

AGENDA

Negotiated Rulemaking – Docket 16-0310-1801

Mandatory Managed Care for Duals

Date: Wednesday, May 16, 2018

Time: 3:00 p.m. – 4:30 p.m. MDT (2:00 p.m. – 3:30 p.m. PDT)

Web-Ex Link:

<https://idahohomechoicemfpevents.webex.com/idahohomechoicemfpevents/onstage/g.php?MTID=e0b3b0e5b486660e0a31b1457200188d1>

Dial-In Information

Dial: (877) 820-7831

Participant Code is: 614545#

3:00 p.m. – 3:20 p.m. Introduction and Overview

Overview of the proposed mandatory managed care program for duals in Idaho.

- Covered benefits and program structure
- Planned implementation timeline

Ali Fernández

3:20 p.m. – 4:20 p.m. Open Discussion of Proposed IDAPA Changes

Targeted discussion of provisions to incorporate into new IDAPA sections.

- Program authority
- Participant eligibility
- Covered Services

Group

4:20 p.m. – 4:30 p.m. Next Steps

Review of additional opportunities for stakeholder education and input.

Ali Fernández

Additional information on back of page.



Key Points:

- Proposed IDAPA structure:
 - Program Authority
 - Contract with Medicaid
 - CMS approval (1915(b) waiver)
 - Implementation – pilot county
 - Participant Eligibility
 - Eligible populations
 - Mandatory and passive enrollment requirements
 - Covered Services
 - Coverage and Limitations
 - Provider Reimbursement
- Please submit additional feedback by close of business on **Friday, May 25**. Submit your comments by:
 - **Mail:** Ali Fernández, Division of Medicaid, PO Box 83720, Boise, ID 83720-0036
 - **Email:** IdahoMMCP@dhw.idaho.gov
- Stay informed about updates to the MMCP and Idaho Medicaid Plus at the program webpage: www.MMCP.dhw.idaho.gov
 - FAQs
 - Calendar of outreach activities
 - Informational materials
 - Copies of presentations, including today's slides
- Draft rules will public August 1, 2018 in the Administrative Bulletin at <https://adminrules.idaho.gov/bulletin/> . Public hearings will be hosted to solicit additional public comments.
- Temporary rules will publish in the October 3, 2018 edition of the Administrative Bulletin.

Negotiated Rulemaking Docket 16-0310-1801

Mandatory Medicaid Managed Care for Duals

MAY 16, 2018

Goals of Today's Meeting

- Provide an overview of a new mandatory Medicaid Managed Care program for Duals, called “Idaho Medicaid Plus”
- Solicit feedback on provisions needed in IDAPA to implement the program
- Inform stakeholders of next steps in the rulemaking process and program implementation

The Idaho Legislature directed Idaho Medicaid to implement managed care programs for duals in HB 260 in 2011.

Why?



Who is considered a Dual?

- Eligible and enrolled in Medicare A and B and Enhanced Medicaid
- 21 years of age or older

Existing Program: MMCP

- The Medicare Medicaid Coordinated Plan (MMCP) is an existing, voluntary program that is offered in 22 of Idaho's 44 counties.
- The MMCP integrates all Medicare Parts A, B, and D benefits with most Medicaid benefits.
- This docket will not impact the current MMCP program.

New Program: Idaho Medicaid Plus

- **Idaho Medicaid Plus** will administer the same array of Medicaid benefits as the MMCP.
- A member's Medicare coverage will not be affected.
- Enrollment into **Idaho Medicaid Plus** will be
 - mandatory in counties where there are two or more participating health plans.
 - passive, with an opt-out option in counties where there is only one participating health plan.

Mandatory Enrollment

- Duals will be asked to select a health plan to administer their Medicaid benefits.
- If a dual does not make an active selection, he or she will be assigned to a health plan.
- Duals can make a change to their health plan in the first 90 days of coverage.
- Duals will not be able to opt out to fee-for-service Medicaid.

Target Population for Idaho Medicaid Plus

- Duals who have not enrolled in the MMCP.
- Duals who do not belong in one of the following groups:
 - Tribal members
 - Pregnant women
 - Individuals on the Adult Developmental Disabilities 1915(c) waiver

Passive with Opt-Out Enrollment

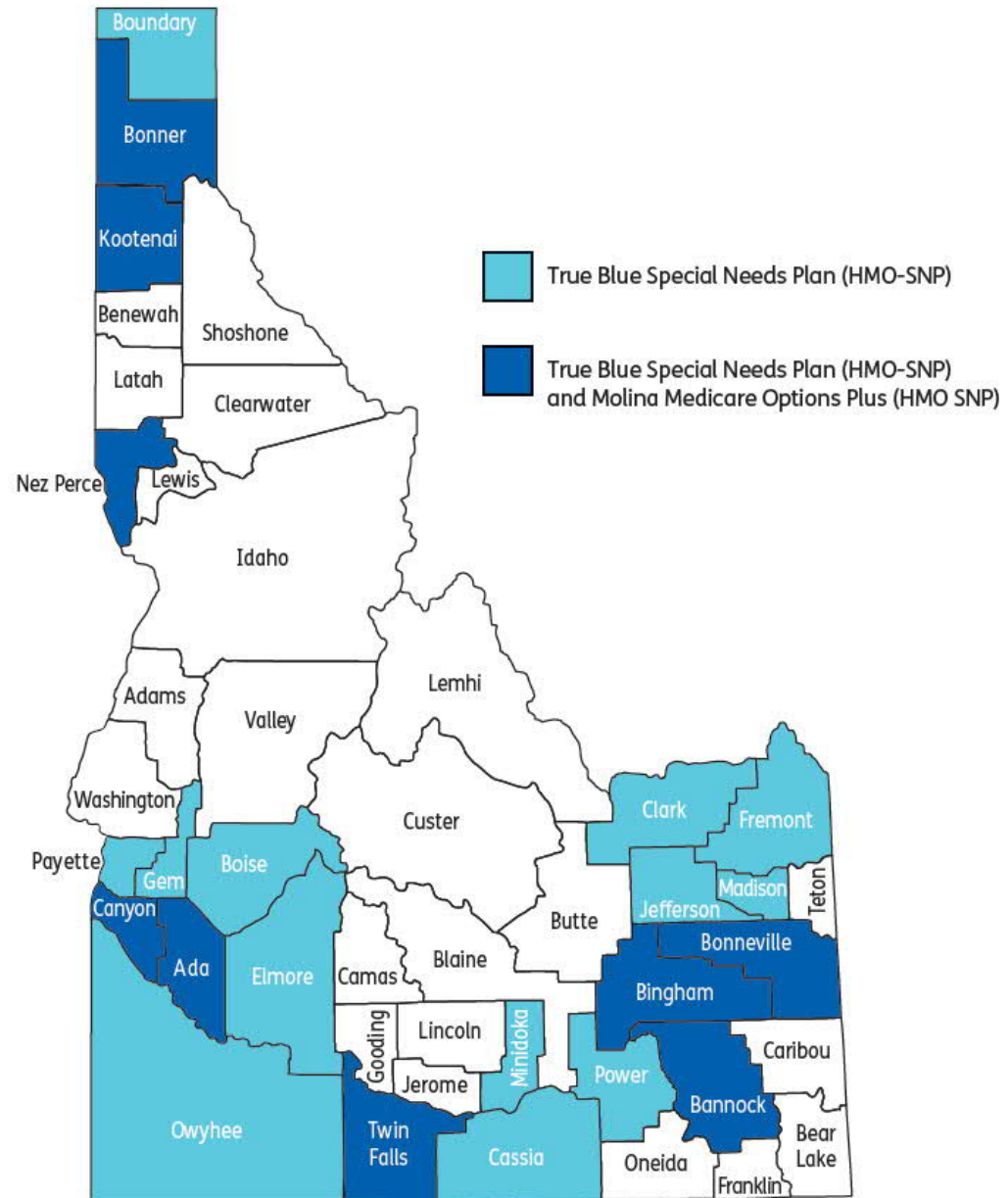
- Duals will be advised of the opportunity to opt out of enrollment into [Idaho Medicaid Plus](#).
- If a dual does not opt out of [Idaho Medicaid Plus](#), he or she will be enrolled in the participating health plan for that county.
- Duals who are passively enrolled retain the ability to opt out to Medicaid fee-for-service at any time.

Mandatory Counties*

Ada
Bannock
Bingham
Bonner
Bonneville
Canyon
Kootenai
Nez Perce
Twin Falls

Passive w/ Opt-Out Counties**

Boundary
Gem
Boise
Elmore
Owyhee
Cassia
Minidoka
Power
Clark
Fremont
Madison
Jefferson



*Blue Cross of Idaho and Molina Healthcare of Idaho

**Blue Cross of Idaho only

Implementation Schedule

- Twin Falls County is our pilot county with a planned go-live date of October 1, 2018 for Idaho Medicaid Plus.
- Idaho Medicaid Plus will expand to additional counties after successful implementation in Twin Falls County.

IDAPA Provisions for Idaho Medicaid Plus

Proposed Elements

- Program Authority
 - Contract with Medicaid
 - CMS approval (1915(b) waiver)
 - Implementation – pilot county
- Participant Eligibility
 - Eligible populations
 - Mandatory and passive enrollment requirements
- Covered Services
 - Coverage and Limitations
 - Provider Reimbursement

Program Authority

- Administered under a Managed Care Organization (MCO) contract with Idaho Medicaid.
- Authorized under 1915(b) waiver authority
- Implementation in pilot county on or after October 1, 2018, based on successful readiness review.
- Expansion to additional counties contingent upon
 - Successful pilot county
 - Participating MCOs meeting performance benchmarks

Participant Eligibility

- Eligible participants – duals over age 21 that
 - Are not enrolled in the MMCP
 - Do not belong to an excluded group
 - Reside in a county with one or more participating health plans

Participant Eligibility

- Mandatory enrollment
 - Counties with two or more participating health plans
 - Duals who do not make an active selection will be assigned to a health plan
 - After 90 days in the plan, annual “open enrollment” period applies
- Passive enrollment with opt-out
 - Counties with only one health plan
 - Duals that do not actively opt-out will be enrolled with the health plan, retaining the option to opt-out at any time.

Covered Services

- Coverage and Limitations
 - Benefits include Medicaid Basic and Enhanced Plan
 - Carved-out benefits
- Provider Reimbursement
 - Medicaid-only services reimbursed at Medicaid rates (at minimum)

Rule Promulgation Next Steps

Submit additional feedback before 5:00PM on May 25.



The Department will review, summarize, and respond to all comments received; and draft rule language accordingly.



Draft rule language will publish on August 1. Public hearings for comments on the draft rules will be held in August.



Temporary rules will go into effect October 1, 2018.

Stay Informed!

- Visit our webpage at <http://MMCP.dhw.Idaho.gov> to find a calendar of outreach events, FAQs, project updates and other informational materials
- Email us at IdahoMMCP@dhw.Idaho.gov with questions or to join our mailing list