

Sears: House's Medicaid Budget Changes Hinder Plans To Improve Quality, Find Savings

Medicaid Director Barbara Sears on Thursday relayed to senators the administration's concerns with the current budget bill ([HB 49](#)), including the House-proposed delay of the behavioral health redesign.

She told the Senate Finance Health and Medicaid Subcommittee that several changes the House made in the budget would mitigate the program's ability to save money and improve quality down the road.



Barbara
Sears

Those changes, such as moving long-term services and supports into managed care, the behavioral health redesign and comprehensive primary care, are ways the state can better incentivize quality care that improves health and minimizes costly services, she said.

Senators asked for hard numbers on the projected savings.

Having that information, Sen. Lou Terhar (R-Cincinnati) said, would "give us more confidence on moving and not moving on these issues."

Director Sears said the agency doesn't budget for those savings until they're in hand, but there are estimates.

"I would caution... until we see how things actually get implemented and how it shifts the movement that we are anticipating, it's hard to take that to the bank," Director Sears said.

The behavioral health redesign continued to be an issue for the administration and members of the subcommittee. The director said the delay inserted into the budget bill by the House is not needed and would postpone patients being able to get new services offered by the new coding system.

Chairman [Sen. Bob Hackett](#) (R-London) said there will always be some providers who push for more delays, in the hopes the change would never happen, but the transition still needs to be smooth.

"Here's the dilemma we worry about: We know we don't have enough providers," he said. "If some of our providers are small, how can we be sure that we don't go to a rural area of the state and knock somebody out of business?"

Director Sears said the redesign has already been delayed before, and the state is now ready for the changes, which will bring behavioral health into parity with physical health.

"I might suggest that our current system is not working well," she said.

[Sen. Charleta B. Tavares](#) (D-Columbus) again raised concerns about the timeliness of payments to behavioral health providers.

"Based on the testimony that I heard yesterday, it still doesn't appear that we're getting all those claims paid within the timely fashion that you've shared with us," she said. "Most of the nonprofits that are providing behavioral health services don't have a large reserve, so timing is everything, particularly if you have a lot of claims that you're sending in."

Patrick Stephan, director of managed care for ODM, said the department now has the ability to more strictly enforce penalties against plans who don't meet prompt pay requirements.

"Up front, we're going to have this capability, and on day one, if there are prompt pay issues by provider type, they are going to be fined," he said.

[Sen. Dave Burke](#) (R-Marysville) said the focus in the debate over the redesign should be on patients.

"I am vexed as to how people think that the current system is working," he said. "When we look at the complaints that come before us on these issues, and I'm sensitive to them, very rarely do I hear the word patient."

Director Sears said she believed the state was ready to handle the redesign transition, but that the department will be ready for problems as they occur.

"Is it perfect? Nothing ever is when you put on a program this large," she said. "What I do know is the speed at which we are prepared to respond."