

**Partial excerpt of All Sides with Ann Fisher WOSU interview
with Ohio Department of Medicaid Director Maureen Corcoran**

Transcribed by Ohio Capital Journal's Marty Schladen

8/25/21

Q: Why did you restart the Centene contract after Yost made the accusation that he did?

A: The action that was brought by the attorney general was really separate from the procurement process that we were engaged in which was of course very rigorous.

It is very common, normal practice in Medicaid that when there are any kinds of legal actions against any kind of managed care provider or hospital or whomever, we have them identify that, we look into that. So we are aware of and looking into legal actions whether here in Ohio or elsewhere is part of the normal Medicaid application process. So of course when we heard the attorney general was going to bring this action, we in similar fashion as I just mentioned took a step back and said we are going to make our own assessment.

The attorney general then settled the case. There were still several weeks as you know that passed and we were making our own assessment at the same time and determined that we were going to proceed with them as part of our newly selected group of plans. They also, you may remember, scored the second-highest score from a quality point of view, so they provide good care, they've been a partner in Ohio.

But I also think one thing that's important to mention is that the issue that the attorney general brought has to do with pharmacy benefit managers and the role that they play with medications. Two years ago, our general assembly passed a law taking that responsibility away from the managed care plans and instructing the Department of Medicaid to set up a separate pharmacy benefit manager.

So, in essence, it was important for us to have good business partners, but in essence the underlying problem... and corporate oversight has changed

and that set of responsibilities as part of our new design will not be with the individual plans, but will be managed directly by the state."

Q: How has Centene's corporate oversight changed?

A: Our assessment of them was not unrelated, but different from, what the attorney general was looking at and we interact with them as a business partner and so what was important to us then and remains important to us is that there be appropriate ethical training and that there be oversight and compliance monitoring, all those sorts of things are again another routine part of our oversight and so we wanted to have a little time to, you know, take a look at those things."

Q: The attorney general acts as lawyer to the Medicaid department. What advice did he give you about restarting business with Centene?

A: As you know, attorneys and clients have a certain legal protection that, if I were aware of any of that, I wouldn't be able to share it with you anyway."

Q: It sounds like you're doing business with a con man.

A: Well, I think Ann, and this was a very long, hard discussion with the General Assembly and we've been in contact with other Medicaid programs across the country and, you know, remember, you know, seven, ten years ago Medicaid was a very small, much smaller, program than we are today...

My point is, what we experienced and what has been part of the conversation with our whole General Assembly and other policy makers in this whole idea of spread pricing was a routine part of the pharmaceutical, the way the pharmaceutical supply chain works and the benefit... the good thing that occurred out of all this is that with the investigatory work The Dispatch did was peeling back those onions. There were things that were never understood, not just by a Medicaid program or us, but you know from looking at the national conversation about medications that there are lots of things about this industry that were not well understood.

kSo I think the major point is that we wanted to continue to be aggressive about peeling back those onions and another reason were doing the work to

stand up a single pharmacy benefit manager who will work with all of the managed care plans is it will give us much better insight and visibility into all the relationships with pharmacies, all the pricing we'll be working to set up a pricing mechanism that is based on what pharmacy paid for their medication, so all this, all these other sort of relationships are being streamlined with a much greater degree of visibility into it and cost savings for Ohio taxpayers."