

One Care: MassHealth plus Medicare

MassHealth Demonstration
to Integrate Care for Dual Eligibles

Open Meeting

August 22, 2014, 1:00 PM – 3:00 PM

State Transportation Building

Boston, MA



Agenda for Today

- One Care Outreach and Engagement Activities
 - Consumer video vignettes
 - Community outreach sessions
 - Provider outreach
- Update on Rates
- Update on Enrollments
- Early Indicators Project (EIP) Update
- LTS Coordinator
- Implementation Council Update
- One Care Ombudsman Update

Outreach and Engagement Activities

Community Outreach Video Vignettes

- MassHealth is putting together video vignettes to share the personal experiences of One Care from consumers
- The stories bring to life some of the key features of the program told from the perspective of an enrollee, including
 - Care Coordination
 - Person-centered Care
 - Care Team
 - Independent Living
 - No co-payments
- MassHealth will use these stories to continue to raise awareness of One Care from the perspective of members

Discussion/Questions?

Community Outreach

- MassHealth continues to participate in conferences and meetings across the state to reach key audiences (e.g., members, providers, advocates), including

Date	Session/Conference/Event	Location
8/6/14	MassMATCH & Easter Seals Assistive Technology Expo (Exhibit Table)	Holyoke
8/13/14	Boston Health Care For the Homeless Program Health Fair (Exhibit Table)	Boston
8/17/14	1199 SEIU Health Fair (Exhibit Table)	Dorchester
8/21/14	National Alliance on Mental Illness Greater Boston Consumer Advocacy/Affiliate Network (NAMI GB CAN)	Boston
9/17/14	The Arc of Opportunity (AM and PM discussion)	Fitchburg
9/18/14	Living Longer: Aging with Intellectual Disability Conference (Hosted by Bridgewell) (Exhibit Table)	Framingham
9/20/14	Worcester Celebrates National Recovery Month Miracles Peer Recovery Center (Exhibit Table)	Worcester

- If you are interested in MassHealth coming to one of your events, please email us at OneCare@state.ma.us

Provider Outreach

- MassHealth will be implementing a provider engagement plan to communicate general information about One Care to providers
- The plan was developed in response to feedback from providers and the Implementation Council and will include
 - Placement of ads in provider journals that target primary care and behavioral health providers (Sept-Dec 2014)
 - Mailing information to providers in One Care service areas
 - Providing One Care information to provider associations to include in newsletters, bulletins, and updates to their members and networks

Provider Outreach (cont'd)

- Communications will focus on key features of One Care that will benefit providers and their patients, including
 - Single authorization for payment
 - Enhanced care coordination
 - Team-based, person-centered care
 - No co-payments for members
 - Enhanced dental and vision services and additional community-based services

Discussion/Questions?

Update on Rates

Updates to Risk Corridor Adjustments **MassHealth**

- Risk-sharing mechanism intended to mitigate the financial risk One Care plans assume as they begin to implement the integrated care model and provide coordinated services to One Care enrollees
- The three-way contract established risk corridors for the first year of the demonstration
- MassHealth and CMS amended the three-way contract to extend risk corridors for the second and third years as follows:
 - Year 2:
 - For plan gains/losses up to 3%, no sharing
 - For plan gains/losses 3.1-10%, 50%-50% sharing between plan and CMS/MassHealth
 - For plan gains/losses >10%, no sharing
 - Year 3:
 - For plan gains/losses up to 4%, no sharing
 - For plan gains/losses 4.1-8%, 50%-50% sharing between plan and CMS/MassHealth
 - For plan gains/losses >8%, no sharing

Coding Intensity

- CMS applies an adjustment to the Medicare payment rate called coding intensity
- The coding intensity adjustment is intended to offset the differences in diagnosis coding patterns between Medicare FFS and managed care (i.e., Medicare Advantage)
- CMS prorated the coding intensity adjustment in One Care for 2014, and has agreed to prorate the adjustment in 2015 in consideration of auto-assignments
- A prorated coding intensity adjustment means plans receive more in capitation from Medicare

Update on Enrollments

One Care Rating Category Definitions **MassHealth**

- **F1 – Facility-based Care.** Individuals identified as having a long-term facility stay of more than 90 days
- **C3 – Community Tier 3 – High Community Need.** Individuals who have a daily skilled need; two or more Activities of Daily Living (ADL) limitations AND three days of skilled nursing need; and individuals with 4 or more ADL limitations. In CY2014, C3 split into two subsets:
 - **C3B:** for C3 individuals with certain diagnoses (e.g., quadriplegia, ALS, Muscular Dystrophy and Respirator dependence) leading to costs considerably above the average for current C3
 - **C3A:** for remaining C3 individuals
- **C2 – Community Tier 2 – Community High Behavioral Health.** Individuals who have a chronic and ongoing Behavioral Health diagnosis that indicates a high level of service need. In CY2014, C2 split into two subsets
 - **C2B:** for C2 individuals with co-occurring diagnoses of substance abuse and serious mental illness
 - **C2A:** for remaining C2 individuals
- **C1 – Community Tier 1 Community Other.** Individuals in the community who do not meet F1, C2 or C3 criteria

Total Enrollment

- Effective **August 1**, total number of enrollees: **18,067**
 - 6,068 self-selection enrollments
 - 5,333 round 3 auto-assignment
 - 2,827 round 2 auto-assignment
 - 3,839 round 1 auto-assignment

Total Enrollment by Plan	
Commonwealth Care Alliance (CCA)	9,765
Fallon Total Care (FTC)	6,800
Network Health	1,502
Total	18,067

Total Enrollment by Rating Category	
F1	23
C3B	140
C3A	2,747
C2B	738
C2A	3,694
C1	10,724
Unavailable*	1
Total	18,067

*The rating category for one enrollment was unavailable at the time of this report. 15

Enrollments via Auto-Assignment July 1, 2014 Effective Date (Round 3)



Who was Included	Assignment Approach	Key Dates
9,314 individuals from across the target population, including those with higher levels of LTSS and behavioral health need (i.e., C1, C2 and C3 rating categories)	In addition to primary care, MassHealth used data on where individuals accessed LTSS and behavioral health services to match individuals to a One Care plan	<ul style="list-style-type: none"> • April 28: 60-day notices mailed • May 29: 30-day notices mailed • July 1: Coverage effective

- Of those 9,314 individuals who were included in auto-assignment:
 - 59% stayed with their assigned plan for July 1
 - 4% decided to enroll in assigned plan for an earlier effective date
 - 2% switched plans
 - 24% opted out of One Care
 - 10% were cancelled for various reasons (e.g. no longer eligible, or notices came back undeliverable)
- 6,104 enrollments effective July 1 from auto-assignment

Opt-Outs

- Total number of opt-outs as of August 1: 24,775
 - Will be excluded from any future auto-enrollment
 - If eligible, can choose to enroll by self-selection at any time
- Total opt-out number includes individuals who may be ineligible
- Of approximately 95,700 individuals who received a One Care enrollment package, ~26% have chosen to opt out

Total Opt-Outs by County	
Essex	2,326
Franklin	380
Hampden	5,590
Hampshire	1,309
Middlesex	3,375
Norfolk	1,439
Plymouth	1,055
Suffolk	3,040
Worcester	6,160
Non-Demo Counties	101
Total	24,775

Auto-Assignment

- MassHealth will not do auto-assignments for October 2014
- MassHealth will be auto-assigning approximately 1,350 members to Network Health for coverage beginning November 1, 2014
 - Network Health did not take any auto-assigned enrollments in round two (April 1, 2014 coverage effective date)
 - MassHealth has been working closely with Network Health and is comfortable with the plan's capacity to accept auto-assigned enrollments for November 1, 2014
- MassHealth and CMS continue to work closely with all of the plans to understand their capacity to accept potential auto-enrollments in 2015

Discussion/Questions?

Early Indicators Project (EIP) Update

EIP Goals

- Use mixed methods, including focus groups, surveys, and enrollment and other administrative data, to:
 - Assess early experiences of One Care among members
 - Enrolled in One Care (voluntarily enrolled and auto-assigned)
 - Opting-out of One Care
 - Examine members' perceptions/experiences with:
 - Enrollment process
 - Decision-making about One Care
 - Their care team
 - Assessment and care planning process
 - Their care plan and getting services
 - Overall perceptions of One Care
 - Provide regular reports on administrative data

EIP Activities to Date

- Monthly data reports – ONGOING
- 4 Focus groups – COMPLETE
 - Early self-selects
 - Early opt-outs
 - Spanish-speaking enrollees
 - Auto-assigned enrollees
- Survey #1 (N=300) – COMPLETE & REPORTED
- Survey #2 (N=3,000) – IN PROGRESS

EIP Reports are available on the One Care website

<http://www.mass.gov/eohhs/consumer/insurance/one-care/one-care-early-indicators-project-eip-reports.html>

Survey #2

- 6,000 randomly selected enrollees in three cohorts of 2,000 each
 - Goal of 50% response rate (3,000 completed surveys total)
 - Administered by mail, phone, and on-line

- Samples enrollees who have been enrolled for approx. 120 days

Cohort: Month of enrollment	Enrollee cohort sampled
Cohort 1: January-March 2014	June-August 2014
Cohort 2: April-June 2014	August-October 2014
Cohort 3: July-September 2014	November 2014 – January 2015

Major Domains

- Comprehensive survey of enrollees' early experiences in One Care
 - One Care enrollment process
 - Transition into One Care
 - Care team
 - Assessment and care planning processes
 - Overall satisfaction with the individualized care plan
 - Extent to which needs for care are being met under One Care
 - Overall perceptions of One Care
 - Demographic information

Preliminary results (N=375)

- 375 early responses from Cohort 1 have been compiled to date (target=1,000)
- Cohort 1 is open through August; additional responses are being compiled
- A summary of preliminary results will be available soon on the One Care website: <http://www.mass.gov/eohhs/consumer/insurance/one-care/one-care-early-indicators-project-eip-reports.html>

Question	Yes	No	Unsure
Have you had contact with Care Coordinator?	76%	17%	6%
Do you need/want LTS Coordinator?	40%	40%	18%
Have you been offered LTS Coordinator?	46%	20%	33%
Do you plan to stay in One Care?	85%	3%	11%

Rate your satisfaction with:	Completely or somewhat satisfied	Somewhat or extremely dissatisfied	Not sure / refused
Your Care Coordinator	89%	6%	4%
Your LTS Coordinator	95%	3%	2%
Your One Care plan	94%	4%	2%
Your services under One Care	93%	4%	4%


Discussion/Questions?

LTS Coordinator

LTS Coordinator Member Mailing



- MassHealth collaborated with stakeholders to develop a member-facing document about the LTS Coordinator role in One Care. It describes:
 - Members' rights to access an LTS Coordinator
 - What an LTS Coordinator is and does
 - How to request and get an LTS Coordinator
- It is two-sided (English/Spanish)
- MassHealth mailed the document to all current enrollees at the end of July
- The document will be available on the One Care website for reference, and to download or order



You have the right to a Long-term Supports (LTS) Coordinator

Everyone who enrolls in a One Care plan has the right to have an independent living and long-term services and supports coordinator (LTS Coordinator, for short) on their care team.

What is an LTS Coordinator?
An LTS Coordinator will work with you as a member of your One Care plan to find resources and services in your community that can support your wellness, independence, and recovery goals. These services are sometimes called long-term services and supports, or LTSS.

LTS Coordinators do not work for One Care plans. They come from independent community organizations and are experts in areas like independent living, recovery, and aging. This means that they can work for you and help you advocate for your needs.

You can choose to have an LTS Coordinator work with you as a full member of your care team at any time. This is a free service for you.

What does an LTS Coordinator do?
As a member of your care team, an LTS Coordinator will work with you to:

- **Identify and understand your needs** and the kind of help and supports you want from your One Care plan;
- **Identify community services and resources** that are available to you, including support that can help you in your recovery;
- **Develop a personal care plan** that includes services that will support your health, safety, independence, and/or recovery;
- **Help connect you to the services** in your personal care plan; and
- **Help you understand and protect your rights** as a One Care plan member.

How do you get an LTS Coordinator?
You can ask for an LTS Coordinator at any time. Tell your care coordinator in your One Care plan that you would like to meet with an LTS Coordinator. Your care coordinator will give you information about the LTS Coordinators that the One Care plan works with. Then, you can choose the one you want. If you are age 60 or older, you have the right to work with an LTS Coordinator who is an expert in aging. You may also ask for an expert in mental health and substance use recovery or in intellectual challenges.

What are long-term services and supports (LTSS?)
LTSS can help you live independently and participate fully in your community. Here are some examples of LTSS:

- Things that help you with basic tasks, like a wheelchair, or a device that helps you communicate;
- Support from a peer with experience in recovery;
- Help preparing your meals or shopping;
- Help managing your medications;
- Ramps or grab bars in your home;
- Accessible transportation to help you go places in your community; and
- Training and education to support your wellness and recovery goals.

An LTS Coordinator can help you get the supports you need.

One Care
MassHealth+Medicare
Bringing your care together

www.mass.gov/masshealth/onecare

LTS Coordinator Training

- MassHealth and UMMS are currently developing a training webinar for the LTS Coordinator role in One Care
 - Developed in response to and with stakeholder input on a uniform training for the LTS Coordinator role in One Care
 - The webinar is tentatively scheduled for September 18, 2014
 - The recorded webinar will be posted to the One Care learning website
- The audience for the webinar includes LTS Coordinator providers, One Care plan staff, and providers of long-term services and supports
- MassHealth may consider developing additional trainings and alternative formats to meet the needs of different audiences
- MassHealth is also working with the One Care plans to understand:
 - the plans' experience referring members to CBOs for long-term services and supports
 - challenges related to CBO/agency capacity to accept LTS Coordinator referrals

Implementation Council Update

One Care Ombudsman

Discussion/Questions?

Visit us at www.mass.gov/masshealth/onecare

Email us at OneCare@state.ma.us

