



# Payment and Care Delivery Innovation

COMMONWEALTH OF MASSACHUSETTS | Executive Office of Health and Human Services

## FACT SHEET: LTSS Providers of non-ACO/MCO Covered Services

*(including Adult Day Health, Adult Foster Care, Continuous Skilled Nursing, Day Habilitation, Group Adult Foster Care, and Personal Care Attendant Program)*

As part of the Payment and Care Delivery Innovation (PCDI) initiative, MassHealth offers **Accountable Care Organizations (ACOs)** to its 1.3 million managed-care-eligible members. These health plans are designed to emphasize care coordination and member-centric care. They have financial incentives to control avoidable cost growth, improve clinical quality, and enhance the member experience of care. MassHealth also offers Managed Care Organizations (MCOs) and the Primary Care Clinician (PCC) Plan.

This Fact Sheet provides an overview to help **Long-Term Services and Supports (LTSS) providers of non-ACO/MCO Covered Services** better understand the payment and care delivery aspects of these health plans.

**MassHealth-covered LTSS** (e.g., Adult Day Health, Adult Foster Care, Continuous Skilled Nursing, Day Habilitation, Group Adult Foster Care, and Personal Care Attendant Program) are **non-ACO/MCO covered services** and are paid for by MassHealth. These services are **not** included in the scope of accountability for ACOs and MCOs. Members can see any provider in the MassHealth provider network for these services.

### Eligible Members

MassHealth managed-care-eligible members are

- Younger than age 65, without any third-party insurance coverage (including Medicare)
- Living in the community (not in a nursing facility)
- Enrolled in one of the following MassHealth coverage types: Standard, CommonHealth, CarePlus, or Family Assistance\*

### Available Plans

What health plans can these members join?

MassHealth managed-care-eligible members can enroll in one of the following plans.

- Accountable Care Partnership Plans
- Primary Care ACOs
- MCOs
- Primary Care Clinician (PCC) Plan

### Does Not Apply To

PCDI does not affect members who receive MassHealth coverage through

- Fee-For-Service
- One Care plans
- Senior Care Options (SCO) plans
- Program of All-Inclusive Care for the Elderly (PACE) organizations
- Special Kids Special Care

\*ACO/MCO covered services may vary by MassHealth coverage type. Members should consult with their plans to determine which services are covered.

## What is an ACO?

An ACO is a provider-led health plan that holds participating providers financially accountable for both cost and quality of care for members. ACOs are composed of groups of primary care providers (PCPs) in which members are enrolled. In an ACO, PCPs and their team are responsible for working with the member and the ACO's network of providers to help coordinate care and connect the member with available services and supports.

### Types of ACOs

- **Accountable Care Partnership Plans:** A network of PCPs who have exclusively partnered with an MCO to use the MCO's provider network to provide integrated and coordinated care for members.
- **Primary Care ACOs:** A network of PCPs who contract directly with MassHealth, using MassHealth's provider network, to provide integrated and coordinated care for members. Members who enroll in a Primary Care ACO receive behavioral health services through the Massachusetts Behavioral Health Partnership (MBHP).
- **MCO-Administered ACOs:** A network of PCPs who may contract with one or multiple MCOs, and use the MCO provider networks, to provide integrated and coordinated care for members. Note: Members do not enroll in the MCO-administered ACOs directly.

For a list of plans participating in MassHealth effective 3/1/2018, see the [MassHealth Health Plan Contact Matrix in MassHealth All-Provider Bulletin 272](#) (November 2017).

## Which MassHealth Services Are ACO/MCO Covered Services?

MassHealth members enrolled in Accountable Care Partnership Plans and MCOs receive certain services that are paid for by their plan ("ACO-covered" or "MCO-covered") and certain services that are paid for by MassHealth ("non-ACO covered" or "non-MCO covered"). Covered services may differ by MassHealth coverage type.

ACO/MCO-covered services include

- **Physical health services** such as primary care, inpatient, outpatient, professional specialty, and emergency physical health services
- **Behavioral health services** such as inpatient, outpatient, diversionary, and emergency behavioral health services
- **Pharmacy services**, with limited exceptions
- **Other covered services**, including chronic disease and rehab hospitals <100 days, durable medical equipment, home health, hospice, nursing facility <100 days, occupational therapy, orthotics, oxygen and respiratory therapy equipment, physical therapy, prosthetics, and speech therapy

Non-ACO and non-MCO-covered services include

- **Adult Day Health**
- **Adult Foster Care**
- **Continuous Skilled Nursing**
- **Day Habilitation**
- **Group Adult Foster Care**
- **Personal Care Attendant Program**

## Provider Network

LTSS providers (such as *Adult Day Health, Adult Foster Care, Continuous Skilled Nursing, Day Habilitation, Group Adult Foster Care, and Personal Care Attendant Program*) who provide non-ACO/MCO covered services are not subject to provider network limitations. Members can receive services from any of these LTSS providers, as long as they remain credentialed and authorized to participate in MassHealth's provider network.

## More Information

### *Community Partners*

Community Partners (CPs) work collaboratively with ACOs and MCOs<sup>1</sup> to provide care coordination to certain members identified by ACOs, MCOs, or MassHealth. Behavioral Health CPs provide care management and care coordination to members with significant behavioral health needs. Long-Term Services and Supports (LTSS) CPs provide LTSS care coordination and navigation to members with complex LTSS needs. CPs support member freedom of choice among MassHealth participating providers for the MassHealth members that they serve.

To learn more about the Community Partners Program, visit [www.mass.gov/guides/masshealth-community-partners-cp-program-information-for-providers](http://www.mass.gov/guides/masshealth-community-partners-cp-program-information-for-providers).

### *Member Eligibility*

Providers can check member enrollment and eligibility using the Eligibility Verification System (EVS). EVS messages indicate the type of health plan in which a member is enrolled and whom to contact with billing questions.

## Resources for Providers

For more information about these health plans, and to register for trainings, please visit:

- [www.mass.gov/payment-care-delivery-innovation-pcdi-for-providers](http://www.mass.gov/payment-care-delivery-innovation-pcdi-for-providers)
- [www.masshealthtss.com](http://www.masshealthtss.com)

<sup>1</sup> CPs are not available to members enrolled in the Primary Care Clinician (PCC) Plan or in MassHealth's Fee-For-Service (FFS) Program, unless the member is affiliated with the Department of Mental Health's Adult Community Clinical Supports Program.