

Community Network Development Workgroup Meeting Notes

July 15, 2002

I. Welcome and Introductions

Leslie Hine-Rabichow, Evalyn Greb, Jeff Lazenby, Kathlyn Mead, Louise Guarnotta, Burton Disner, Leane Marchese, Carol Fitzgibbons, Roger Bailey, Sara Barnett

II. Agenda Review – Meeting Objectives

The two previous workgroup meetings generated discussions regarding the importance of creating and organizing community provider networks that can be successful in contracting with different types of business models (i.e., managed care organizations, FFS, other).

The objective of this meeting was to discuss more in-depth the “how to’s” of organizing community networks to successfully contract with the various business models for the LTCIP.

III. Presentation

Kathlyn Mead, CEO Sharp Health Plan, outlined important issues and questions that community-based organizations (CBOs) need to address when contracting with a managed care organization (MCO). MCOs must meet certain standards and requirements for National Committee for Quality Assurance (NCQA) accreditation, so it is important for CBOs to be able to provide MCOs with adequate background information about their organizations.

MCOs want to know:

- 1) Who are you and what services do you provide?
- 2) What are the similarities/differences between your organization and other service providers? Geographic service areas? Target populations? What areas overlap?
- 3) What is your administrative structure? What efficiencies can you offer the MCO?
 - i) How do you bill and collect?
 - ii) What is your Board make-up?
 - iii) What are your current marketing strategies?
 - iv) How do you interface with other organizations?
 - v) What are the costs of your services?
 - vi) How do you price your services and how do they compare to others who provide similar services? *Price, quality of service, outcomes from consumer satisfaction and measures of success are the most important drivers for MCOs.*
- 4) **How do you contract with managed care?**
 - i) What services are you going to sell? Is it a necessary service?
 - ii) What is your structure for contracting with outside agencies? What does your business model look like? Does it make sense?
 - iii) How much experience and expertise do you have with negotiation?

IV. Group Discussion – Main points

- ◆ The Council of Community Clinics is a good example of several providers collaborating to consolidate the contracting process with a managed care organization (i.e., one contract).
- ◆ Community based organizations need financial stability in order to survive in the managed care environment. (Kathlyn will bring financial solvency standards to next meeting).

