




Medicaid Reform-Public Input






1. Please include demographic information so feedback can be given to DOH and CMS. Thank you

		Response Percent	Response Count
Name:		100.0%	34
Company:		61.8%	21
Address:		85.3%	29
City/Town:		97.1%	33
State:		100.0%	34
ZIP:		97.1%	33
Country:		94.1%	32
Email Address:		94.1%	32
		answered question	34
		skipped question	1




2. Need to define medical home at outset:

		Response Percent	Response Count
Very Important		87.5%	28
Somewhat Important		9.4%	3
Neutral		3.1%	1
Not Important		0.0%	0
answered question			32
skipped question			3




3. Medical home definition should support patient-centered medical homes (American Academy of Family Physicians)

		Response Percent	Response Count
Very Important		83.3%	25
Somewhat Important		13.3%	4
Neutral		3.3%	1
Not Important		0.0%	0
answered question			30
skipped question			5




4. ACO's need to be more robustly defined ensuring access to adequate networks and quality care.

		Response Percent	Response Count
Very Important		83.9%	26
Somewhat Important		6.5%	2
Neutral		9.7%	3
Not Important		0.0%	0
		answered question	31
		skipped question	4





5. Create a Health Benefits Commission (HBC) comprised of expertise from the private and public sectors to define a minimum level of creditable coverage or 'floor' for the level of coverage that individuals must have based on the dictates of evidence-based medicine.

		Response Percent	Response Count
Very Important		79.3%	23
Somewhat Important		17.2%	5
Neutral		3.4%	1
Not Important		0.0%	0
		answered question	29
		skipped question	6





6. Create safeguards for vulnerable populations in the benefit rationing process.

		Response Percent	Response Count
Very Important		86.2%	25
Somewhat Important		10.3%	3
Neutral		3.4%	1
Not Important		0.0%	0
answered question			29
skipped question			6




7. Take the elimination of EPSDT (Early & Periodic Screening, Diagnosis, and Treatment for children) out of the proposal for benefit rationing entirely.

		Response Percent	Response Count
Very Important		75.9%	22
Somewhat Important		13.8%	4
Neutral		6.9%	2
Not Important		3.4%	1
answered question			29
skipped question			6





8. Create transparent and extensive review process of the benefit priority list.

		Response Percent	Response Count
Very Important		75.9%	22
Somewhat Important		17.2%	5
Neutral		3.4%	1
Not Important		3.4%	1
answered question			29
skipped question			6




9. Create a sliding scale, or a tiered program, acknowledging that different incomes and populations have different abilities to cost share.

		Response Percent	Response Count
Very Important		86.2%	25
Somewhat Important		10.3%	3
Neutral		0.0%	0
Not Important		3.4%	1
answered question			29
skipped question			6





10. Provide cost-sharing protections for people with disabilities and others living on fixed incomes.

		Response Percent	Response Count
Very Important		89.7%	26
Somewhat Important		3.4%	1
Neutral		3.4%	1
Not Important		3.4%	1
		answered question	29
		skipped question	6





11. The health outcomes measures should focus on those measures that are both meaningful for patients and can demonstrate quick monetary savings, including: Potentially preventable initial hospital admissions, especially for patients with chronic conditions and potentially preventable emergency room visits, readmissions, and preventable hospital complications.

		Response Percent	Response Count
Very Important		85.7%	24
Somewhat Important		10.7%	3
Neutral		3.6%	1
Not Important		0.0%	0
		answered question	28
		skipped question	7




12. Allow sharing of medical history records upon enrollment of a beneficiary as matter of course, i.e. patient is presumed to have automatically opted in. However, If necessary to gain approval...include provision allowing beneficiary to 'opt out' in order to increase quality outcomes.

		Response Percent	Response Count
Very Important		57.1%	16
Somewhat Important		28.6%	8
Neutral		7.1%	2
Not Important		7.1%	2
		answered question	28
		skipped question	7





13. The premium subsidy option should have the same Medicaid cost sharing protections, 5% of income.

		Response Percent	Response Count
Very Important		82.1%	23
Somewhat Important		7.1%	2
Neutral		3.6%	1
Not Important		7.1%	2
answered question			28
skipped question			7

14. Create a clear and understandable disclosure process for consumers who may elect this option, explaining that the cost sharing could be much higher in private market.

		Response Percent	Response Count
Very Important		88.9%	24
Somewhat Important		7.4%	2
Neutral		0.0%	0
Not Important		3.7%	1
answered question			27
skipped question			8

15. Adults should be able to opt out of the private market and reinstated in Medicaid at any time, just like the children.

		Response Percent	Response Count
Very Important		77.8%	21
Somewhat Important		14.8%	4
Neutral		3.7%	1
Not Important		3.7%	1
		answered question	27
		skipped question	8

16. Additional Comments or concerns:

		Response Count
		3
		answered question
		3
		skipped question
		32