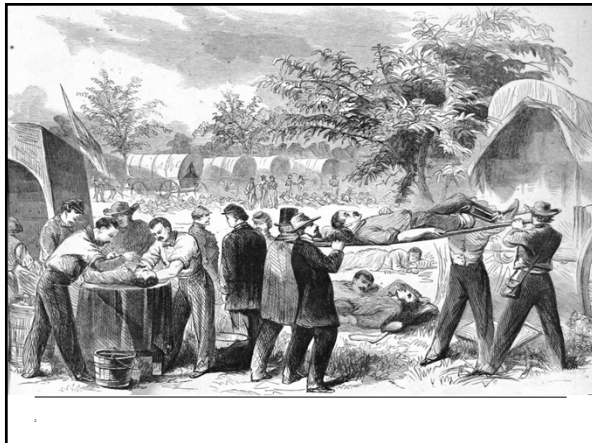


MANAGED CARE: *IS IT WORKING?*
OCTOBER 16, 2024

Willi Lucius, Chief Trust Officer
Raymond James Trust, N.A.

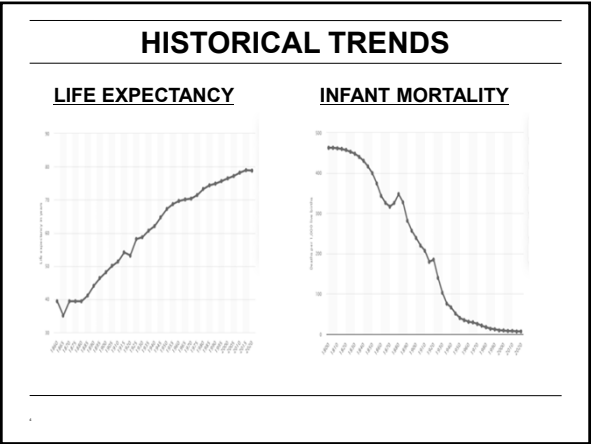
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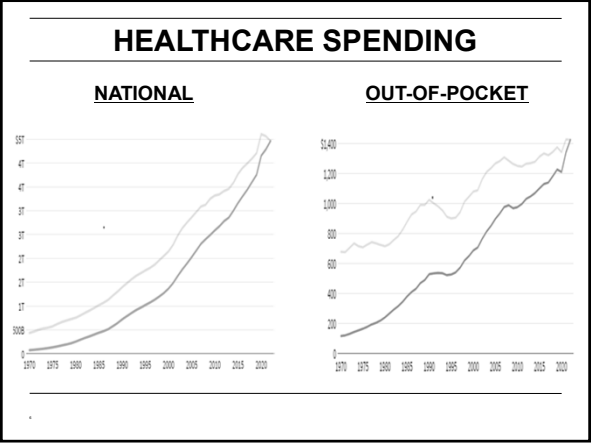
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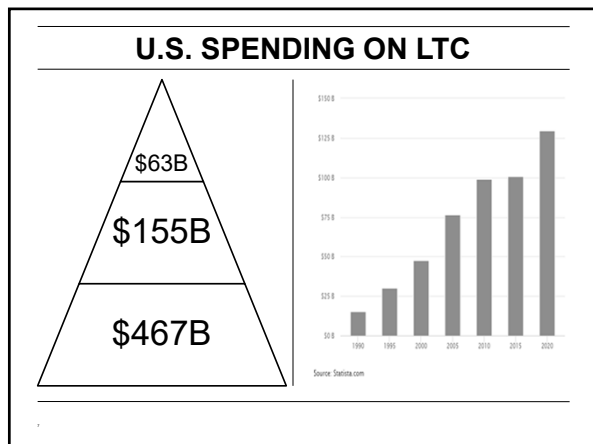
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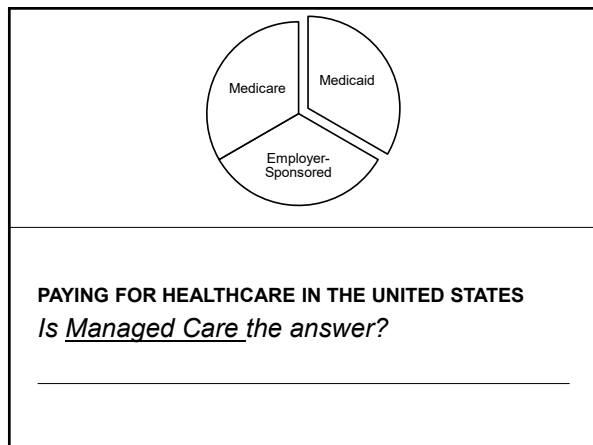
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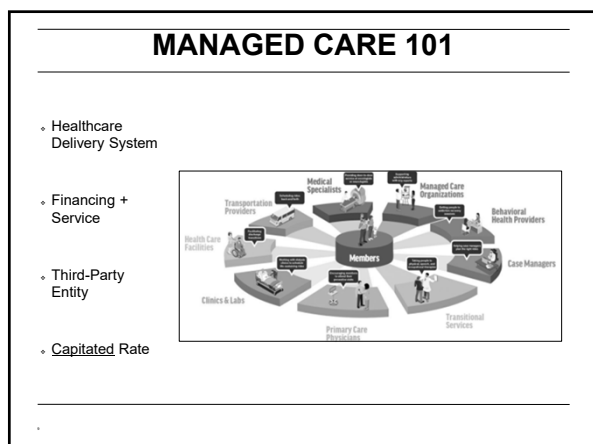
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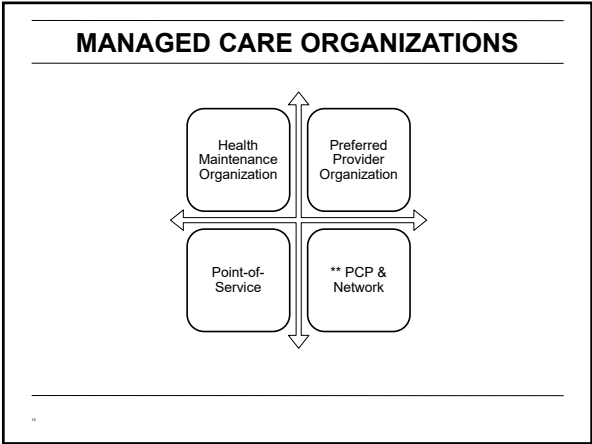
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11

FEE-FOR-SERVICE

AGREED RATE OF MEDICAL CHARGES.

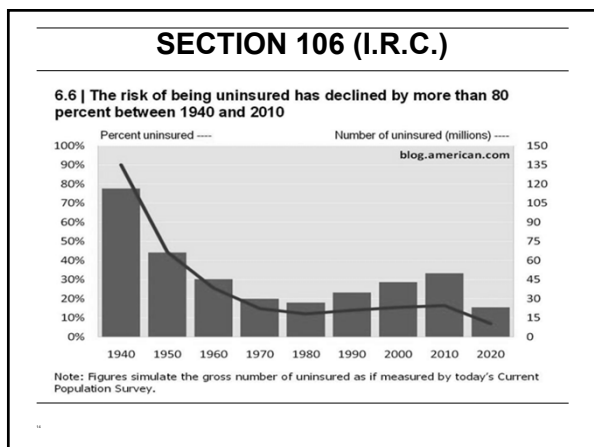
PHYSICIANS, PRACTISING IN CHARLOTTESVILLE, MUTUALLY AGREE, TO CHARGE AND REQUIRE FEES NOT LESS THE FOLLOWING, IN THE CASES HEREINAFTER SPECIFIED.

VISITS. (including one prescription.) within the Corporation, and the limits of the Corporation and with- age boards, viz.: George Simola's, the Wm. Booth's, Madrell and William (including these several places, to limit, and not exceeding two miles, he above two,	\$ etc. 1 00 1 50 2 00 2 25	Caries or Necrosis, Trephining, Introducing Catheter or Bougie. 1. The first time 2. Each subsequent time, Excision of one Tonsil, " " both Tonsils, Removal of Enlarged Uvula, Removal of a foreign body from the Nose, Ear,	\$10 to 50 00 25 to 100 00 5 00 1 00 10 00 15 00 5 00	Difficult or Instrumental Delivery, Delivery of Placenta—Fetus not delivered by the ician, Abortions to be charged as Labors. If a Physician is summoned to attend a woman ber, and is in the house but does not officiate, he receive the same fee as if he did. All necessary services, subsequent to confinement
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12



13



14

HMO ACT OF 1973

ACT FEATURES

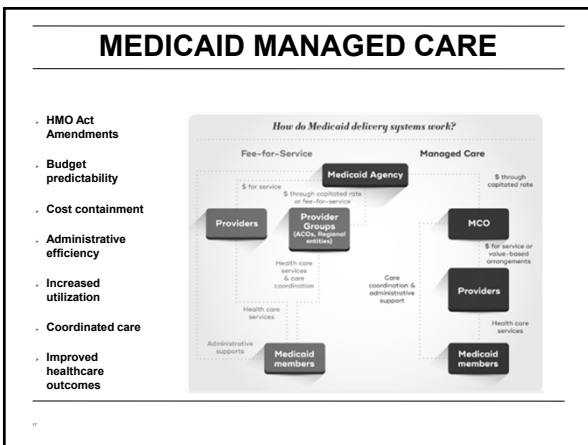
- Inflationary pressures and inefficiencies of FFS system
- Supported expansion of HMOs
- Preempted state law
- HMO choice in employer-sponsored coverage

15

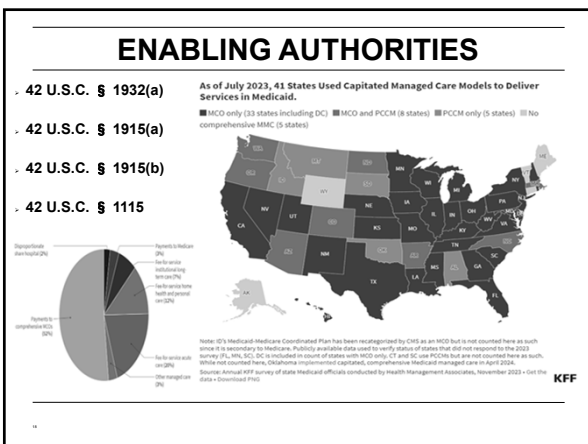


INTERSECTION OF MEDICAID & MANAGED CARE

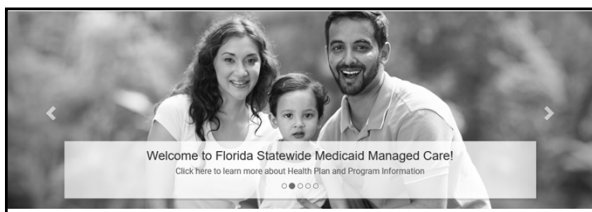
16



17



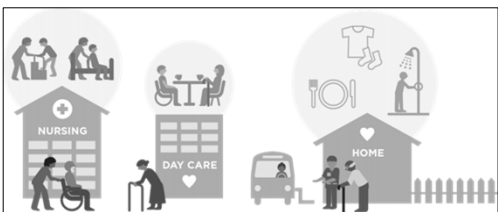
18



DELIVERY OF LTSS BENEFITS IN A MEDICAID MANAGED CARE MODEL
Remains fragmented...

19

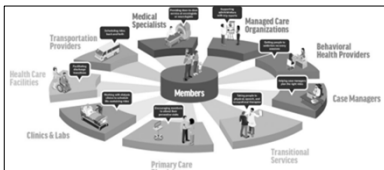
LONG-TERM SERVICES AND SUPPORTS
 It is expensive.



20

MLTSS 101

- Risk-based, capitated program
- State MA Agency & MCO
- <65 + people with disabilities
- Enabling Authorities



21

MANAGED CARE BACKLASH

AS THE MARKETPLACE CHANGES, CONSUMERS ARE CAUGHT IN THE MIDDLE



By Stuart Auerbach
June 25, 1996 at 1:00 a.m. EDT

After undergoing breast cancer surgery, Kathleen Newell required another operation to strengthen her abdominal wall. Her Johns Hopkins University surgeons wanted the 59-year-old Columbia shoe saleswoman in the hospital a day early for preoperative medication. But Newell recalls that the gatekeeper physician at her health maintenance organization (HMO) overruled the surgeon's recommendations and told her to take the medicine at home.

11

25

FINAL RULE

Health Affairs

➤ **"MA and CHIP Managed Care Access, Finance and Quality Final Rule":**

1. Strengthen standards for access to primary care
2. Enhanced fiscal integrity
3. "In lieu of services"
4. Quality rating system for MCOs

Still needed

- 1) Network quality monitoring
- 2) Comprehensive, standardized assessments
- 3) Increased funding

HEALTH AFFAIRS FOREFRONT
RELATED TOPICS
PAYMENT | MEDICAID | MANAGED CARE | TAXES
HEALTH CARE PROVIDERS | MEDICAID MANAGED CARE
COSTS AND SPENDING | QUALITY OF CARE | MEDICAL LOSS RATIO
WAIT TIMES

The Medicaid Managed Care Rule Is A Blockbuster

Sara Rosenbaum, Maria Casoni

MAY 13, 2024 10:1377/forefront.20240513.024164



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AP

WORLD U.S. ELECTION 2024 POLITICS SPORTS ENTERTAINMENT BUSINESS SCIENCE FACT CHECK ODDITIES BE WE

Vanderbilt beat Alabama Tropical Storm Milton Midwest wars Bronny James Keane Reeves debut

AP SU

U.S. NEWS

States offer services for disabled kids, then make their families wait 10 years for them

11

27

Will Lucius, J.D.
Chief Trust Officer

Raymond James Trust N.A.
T 727.567.7758 // F 727.567.7482
880 Carillon Parkway
St. Petersburg, FL 33716
will.lucius@raymondjames.com

QUESTIONS???
