

One Care: MassHealth plus Medicare

MassHealth Demonstration
to Integrate Care for Dual Eligibles

Open Meeting

February 21, 2014, 1:00 PM – 3:00 PM

State Transportation Building

Boston, MA



Agenda for Today

- February Enrollment Report
- Round Two Auto-Assignment Update
- Outreach Mailing to Additional Members
- Implementation Council Update
- Early Indicators Project
 - Focus Groups 1 and 2 Preliminary Findings
 - Survey #1 Preliminary Findings
 - Next Steps
- One Care Ombudsman Update

Monthly Enrollment Report

- MassHealth is issuing monthly reports on One Care enrollment activity
- Reports will be issued mid-month
- Reports are intended to provide general information to stakeholders

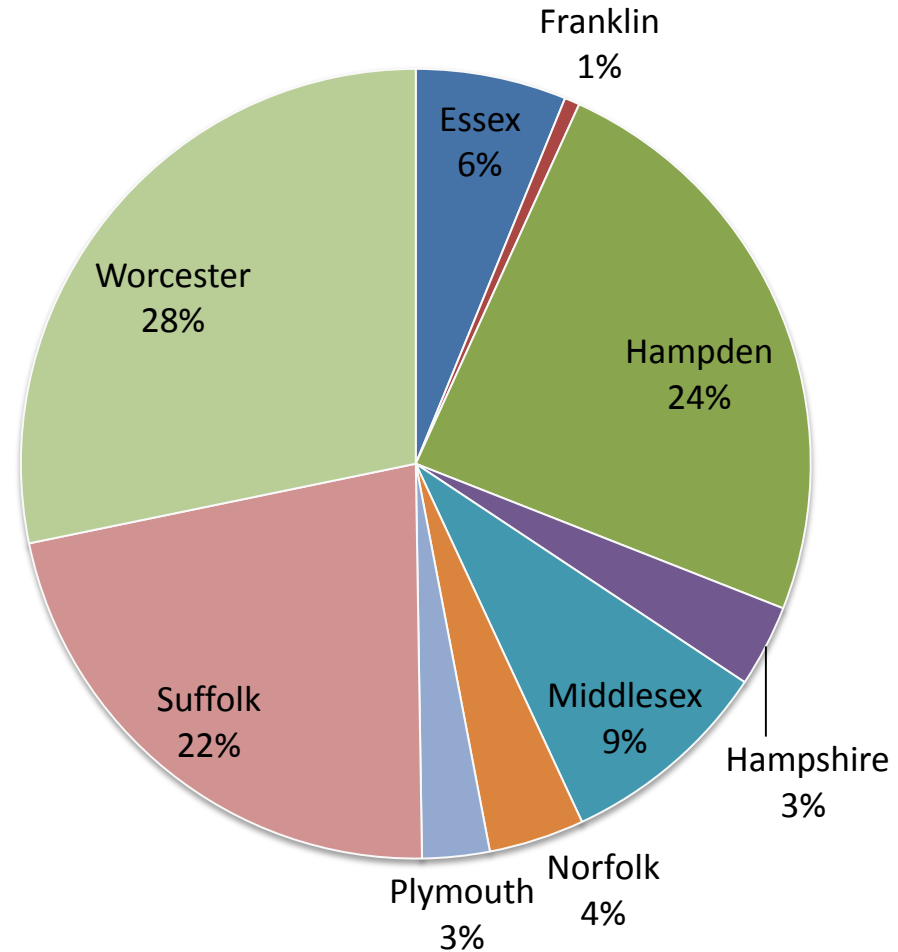
Total Enrollment

- Effective **February 1**, total number of enrollees: **9,541**

Total Enrollment by Plan	
Commonwealth Care Alliance (CCA)	6,238
Fallon Total Care (FTC)	2,503
Network Health	800
Total	9,541

Total Enrollment by County

Total Enrollment by County	
Essex	589
Franklin	56
Hampden*	2,307
Hampshire*	321
Middlesex	835
Norfolk	373
Plymouth	263
Suffolk*	2,101
Worcester*	2,694
Total	9,541



*Auto assignment county

Enrollment Penetration by County

County	Eligible	Enrolled	% Eligible Enrolled
Essex	13,979	589	4%
Franklin	2,060	56	3%
Hampden*	14,407	2,307	16%
Hampshire*	2,587	321	13%
Middlesex	17,393	835	5%
Norfolk	7,062	373	5%
Plymouth	6,593	263	4%
Suffolk*	15,099	2,101	14%
Worcester*	14,597	2,696	19%
Total	93,759	9,541	10%

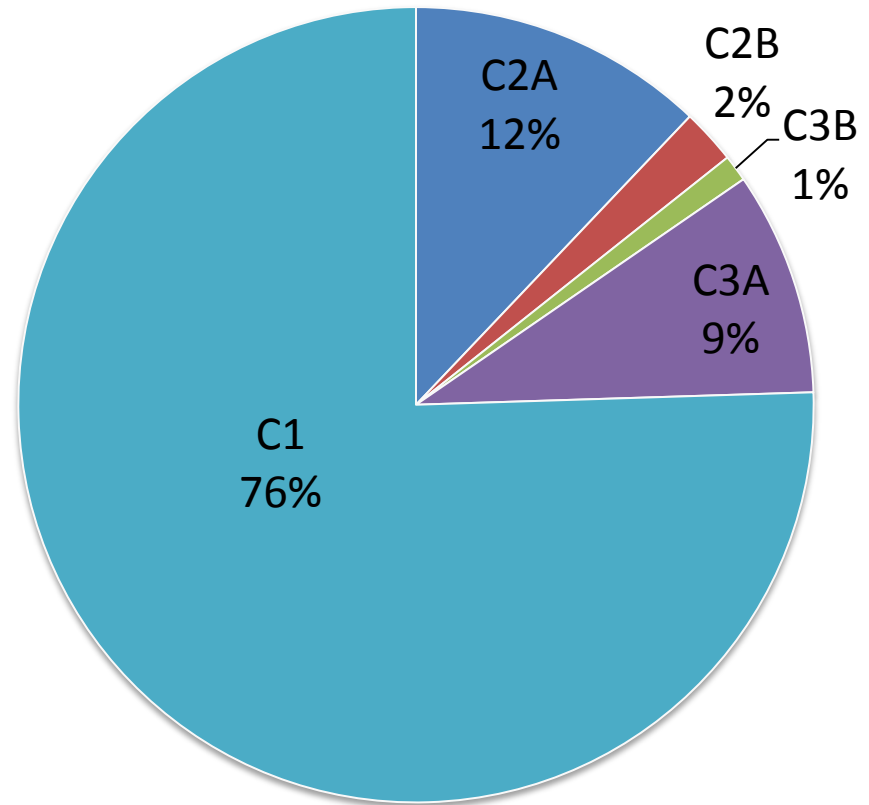
*Auto assignment county

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 by Rating Category

Total Enrollment by Rating Category	
F1	18
C3B	103
C3A	866
C2B	212
C2A	1,151
C1	7,186
Unavailable*	5
Total	9,541



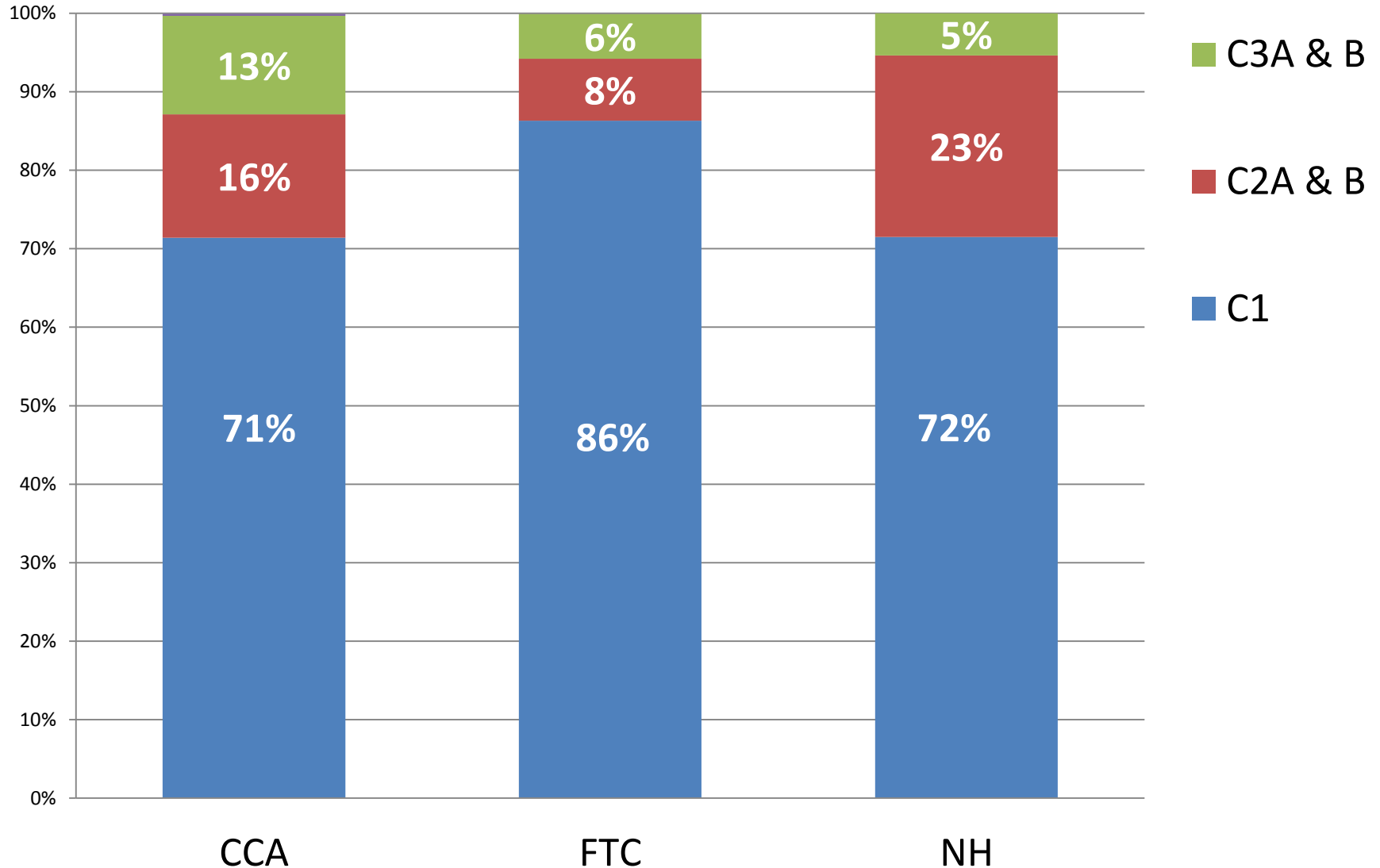
* Rating categories for five enrollments were unavailable at the time of this report.

Enrollment Penetration by Rating Category

Rating Category	Eligible	Enrolled	% Eligible Enrolled
F1	1,287	18	1%
C3B	868	103	12%
C3A	10,459	866	8%
C2B	2,765	212	8%
C2A	13,604	1,151	9%
C1	64,776	7,186	11%
Unavailable	N/A	5	N/A
Total	93,759	9,541	10%

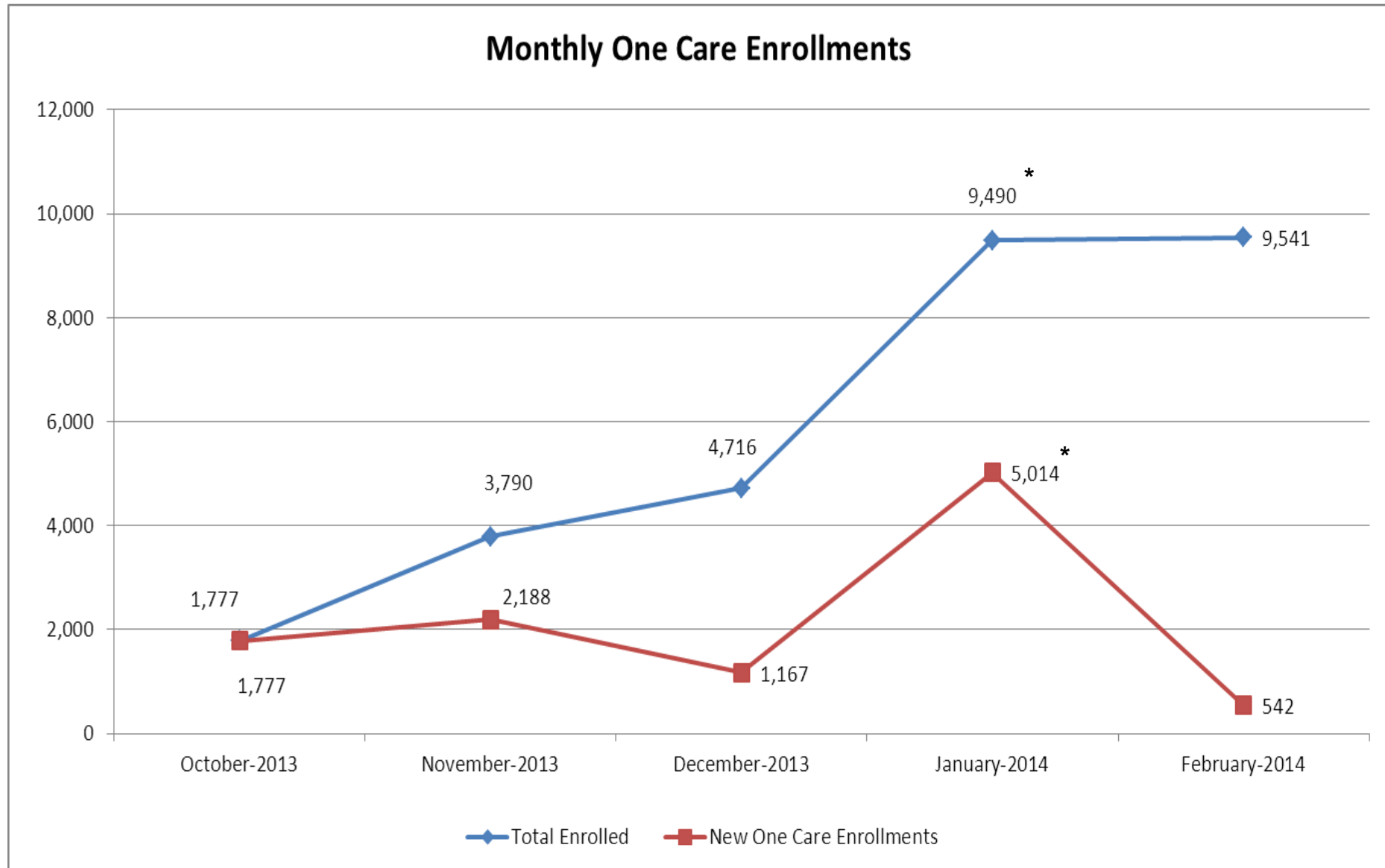
*Auto assignment county

Rating Category Enrollment by Plan



F1 represents <1% of enrollments in each plan

Enrollment Over Time



*Auto-assignment round one effective date January 1, 2014.

Note: Data in the graph reflect current month information about enrollments. Monthly data may vary slightly from the previous reports due to enrollment status changes that have occurred since previous reports were issued.

Opt-Outs

- Total number of opt-outs as of February 1: 16,642
 - 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 the individuals who received a One Care enrollment package, ~20% have chosen to opt out

Total Opt-Outs by County	
Essex	2,010
Franklin	324
Hampden	2,770
Hampshire	672
Middlesex	2,949
Norfolk	1,232
Plymouth	912
Suffolk	2,209
Worcester	3,490
Non-Demo Counties	74
Total	16,642

Auto-Assignment Update

Auto-Assignment Overview

- Auto-assignment (passive enrollment) is the term MassHealth is using to describe the process of assigning, notifying, and automatically enrolling someone in a One Care plan.
- Who *may* be auto-assigned? Only Individuals who:
 - Live in Hampden, Hampshire, Suffolk, or Worcester County (counties with at least two One Care plans)
 - Received enrollment packet mailing and did not enroll or opt out
 - Are not enrolled in Medicare Advantage or PACE plan
- MassHealth sends two notices to individuals who have been auto-assigned:
 - 60-day notice – Informs the member of the plan assignment and coverage effective date.
 - 30-day notice – Reminder that changes will take effect in 30 days
 - Both notices tell people how to opt out or change plans
- Three planned rounds of auto-assignment, for coverage effective January 1 (complete), April 1 (round two), and July 1, 2014 (round three).

Round Two Auto-Assignment

- Round two auto-assignments will take effect April 1, 2014
- Approximately 6,400 people are being automatically enrolled in a One Care plan for an April 1 start date
- Round two includes 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
- MassHealth worked closely with the One Care plans throughout the assignment process to understand their capacity to accept additional auto-assignment enrollments, and to maximize matches with their provider networks

Auto-Assignment (cont'd)

- Members who are being automatically enrolled received a 60-day notice by January 30
- 30-day reminder notices are being mailed early next week
- Individuals can always self-select or opt out
- MassHealth continues to encourage all individuals to carefully consider their enrollment options and make their own choice, using resources such as:
 - Enrollment packet materials (also available on One Care website, www.mass.gov/masshealth/onecare)
 - One Care plans (call or visit plan websites for more information and to search their provider directories. See One Care website for plan contact information)
 - SHINE (Serving the Health Insurance Needs of Everyone) counselors (for an appointment, call 1-800-243-4636)
 - MassHealth Customer Service (call 1-800-841-2900, TTY: 1-800-497-4648)

Auto-Assignment and Medicare Part D **MassHealth**

- Like the 60-day notice mailing, the 30-day notice mailing will include an insert on “One Care and Part D” to help members understand what auto-assignment in One Care means for their Part D coverage, including:
 - You will continue to receive your prescription drug benefits from your current plan through March 31, 2014
 - Your new prescription coverage from the One Care plan will start on April 1
- This is to address concerns that members are receiving notices from their Part D plans about being disenrolled
- To provide additional information to members, MassHealth is working with CMS to develop more comprehensive information about Part D coverage and One Care
 - Will address enrollment, continuity of care, covered drugs, and other key topics
 - MassHealth will also work with SHINE, which has expertise in helping individuals understand Medicare Part D and their options

Outreach Mailing to Additional Members

Mailing to Additional Members

- In September 2013, MassHealth sent a One Care Enrollment Package to approximately 82,000 members and their guardians
 - Introduced One Care and let members know about the opportunity to self-select into a One Care plan in their area
 - Included a One Care Enrollment Guide, a cover letter with a purple stripe, a List of Covered Services, and an Enrollment Decision Form
- MassHealth is now planning to send a similar mailing, in late March, to:
 - Individuals who have become eligible for One Care since September mail file was created
 - Others who appear eligible in MassHealth data, but were not mailed to in September
- Expected to include approximately 10,000-15,000 members in total
- MassHealth will look at feedback and experience with September mailing to make improvements for March mailing

Implementation Council Update

Early Indicators Project (EIP) Update

The Early Indicators Project (EIP)

- Overall goal
 - Assess early perceptions and experiences of MassHealth members eligible for One Care using multiple methods
 - Distinct from One Care programmatic evaluation or quality measures
- Qualitative data sources
 - Five focus groups (two completed)
 - Two surveys (one completed)
- Quantitative data sources:
 - Enrollments, MassHealth Customer Service, SHINE, the One Care Ombudsman
- Today – initial findings from
 - First two focus groups
 - One Care Survey #1

Focus Groups Update

Five Focus Groups of Eligible Members		
Early opt-ins – completed	December 16, 2013	Boston
Early opt-outs – completed	December 19, 2013	Worcester
Spanish language	Late March 2014	Springfield
Auto-enrollees	Early April 2014	Worcester
Enrollees with intellectual disabilities and their caregivers	April 2014	Boston

- 2013 focus groups sought feedback on MassHealth’s initial One Care materials/outreach, reasons for decision, and early experiences
- 2014 focus groups will explore early experiences and population-specific concerns/experiences

Overview of Focus Groups 1 and 2

- Goal - understand perceptions and experiences of members enrolling in or opting out of One Care

- Focus group questions explored
 - Knowledge of One Care/information received about One Care
 - Making the decision to enroll in or opt out of One Care
 - Hopes for or concerns about One Care

- Focus Group #1: Opt-ins (Boston)
 - December 16, 2013; 7 participants (13 registered)

- Focus Group #2: Opt-outs (Worcester)
 - December 19, 2013; 5 participants (9 registered)

Focus Group #1: Opt-ins (Boston)

Preliminary Findings

- Knowledge of and information received about One Care:
 - All seven participants felt they understood One Care
 - All seven recalled receiving One Care Enrollment Packet
 - All seven found information clear and easy to understand

- Three of the seven participants had contacted MassHealth Customer Service and found CST to be helpful; none had contacted SHINE

- Making the decision to enroll in One Care:
 - Most participants made efforts to confirm that providers, pharmacies and medications would be covered
 - Most discussed the decision with a primary care provider, family member or CST

Focus Group #1 (cont'd)

- Reasons for enrolling:
 - Less expensive co-payments for prescriptions
 - Having a care coordinator
 - Better dental coverage
 - One insurance/one insurance card

Focus Group #2: Opt-outs (Worcester) **MassHealth**

Preliminary Findings

- Knowledge of and information received about One Care:
 - All five participants were familiar with One Care and had basic awareness of what One Care offers
 - Three out of five participants recalled receiving Enrollment Packet; two only recall receiving a letter
 - Two of five participants had contacted CST
 - None had contacted SHINE
- Concerns about One Care information
 - Enrollment guide was *“too generic...not specific enough”*
 - *“The letter ... basically said that One Care will replace your existing Medicare and MassHealth. I don’t want to replace it ... if you want to add stuff to it, that’s fine.”*
 - One Care website needs more information:
 - List of providers that are part of One Care
 - List of medications covered under One Care

Focus Group #2 (cont'd)

- Deciding not to enroll in One Care
 - General consensus -- *“If it’s not broke, don’t fix it”*
 - Participants felt more secure having Medicare and Medicaid
 - Two of five participants use PCA services; LTS Coordinator role is appealing, but not enough for them to enroll in One Care
 - One Care is new and unknown

- Some participants thought they might...
 - Lose current doctors and medications
 - Not get care when needed for their complicated medical conditions
 - Have to wait for approvals for treatment
 - Have to wait to get appointments with One Care providers
 - Not be able to reach their Care Coordinator when needed

Survey #1 Overview

- Examined members' perceptions and experiences of One Care during initial enrollment period

- Covered 5 major areas:
 - MassHealth's One Care enrollment information and the enrollment process
 - Members' decision-making regarding One Care enrollment
 - Limited inquiry about early experiences in One Care (for those enrolled)
 - Getting answers to questions about One Care
 - Demographic, background and disability information

Survey #1 (cont'd)

- Telephone interview of 300 members eligible for One Care

- Three groups of eligible MassHealth members were surveyed:
 - Self-selected into One Care (Opt-in group)
 - Opted-out of One Care (Opt-out group)
 - Neither opted-in nor opted-out (Waiting group)

- Interviews conducted by UMMS Office of Survey Research from December 16 – January 20
 - 109 members who opted-in
 - 125 members who opted-out
 - 51 members who are “waiting”
 - 15 members who were not sure which group they were in

Perceptions of and Experiences with Information about One Care: Enrollment Packet Materials

	Opt-In (N=109)	Opt-Out (N=125)	Waiting (N=51)
	<u>%</u>	<u>%</u>	<u>%</u>
Ease of understanding Enrollment Guide			
Very easy/somewhat easy	83.3	72.9	58.3
Somewhat difficult /very difficult	12.2	21.9	37.5
Ease of understanding Enrollment Decision Form			
Very/somewhat easy	81.1	72.9	58.3
Somewhat /very difficult	6.7	15.6	29.2
Importance of info in deciding about One Care			
Very/somewhat important	88.9	84.4	91.7
Not very/not at all important	8.9	14.6	0.0

*Respondents could identify more than one source, so totals exceed 100%.

Perceptions of and Experiences with Information about One Care: Other Sources or Methods

	Opt-In (N=109) <u>%</u>	Opt-Out (N=125) <u>%</u>	Waiting (N=51) <u>%</u>
Called MassHealth Customer Service	33.9	34.4	7.8
Called or met with SHINE counselor	19.3	6.4	0.0
Attended community info session/health fair	6.4	7.2	3.9
Spoke to rep from One Care plan	56.9	16.0	3.9
Spoke to doctor or other provider	41.3	34.4	21.6
Got info from someone else	12.8	14.4	5.9
None of the above	12.8	36.8	62.8

Reasons for Decisions about One Care: Opt-Ins

	Opt-In (N=109)
	<u>%</u>
<u>*Reasons for Enrolling (Opt –in)</u>	
To get better services	80.7
To get additional services	76.2
To get less complicated health care	71.6
To lower my health care costs	71.6
To have a care coordinator	52.3
Someone recommended it	41.3
Other reasons	31.2

*Respondents could identify more than one reason, so totals exceed 100%

Reasons for Decisions about One Care: Opt-Outs

	Opt-Out (N=125) <u>%</u>
<u>*Reasons for Opting Out</u>	
Happy with health care/One Care won't be as good	76.0
Would lose an important provider	68.8
Would lose an important service	56.0
Care would be more complicated	51.2
Didn't find answers to my questions about One Care	24.8
Would have to pay more for health care	23.2
Someone recommended it	16.0
Other reasons	33.6

*Respondents could identify more than one reason, so totals exceed 100%

Reasons for Decisions about One Care: Waiting

	Waiting (N=51) %
*<u>Reasons for Waiting to Decide (Waiting)</u>	
Need more time to decide	84.3
Not sure what to do next	70.6
Want to discuss with someone first	68.6
Need more information	68.6
Other reasons	29.4

*Respondents could identify more than one reason, so totals exceed 100%

Next Steps in EIP

- Three additional focus groups will be conducted March-April 2014
 - Spanish speaking enrollees, auto-assigned enrollees, enrollees with intellectual disabilities and their caregivers
 - Final report on all focus groups expected July 2014
- Survey #2: May-December 2014
 - 3,000 self-selected and auto-assigned enrollees
 - More comprehensive survey on continuity of care; assessments and care plans; Care Coordinator/LTS Coordinator experience; successes/problems
 - Telephone and mail, English and Spanish
 - Fielded approx. 120 days after each wave of auto-assignment
 - Final report in March 2015
- Ongoing/additional indicator reports; eventual quarterly “dashboard” with findings published on One Care website
- MassHealth will work with the EIP Workgroup and the entire Implementation Council to interpret the data and determine any future strategic or corrective actions that may be called for

One Care Ombudsman

One Care Ombudsman Update

- The One Care Ombudsman (OCO) launch expected March 3
- The OCO is a partnership between the Disability Policy Consortium, Health Care for All, and Consumer Quality Initiatives (CQI), contracted by MassHealth
- Contact information as of March 3:

855-781-9898 (MassRelay – dial 711)

11 Dartmouth St., Suite 301

Malden, MA 02148

- This information will be posted on the One Care website and emailed to stakeholders
- In addition, MassHealth and OCO are working on a broader communication plan and materials for notifying members about the OCO

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

Email us at OneCare@state.ma.us

