



MAKING MEDICAID MANAGED CARE WORK FOR KENTUCKIANS

Kentucky Voices for Health is a broad coalition of more than 100 organizations working to improve Kentuckians' health and health-care coverage. As the Commonwealth seeks opportunities to expand Medicaid managed care, Kentucky Voices for Health is interested in ensuring that the following principles are addressed.

1. Kentuckians should have access to high-quality, affordable, effective health care regardless of poverty status or disability.
2. To ensure a health care program that is responsive and accountable to the public, the state should require managed care plans to implement consumer involvement, representation, and protections; including adequate appeal rights for denial of services.
3. Managed care plans should cover prevention and early intervention, emphasize a recovery orientation, and provide for health education and promotion of healthy lifestyles.
4. The state should engage in vigorous oversight and management to assure the highest quality of care; eliminate waste, fraud, and abuse; and achieve administrative efficiency at all levels.
5. Implementation of cost-containment and cost-sharing measures should be grounded in evidence-based practices and should not create a barrier for individuals to access necessary care.
6. Provider rates should be set appropriately to assure participation and access.
7. Provider networks must be sufficient in number, distribution, and variety of health care professionals to serve Kentuckians in the Medicaid program in a timely and convenient manner.
8. The health care program should be comprehensive in benefit structure and promote the integration of mental, dental and vision care with physical health care to meet all of the health needs of Kentuckians in the Medicaid program.
9. Administrative costs should be limited in a manner similar to the Medical Loss Ratios required by the Affordable Care Act to ensure that funds for the provision of services will not be unnecessarily diverted to profits for managed care plans.
10. The state should require transparent record keeping affording the public easy access to key information about the cost and quantity of services provided in each Kentucky county, utilization trends, quality indicators, patient satisfaction and health care outcomes.
11. All contractors receiving state funds to administer Medicaid managed care programs should be required to comply with the Kentucky Open Records Act.