#### Department of Medical Assistance Services



#### Virginia Coalition of Private Provider Associations

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#### Overview

- Introducing Commonwealth Coordinated Care (CCC)
- Behavioral Health Homes
- Enrollment
- Timelines

- Beginning early 2014, Virginia is rolling out a new initiative called *Commonwealth Coordinated Care* or CCC.
- Provides high-quality, person-centered care for Medicare-Medicaid enrollees that is focused on their needs and preferences
- Blends Medicare and Medicaid services and financing to streamline care and eliminate cost shifting

- Creates a single program to coordinate delivery of primary, preventative, acute, behavioral, and long term services and supports
- Promotes the use of home and community based behavioral and long term services and supports
- Supports improved transitions between acute and long term facilities

- CCC is a voluntary program for individuals who are full benefit Medicaid and Medicare (entitled to benefits under Medicare Part A and enrolled under Medicare Parts B and D, and receiving full Medicaid benefits).
- Individuals may proactively sign up or be automatically enrolled.
- When an individual is enrolled in CCC, he/she will no longer have traditional Medicare or Medicaid fee-for-service.
- Instead, the individual will have one plan, with one ID card, and one number to call for assistance.

• DMAS is currently in negotiations with three health plans who are proposing to provide services and supports under CCC:

- > Healthkeepers
- Humana
- ➤ Virginia Premier

- CCC provides all the same benefits currently available under Medicaid and Medicare
- CCC also provides case management services for all beneficiaries
- Behavioral health homes will also be an option
- There may be additional services such as telehealth and dental coverage
- More specific information on services and supports available under CCC will be available next month.

# Who is eligible for CCC?

- Full benefit Medicare-Medicaid Enrollees (entitled to benefits under Medicare Part A and enrolled under Medicare Parts B and D, and receiving full Medicaid benefits)
- Participants in the Elderly or Disabled with Consumer Direction Waiver
- Residents of nursing facilities
- Age 21 and Over
- Live in designated regions (Northern VA, Tidewater, Richmond/Central, Charlottesville, and Roanoke)

# Who is eligible for CCC?

#### Approximately 78,600 Medicare-Medicaid Enrollees

Region	Nursing Facility	EDCD Wavier	Community Non-waiver	Total
Central VA	4,430	3,762	16,135	24,327
Northern VA	1,935	1,766	12,952	16,653
Tidewater	3,031	2,492	12,575	18,098
Charlottesville	1,477	842	4,427	6,747
Roanoke	2,833	1,355	8,583	12,771
Total	13,706	10,217	54,672	78,596

# Who is *not* eligible for CCC?

- Individuals not eligible include those in:
  - ID, DD, Day Support, Alzheimer's, Technology Assisted HCBS Waivers
  - MH/ID facilities
  - ICF/IDs
  - PACE (although they can opt in)
  - Long Stay Hospitals
  - Money Follows the Person (MFP) program
  - Hospice

- One of the unique features of the CCC is the opportunity for health plans to develop behavioral health homes.
- Behavioral health homes are a team-based services delivery model that provides comprehensive and continuous care to patients, including care management, with the goal of maximizing health outcomes.
- Behavioral and physical health services are provided to individuals in one system of care.

- DMAS estimates there are over 17,000 dual eligible individuals with SMI in Virginia.
- This figure represents a population of individuals with comprehensive health and behavioral health care needs that historically have been underserved.

- Health Plans are working in partnership with Virginia's Community Services Boards (CSBs) in the development of these health homes.
- The behavioral health homes will serve as a comprehensive behavioral health management program that integrates physical and behavioral health services and that has the staff and resources to improve health care delivery, including the ability to rapidly respond to acute episodes for individuals with severe mental illnesses.

- The CSBs will use person-centered planning to work with the individual in assessing overall needs, goals, and preferences for services and choices of service providers.
- Together, the health plan, CSB and individual, will design a service plan that will meet the individual's life and health goals while coordinating care for healthy and productive community living.

- Individuals with high behavioral health needs benefit from this health home choice:
  - The Targeted Case Management provided by the CSBs will assure outreach, linkage to services that support well-being, monitoring for stability and wellness, and making adjustments in levels of service needs.
  - This Targeted Case Management assists with an individual's medical health condition with routine care.
  - The health plan care coordinator can ensure that followup and support services are coordinated outside of the behavioral health home.

- Expected outcomes for the health homes are:
  - Reduced use of the ER for routine care
  - Regular use of preventive strategies
  - Reduced hospitalizations and re-admissions
  - Coordinated prescribing and medication management
  - Crisis prevention and avoidance

### Behavioral Health

• For CCC, health plans are required to have an adequate network of behavioral health and substance abuse providers to meet the needs of the dual eligible population, including their community mental health rehabilitative service needs.

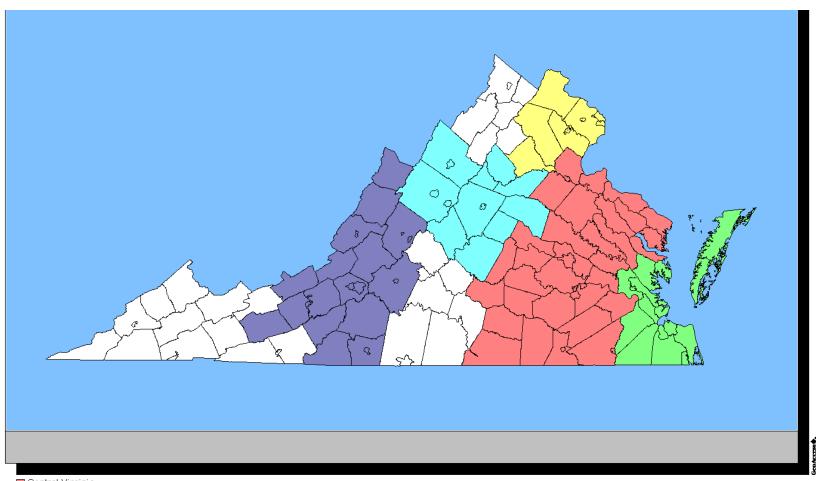
### Behavioral Health

- Examples of the types of providers in the health plan network include but are not limited to the following:
  - Psychiatrists
  - Clinical psychologists
  - Licensed clinical social workers
  - Outpatient substance abuse treatment providers
  - Residential substance abuse treatment providers for pregnant women

#### Enrollment

- Enrollment in CCC will be in five regions of the Commonwealth:
  - Central Virginia/Richmond
  - Tidewater
  - Northern Virginia
  - Roanoke area
  - Charlottesville area

# Virginia's Service Regions



- Central Virginia
- □ Northern Virginia
- Roanoke
- Tidewater
- Western/Charlottesville

#### Enrollment

- Enrollment will also be in two phases:
  - The first phase is called "voluntary enrollment" where an individual proactively enrolls in the program
  - The second phase is called "passive enrollment" (also known as automatic enrollment) where the individual is automatically enrolled into the CCC program. Individuals will be automatically enrolled after considering the individual's previous enrollment with the health plans, or the health plan network that includes their current adult day health provider or nursing facility (if applicable).

#### Enrollment

Most importantly, if an individual is unhappy with the health plan chosen for them, he/she may request reassignment to another health plan or opt out of the program and return to traditional Medicare and Medicaid.

# Commonwealth Coordinated Care Enrollment Timeline

- Central Virginia/Richmond and Tidewater areas:
  - Early 2014: Voluntary enrollment begins
  - March 2014: Coverage begins
  - May 2014: Automatic enrollment begins
  - July 2014: Coverage for those automatically enrolled begins
- Northern Virginia, Roanoke, Charlottesville areas:
  - May 2014: Voluntary enrollment begins
  - June 2014: Coverage begins
  - August 2014: Automatic enrollment begins
  - October 2014: Coverage for those automatically enrolled begins

#### **Timeline**

for

#### Central Virginia/Richmond and Tidewater areas

- Early 2014: first letters are mailed to eligible individuals.
- March 2014: For those signed up with CCC, coverage begins.
- May 2014: Automatic enrollment begins.
- July 2014: For those automatically enrolled in CCC, coverage begins.

#### **Timeline**

for

#### Northern Virginia, Roanoke, Charlottesville areas

- May 2014: First letters are mailed out to eligible individuals
- June 2014: for those signed up for CCC, coverage begins.
- August 2014: Automatic enrollment begins.
- October 2014: Coverage for those automatically enrolled begins.

#### **Contact Information**

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