

Senate Bill 419

Advisory Committee
Meeting

May 11, 2023



SB419 Project Management

- BMS and Myers and Stauffer will provide project management in the implementation of the SB419 pilot. Project management activities will include:
 - Coordination of workgroup membership and scheduling of workgroup meetings.
 - Communication of the specific roles and responsibilities for each workgroup.
 - Development of key objectives, goals and timelines for each workgroup.
 - Documentation of workgroup activities, progress and implementation challenges to ensure transparency.
 - Coordination of additional resources and subject matter expertise, as needed, to support SB419 implementation.
 - Development of workgroup status reports and distribution to Advisory Committee and other key parties based on an established cadence.

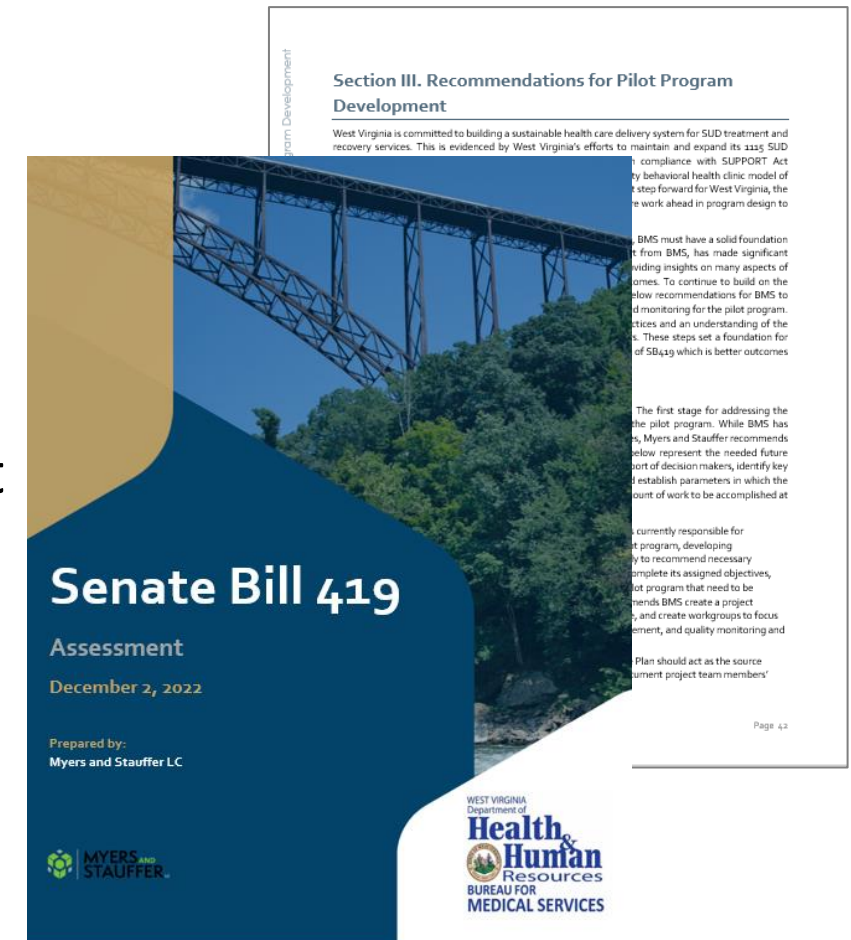
SB419 Advisory Committee Requirements

SB419 requirements of the Advisory Committee:

- Develop the **performance-based metrics** for which payment is based;
- Determine **best practices and refinement** of the pilot; and
- **Evaluate pilot** annually for effectiveness, adjust metrics as indicated to improve quality outcomes, and assess the pilot for continuation.

SB419 Assessment: Recommendations

- Establishment of the pilot project governance plan to document project team members' roles and responsibilities and to support the progress of the pilot program implementation.
- Creation of workgroups to focus on key areas of pilot design. These workgroups are:
 - Clinical Workgroup
 - Reimbursement Workgroup
 - Quality Monitoring and Oversight Workgroup



Clinical Workgroup

To meet the overall goals of the pilot, this workgroup is responsible for identifying and recommending clinical and operational refinements. Key objectives include:

- Documentation of patient and provider flows throughout the substance use disorder (SUD) care continuum to ensure a comprehensive understanding of how care is currently delivered and by whom.
- Clearly define all the required components of the “robust post-treatment planning program,” as referenced in SB419. This would include care coordination services which are the cornerstone of the pilot program.
 - Challenges to the SUD care continuum are highlighted.
- Determine the roles and responsibilities of pilot participants.
 - For example, should RTCs assume full ownership in providing care coordination services as stated in the pilot?
 - What are the roles for CMHCs and other behavioral health providers in the pilot?

Clinical Workgroup

The proposed Clinical Workgroup composition is as follows:

- BMS representatives:
 - Cynthia Parsons, Keith King, Susan Hall and Matt Brannon
- Representative from the Office of Drug Control Policy: To Be Determined (TBD)
- 2 RTC providers: TBD
- 1 representative from each Managed Care Organization (MCO): TBD
- West Virginia Alliance of Recovery Residences: Emily Birckhead, Executive Director

Workgroup Meetings

- Meeting cadence: Every other week
- Workgroup kick-off meeting: Week of May 29nd

Reimbursement Workgroup

This workgroup is responsible to make recommendations on the design of the value-based payment award and processing. This workgroup will:

- Document and determine near term and future impact for the multiple stakeholder groups who will participate in the pilot. Considerations will include:
 - Tolerance level and potential financial burden (hiring of a patient navigator and staff to collect and report measures) for providers.
 - Use of incentives.
 - Payment reimbursement model impact (if any) on capitation rates.
 - Attribution model design and potential effects on MCOs and providers.
- Support development of MCO contract language required for the SB419 provider value-based payment model.
- Develop the provider education module to ensure transparency and provider understanding of the model.
- Finalize timeline for contracting with providers.

Reimbursement Workgroup

The proposed Reimbursement Workgroup composition is as follows:

- BMS representatives:
 - Cynthia Parsons, Keith King, Susan Hall and Anita Ferguson
- 2 RTC providers: TBD
- 1 representative from each MCO: TBD
- 1-2 representatives from Milliman, Inc.

Workgroup Meetings

Meeting cadence: Every other week

Workgroup kick-off meeting: TBD

Quality Monitoring and Oversight Workgroup

This workgroup is responsible for providing oversight of the pilot program including assessing if the services delivered (as a result of the pilot) have improved the quality of care and services provided to members as evidenced through the monitoring of measures. Near-term and on-going objectives include:

- Documenting the data collection and reporting requirements for each Year 1 measure.
- Defining key performance indicators that can offer a quick and efficient way of reviewing progress of the pilot.
- Development of reporting to track utilization and ensure programmatic requirements are being met.
- Evaluating and refining the measurement set as needed over the course of the pilot program.
- Supporting the setting of benchmarks.

Quality Monitoring and Oversight Workgroup

The proposed Quality Monitoring and Oversight Workgroup composition is as follows:

- BMS representatives:
 - Cynthia Parsons, Keith King, Susan Hall and Anita Ferguson
- Representative from the Office of Drug Control Policy: TBD
- 2 RTC providers: TBD
- 1 representative from each MCO: TBD

Workgroup Meetings

Meeting cadence: Every other week

Workgroup kick-off meeting: TBD



Questions