

One Care: MassHealth plus Medicare

MassHealth Demonstration to Integrate Care for Dual Eligibles

Open Meeting

September 23, 2015 10:00 AM – 12:00 PM

Worcester Public Library

3 Salem Square, Saxe Room

Worcester, MA



Agenda for Today

- One Care Finance and Extension Updates
- One Care Plans' Enrollment Status
- Where We Go from Here
- Update on Tufts' Long Term Supports Coordinator Discussions
- Recap of Fallon Total Care (FTC) Closure Information

One Care Finance and Extension Updates

- Pursuant to the Commonwealth's Memorandum of Understanding (MOU), CMS convened a meeting on September 2nd to evaluate the financial structure and payment parameters of One Care
 - Participants included leadership from the following agencies:
 - EOHHS/MassHealth,
 - CMS,
 - the federal Office of Management and Budget, and
 - the federal Office of the Actuary,
 - along with brief presentations from Dennis Heaphy and Olivia Richard

- MassHealth and CMS have released a package of capitation rate updates to Commonwealth Care Alliance (CCA) and Tufts Health Plan (Tufts). This package:
 - Reflects the additional services and complex care management required in the demonstration, and
 - More accurately accounts for the acuity of the population

- Together with additional administrative and operational efficiencies by the plans, these actions have been taken to financially stabilize the One Care program by providing rates that are consistent with the experience of the demonstration.

Transitional Adjustments Through The End of 2016

- Adjustments will be made to the capitation withholds in the rates
- If the One Care demonstration is extended beyond 2016, we do not expect that continuing these temporary adjustments will be necessary.

Transitional Adjustments (cont.)

- Update the base Medicare Parts A/B rate component.
 - CMS is currently evaluating the CMS-HCC risk adjustment model, including how well it predicts costs for individuals dually eligible for Medicare and Medicaid across the country.
 - CMS' analysis will be shared when it is completed.
 - In the interim, CMS will increase the base Medicare Part A/B rate component to better reflect cost experience in One Care to date.

Yearly Evaluation of the Rate Component

- MassHealth will continue to evaluate the MassHealth rate component every year.

- This evaluation lead us to update the base MassHealth rate component for 2015 and 2016 to include additional funding for:
 - administrative spending
 - expanded community support services
 - dental services
 - additional behavioral health services
 - complex care management

- EOHHS/MassHealth and CMS have made the adjustments necessary to better reflect the cost of integrated care for adults with disabilities.
 - For rate years 2015 and 2016, these adjustments will include \$29.8 million from MassHealth, and \$17.8 million from Medicare.

- MassHealth will continue to work with the plans and stakeholders to ensure that One Care is a financially sound, high quality program.

- As part of these adjustments, Commonwealth Care Alliance (CCA) and Tufts Health Plan will need to commit to remaining in the demonstration through the end of 2016.

- MassHealth and CMS will also work with CCA and Tufts to identify and achieve greater efficiencies in implementation of the program while ensuring high quality care.

Stabilizing The One Care Program (cont.)

- One Care continues to fulfill its role as a demonstration: these financial adjustments are a key lesson learned from our first year of experience as we strive to implement the best and most efficient models of care for our members.
- Strong support from the disability community was a critical consideration in deliberations

- On August 28, 2015, MassHealth submitted a non-binding Letter of Intent to CMS to extend the One Care demonstration for an additional two years (through 2018).
 - One Care is currently authorized through December 31, 2016
 - MassHealth’s Letter of Intent is posted on our website under “Related Information” at: <http://www.mass.gov/masshealth/duals>

- This is an important step toward ensuring stability for One Care enrollees and members who may wish to enroll in One Care in the future.

- A two-year extension would provide sufficient time for MassHealth and CMS to fully measure and understand the impact of the demonstration.

Discussion/Questions?

- Commonwealth Care Alliance (CCA)
 - As of August 7, 2015, CCA is at capacity and is temporarily not accepting enrollment of new One Care members
 - Does not affect current CCA members or One Care members who had previously been enrolled in CCA and who wish to re-enroll
 - Does not affect CCA's Senior Care Options (SCO) plan

- Tufts Health Plan – Network Health (Tufts)
 - Tufts accepting up to 500 new members in Worcester County through December 31, 2015
 - No impact for current Tufts' One Care members or other Tufts Medicaid products
 - No limit on Suffolk County enrollments into Tufts' One Care plan

- MassHealth will post updates on the One Care website at www.mass.gov/masshealth/onecare under the “One Care Plans” section on the availability of both CCA and Tufts as One Care plan enrollment options

Where We Go From Here

- 1) Based on the important rate adjustments underway with CMS, we have come up with a financial construction that better supports diversionary behavioral health and community support services, complex care management, and administrative costs.
 - We will continue to work with the plans to identify additional administrative and operational efficiencies.
- 2) We need to maintain integrated care options in light of losses felt from FTC's withdrawal from One Care
 - Includes up to 500 additional enrollments with Tufts in Worcester County
- 3) Tufts has expressed interest in expanding its footprint in Suffolk County
 - Will help to offset the market challenges of adding up to 500 Worcester County new enrollees so quickly
 - Will likely involve an enhanced approach to auto assignment

This combination of steps should stabilize the Demonstration, reopen enrollment over time, and put us in a better position going into a 2 year extension.

LTS Coordinator Discussions with Tufts and CBOs

- MassHealth has been having ongoing discussions with Tufts Health Plan and their contracted Community-Based Organizations (CBOs) to discuss the provision of the Long-Term Supports (LTS) Coordinators in Tufts Health Plan

- On September 8th, MassHealth hosted a joint meeting with Tufts and CBOs
 - Discussion topics included:
 - Billing/Payments
 - Communication
 - Authorization process
 - Program approach

- Next steps:
 - Ongoing meetings and discussions with Tufts and CBOs
 - MassHealth will reconvene a joint meeting with Tufts and their contracted CBOs in October

Recap of Fallon Total Care (FTC) Closure Information

- Member Information:
 - On July 28th, FTC sent a letter to its members about the closure that included information about the transition, preliminary coverage options, and who to call for help
 - FTC also hosted enrollment/information sessions in Worcester (Aug. 17th) and Springfield (Aug. 19th)
 - On August 31, 2015, MassHealth and the Centers for Medicare & Medicaid Services (CMS) sent a joint letter to FTC members that included additional information about coverage options
 - Members who take no action will be automatically enrolled in Original Medicare and MassHealth fee for service, and in the Humana Preferred Rx Plan (PDP), plan # S5884-102 for prescription coverage.
 - On September 16th, MassHealth sent a letter to FTC members whose primary care providers (PCPs) also participate in Tufts Health Plan – Network Health (Tufts) to let them know they could continue to see these providers if they joined Tufts.
 - MassHealth is also holding a targeted outreach session for these members here in the Worcester Library this afternoon.
- MassHealth created a new page on the One Care website with information related to FTC's closing.
 - Visit the One Care website at www.mass.gov/masshealth/onecare, and go to “News and Community” to access the new page

Continuity for FTC Members' Prior Authorizations

■ MassHealth Services:

- MassHealth will accept service authorizations from Fallon Total Care for at least 90 days from October 1, 2015 (MassHealth services are mostly long-term services and supports and transportation)
- Certain authorizations will remain in place for at least 6 months from October 1, 2015. They are:
 - Personal Care Attendant services (PCA)
 - Durable medical equipment (DME)
 - Oxygen and respiratory therapy equipment
 - Renal dialysis services

■ Medicare Services:

- Members may need to work with their health care provider to get authorization for certain health care services covered by Medicare (generally, inpatient/outpatient hospitals and doctor visits)
- Medicare Part D
 - Humana (and any Medicare Part D plan) will provide access to at least one 30-day supply of the Part D drugs members currently take during their first 90 days in the plan, if, for example:
 - the drugs are not on the plan's formulary,
 - the plan's rules do not let the member get the amount ordered by their doctor, or
 - if the drug requires prior approval by the plan

Discussion/Questions?

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

Email us at OneCare@state.ma.us

