guiding principles for serving its Medicaid population.

Timeline

Q: What is the timeline for the RFI?

A: The RFI will likely be released in mid-May with a deadline for responses in mid-June.

Q: What would be the long-term decision-making horizon?

A: The RFI will be used as a first step in informing the decision-making process for any potential transition to managed care. If the State were to continue the process, the next step would be a Request for Proposals (RFP). The decision to issue an RFP would be made in conjunction with the Office of the Governor and the Arkansas Health Care Reform Legislative Task Force.