South Carolina Medicaid in 2018

Bryan Arrick
SC Chapter, American Academy of Pediatrics
2018 CATCH Quality Improvement Meeting

Medicaid in South Carolina

- FY 2017 Appropriation: $7.2 billion
- Full benefit Membership: 1.04 million
  - Children: 625,000
  - Medicaid Adults: 132,000
  - Other Adults: 160,000
  - Elderly: 66,000
  - Limited Benefit: 33,000

- 64% of Medicaid members are age 0 to 18
- Roughly 65% of all children in SC are on Medicaid
- Medicaid pays for 60% of all births in SC
- 74% of our Medicaid members are enrolled in Managed Care

Medicaid in South Carolina

Improving pediatric quality of care

Efforts to address the opioid epidemic

Drug pricing and formulary approaches

Quality Withholds

Medicaid CQI Quality Reform: Measurement Years 2016 and 2017

| Measure | Result | Value | Standard
|---------|--------|-------|-----------
| Birth Weight | % | 10% | NC
| Infant Mortality | % | 20% | NC
| Child Health | % | 50% | NC
| Chronic Disease | % | 10% | NC
| Homelessness | % | 10% | NC
| Substance Use | % | 10% | NC
| Suicide | % | 10% | NC

Blending Quality and Payment Reform

Pediatric Quality of Care
2017 Performance

- Well-child visits for 3 to 6 year olds
  - Between 25th and 50th percentiles
  - Improved by 14.27 percent
- Well-child visits during the first 15 months of life
  - Between 50th and 75th percentiles
- Adolescent well-care visits
  - Between 50th and 75th percentiles
- Weight Counseling BMI
  - Between 50th and 75th percentiles

BH Index Measures

1. Antidepressant medication management - Continuation phase (AMM)
2. Follow-up care for children prescribed ADHD medication - Initiation phase (ADD)
3. Follow-up after hospitalization for mental illness - 7 Day (FUH)
4. Use of First-Line Psychosocial Care for Children and Adolescents on Antipsychotics - Total (APP)
5. Metabolic monitoring for children and adolescents on antipsychotics - Total (APM)
6. Initiation and engagement of alcohol and other drug dependence treatment - Initiation, Total (RET)

In South Carolina...

- Prescription Opioid Overdose Deaths: In 2016, 550 deaths occurred in South Carolina from a drug overdose with prescription opioid drugs listed on the death certificate
  > 7% increase from 2015
- Heroin Opioid Overdose Deaths: Fatal overdoses involving heroin increased by 14% from 2015 to 2016
  > Fatal overdoses involving heroin increased by 67% from 2014 to 2015.
- Opioid Overdose Deaths Surpass Homicides: In 2015, the number of deaths from heroin and opioid overdoses in South Carolina surpassed the number of homicides.

Source: SCDHHS Website

Medicaid Adults with an Opioid Prescription

- Source: SCDHHS Website

- 2013: 27.0%
- 2014: 26.0%
- 2015: 24.0%
- 2016: 22.0%
**SUD Treatment**

- Innovative delivery models
  - Emergency room initiation of MAT
  - Prevention of MAT via telehealth
- More aggressive screening
  - Building on SBIRT model
  - Screening, Brief Intervention, and Referral to Treatment (SBIRT) current covered for pregnant women when provided by an obstetrician

**High drug prices aren't all the same**

![Image of dollar bill and pills]
Drug Pricing

- "High drug costs" - not a singular phenomenon
  - Valuing new technology
  - Limiting exposure to low-value expenses
- Largely the result of generous pharmacy coverage
  - Consumers and prescribers are ill-informed and insensitive to drug costs
- Current policy environments prohibit aggressive payer controls
  - Medicaid "all rebated drugs" rule
  - Bans on closed formularies

Formulary Approaches

- Divergent incentives create widening gaps in formulary approaches between payers
- While these are usually manageable, issues can arise
- In pediatrics, those seem to center around specific drug classes:
  - ADHD
  - Asthma