



MEDICAID EXPANSION: WHAT PROVIDERS NEED TO KNOW

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DEPARTMENT OF MEDICAL ASSISTANCE
SERVICES**



Who Medicaid Serves Now

Populations Covered in Virginia - SFY 2017



Children in Low
Income Families



Parents, Caregivers,
and Pregnant
Women

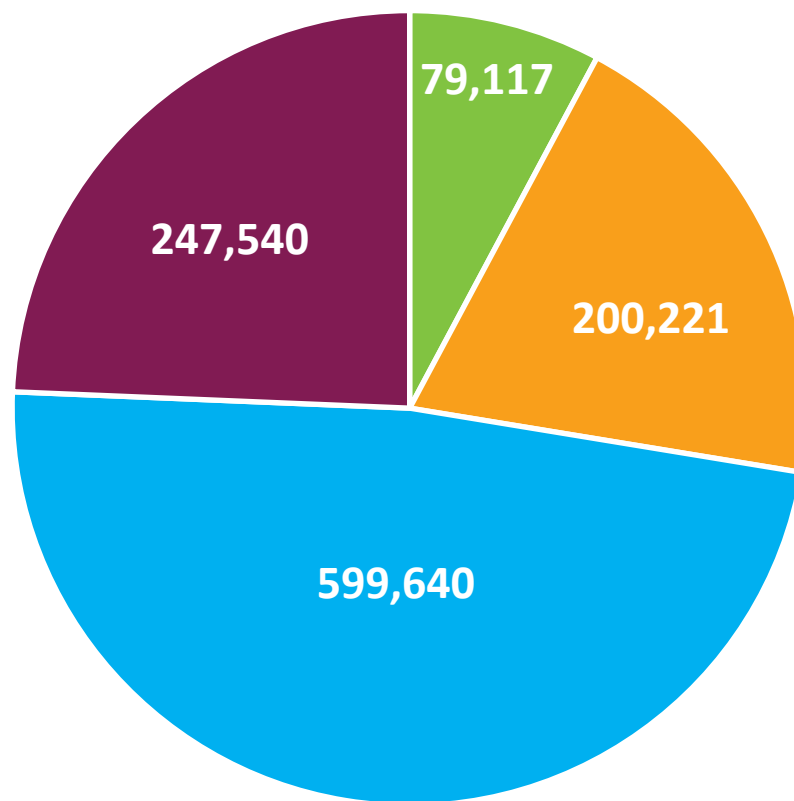


Individuals with
Disabilities



Older Adults

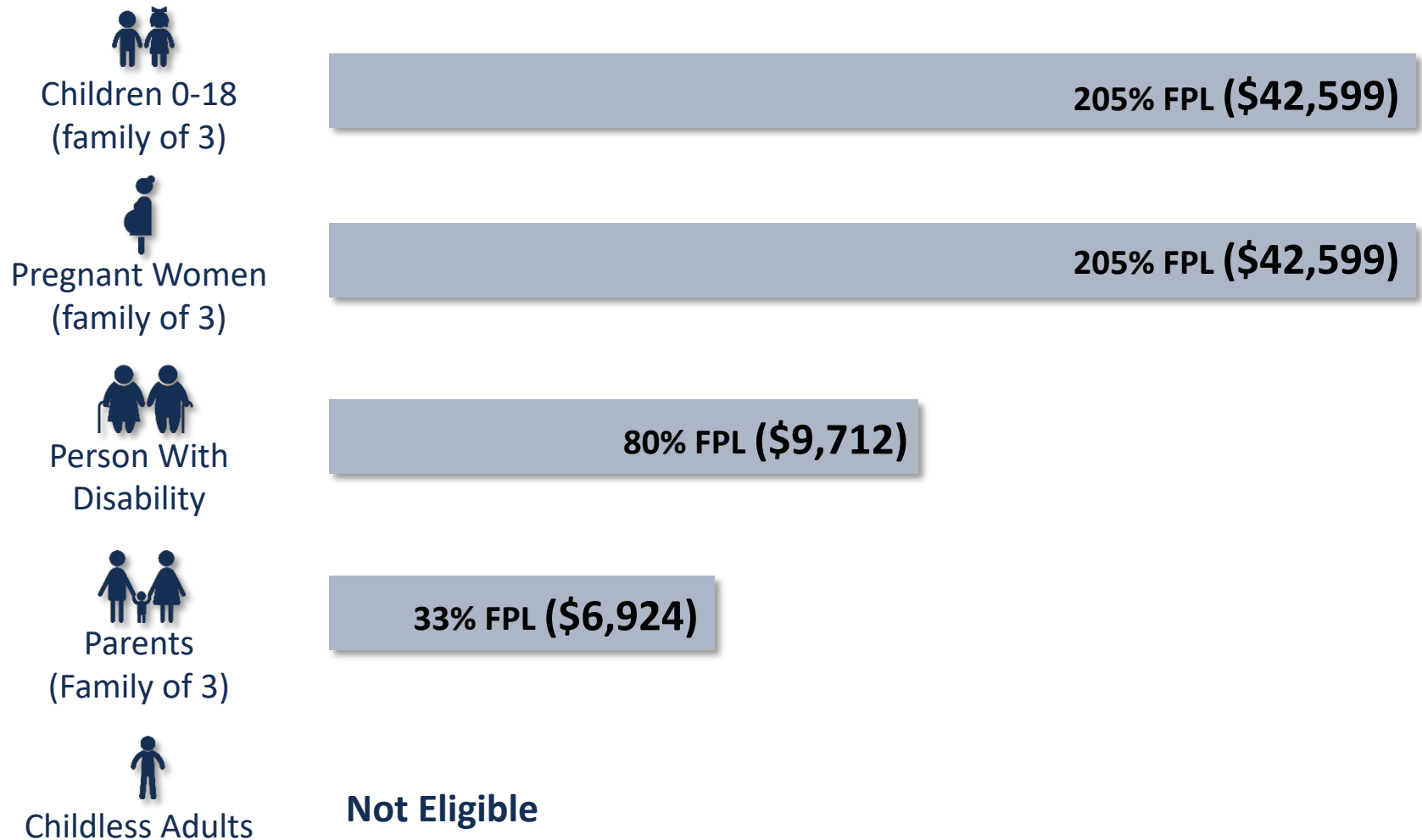
*Average Monthly Membership,
Medicaid & CHIP*



Medicaid and CHIP touched the lives of over 1.6 million Virginians in SFY 2017

Who Qualifies for Virginia Medicaid Now?

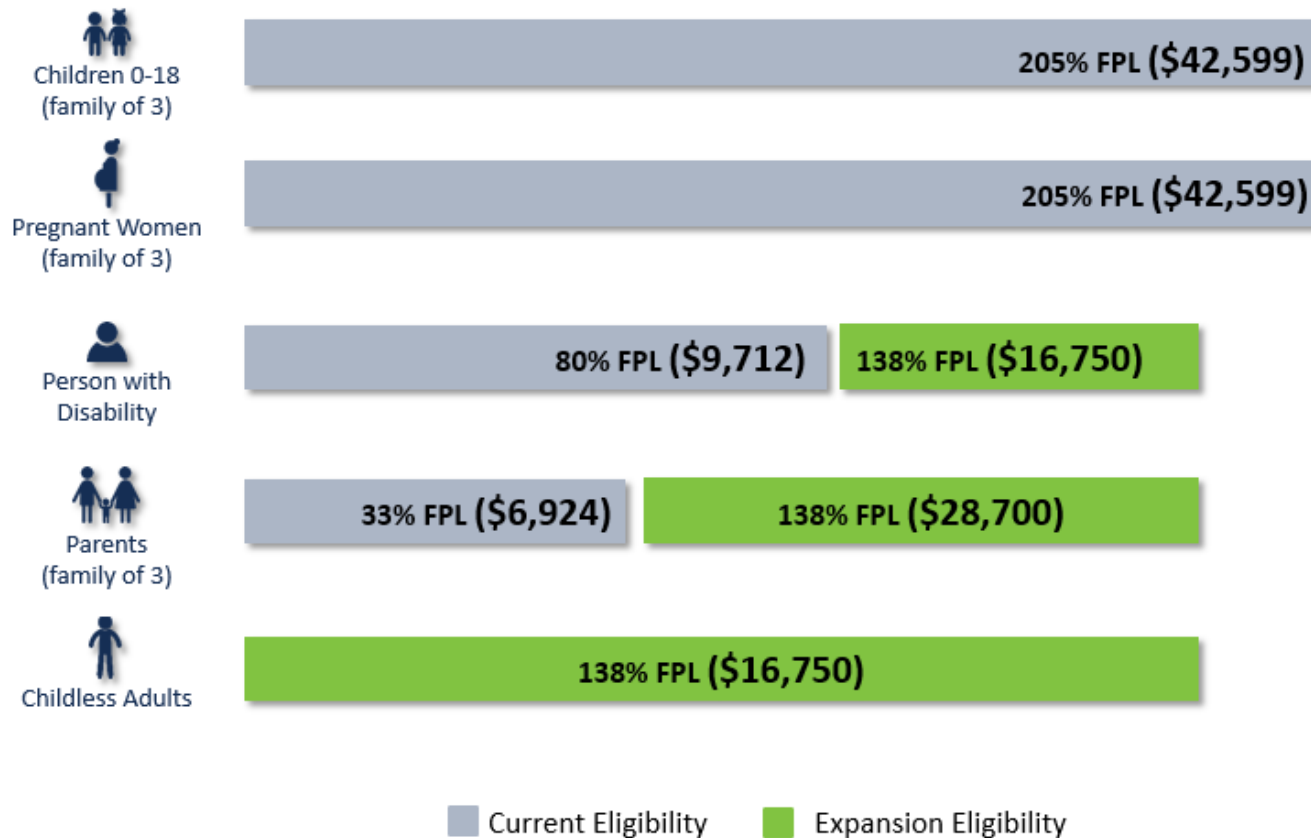
Not all low-income Virginians are eligible



Who Qualifies for Virginia Medicaid Under Expansion?

Medicaid expansion will provide quality, low-cost coverage to up to 400,000 Virginians


















- Adults ages 19 – 64, not Medicare eligible
- Income from 0% to 138% Federal Poverty Level



Who is Eligible?

Income Eligibility Guidelines

Adults may be eligible if they make less than:

FAMILY SIZE	MONTHLY	YEARLY
 	\$1,397	\$16,754
 	\$1,894	\$22,715
 	\$2,391	\$28,677
 	\$2,887	\$34,638
 	\$3,384	\$40,600
 	\$3,881	\$46,562
 	\$4,378	\$52,523
 	\$4,875	\$58,485
Each additional person add 	\$497	\$5,962

Overview of Medicaid Expansion: Covering More Low-Income Virginia Adults

- The rules have changed. More Virginians will be eligible for coverage **beginning January 1, 2019.**
 - Many have applied for Medicaid in the past , but were denied
- Up to 400,000 more Virginia adults will enroll in quality, low-cost health coverage
- People working in retail, construction, childcare, landscaping, food service or other jobs that do not offer health insurance may be eligible



New Adult Coverage Uses Current Health Plans

Coverage will be provided for most individuals through the Medallion 4.0 and Commonwealth Coordinated Care Plus (CCC Plus) managed care programs

aetna[®]

Aetna Better Health[®] of Virginia



Anthem. HealthKeepers Plus
Offered by HealthKeepers, Inc.

Magellan
COMPLETE CARE[®]

OptimaHealth[®]
Family Care

 **UnitedHealthcare**[®]
Community Plan

 **VirginiaPremier**[™]
Powered by **VCU Health**

Medicaid's six current health plans will serve the new adult members

What Services are Covered?

New enrollees will receive coverage for all Medicaid covered services including evidence-based, preventive services

- Doctor, hospital and emergency services, including primary and specialty care
- Prescription drugs
- Laboratory and X-ray services
- Maternity and newborn care
- Home health services
- Behavioral health services, including addiction & recovery treatment services
- Rehabilitative services, including physical, occupational and speech therapies
- Family planning services
- Medical equipment and supplies
- Preventive and wellness services, including annual wellness exams, immunizations, smoking cessation and nutritional counseling
- Transportation to Medicaid-covered services when no alternatives are available
- And more

“Medically Complex” Enrollees

“Medically Complex” includes individuals with a complex behavioral or medical condition and functional impairment, which may be established by:



Application Question

Applicant responds to a “Yes/No” question at time of the initial Medicaid application.

If Applicant marks “Yes,” then the member will receive a screening to validate.

Question on the Medicaid Application:

9. Do you need help with everyday things like bathing, dressing, walking or using the bathroom to live safely in your home? Or Has a doctor or nurse told you that you have a physical disability or long term disease, mental or emotional illness, or addiction problem? Yes No

“Medically Complex” members will be enrolled in the CCC Plus managed care program, which will provide enhanced care coordination services

New Adult Coverage: Early and Future Initiatives

The 2018 Appropriations Act directs Virginia Medicaid to implement new coverage for adults and transform coverage

Beginning January 1, 2019: Implement New Adult Coverage And Other Policy Initiatives

Beginning January 1, 2019 –

- ✓ New coverage for adults with incomes up to 138% FPL

Key initiatives include:

- ✓ Health and Wellness Incentives
- ✓ Referrals to Workforce Resources
- ✓ Appropriate Utilization of ER Services

Future Initiatives in Development:

(These initiatives require federal approval of a § 1115 Demonstration Waiver)

Future initiatives in development for certain individuals:

- Health and Wellness Accounts
- Cost-sharing including copayments
- Training, Enrollment, Education, Employment and Opportunity Program (TEEOP)
- Supportive Employment and Housing Benefit

New adult coverage begins January 1, 2019, while future initiatives are still in development

Cover Virginia Website: New Adult Coverage Webpage



1-855-242-8282

Virginia's New Health Coverage for Adults

Beginning January 1, 2019, more adults in Virginia will have access to quality, low-cost health insurance. Thousands of Virginians aged 19-64 will soon be able to get the health care they need so they don't have to worry about getting sick or having an accident.

Who Qualifies for Virginia Medicaid?

	Childless Adult	Parent (family of 3)	Person with Disability
Currently:	Not Eligible	Eligible with annual income at or below \$6,900	Eligible with annual income at or below \$9,700
Beginning 2019:	Eligible with annual income at or below \$16,754	Eligible with annual income at or below \$28,677	Eligible with annual income at or below \$16,754

You may be eligible if you make less than:

Family Size	Yearly*	Monthly*
1	\$16,754	\$1,397
2	\$22,715	\$1,894
3	\$28,677	\$2,391
4	\$34,638	\$2,887
5	\$40,600	\$3,384
6	\$46,562	\$3,881
7	\$52,523	\$4,378
8	\$58,485	\$4,875



Do you qualify for health benefits? Check out the **Eligibility Screening Tool** to see if you may be eligible.*



*This tool is only for the purpose of estimating eligibility. Actual eligibility cannot be determined until the time when you apply.

HELPFUL INFORMATION

Frequently Asked Questions (Spanish)

Coverage for Adults Brochure (Spanish)

Coverage for Adults Poster (Spanish)

Coverage for Adults One-Pager (Spanish)

RESOURCES FOR ADVOCATES

Please visit the [Advocates page](#) for helpful resources that can assist you with outreach.

Some adults may already be eligible for other Medicaid programs that offer limited benefits. Visit the [Eligibility](#) page to see if you qualify. If you do qualify for a limited benefit program now, you may still be eligible for the new Medicaid coverage with full benefits that begins on January 1, 2019.



COMMON CORE FORMULARY (CCF)

What is the “Common Core” Formulary

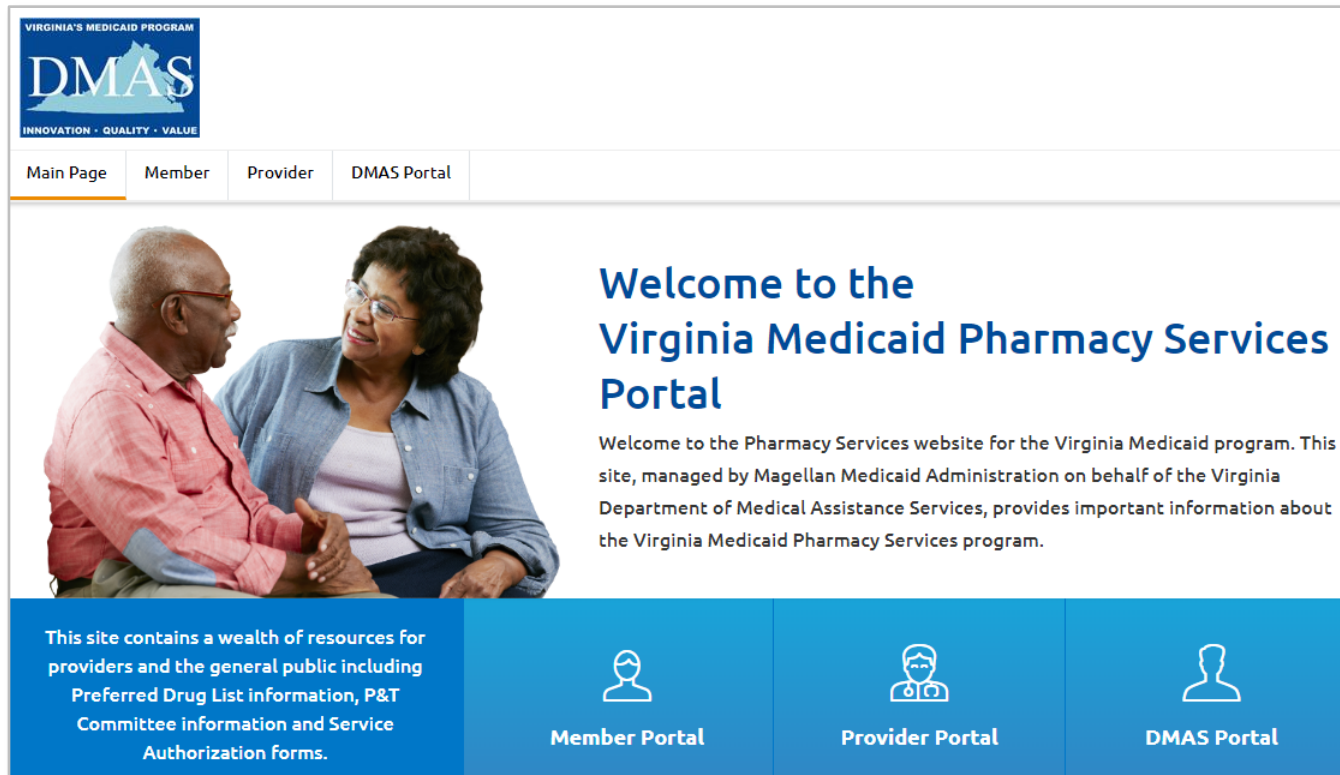
- The Common Core Formulary (CCF) is a list of “preferred” drugs on DMAS’ Preferred Drug List (PDL)
- ALL Medicaid health plans are required to cover all drugs on the CCF
 - The CCF includes 90 common drug classes
 - Some drugs are not on the CCF and health plans will decide which drugs to include on their formularies
 - For example, drugs used to treat HIV, hemophilia & cancer are **not** on the CCF
 - **Health plans cannot require additional prior authorizations (PAs) or added restrictions on CCF drugs**

Advantages for providers include increased continuity of care for patients and decreased administrative burdens for prescribers

Common Core Formulary Resources

Visit the Common Core Formulary/DMAS PDL link:

<https://www.viriniamedicaidpharmacyservices.com/>



The screenshot shows the homepage of the Virginia Medicaid Pharmacy Services Portal. At the top left is the DMAS logo with the tagline "INNOVATION · QUALITY · VALUE". Below the logo is a navigation menu with "Main Page", "Member", "Provider", and "DMAS Portal" options. The main content area features a photograph of an elderly couple and a large heading: "Welcome to the Virginia Medicaid Pharmacy Services Portal". Below the heading is a paragraph of introductory text. At the bottom, there are three blue buttons: "Member Portal" (with a person icon), "Provider Portal" (with a doctor icon), and "DMAS Portal" (with a person icon). A text box on the left side of the bottom bar states: "This site contains a wealth of resources for providers and the general public including Preferred Drug List information, P&T Committee information and Service Authorization Forms."

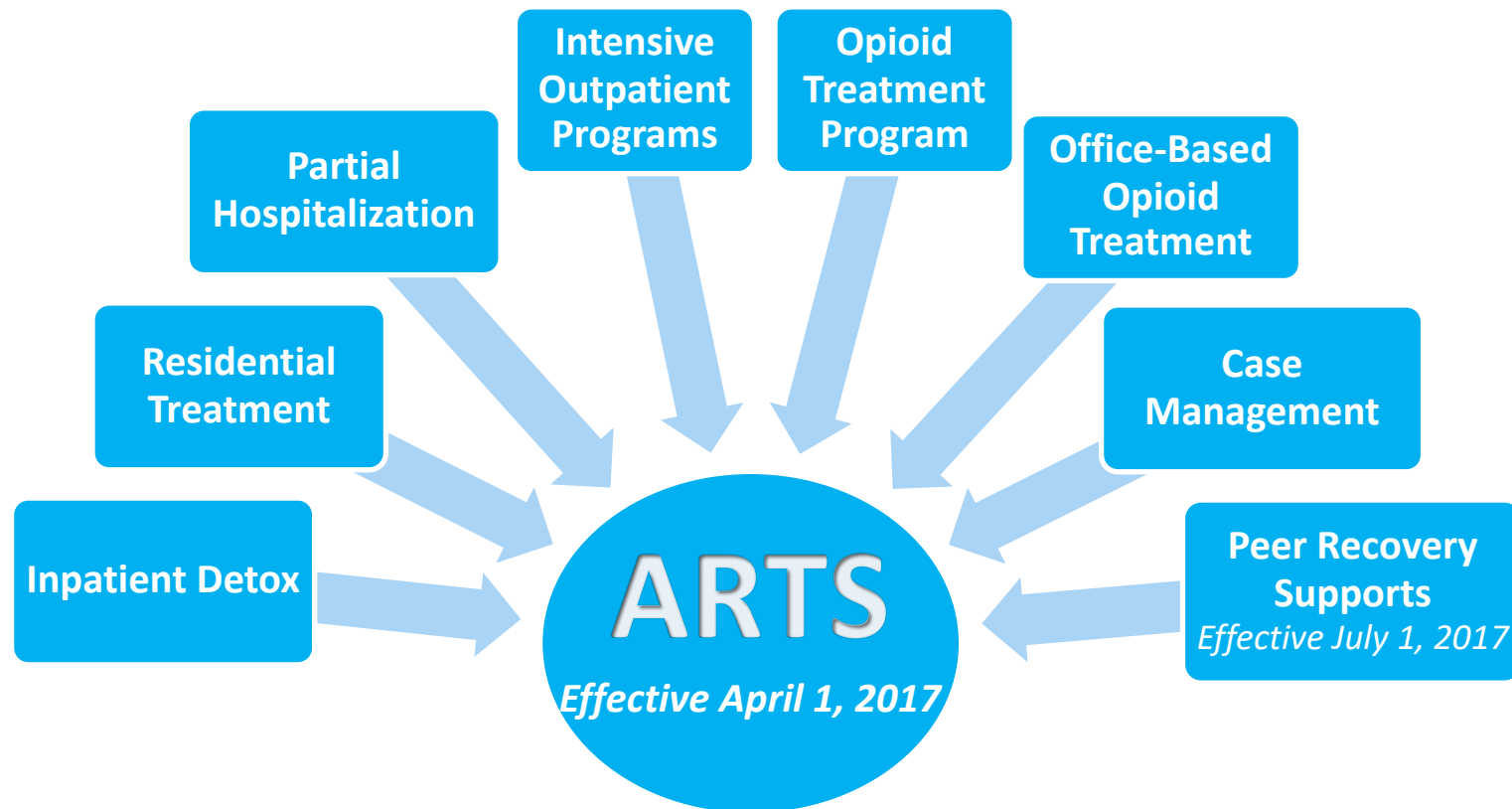
Please email questions regarding the Common Core formulary to commoncoreformulary@dmass.virginia.gov



ADDICTION AND RECOVERY TREATMENT SERVICES (ARTS) PROGRAM

Addiction and Recovery Treatment Services (ARTS): Transforming the Delivery System of Medicaid SUD Services

- All ARTS services are covered by managed care plans
- Magellan continues to cover community-based substance use disorder treatment services for fee-for-service members



ARTS creates a fully integrated physical and behavioral health continuum of care

Increases in Addiction Providers Due to ARTS

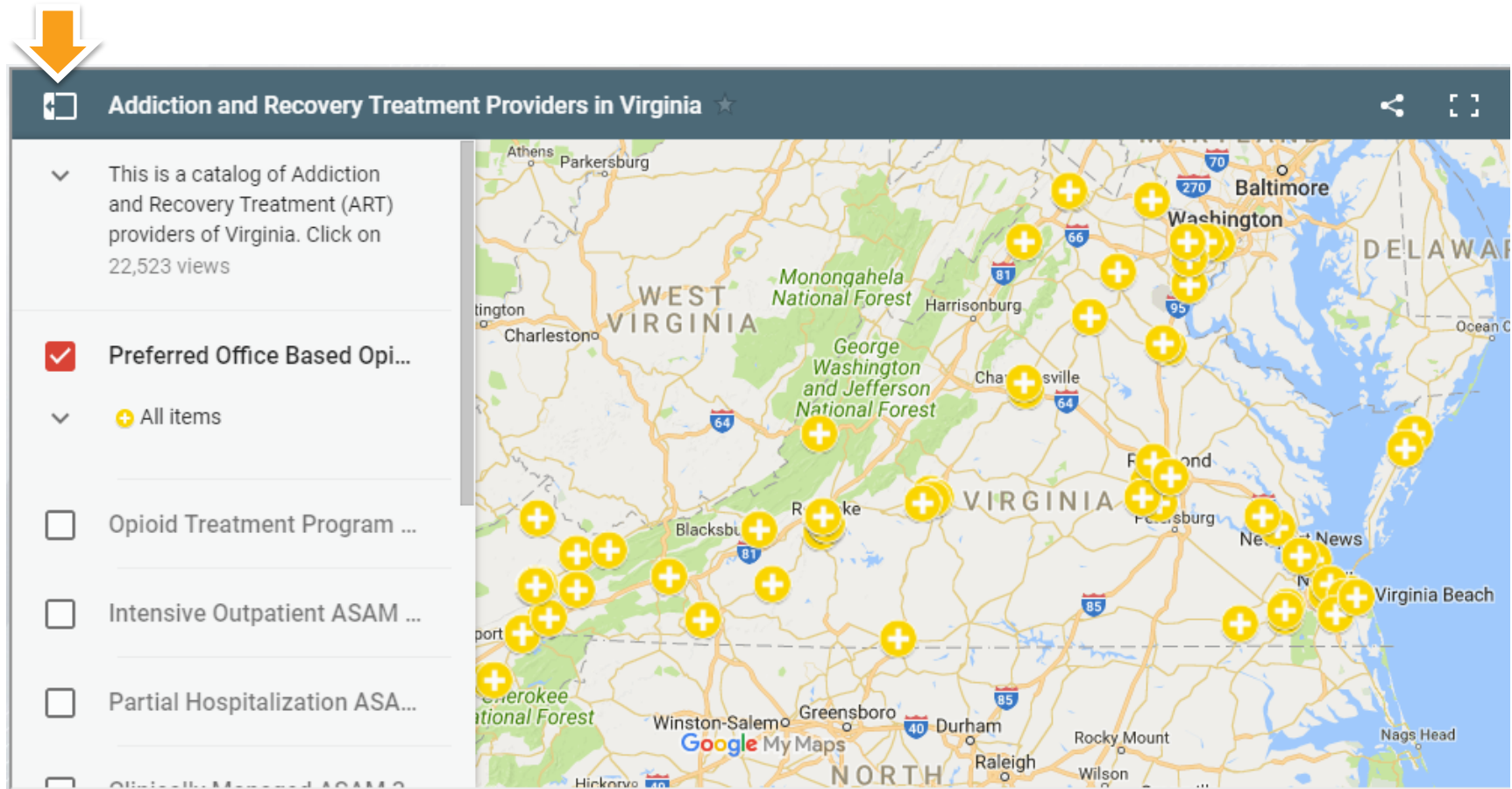
Over 440 new Addiction Treatment Provider Sites in Medicaid

Addiction Provider Type	# of Providers before ARTS	# of Providers after ARTS	% Increase in Providers
Inpatient Detox (ASAM 4.0)	Unknown	103	NEW
Residential Treatment (ASAM 3.1, 3.3, 3.5, 3.7)	4	94	↑ 2250%
Partial Hospitalization Program (ASAM 2.5)	0	16	NEW
Intensive Outpatient Program (ASAM 2.1)	49	156	↑ 218%
Opioid Treatment Program	6	40	↑ 566%
Preferred Office-Based Opioid Treatment Provider	0	91	NEW

ARTS Resources Available on the DMAS ARTS Website

Visit the DMAS ARTS website to locate providers with Google Maps:

<http://www.dmas.virginia.gov/#/arts>



The screenshot displays a Google My Maps interface for 'Addiction and Recovery Treatment Providers in Virginia'. The map shows the state of Virginia with numerous yellow plus markers indicating provider locations. The sidebar on the left contains the following filters:

- This is a catalog of Addiction and Recovery Treatment (ART) providers of Virginia. Click on 22,523 views
- Preferred Office Based Opi...
- All items
- Opioid Treatment Program ...
- Intensive Outpatient ASAM ...
- Partial Hospitalization ASA...
- Clinically Managed ASAM...

Please email questions regarding the ARTS program to sud@dmas.virginia.gov



EMERGENCY DEPARTMENT CARE COORDINATION (EDCC)

Emergency Department Care Coordination (EDCC)

- ✓ **Single, statewide technology solution** that connects all hospital EDs in Virginia, enabling integration with hospitals' electronic health records
- ✓ Facilitates **real-time** communication and collaboration
- ✓ Providers and their clinical and care management staff will receive alerts with **hospital admissions, discharges, and transfers, and care coordination plans**
- ✓ HIPAA-compliant
- ✓ Integration with the Prescription Monitoring Program and the Advance Health Care Directive Registry
- ✓ Managed by the Virginia Department of Health



ED Care Coordination Implementation



By June 30, 2018

Phase 1:

ALL emergency departments
& Medicaid Managed Care
Organizations



Starting July 1, 2018

Providers - primary care,
case managers, long-term
care, Community Service
Boards, Behavioral Health,
Federally Qualified Health
Centers, specialty care, etc.



By June 30, 2019

Phase 2:

Commercial, Medicare and
State Employee Health Plans



ED Care Coordination

- ✓ Medicaid providers will be prioritized for access to the system
- ✓ Data will be available for all insured patients, not just those covered by Medicaid
- ✓ Collective Medical (EDCC vendor) will need to collect some information from you about best contacts, the scope/size of your practice(s), EHR specifics, etc. They will also need you to sign a legal agreement:
 - E-mail Rachel Fried at rfried@connectvirginia.org
 - Website: <https://connectvirginia.org/>

WHAT'S NEXT?



SUMMARY AND NEXT STEPS

Summary

- ✓ Up to 400,000 Virginians may qualify for expanded Medicaid coverage, but coverage does not yet mean *access* to health care...we need you!
- ✓ New reforms, such as Common Core Formulary, will ease administrative burden
- ✓ New statewide resources to increase collaboration and address needs of complex patients
 - Addiction and Recovery Treatment Services (ARTS) program
 - Emergency Department Care Coordination (EDCC)

Next Steps

If you are already accepting Medicaid patients...

- ✓ Consider opening your panel to more Medicaid patients
- ✓ Inform those who are not currently covered by Medicaid that “the rules have changed” and encourage them to apply
- ✓ Consider becoming a Provider Champion and presenting on Medicaid Expansion in your community

If you are interested in accepting Medicaid patients...

- ✓ To enroll as a DMAS fee-for-service provider, visit www.virginiamedicaid.dmas.virginia.gov to learn more
- ✓ “Pick Two” or more health plans and join their networks
 - Visit each health plan’s website to learn how

Thank you!

MCO Network Contact Information

Health Plan	Contact for Medallion 4.0 and CCC Plus	
Aetna	Jannette Anderson, 804-527-6402, NetworkDevelopmentVAContact@aetna.com	
Anthem	Jamal Matthews, 1 804-354-2178, Jamal.matthews@anthem.com	
Magellan	Kenya C. Onley, 804-366-6339, KConley@magellanhealth.com	
Optima	Annie Beck, 877-865-9075, Option 4, OptimaContract@Sentara.com	
United Health/ INTotal	Contact provider services at: CCC Plus , 877-843-4366 Medallion 4.0 , 844-284-0146 www.providerexpress.com	
Virginia Premier	Medallion 4.0: Phone: 804-819-5151 Angela Woodley, Angela.Woodley@vapremier.com , Ext. 55048 Tammy English, Tammy.English@vapremier.com , Ext. 55817	MLTSS (CCC Plus): Phone: 804-819-5151 John “Huck” Blauvelt, John.Blauvelt@vapremier.com , Ext. 54133 Shannon Wilson, Shannon.Wilson@vapremier.com , Ext. 54132