CardinalCare
Virginia's Medicaid Program

Current Medicaid Initiatives

DMAS

DMAS is Member Focused

DMAS listens, learns, and evaluates to improve the program

DMAS is committed to improving

- Coverage Process
- Education and Information
- Services – Accessible and Available
  - Provider Networks
  - Support Services
- Member's ability to choose plans, services and providers

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Behavioral Health Services Redesign
Right Help, Right Now

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Six Pillars of Governor Youngkin's Right Help, Right Now Plan

An aligned approach to BH that provides access to **timely, effective, and community-based care** to reduce the burden of mental health needs, developmental disabilities, and substance use disorders on Virginians and their families

1: We must strive to ensure **same-day care for individuals experiencing behavioral health crises**

2: We must **relieve the law enforcement communities' burden** while providing care and **reduce the criminalization of behavioral health**

3: We must **develop more capacity** throughout the system, going beyond hospitals, especially to enhance community-based services

4: We must **provide targeted support for substance use disorder (SUD)** and efforts to prevent overdose

5: We must **make the behavioral health workforce a priority**, particularly in underserved communities

6: We must **identify service innovations and best practices** in pre-crisis prevention services, crisis care, post-crisis recovery and support and develop tangible and achievable means to close capacity gaps

Initiatives to redesign adult (Pillar 3) and youth (Pillar 6) Medicaid services arose in two Pillars

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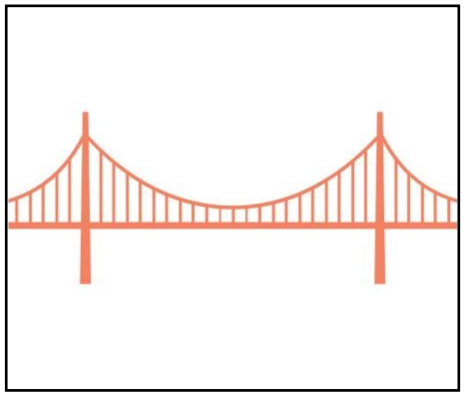
Source: VA HHR

Medicaid Behavioral Health Services Redesign Priorities



Strengthen the evidence-based, trauma-informed service continuum for youth and adults

Promote earlier intervention and increase access through tiered service design

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Design services for Virginia's managed care service delivery system and multipayer system

Integrate workforce priorities and workforce supports into service design and implementation

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Maternal and Child Health

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Virginia Medicaid Maternal Health & Outcomes

As Virginia Medicaid covers 1/3 of births, investing in maternal health and adopting best evidence-based practices in the perinatal and postpartum period can prevent many of the common causes of pregnancy-related morbidity and improved family and community health

- Pregnancy-related morbidity disparities are greatest among African American women and women in the Tidewater, and Roanoke/ Alleghany regions
  - Highest pre-term and low-birth weight babies
  - Highest Emergency Room (ER) utilization postpartum

- Majority of Virginia Medicaid maternal deaths occur **after** childbirth, with common causes including:
  - Cardiovascular Disease
  - Sepsis/Infection
  - Hemorrhage
  - Hypertensive Disorders
  - Thrombotic Pulmonary Embolism
  - Behavioral Health and Substance Use Disorder

Snapshot of Actions to Connect the Dots on Enhancing Maternal Care

Reviewing Virginia and national data and programs to inform policies and programs
Launching the Ask Aspirin campaign to combat cardiac comorbidities
Working with the provider community on improving care and extended hours
Working with hospitals to add the postpartum visit discussion on hospital discharge checklist
New enhanced materials and communications to members
Participating in Governor's Maternal team, task force and National Governor's Association learning opportunity with VDH

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Oral Health

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- *Cardinal Care Smiles* (formerly Smiles for Children) is Virginia's Medicaid dental program
- *Cardinal Care Smiles* provides comprehensive benefits for children, pregnant members and adults ages 21 and older
- *Cardinal Care Smiles* is currently administered by DentaQuest

Program Goals

- Prevention and Education

- Emphasize oral health as an integral part of overall health

- Innovative strategies to improve utilization and access to care through member, provider, and stakeholder outreach

A Health Body Starts With A Healthy Mouth

IMPACTS BEYOND THE MOUTH

Growing evidence connects a healthy mouth with a healthy body. Here are some examples showing why oral health is about much more than a smile:

High Blood Pressure

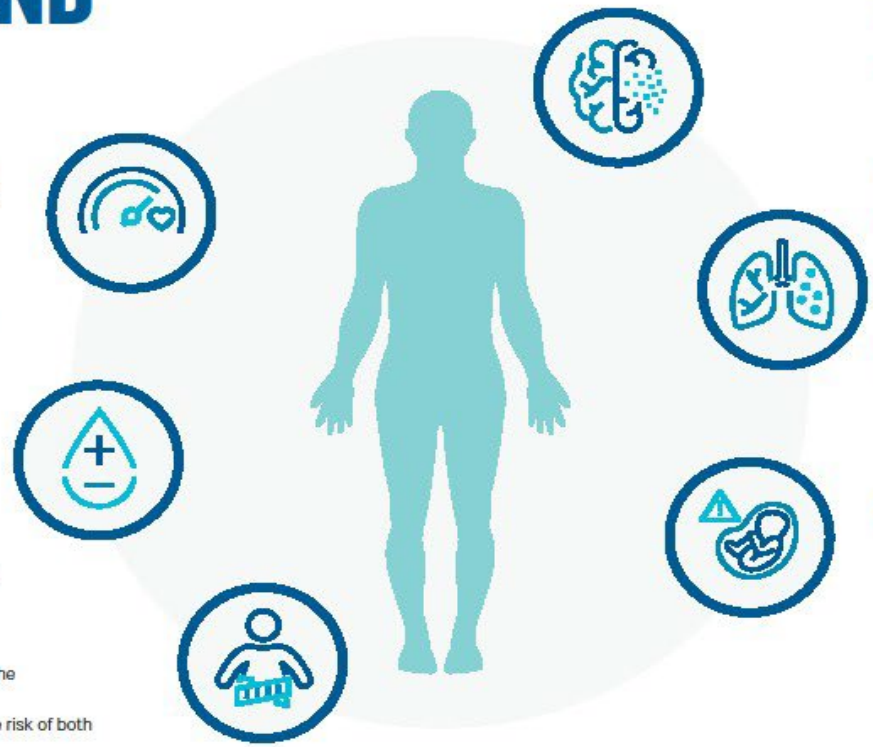
- Putting off dental care during early adulthood is linked to an increased risk of having high blood pressure.[1]
- Patients with gum disease are less likely to keep their blood pressure under control with medication than are those with good oral health.[2]

Diabetes

- Untreated gum disease makes it harder for people with diabetes to manage their blood glucose levels.[3]
- Diabetes raises the risk of developing gum disease by 86%.[4]

Obesity

- Brushing teeth no more than once per day was linked with the development of obesity.[5]
- Frequent consumption of sugar-sweetened drinks raises the risk of both obesity[6] and tooth decay among children[7] and adults.[8]



Dementia

- Having 10 years of chronic gum disease (periodontitis) was associated with a higher risk of developing Alzheimer's disease.[9]
- Researchers report that uncontrolled periodontal disease "could trigger or exacerbate" the neuroinflammatory phenomenon seen in Alzheimer's disease.[10]

Respiratory Health

- Research shows that improving oral hygiene among medically fragile seniors can reduce the death rate from aspiration pneumonia.[11]
- Patients with ventilator-associated pneumonia (VAP) who engaged in regular toothbrushing spent significantly less time on mechanical ventilation than other VAP patients.[12]
- Improving veterans' oral hygiene reduced the incidence of hospital-acquired pneumonia (HAP) by 92%, preventing about 136 HAP cases and saving 24 lives.[13]

Adverse Birth Outcomes

- Gum disease among pregnant women is associated with preterm births, low birthweight babies and preeclampsia, a pregnancy complication that can cause organ damage and can be fatal.[14]

DentaQuest.
Partnership
for Oral Health Advancement

SOURCES

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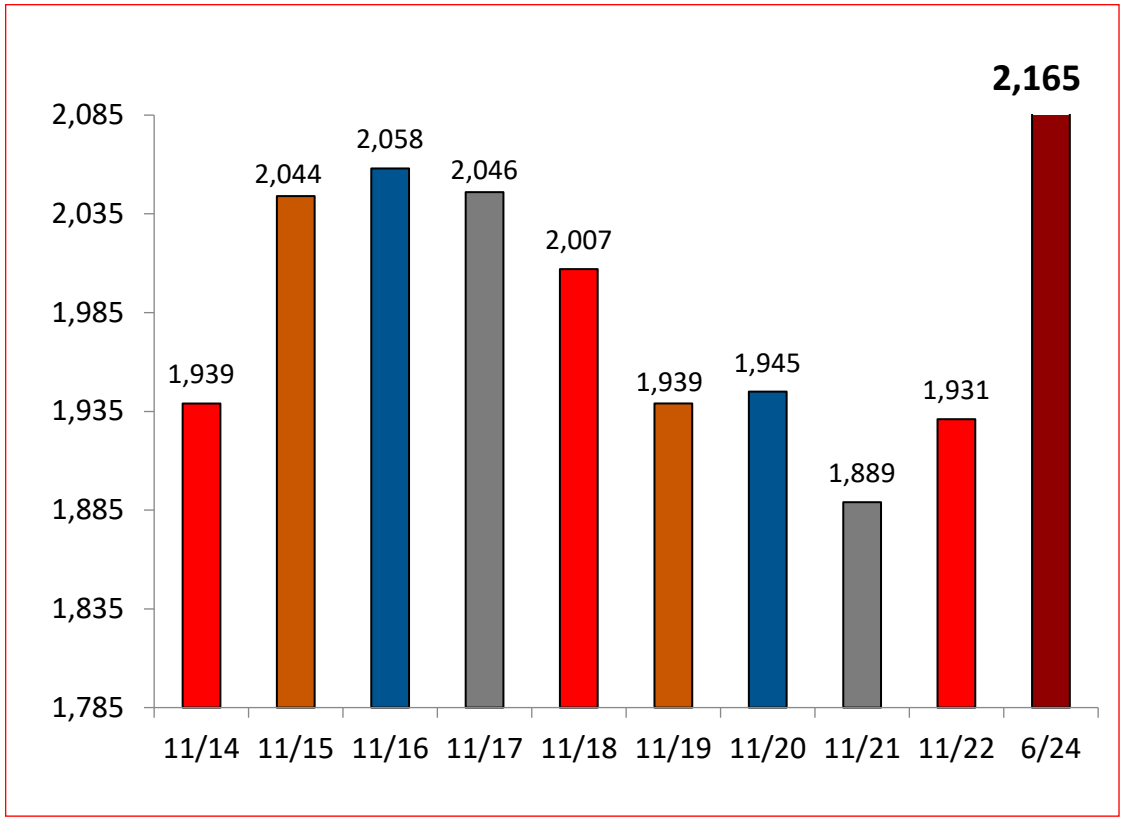
Provider Participation



7/15/2024	
Files with Incomplete/Missing Documentation	5
Application Aging	Complete Applications in Process
0-15 days	14
16-30 days	5
31-59 days	0
60 and over	0
Total providers processed CY2024 and added to network 1/1/2024 to 7/14/2024	133

As of July 31, 2024, **2,165** dentists are participating in the program:

- This represents approximately 28% of Virginia licensed dentists
- 38% of the states practicing dentists participate in the program

CardinalCare Smiles
Improving Dental Care in Virginia for Children and Adults

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Virginia's Medicaid Program

DMAS' New Website and Dashboards

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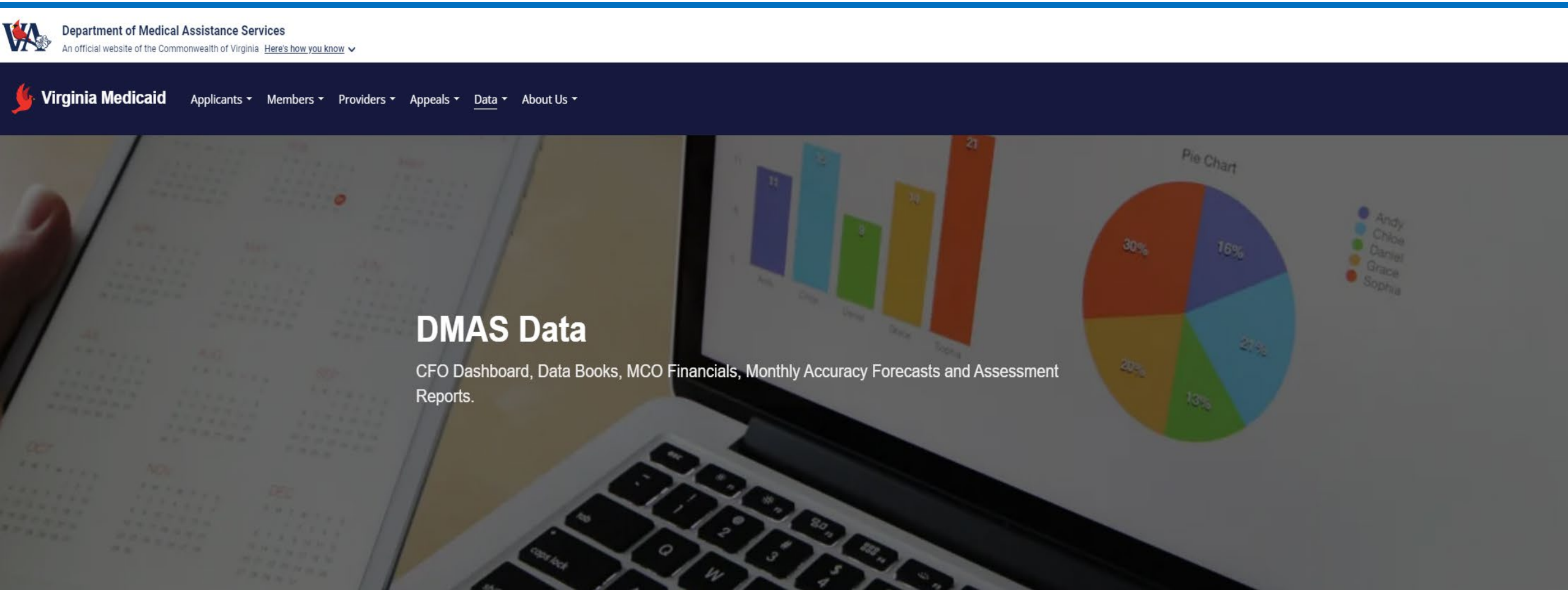
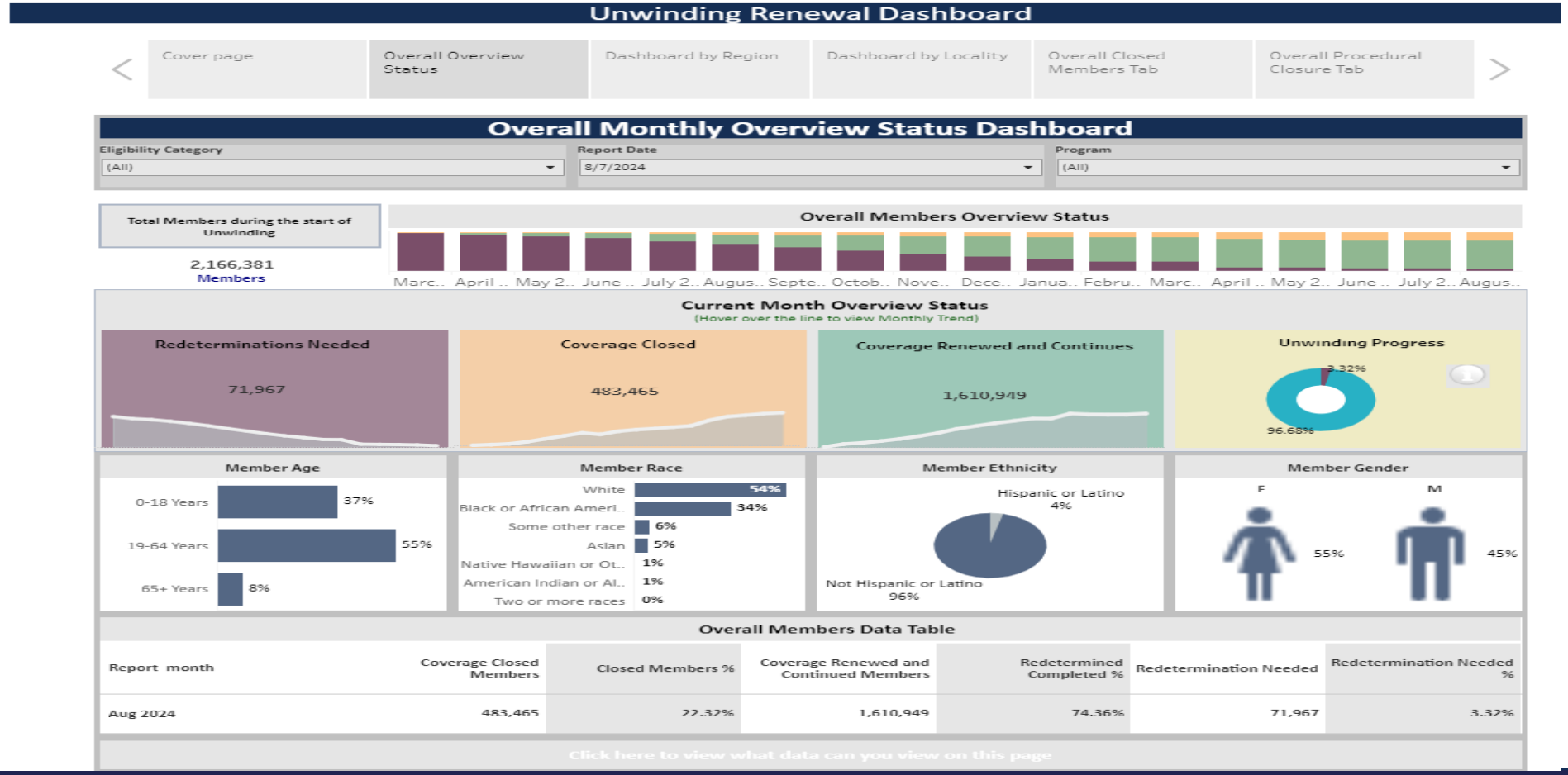
DMAS' New Website and Dashboards

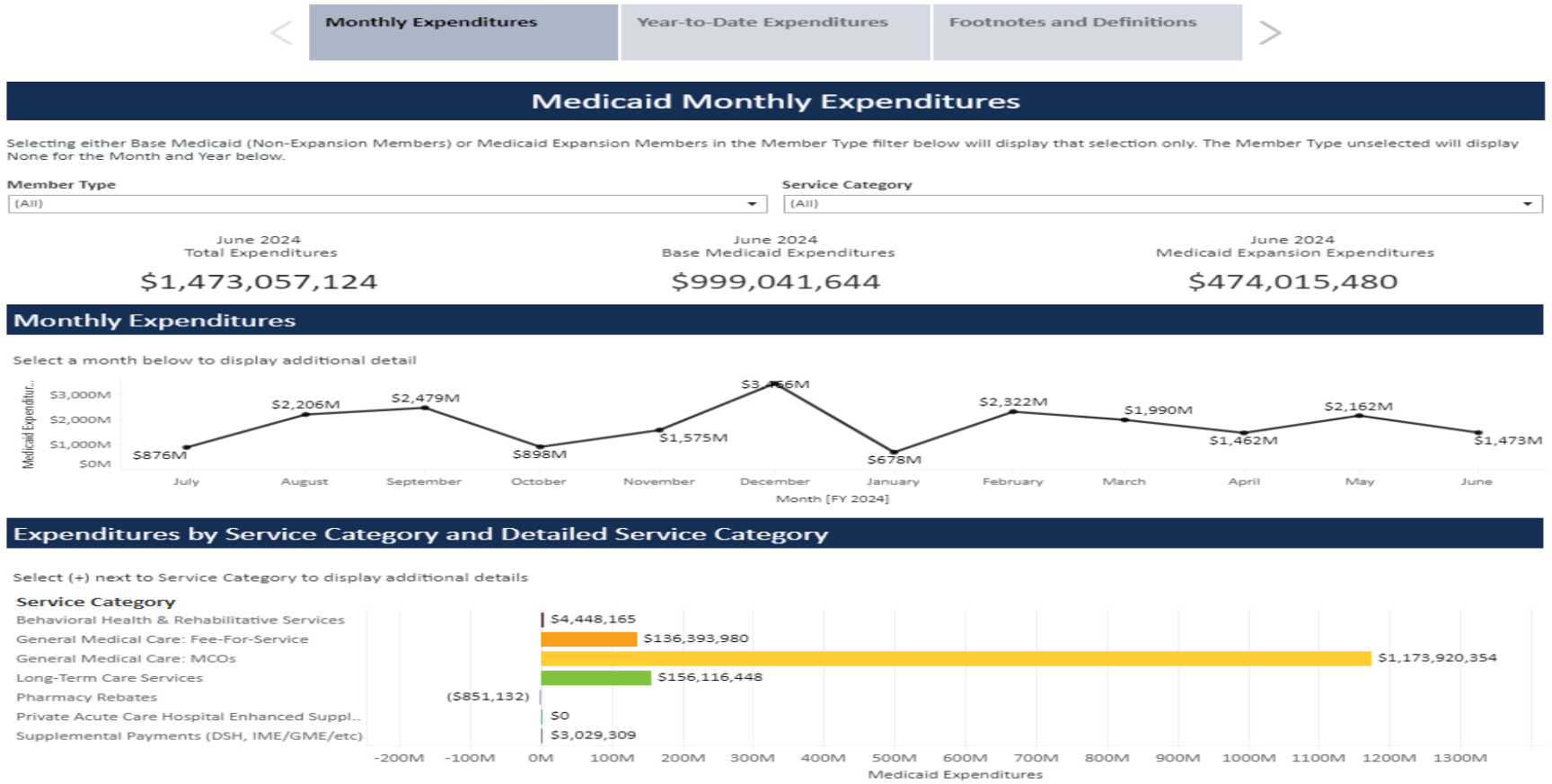


Eligibility Redetermination Tracker

The Eligibility Redetermination Tracker displays Virginia Medicaid's overall unwinding status.



Monthly Expenditure Reports of the Medicaid Program



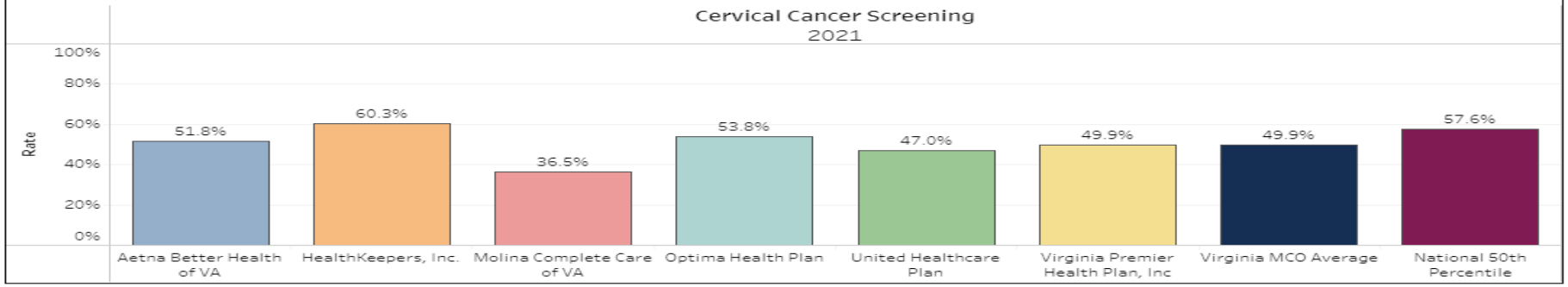
HEDIS Dashboard – Preventive Care for Adults

HEDIS® is a registered trademark of the National Committee for Quality Assurance (NCQA)

Measure Name (Select from Dropdown below):

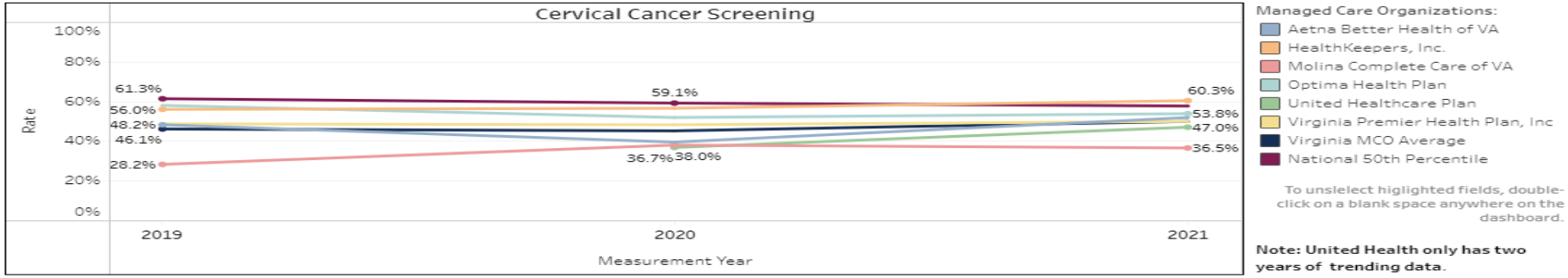
Cervical Cancer Screening

Category: Preventive Care for Adults



Measure Definition:

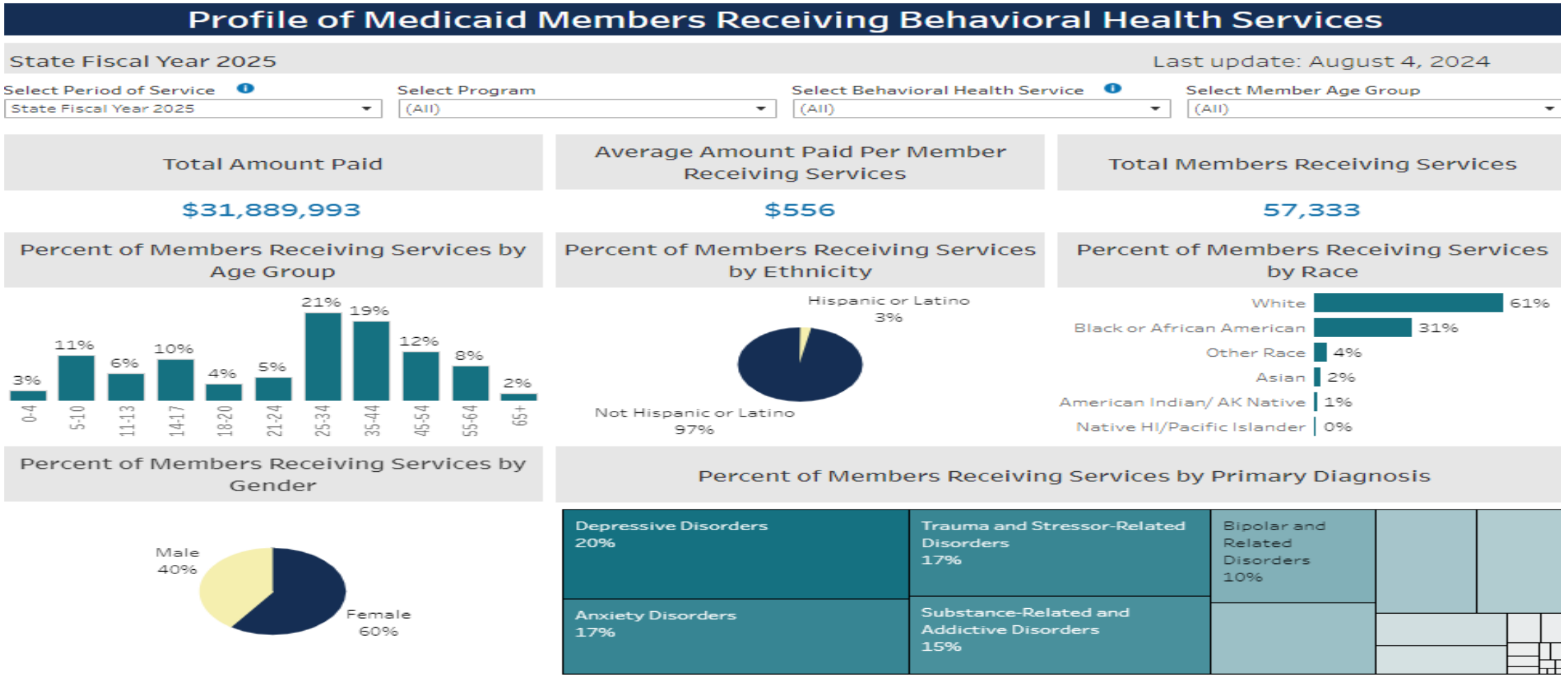
The percentage of women 21–64 years of age who had cervical cytology performed within the last 3 years, women 30-64 years of age who had cervical high-risk human papillomavirus (hrHPV) testing performed within the last 5 years, or women 30-64 years of age who had cervical cytology/high-risk human papillomavirus (hrHPV) co-testing performed within the last 5 years.



To unselect higlighted fields, double-click on a blank space anywhere on the dashboard.

Note: United Health only has two years of trending data.

DMAS Dashboard



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Virginia's Medicaid Program

DMAS Leadership

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DMAS Executive Leadership Team

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Agency Director

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Chief of Staff

Adrienne Fegans
Deputy for Programs & Operations

Chris Gordon
Chief Financial Officer

Sarah Hatton
Deputy for Administration

John Kissel
Deputy for Technology & Innovation

Jeff Lunardi
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Thank You!