




MassHealth
All Provider Bulletin 238
October 2013

TO: All Providers Participating in MassHealth
FROM: Kristin L. Thorn, Medicaid Director 
RE: **Introduction to the One Care: MassHealth plus Medicare Program**

Background

The MassHealth and Medicare programs, in partnership with three Massachusetts health plans, have joined together to offer One Care: MassHealth plus Medicare.

One Care is a comprehensive health program designed to fully integrate MassHealth and Medicare benefits for dually eligible members who are between the ages of 21 and 64 at the time of enrollment. The goal of One Care is to offer a better, simpler way for people with disabilities to get all their medical, behavioral health, and long-term services and supports through one integrated person-centered plan. One Care plans will cover Medicare (Parts A, B and D), MassHealth, Behavioral Health, and Long-Term Services and Supports (LTSS) services. One Care plans will also provide care coordination and access to community-based services.

Enrollment for One Care plans began on September 3, 2013, with an enrollee effective date of October 1, 2013. As a health care provider for people with disabilities, you may receive questions about the One Care plan in the near future.

Goals of One Care

- The overarching goals of this integrated model of care are the following.
- Improve health and functional outcomes that will promote an enrollee's ability to live independently in the community
 - Provide person-centered coordinated care and increased member satisfaction.
 - Reduce fragmentation of care.
 - Move from fee-for-service to outcome-focused global payment.
 - Address cost-shifting between the Medicare and Medicaid programs.
 - Target unsustainable, avoidable cost growth.
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Who Is Eligible for One Care?

To be eligible for One Care, a person must meet all the following criteria:

- be disabled and between 21 and 64 years of age at the time of enrollment;
 - be eligible for MassHealth Standard or CommonHealth;
 - be enrolled in Medicare Parts A & B and be eligible for Medicare Part D;
 - lack other comprehensive insurance;
 - not be enrolled in PACE, SCO, or a Home and Community-based Services (HCBS) Waiver; and
 - not be residing in an intermediate care facility (ICF).
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What Services Are Covered?

The following services are covered by all One Care plans:

- Medicare: All Part A (inpatient), Part B (outpatient), and Part D (pharmacy) services;
- Medicaid State Plan Services (these are services covered under MassHealth Standard and CommonHealth), including long-term services and supports (LTSS) such as durable medical equipment, personal care attendants, adult day health, group adult foster care and other home-based and community support services;
- adult dental coverage—preventive, restorative, and emergency;
- community-based behavioral health services (including diversionary services);
- certified peers, community health workers, home care, and other nonmedical services, if part of the approved care plan.

For a comprehensive list of services covered by One Care, click on the following link:

<http://www.mass.gov/eohhs/docs/masshealth/onecare/services-covered-by-one-care.pdf>

Coverage Exceptions

Individuals are not eligible to enroll in One Care if they

- have comprehensive public or private health insurance in addition to Medicare and MassHealth;
 - participate in a Home and Community Based Services (HCBS) waiver;
 - participate in another comprehensive MassHealth program such as Program for All-Inclusive Care for the Elderly (PACE) or Senior Care Options (SCO); or
 - reside in an intermediate care facility (ICF).
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Provider Responsibilities

One Care plans are responsible for all of the member’s benefits as listed on page 2 of this document. MassHealth will not pay fee-for-service claims for any covered services received by members enrolled in a One Care plan, except for family planning services that were not provided or arranged for by the One Care plan. MassHealth providers whose members enroll in One Care plans will need to bill the One Care plans directly to receive payment for services delivered to One Care enrolled members. Providers should contact participating One Care plans directly to contract with these plans. Providers, in partnership with their contracted plan, will coordinate appropriate training requirements for staff on the One Care program.

One Care Plans

Provider contact information for One Care plans follows.

- Commonwealth Care Alliance (CCA)
 Customer Service #: (866) 610-2273
www.Commonwealthonecare.org
- Fallon Total Care (FTC)
 Provider Services #: (855) 508-4715
www.fallontotalcare.com
- Network Health (NH)
 Provider Services #: (888) 257-1985
www.network-health.org

Service Areas (by County)

County	Commonwealth Care Alliance	Fallon Total Care	Network Health
Essex	X		
Franklin	X		
Hampden	X	X	
Hampshire	X	X	
Middlesex	X		
Norfolk	X		
Plymouth	X (partial)*		
Suffolk	X		X
Worcester	X	X	X

** Note: “X” denotes One Care plan(s) coverage in that county.*

Partial county: One Care is not available in the areas of East Wareham, Lakeville, Marion, Mattapoisett, Wareham, and West Wareham.

One Care is not available in the counties of Barnstable, Berkshire, Bristol, Dukes, and Nantucket.

***One Care Plan
Responsibilities***

Providers participating in the One Care program will work in care teams under the arrangement of the One Care Health plans. One Care plans will develop comprehensive, individualized care plans for enrollees based on the specific circumstances and choices of the enrollee and as identified through the Comprehensive Assessment. One Care plans will provide Care Coordinators and Long-Term supports coordinators. Each enrollee will have a Care Coordinator provided by the One Care plan to be a point of contact for the enrollee and to make sure that care planning is in place.

The Care Coordinator will work with members and their Care Team to:

- Complete a review of the enrollee's care needs
- Assist the enrollee and the enrollee's PCP to set up the enrollee's Individualized Care Plan and decide how the enrollee will work together with the Care Team
- Participate in the comprehensive assessment
- Ensure communication between the enrollee and care team members
- Ensure that all services are accessible to meet the enrollee's needs
- Monitor the provision of services including initiating authorizations as needed
- Ensure proper mechanisms are in place for enrollee involvement
- Ensure that the enrollee can get to his/her appointments in a timely manner
- Obtain an interpreter, if one is needed, for the enrollee's appointments or community programs
- Serve as the primary contact to the enrollee's One Care plan

Continuity of Care

After a member's enrollment in a One Care plan becomes effective, a continuity-of-care period will be in place for 90 days or until the health plan completes a Comprehensive Assessment and develops an Individualized Care Plan with the member. During this continuity-of-care period, One Care plans must allow members to continue seeing their current MassHealth and Medicare providers at fee-for-service rates (providers will need to bill One Care plans directly during this period). After the continuity-of-care period has ended, members must receive all of their care within the One Care plan's provider network, unless the plan specifically authorizes otherwise. One Care plans will have the ability to make out-of-network arrangements when appropriate and necessary. However, the care team approach is best facilitated within the One Care plan network.

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Enrollment

Members may enroll in One Care plans beginning September 3, 2013, for an October 1, 2013, effective date. Members may enroll and disenroll at any time (with their decisions taking effect the first of the following month) by contacting MassHealth Customer Service at 1-800-841-2900 (TTY: 1-800-497-4648 for people who are deaf, hard of hearing, or speech disabled).

Note: On September 3, 2013, MassHealth began a direct-mail campaign to potential enrollees to introduce them to the One Care program. This mailing included instructions on how to enroll in One Care plans that are available in their service areas.

Additional Information

MassHealth will send a transmittal letter (TL) with revisions to Appendix Y (found in all provider manuals) informing providers of One Care eligibility to be displayed on the Eligibility Verification System (EVS). The TL will also include the "One Care Plan Guide for MassHealth Providers," which will also be posted on MassHealth's website.

For general information and to review Frequently Asked Questions (FAQs) about the One Care Plans, please visit One Care's website at: www.mass.gov/eohhs/consumer/insurance/onecare/one-care-q-and-as-for-providers.html.

Questions

If you have any questions about the information in this bulletin, please contact MassHealth Customer Service at 1-800-841-2900, e-mail your inquiry to providersupport@mahealth.net, or fax your inquiry to 617-988-8974.
