

# IDAPA 16 - DEPARTMENT OF HEALTH AND WELFARE

## 16.03.10 - MEDICAID ENHANCED PLAN BENEFITS

DOCKET NO. 16-0310-1801

### NOTICE OF RULEMAKING - ADOPTION OF PENDING RULE

**EFFECTIVE DATE:** This rule has been adopted by the agency and is now pending review by the 2019 Idaho State Legislature for final approval. The pending rule becomes final and effective [at the conclusion of the legislative session](#) unless the rule is approved or rejected in part by concurrent resolution in accordance with Section 67-5224 and 67-5291, Idaho Code. If the pending rule is approved or rejected in part by concurrent resolution, the rule becomes final and effective upon adoption of the concurrent resolution or upon the date specified in the concurrent resolution.

**AUTHORITY:** In compliance with Section 67-5224, Idaho Code, notice is hereby given that this agency has adopted a pending rule. The action is authorized pursuant to [Section 56-202\(b\), Idaho Code](#); also [House Bill 260 \(2011\)](#), now codified as [Sections 56-260 through 56-266, Idaho Code](#).

**DESCRIPTIVE SUMMARY:** The following is a concise explanatory statement of the reasons for adopting the pending rule and a statement of any change between the text of the proposed rule and the text of the pending rule with an explanation of the reasons for the change.

[Idaho House Bill 260 \(2011\)](#) included legislative direction for the Department to develop a plan for Medicaid managed care for high-cost populations, including dual eligibles. Idaho Medicaid has offered a voluntary, integrated Medicare-Medicaid Coordinated Plan (MMCP) to Idaho's dual eligibles since 2014. With the addition of another health plan to the market, dual eligibles will have two health plans to select from for the MMCP.

There are no changes to the pending rule and it is being adopted as originally proposed. The complete text of the proposed rule was published in the [August 1, 2018, Idaho Administrative Bulletin, Vol. 18-8, pages 89 through 92](#).

**FISCAL IMPACT:** The following is a specific description, if applicable, of any negative fiscal impact on the state general fund greater than ten thousand dollars (\$10,000) during the fiscal year:

The anticipated fiscal impact is limited to the cost of system changes, which is currently projected at \$411,000, based on the high-level design estimate from the Department's Medicaid Management Information Systems (MMIS) vendor, Molina Medicaid Solutions. Centers for Medicare and Medicaid Services (CMS) has approved an Advance Planning Document (APD) requesting federal financial participation (FFP) to offset the costs of these automation changes. The approved enhanced federal financial participation rate is 90% and the remaining 10% will be utilized from state general funds, meaning \$370,000 federal monies and \$41,000 state general funds.

**ASSISTANCE ON TECHNICAL QUESTIONS:** For assistance on technical questions concerning this pending rule, contact [Ali Fernández at \(208\) 287-1179](#).

DATED this \_\_\_\_\_ day of \_\_\_\_\_, 2018.

Tamara Prisock  
DHW - Administrative Rules Unit  
450 W. State Street - 10th Floor  
P.O. Box 83720  
Boise, ID 83720-0036  
(208) 334-5500 phone; (208) 334-6558 fax  
[dhwrules@dhw.idaho.gov](mailto:dhwrules@dhw.idaho.gov) e-mail

# 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#

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#### **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

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#### **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

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#### **4:20 p.m. – 4:30 p.m. Next Steps**

Review of additional opportunities for stakeholder education and input.

Ali Fernández

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***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](mailto:IdahoMMCP@dhw.idaho.gov)
- Stay informed about updates to the MMCP and Idaho Medicaid Plus at the program webpage: [www.MMCP.dhw.idaho.gov](http://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

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MAY 16, 2018

# Goals of Today's Meeting

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- 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?

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

## Existing Program: MMCP

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- 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

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- **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

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- 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

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- 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

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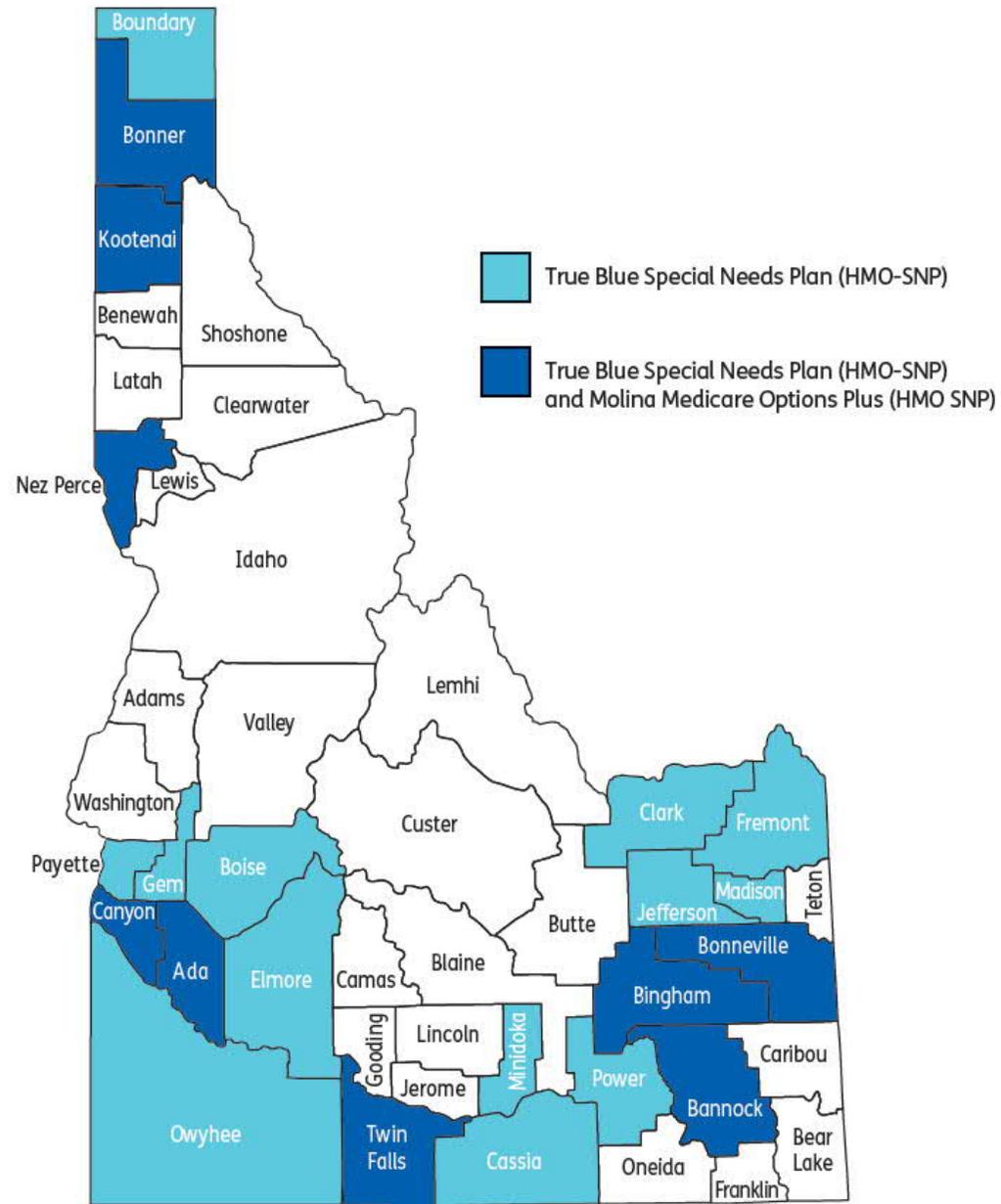
- Duals will be advised of the opportunity to opt out of enrollment into [Idaho Medicaid Plus](#).
- If a dual does not opt out of [Idaho Medicaid Plus](#), he or she will be enrolled in the participating health plan for that county.
- Duals who are passively enrolled retain the ability to opt out to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

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- 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

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# Proposed Elements

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- 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

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- 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

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- 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

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- 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

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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!

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- 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](mailto:IdahoMMCP@dhw.Idaho.gov) with questions or to join our mailing list

## **IDAPA 16 – DEPARTMENT OF HEALTH AND WELFARE**

### **16.03.10 – MEDICAID ENHANCED PLAN BENEFITS**

#### **DOCKET NO. 16-0310-1801**

**NOTICE OF INTENT TO PROMULGATE RULES – NEGOTIATED RULEMAKING AUTHORITY:** In compliance with Sections 67-5220(1) and 67-5220(2), Idaho Code, notice is hereby given that this agency intends to promulgate rules and desires public comment prior to initiating formal rulemaking procedures. This negotiated rulemaking action is authorized pursuant to Sections 56-202, 56-203, 56-250 through 56-257, 56-260 through 56-266, 56-1610, Idaho Code, and Title XIX and Title XXI of the Social Security Act.

**MEETING SCHEDULE:** A public meeting on the negotiated rulemaking will be held as follows:

**MEDICAID MANAGED CARE -- MEDICARE-MEDICAID COORDINATED PLAN (MMCP) METHOD OF PARTICIPATION:** Persons wishing to participate in the negotiated rulemaking must do the following: 1. Attend the negotiated rulemaking meetings as scheduled above; 2. Provide oral or written recommendations, or both, at the negotiated rulemaking meetings; 3. Submit written recommendations and comments to this address on or before Friday, May 25, 2018: Send to: Hand Deliver to: Idaho Dept. of Health and Welfare Idaho Dept. of Health and Welfare Division of Medicaid Division of Medicaid Attn: Ali Fernández, Bureau Chief Attn: Ali Fernández, Bureau Chief P.O. Box 83720 3232 Elder Street Boise, ID 83720-0036 Boise, ID 83705 or e-mail: [IdahoMMCP@dhw.idaho.gov](mailto:IdahoMMCP@dhw.idaho.gov)

**DESCRIPTIVE SUMMARY:** The following is a statement in nontechnical language of the substance and purpose of the intended negotiated rulemaking and the principle issues involved:

**PUBLIC (LIVE) MEETING Wednesday, May 16, 2018 - 2:00 p.m. (PDT) / 3:00 p.m. (MDT)**  
**Region 5 Health and Welfare Office 601 Pole Line Road Conference Rooms A & C Twin Falls, ID 83301 TELECONFERENCE CALL-IN 1:00 p.m. (PDT) / 2:00 p.m. (MDT) Toll Free: 1-877-820-7831 Participant Code: 614545**

**WebEx Link\*:**

**<https://idahohomechoicemfpevents.webex.com/idahohomechoicemfpevents/onstage/g.php?MTID=e0b3b0e5b486660e0a31b1457200188d1> \*The WebEx is limited to the first 100 participants that join, but the audio line does not have a limit. Please feel free to join by phone if you are unable to join the online portion.**

***DEPARTMENT OF HEALTH AND WELFARE Docket No. 16-0310-1801 Medicaid Enhanced Plan Benefits Negotiated Rulemaking Idaho Administrative Bulletin Page 68 May 2, 2018 – Vol. 18-5***

The Department invites interested stakeholders to participate in negotiated rulemaking in this chapter, IDAPA 16.03.10, “Medicaid Enhanced Plan Benefits.” The purpose of the proposed changes to IDAPA 16.03.10 is to allow Idaho Medicaid to implement a phased-in mandatory Medicaid managed care program for individuals who are dually eligible for Medicare Parts A and B and Enhanced Medicaid. Dual eligible individuals are a high-cost, high-needs population that historically have had poorly coordinated care between their Medicaid and Medicare benefits. This program would provide for improved coordination of Medicaid benefits that would be administered by a participating health plan. The purpose of this negotiated rulemaking is to share information about the planned implementation and gather stakeholder feedback about the proposed changes.

**CONTACT INFORMATION, WEB ADDRESS, ASSISTANCE ON TECHNICAL QUESTIONS, SUBMISSION OF WRITTEN COMMENTS:** For assistance on technical questions concerning this negotiated rulemaking, contact Ali Fernández at (208) 287-1179 or e-mail: [IdahoMMCP@dhw.idaho.gov](mailto:IdahoMMCP@dhw.idaho.gov). Materials

pertaining to the negotiated rulemaking for this docket, including any available preliminary rule drafts, can be found on the Department's main Medicaid webpage at:

**<http://healthandwelfare.idaho.gov/Medical/Medicaid/tabid/123/Default.aspx>**, in the "Rulemaking" section of the right-hand column under the "2018" dropdown.

All written comments on the negotiated rules must be directed to the contact person specified above under "Method of Participation" and must be delivered on or before Friday, May 25, 2018. Dated this 5th day of April 2018.

Tamara Prisock DHW - Administrative Rules Unit 450 W. State Street - 10th Floor P.O. Box 83720 Boise, ID 83720-0036 Phone: (208) 334-5500 / Fax: (208) 334-6558 E-mail: **[dhwrules@dhw.idaho.gov](mailto:dhwrules@dhw.idaho.gov)**