Slide 1: One Care Implementation Council Meeting

Executive Office of Health & Human Services

MassHealth Demonstration to Integrate Care for Dual

Eligibles

September 12, 2023, 10:00 AM – 12:00 PM Virtual Meeting via Zoom

Slide 2: Overview of Member Renewal Timelines

Note: the topic for each bullet below is shown in a graphic box with an arrow connecting one to the other.

Selected for Renewal & Auto-renewal attempted

 Whenever possible, MassHealth will automatically process a member's renewal by matching their information against state and federal data sets

Renewal Notices in Blue Envelope

(45 days to respond)

- If a member's renewal cannot be automatically processed, they will receive a blue envelope in the mail with a renewal form to complete and return to MassHealth.
- Typically, members have 45 days to respond to renewal notices

Request for Information (RFI)

(90 days to respond)

 If members respond to renewal notices but MassHealth still needs more information from the member, members have an additional 90 days to respond to that request for information

Termination Notice

 Typically, members have at least 14 days after receiving a termination notice before their benefits stop

Renewal Reconsideration Period

(90-days)*

 During the reconsideration period a member who has been closed for failure to respond to their <u>renewal</u> <u>notice</u> can contact MassHealth to complete their renewal and will be reinstated to the day that they were closed, as long as they contact MassHealth within 90 days of their MassHealth coverage terminating

Deeming Eligibility Period

(60 days)

- MassHealth allows One Care members to remain enrolled in their One Care plan for 2 calendar months after eligibility loss or downgrade due to:
 - Redetermination paperwork not returned timely
 - RFI requests related to eligibility not returned timely

*The 90-day renewal reconsideration period only applies for failure to respond to a renewal notice but DOES NOT apply for failure to respond to RFIs, verifications, or other types of notices.

Slide 3: Auto Renewals and Referred Eligibility

- Whenever possible, MassHealth will automatically process renewals through multiple avenues
- MassHealth members who belong in one of the following categories may be automatically renewed in the April 2023 – April 2024 redetermination cycle:
 - Those who receive SSI through the U.S. Social Security Administration because they are disabled and have limited income/resources
 - Those who receive SSI through the U.S. Social Security Administration because they are 65 and older and have limited incomes/resources
 - Those who receive TANF (Temporary Assistance for Needy Families) through Department of Transitional Assistance (DTA)

Note: the following information is shown in a table format on this slide.

- Plan A
 - Percentage
 - Referred Eligible=24%
 - Non-Referred Eligible=76%
- Plan B
 - Percentage
 - Referred Eligible=22%
 - Non-Referred Eligible=78%
- Plan C
 - Percentage

- Referred Eligible=20%
- Non-Referred Eligible=80%
- Grand Total
 - Percentage
 - Referred Eligible=23%
 - Non-Referred Eligible=77%

Slide 4: One Care Redetermination Metrics

Renewal Metrics by One Care Plan

Plan A

- Percentage of members noticed 6.95%
- Percentage of members noticed who have been termed for non-response 2.82%
- Percentage of past due members termed for nonresponse 3.77%

Plan B

- Percentage of members noticed 7.70%
- Percentage of members noticed who have been termed for non-response 2.48%
- Percentage of past due members termed for nonresponse 3.38%

Plan C

- Percentage of members noticed 8.60%
- Percentage of members noticed who have been termed for non-response 0.00%
- Percentage of past due members termed for nonresponse 0.00%

*Data updated 8.9.2023

Metric Definitions:

Percentage of members noticed termed for non-response: The percentage of members who received a renewal notice with a due date prior to 7/13/23 (which would result in a termination date prior to 7/28/23), and who lost coverage for failure to respond to their renewal notice. Note: Data is current up to 8.9.2023.

Percentage of past due members termed for nonresponse: The percentage of all members who received a renewal notice since the end of the PHE, and lost coverage for failure to respond to their renewal notice.

Slide 5: MassHealth Application Assistance for One Care Members

- MassHealth is continuously working to leverage the relationships managed care entities (MCEs) have with their members to ensure eligible members maintain coverage.
- Following a recent, time-limited opportunity announced by Centers for Medicare and Medicaid Services (CMS), MassHealth seeks to enlist the support of MCEs to provide application assistance to individuals and help them complete and submit Medicaid renewal forms.
- MassHealth is currently finalizing a process for MCEs to directly provide application assistance to individuals via temporary access to the Assister Portal.

- The Assister Portal is an online tool that enables "Assisters" (or those with authorized access) to open, complete, and submit the application on behalf of individuals, with their consent. MCEs may designate staff as Health Plan Assisters so that they may directly provide application assistance to individuals.
- Prior to accessing the Assister Portal, MassHealth will require that our MCEs sign user agreements and will have end users participate in a mandatory training.

Slide 6: One Care and SCO Procurement

- **1. Overall Procurement Approach:** Procure plans for both One Care and SCO in parallel
- We are on track to release a single RFR for both products by the end of the year.
- We will indicate a preference for joint bids, but reserve our option to select 'solo' bids
- Procurement will result in separate contracts for One Care and SCO
- One Care RFR Key facts, as discussed in May 2023 meeting
- Expect to Preserve Existing Benefits
- No Copays
- Preserve Care Model improvements made through the work of the Care Model Focus Initiative (CMFI)
- Self-Selection Enrollment (No Passive Enrollment)
- Plans will coordinate One Care enrollment and disenrollment processes

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Slide 7: Consumer Reader Opportunity

Note: the following three topics are shown in a table on this slide with a wide arrow below it pointing to detailed information on where to find the Notice of Opportunity and Consumer Reader Application form.

What is a Consumer Reader?

- Individuals who will review sections of the bids from organizations that want to be health plans for One Care and/or SCO
- Individuals will provide thoughtful feedback during meetings with MassHealth
- Individuals will receive a stipend for participation

Who is Eligible?

- Individuals with a range of experiences with One Care and/or SCO, including One Care and/or SCO members and applicants with knowledge of or experience with One Care and/or SCO, personally, or through (a) family member(s)
- Implementation Council and SCO Advisory Committee members

Are there Accommodations?

 Applicable bid response sections will be available in an accessible format (e.g. hard copy, electronic, accessible electronic, large print, etc.) Reasonable accommodations are available to support participation

For more details and **to apply**, please review the Notice of Opportunity and then complete the Consumer Reader Application form available on EOHHS' One Care and SCO procurement page or COMMBUYS. Please send your completed applications to Amy Butcher (Amy.Butcher@mass.gov) by 4pm on Friday, September 15th, 2023.

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Slide 8: One Care
MassHealth + Medicare
Bringing your care together

VISIT US ONLINE

EMAIL US
OneCare@state.ma.us