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Building and Sustaining University-Medicaid Partnerships When State Governments Change

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Authors	Friedman, Jerry;Thibodeau, Marc A.
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ISSUE BRIEF

BUILDING AND SUSTAINING UNIVERSITY-MEDICAID PARTNERSHIPS WHEN STATE GOVERNMENTS CHANGE

“There is nothing permanent except change.”
– *Heraclitus of Ephesus (c. 535 – c. 475 BCE)*

“The times they are a changin’.”
– *Bob Dylan (1964)*

“And it ought to be remembered that there is nothing more difficult to take in hand, more perilous to conduct, or more uncertain in its success, than to take the lead in the introduction of a new order of things.” – *Niccolo Machiavelli (1469-1527)*

Many of you are at the beginning of the journey to grow a successful and sustainable partnership between your public universities and your state’s Medicaid-financed health and human service agencies. Perhaps there is a single faculty member who has been engaged around research or services that are of value to the state’s program needs. Perhaps the state saw an expertise available through the university that was equal to or better than what it could find in the private sector.

How to grow that relationship into a true partnership that leverages available and new resources to provide mutual benefits is an enviable goal. These types of partnerships were envisioned by the original drafters of the Medicaid law and supported by the regulations that have framed the program. However, any partnership that joins two complex and bureaucratic organizations relies upon the infrastructure created to support it and the resiliency of the people who make it work.

Resiliency is necessary because things change. Leadership and priorities change within universities. State governments have built in mechanisms for change — elections. When change happens, what survives and persists are those things of value to the constituencies in power. Creation, growth, and survival of these partnerships are maximized when they are built upon a foundation of mutual benefit and trust.

The experiences of the many states exploring these types of partnerships are as varied as their Medicaid programs and systems of higher education. However, many state universities share the common core mission of discovery, creation, and dissemination of knowledge for the betterment of society and the communities they serve. What better avenue to amplify that mission than by leveraging public university efforts in support of state health and human services programs? This partnership brings together the right knowledge and expertise to provide actionable recommendations, based upon data-driven research and evaluations, so as to better inform public policy decision-making.

As sensible as that may seem, it challenges the way things have been done traditionally, and can threaten the political and personal power-bases of the leaders and constituencies who make it work.

What does it take to create a partnership that works, and can sustain the inevitable change that will occur?

For the state, the partnership creates a dedicated, knowledgeable resource that can provide an array of services and expertise to respond to the programmatic and policy challenges facing the largest health plan in most states. Medicaid can, and often does, address program problems by outsourcing to private-sector consultants. But, while in the instant moment those consults may deliver a well-crafted product, they come and they go with the vagaries of competitive bidding. This often means learning and relearning on the state's nickel. Public universities are a constant. While personalities may change, the public university can create infrastructure that sustains a body of knowledge that can be in-sourced to meet the needs of the state.

How does one strategically position this enterprise to sustain and succeed in the changing environment?

When state government leadership changes, one needs to be conscious of the line in the executive agency organizational chart that separates the political from the programmatic. This includes those above the line who serve at the pleasure of the electeds and those below the line who support and maintain the programs (i.e., get the checks out). While the use of political engagement may be of value in the initial establishment of the partnership, sustainability requires the ongoing provision of valued products and support to those charged with the delivery of program services. Straddling the divide is sometimes necessary, but the enduring value comes from work products and projects that are based upon effective and efficient data-driven research and program evaluation, which is delivered on time and within a budget.

UMass Medical School's Commonwealth Medicine division, first established in the late 1990s, has experienced multiple changes in executive branch leadership since its founding. An area of particular programmatic emphasis has been the provision of clinical supports to Medicaid around utilization review, program evaluation, and pharmacy benefit management, among other activities. With each successive administration, an education process has been undertaken to convey the scope of activities and the programmatic benefits of those endeavors. Inevitably, every new administration has a desire to evaluate key aspects of the Medicaid program that they are now responsible for managing, and the university system affords new leadership a resource to help with that sorting-out process.

One must also recognize the legislative branch of state government. While much of the day-to-day partnership work occurs between the university and the executive branch agencies, the legislature can help or hurt the structural basis and financing of the partnership. For example, a useful tool to facilitate the fiscal stability of university-Medicaid programs is the ability of universities to both claim and retain available federal financial participation dollars. Legislative action is typically required in each budget cycle to assure the ability of the university system to retain those dollars for its administrative expenditures that would otherwise be credited to a state's general fund.

Unlike the executive branch, the legislative branch can be a stew of differing politics and world views. However, it may be of value to seek out those members who have an appreciation of the value such partnerships can bring to effective and efficient program administration; and seek them out as your champions. As the saying goes, "all politics is local." There is a benefit to identifying individual legislators whose constituents may be beneficiaries of programs conducted by universities on behalf of the Medicaid agency. Beginning with an emphasis on the local impact of a project may set the table for a broader discussion with members of the legislative branch around the goals and objectives of the public partnership created within state government.

The established partnerships in Ohio (the Ohio Colleges of Medicine Government Resource Center) and Massachusetts (UMass Medical School's Commonwealth Medicine division) are different in their structures and state relationships, but both have maintained and grown because they provide services that are difficult for state governments to create and sustain internally, and they have developed a reputation for a work product that is steeped in non-partisanship and objectivity. In addition, rather than relying upon existing relationships, they have been adept at creating new relationships and balancing the needs of their customers and constituents.

For example during the current Governor's first term, the GRC pressed for a sit-down with our state agency partners and sponsors. It was scheduled to occur when the state agencies were developing their budget requests for the next biennial operating budget. It gave us all an opportunity to bring into focus the demand for and timing of GRC work for which each agency expected to contract. Talking out these budget initiatives brought the participants to recognize the breadth of the GRC capabilities, but also the realization that all projects could not start on the day after the budget was enacted. As such, it informed our resource and personnel planning as to the necessary sequencing of expertise, capacity, and resources to remain a trusted source for high quality, responsive products and timely projects.

Another key factor that adds to the value and sustainability of these relationships is the unique ability of these partnerships to finance a substantial portion of its work through leveraging federal financial participation in the administration of these partnership activities. While this is the subject for a separate discussion, the ability for the state to receive valuable program research and administrative supports by leveraging public university resources to draw down federal matching funds is invaluable.

If change is inevitable, look at what you seek to build or have built. Rather than measuring its capacity for resiliency as a glass half empty or half full, measure it as halfway to the next glass.

Public University Medicaid Partnerships www.universitypartnerships.org

"Change brings opportunity." – Nido Qubein

CONTACT

Jerry Friedman, J.D.

Advisor for Health Policy

Associate Vice President for External Relations & Advocacy

The Ohio State University Medical Center

617-247-8353

jerry.friedman@osumc.edu

Marc A. Thibodeau, J.D., M.S.

Executive Director, Center for Health Care Financing

Commonwealth Medicine

University of Massachusetts Medical School

617-886-8098

Marc.Thibodeau@umassmed.edu