

One Care and SCO Procurement / One Care Transition

Executive Office of Health and Human Services

May 25, 2023

Material in this presentation is for informational purposes only and is not an official part of EOHHS procurement for One Care or SCO plans.

All official procurement information will be included in the RFR and its attachments, which will be posted on COMMBUYS.

Potential bidders are encouraged to check COMMBUYS regularly for updates.

Agenda

- 1) Recap of Prior Discussions
- 2) Enrollment Process
- 3) Guiding Principles for Plan Procurement
- 4) Consumer Reviewer Procurement
- 5) Timeline

Stakeholder Discussion Topics

Prior Discussions

- October 2022: Transition planning process overview
- December 2022: Transition Principles, Benefits, Financial considerations
- March 2023: Duals Demo 2.0, Aligned Procurement, Medicare Contracting Process, Procurement Timeline

Today (05/25/23)

Meeting Focus:

- Enrollment Process
- Provider Network
- Guiding Principles for Plan Procurement
- Consumer Reviewer Procurement

Future Discussion Topics

Tentative Upcoming Meeting Topics:

Summer: Finance Topics Deep Dive

To be Scheduled:

- Encounter Data Collection and Monitoring
- Quality Metrics

Recap of Prior Discussions

MassHealth is committed to active engagement with CMS and stakeholders throughout the One Care D-SNP transition and the procurement of the One Care plans and Senior Care Options (SCO) plans

Prior Meeting Topics and Updates:

- 1. Aligned Procurement for One Care and SCO; resulting in separate contracts for One Care and SCO
- 2. Preserve Expanded Benefits: MassHealth intends to continue offering current One Care and SCO benefits, and is exploring strategies to ensure that Duals Demo benefits in One Care continue
- 3. No Copays: MassHealth expects that One Care and SCO will not have copays (as happens today)
- 4. Leverage Care Model improvements: MassHealth will build on the work of the Care Model Focus Initiative (CMFI) for One Care to ensure effective and engaged person-centered care coordination, to drive plan investments in care coordination, to improve enrollee outcomes, and to achieve high enrollee satisfaction
- 5. Self-Selection Enrollment (No Passive): For 2026 forward, eligible members must request to enroll (self-select) into a One Care Plan. Eligible older adults can continue to enroll in SCO Plans through self-selection (SCO already uses this process)

Enrollment Process Ownership

CMS delegates Enrollment Processing to Medicare Advantage Plans (D-SNPs)

	Current Enrollment Process	Future Enrollment Process					
Responsible Entity	MassHealth coordinates One Care enrollment and disenrollment processes	Plans will coordinate One Care enrollment and disenrollment processes (as in SCO today)					
Enrollment Processing	MassHealth and CMS align member's One Care enrollment status for Medicaid and Medicare	Plans must align member's One Care enrollment status for Medicare and Medicaid					
Accept Member Requests	Members enroll/disenroll through MassHealth's Customer Service Center	Members will enroll/disenroll directly through One Care Plans					
	Members can also go to 1-800-Medicare Enrolling in a new plan disenrolls a member from their current plan						
Manage Enrollment Changes	 MassHealth sends enrollment/disenrollment actions: To CMS for Medicare processing To One Care Plans for coverage 	 Plans will send enrollment/disenrollment actions: To MassHealth for Medicaid confirmation and processing To CMS for Medicare confirmation and processing 					
Member Notices	 MassHealth sends enrollment/disenrollment notices e.g. MassHealth member enrolled in XYZ One Care Plan 	 Plans will send enrollment/disenrollment notices e.g. MassHealth member enrolled in our XYZ Plan 					
	MassHealth and CMS send eligibility notices e.g. Individual is eligible for MassHealth Standard, Medicare Part A/B						

Enrollment Process Protections

Proposed Protections for Eligible Members

- Permit only One Care and SCO Plan employees (Employed Agents) to market and enroll members in One Care and SCO plans
 - No third-party Captive Agents or Independent Agents/Brokers will be permitted to enroll members in One Care or SCO
 - No referral fees, contingency basis, or other volumebased payment for enrollments into One Care or SCO
- 2. Training requirements for Plan Employed Agents

In addition to Department of Insurance (DOI) required training, additional training in key areas, including:

- MassHealth, Medicare coverage options, and integrated care program: One Care, PACE, and SCO
- Eligible populations, including relative to other Medicare or MassHealth populations
- Disability, Independent Living, Recovery, Accessibility, and Aging Topics
- Social Determinants of Health, health disparities, health equity

3. Improve MassHealth and Plan reporting and enrollment data monitoring to identify enrollment and market trends

Examples include:

- How many dual eligible individuals are choosing to enroll in other types of Medicare Advantage and Part D plans
- Short-term enrollments, both in other Medicare Advantage plans, and in One Care and SCO plans
- Which Medicare Advantage plans enroll One Care and SCO eligible members
- 4. Additional MassHealth review and contract requirements for marketing, education, and enrollment activities
 - Leverage integrated templates for member materials (Summary of Benefits, Member Handbook, etc.)
 - Clarify rules for when member eligibility or other circumstances change (e.g. turning 65, support need changes, etc.)
 - Monitor plan enrollment and marketing activities, including in coordination with CMS

Guiding Principles for Plan Procurement – Service Areas

Geographic Coverage and Choice:

- Provide members with choices between plans
 - In all or most counties, choice of at least 2 One Care or SCO plans; and
 - Encourage bids that maximize statewide coverage for One Care and SCO
- Potential bidding requirements such as:
 - Allowing bidding on full counties only (no partial counties)
 - Requiring bids to include at least 6 counties in plan Service Areas
- Continuity when members move or have an address change

Guiding Principles for Plan Procurement – Provider Networks

- Align provider networks for One Care and SCO products to:
 - Promote enrollee choices and access to providers and services
 - Improve ability for members to keep current providers when enrolling
 - Enable MassHealth to be more efficient in contract management and oversight
 - Simplify plan/provider operational processes
- Potential preference for bid responses that include aligned provider networks for both One Care and SCO products with certain exceptions
 - Population-specific providers and expertise (e.g. LTS Coordinator in One Care and GSSC in SCO; Geriatricians, etc.)
 - Specific and limited other exceptions requested by plans and approved by MassHealth
- Build strong provider networks with access and availability standards appropriate for each program's population
- Require plans to develop and deploy their expertise, services, and care models for the unique populations in One Care and SCO

Consumer Reviews for Responses to the One Care and SCO Procurement

EOHHS will include consumer perspectives as part of its review of One Care and SCO health plan proposals

- In previously One Care plan procurements, MassHealth has sought and incorporated consumer perspectives
 on certain parts of those procurement bid responses
- MassHealth will provide an opportunity for individuals who have personal experience with disabilities and/or aging to apply to become a consumer reviewer
- Selected consumers would review certain parts of the plan procurement responses
- More information on the application process, timeline, and expected commitment for selected reviewers will be released in the future on COMMBUYS and on another public-facing website (TBD)
- Stipends are expected to be available for Consumer Reviewers

Sharing early to raise awareness for individuals who would be interested in participating

Consumer Reviewer Opportunity

- 1 What is the role of a Consumer Reviewer?
 - Review sections of the bids from organizations that want to be health plans for One Care and SCO
 - Participate in meetings with MassHealth
 - Provide thoughtful feedback
- 2 Who can be a Consumer Reviewer?

In general, individuals who are described below may be eligible to apply to participate as a Consumer Reviewer. Specific criteria will be provided when the opportunity is announced.

- Eligible for One Care or SCO or
- Members of One Care or SCO or
- Family members of individuals who are eligible (or members) of One Care or SCO
- Implementation Council and SCO Advisory Committee members who are also consumers may apply
- What supports will be available for Consumer Reviewers?

Consumer Reviewers will be provided with:

- Applicable bid response sections in an accessible format convenient for their review (e.g. hard copy, electronic, accessible electronic, large print, etc.)
- Reasonable accommodations to support their participation
- A facilitator and note taker from UMass to help organize their discussions with other participating reviewers
- A stipend for their participation

Transition & Procurement Timeline (Preliminary)

	2023		2024				2025		2026
Overall Transition Process	EOHHS updates on policy direction and decisions in stakeholder forums (at least quarterly)		Operations Planning, Medicaid Authority, State Regulations, etc. for 2026					One Care Operates via FIDE SNPs 1/1/2026	
			EOHHS Procures and Contracts with One Care Plans and SCO Plans						
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Procurement Milestones	and	se RFR Model	Bids Due ~ Spring 2024	Select Plans	EOHHS Readiness Reviews ~Early 2025			Enrollments	
	Contra ~late 20 early 2			~ Fall/2024		Sign EOHHS		Medicare Open	Effective ~1/1/26
	Consumer Reviewer Notice of	F			Contract ~5/1/2025			Enrollment Oct-Dec	
	Opportunity			Medicare NOIA*	Medicare Medicar Apps Bids		Medicare	2025	
				11/2024	2/20		Contracts ~7/2025		
Implementation and Advisory Councils	Procu One Care Impleme & SCO Advisory	ntation C	ation Council Orientation & Training		Updated (2026) Program Structure Training for Committee Members				
	Advise on Implementation, Performance, and Monitoring Plans								

^{*}Medicare Application process begins with a Notice of Intent to Apply (NOIA) 14 months before the coverage year begins

Procurement Information for Stakeholders

- COMMBUYS is the official source for all procurement-related information
 - www.commbuys.com/bso/external/bidDetail.sdo?docId=BD-23-1039-EHS01-ASHWA-84773&external=true&parentUrl=close
- Stakeholders can also find related announcements and information on upcoming forums at:

One Care Transition Planning

www.mass.gov/info-details/one-care-transition-planning

One Care and SCO Procurement Information for Stakeholders

- <u>www.mass.gov/info-details/procurement-for-one-care-plans-and-senior-care-options-sco-plans-for-2026</u>
- Email <u>OneCare@Mass.gov</u> to be added for future updates