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## News: Changes win over former foes of Kasich plan on Medicare, Medicaid overlap

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Changes win over former foes of Kasich plan on Medicare, Medicaid overlap

Two stakeholders applauding the state's new proposal to better coordinate care for some of Ohio's sickest patients were skeptics not so long ago.

When the administration of Gov. John Kasich made public in January its intention to change how health care is delivered to people eligible for both Medicare and Medicaid, the Ohio Association of Area Agencies on Aging went public with its concerns.

At one point, it enlisted the help of Ohio's Democratic congressional delegation to petition Kasich to make sure the area agencies remained a part of long-term-care management for Medicaid patients.

Another group, AARP Ohio, was frank with Kasich's aides in private meetings about what a plan to coordinate care for Ohio's "dual eligibles" should look like.

When the state formally delivered its proposal to the federal Centers for Medicare and Medicaid Services on Monday, included in the administration's public announcement were statements of support from both the AARP and the area agencies on aging.

What persuaded them to endorse the plan?

"To their credit, they really did listen to what was being expressed all along," Jane Taylor, state director of AARP Ohio, said of the administration. "With all of the input from all the groups, (the proposal) developed into something we could support."

The area agencies on aging and the AARP shared the concern that under the state's plan, Ohio's 12 area agencies on aging might lose their administrative roles in the popular PASSPORT home-care program.

But in Kasich's formal proposal to the feds, including a three-year pilot program affecting about 115,000 of the 182,000 Ohioans considered dual eligibles, managed-care companies are required to contract with the area agencies for long-term-care management.

"I heard concerns from the triple-A's six months ago," said Republican state Rep. Cheryl Grossman of Grove City, who helped arrange meetings with stakeholders and administration officials to address concerns.

"People were listened to. Their points were made, and we're very fortunate the two (Kasich administration) directors involved helped to work out solutions together. I'm very pleased with where we are."

The two directors - Medicaid Director John McCarthy and Office of Health Transformation Director Greg Moody - argue that the state's all-encompassing proposal was more a result of a months-long process than a single change.

McCarthy said from the release of the administration's "concepts paper" in January, to its rough draft proposal in February, it held dozens of public and private meetings with stakeholders to craft a policy that fit their needs.

He said items such as allowing nursing-home residents to stay put, installing a transition period of at least 365 days for patients to continue receiving care from current providers, and for managed-care companies to pay Medicaid providers their current rates all were the results of those meetings.

Even the nursing-home industry, which clashed with Kasich for much of 2011 and is opposed to placing large amounts of responsibility with managed-care organizations, said it had a seat at the table with the state's plan.

Peter Van Runkle, executive director for the Ohio Health Care Association, said Kasich's plan appears to protect nursing homes' reimbursement rates and their ability to participate in managed-care plans.

"The administration worked with us to hear our concerns," Van Runkle said. "Although there are things we've talked about that are not readily apparent in the document, they've heard our concerns and taken them into account to some degree."

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