

optimetra

Strategy

Leadership

Solutions

Capacity

Value Proposition

Competitive

Intelligence

Collaboration

Metrics & Data

Agility

Purpose

Training & Tools

Vision

Analysis

Facilitation

Financial Stability

Mission

Communication

Voice

Champions

Insight

Programs

Plan

Messaging

Inspiration

Direction

August 29, 2018

Transitioning to Managed LTSS: Unique Insights from Pennsylvania

Kimberly Austin-Oser – Moderator
VP, LTSS & Specialty Services

The logo for Optimetra, featuring a stylized orange 'o' followed by the word 'ptimetra' in white lowercase letters. The logo is centered within a dark grey circular graphic that has a white outline and a white center, resembling a stylized 'O' or a drop shape.

optimetra



we think. we guide. you thrive.

optimetra.com

Perspective – Community-Based Organizations

Dan Hart, Chief Operating Officer
Liberty Resources, Inc.

Barbara Polzer, Co-Executive Director
Liberty Community Connections, Inc.

Be Aware of What's Coming and Prepare

- Create a role or a team whose focus is on managed care readiness
- Look to others who have already gone through the transition to managed care
- Be proactive in educating your staff
- Prepare to demonstrate value



GET and STAY Involved

- Build relationships with MCOs, start early and engage with them often
- Work with your coalitions/membership associations to amplify efforts
- Advocate and provide solutions when you see a risk or an opportunity
- We want managed care to be successful and effective for our consumers!





Questions

Perspective – System Advocates

Pam Auer, Director
Living Well with a Disability, Center for
Independent Living of Central PA;
Organizer, Central PA ADAPT

Germán Parodi, President
Disabled in Action of Pennsylvania;
Organizer, Pennsylvania ADAPT

Nothing About Us without Us!

No policy should be decided by any representative without the full and direct participation of members of the groups affected by that policy.



What Didn't Work

Monthly committee meetings meant to advise the department of health before, during and after the transition to managed long term services and supports limited comments from the public to write in questions before hand and provided little to no interaction with the public.

How we addressed it –

We stopped the meeting! Advocates need to take action when their voices aren't being heard.



What Could Have Been Better

- Some services felt like they were an afterthought or almost forgotten.
- States and MCOs should take advantage of the tremendous value in having a variety of consumers help evaluate readiness.
- We use the services every day and if something is missing or doesn't make sense we will be the first to let you know.



What We are Working on Now

- With any new program there will be glitches, we get it!
- How you react is what matters.



What We Want and Need

We want and need managed care to work –

We believe for Managed care to be effective we the consumers who receive and depend on these services to keep our independence need to be part of the process, we need to be able share our stories, our concerns and our ideas.

At the same time MCOs and States need to be creative and think outside the box. Don't allow old systems and ways dictate the future. Collaborate with consumers, advocacy groups and service providers.

Together, we can only make it better.





Questions

Perspective – State Administrator

Kevin Hancock, Deputy Secretary
Pennsylvania Department of Human Services
Office of Long-Term Living

Community HealthChoices

O V E R V I E W



pennsylvania
DEPARTMENT OF HUMAN SERVICES

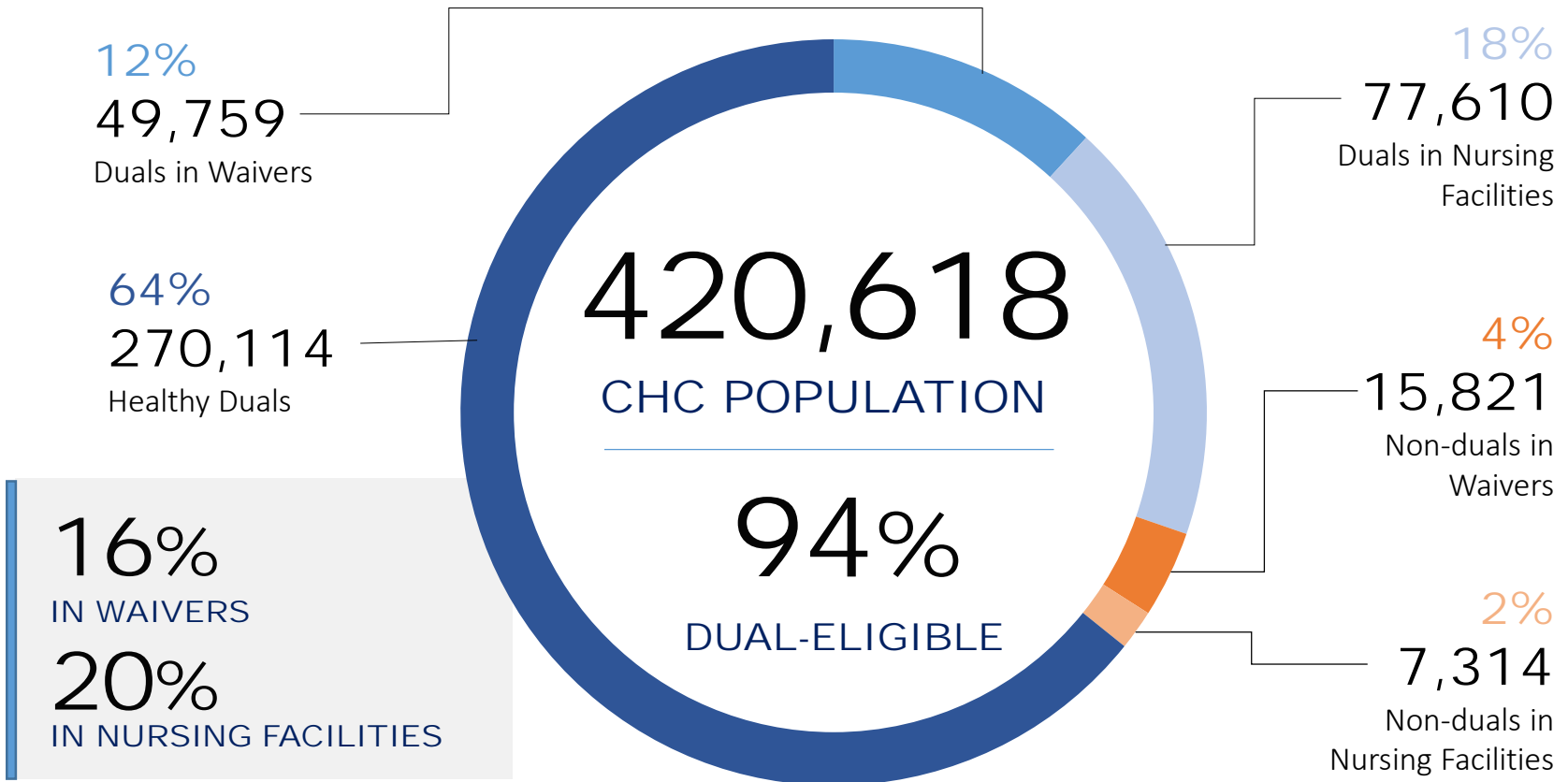
WHAT IS COMMUNITY HEALTHCHOICES (CHC)?

A Medicaid managed care program that will include physical health benefits and long-term services and supports (LTSS). The program is referenced to nationally as a managed long-term services and supports program (MLTSS).

WHO IS PART OF CHC?

- Individuals who are 21 years of age or older and dually eligible for Medicare and Medicaid.
 - ✓ Individuals with intellectual or developmental disabilities who are eligible for services through the Office of Developmental Program will not be enrolled in CHC.
- Individuals who are 21 years of age or older and eligible for Medicaid (LTSS) because they need the level of care provided by a nursing facility.
 - ✓ This care may be provided in the home, community, or nursing facility.
 - ✓ Individuals currently enrolled in the LIFE Program will not be enrolled in CHC unless they expressly select to transition from LIFE to a CHC managed care organization (MCO).

CHC STATEWIDE POPULATION



HOW DOES CHC WORK?

Participants

- Choose their MCO
- Should consider the provider network and additional services offered by the MCOs



DHS

- Pays a per-member, per-month rate (also called a capitated rate) to MCOs
- Holds the MCOs accountable for quality outcomes, efficiency, and effectiveness



MCO

- Coordinates and manages physical health and LTSS for participants
- Works with Medicare and behavioral health MCOs to ensure coordinated care
- Develops a robust network of providers

WHAT ARE THE GOALS OF CHC?

GOAL 1

Enhance opportunities for community-based living.

GOAL 2

Strengthen coordination of LTSS and other types of health care, including all Medicare and Medicaid services for dual eligibles.

GOAL 3

Enhance quality and accountability.

GOAL 4

Advance program innovation.

GOAL 5

Increase efficiency and effectiveness.

COVERED SERVICES

FOR ALL PARTICIPANTS:

Physical health services

All participants will receive the Adult Benefit Package, which is the same package they receive today.

This includes services such as:

- Primary care physician
- Specialist services
- Please note: Medicare coverage will not change.

COVERED SERVICES

FOR ALL PARTICIPANTS:

Behavioral health services

All participants will receive behavioral health services through the Behavioral Health HealthChoices MCOs.

Services available to participants include but are not limited to:

- Inpatient Psychiatric Hospital
- Inpatient Drug and Alcohol Detox and Rehabilitation
- Psychiatric Partial Hospitalization
- Outpatient Psychiatric Clinic
- Drug and Alcohol Outpatient Clinic

This is new for Aging Waiver participants and nursing facility residents, who receive behavioral health services through fee-for-service.

COVERED SERVICES

FOR PARTICIPANTS WHO QUALIFY FOR LTSS:

- Home and community-based long-term services and supports including:
 - ✓ Personal assistance services
 - ✓ Home adaptations
 - ✓ Pest eradication
- Long-term services and supports in a nursing facility
- Participant-directed services will continue as they exist today.

CONTINUITY OF CARE

- MCOs are required to contract with all willing and qualified existing LTSS Medicaid providers for 180 days after CHC implementation.
- Participants may keep their existing LTSS providers for the 180-day continuity of care period after CHC implementation.
- For nursing facility residents, participants will be able to stay in their nursing facility as long as they need this level of care, unless they choose to move.
- The commonwealth will conduct ongoing monitoring to ensure the MCOs maintain provider networks that enable participants choice of provider for needed services.

SERVICE COORDINATION OBJECTIVES

- Every participant receiving LTSS will choose a service coordinator.
- The service coordinator will coordinate Medicare, LTSS, physical health services, and behavioral health services.
- They will also assist in accessing, locating and coordinating needed covered services and non-covered services such as social, housing, educational and other services and supports.
- The service coordinator will also facilitate the person-centered planning team.
- Each participant will have a person-centered planning team that includes their doctors, service providers, and natural supports.



WHERE
IS IT NOW?

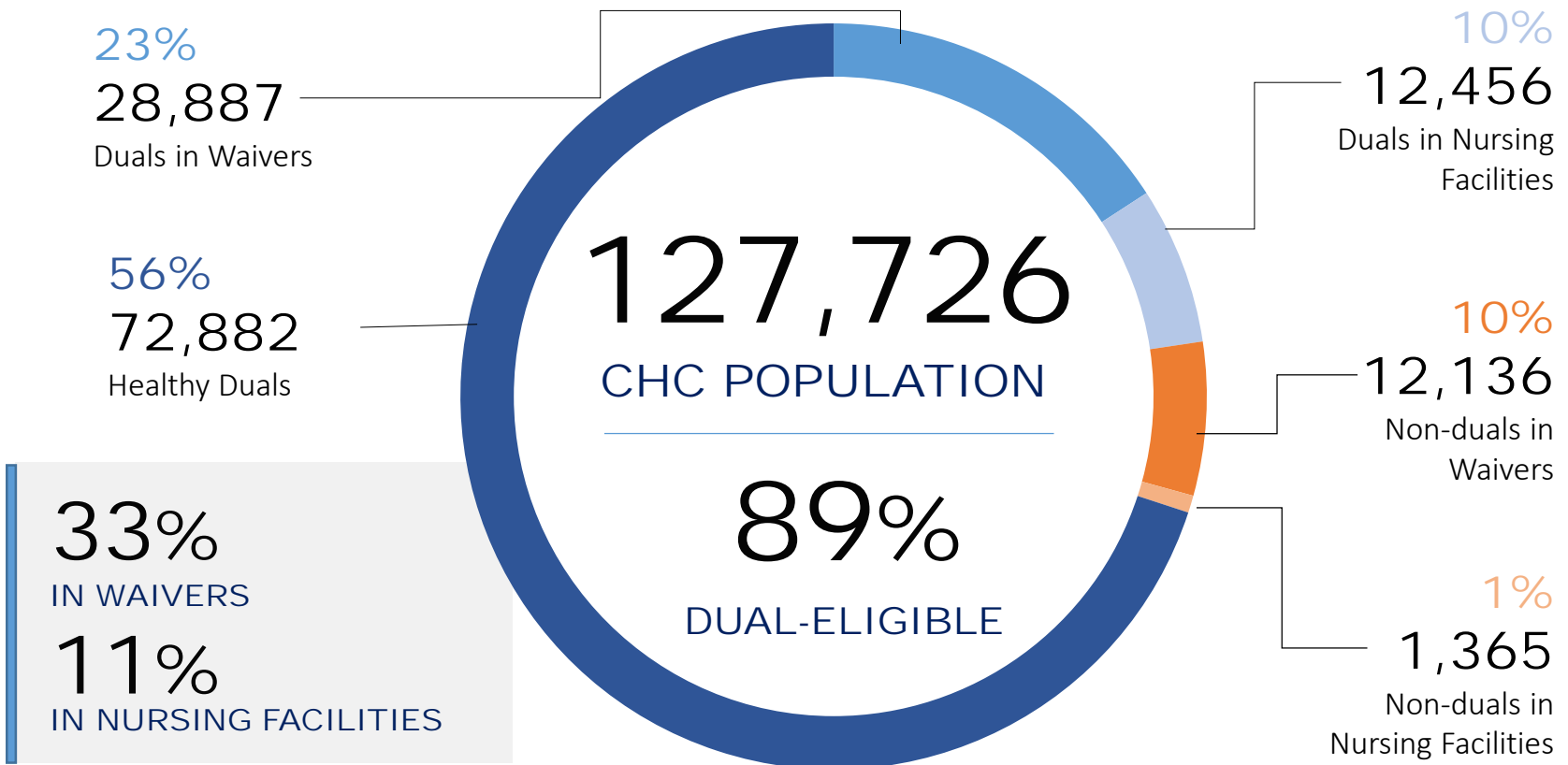
SOUTHWEST IMPLMENTATION

- Successfully implemented the southwest on January 1, 2018
- Approximately 79,000 Participants were transitioned to the CHC program
- Lessons Learned (so far)
 - Earlier stakeholder engagement opportunities
 - Enhanced communication materials and training regarding Medicare vs. CHC
 - More education and communication on continuity-of-care
 - MCO Provider Training and outreach to occur earlier and more often
 - Earlier OBRA reassessments
 - Earlier data clean-up in HCSIS and SAMS
 - Earlier pre-transition notices
- Transportation issues

SOUTHEAST IMPLEMENTATION

- Comprehensive participant communication
- Robust readiness review
- Provider communication and training
- Pre-transition and plan selection for southeast participants
- Incorporation of southwest implementation and launch lessons learned

CHC SOUTHEAST POPULATION



PRIORITIES THROUGH IMPLEMENTATION

ESSENTIAL PRIORITIES

- No interruption in participant services
- No interruption in provider payment

HOW WILL WE ENSURE NO INTERRUPTIONS?

- The Department of Human Services (Department) is engaged with the MCOs in a rigorous readiness review process that looks at provider network adequacy and IT systems.
- The Department of Health must also review and approve the MCOs to ensure they have adequate networks.

PRIORITIES THROUGH IMPLEMENTATION

READINESS REVIEW

- Information systems
- Network adequacy
- Member materials and services



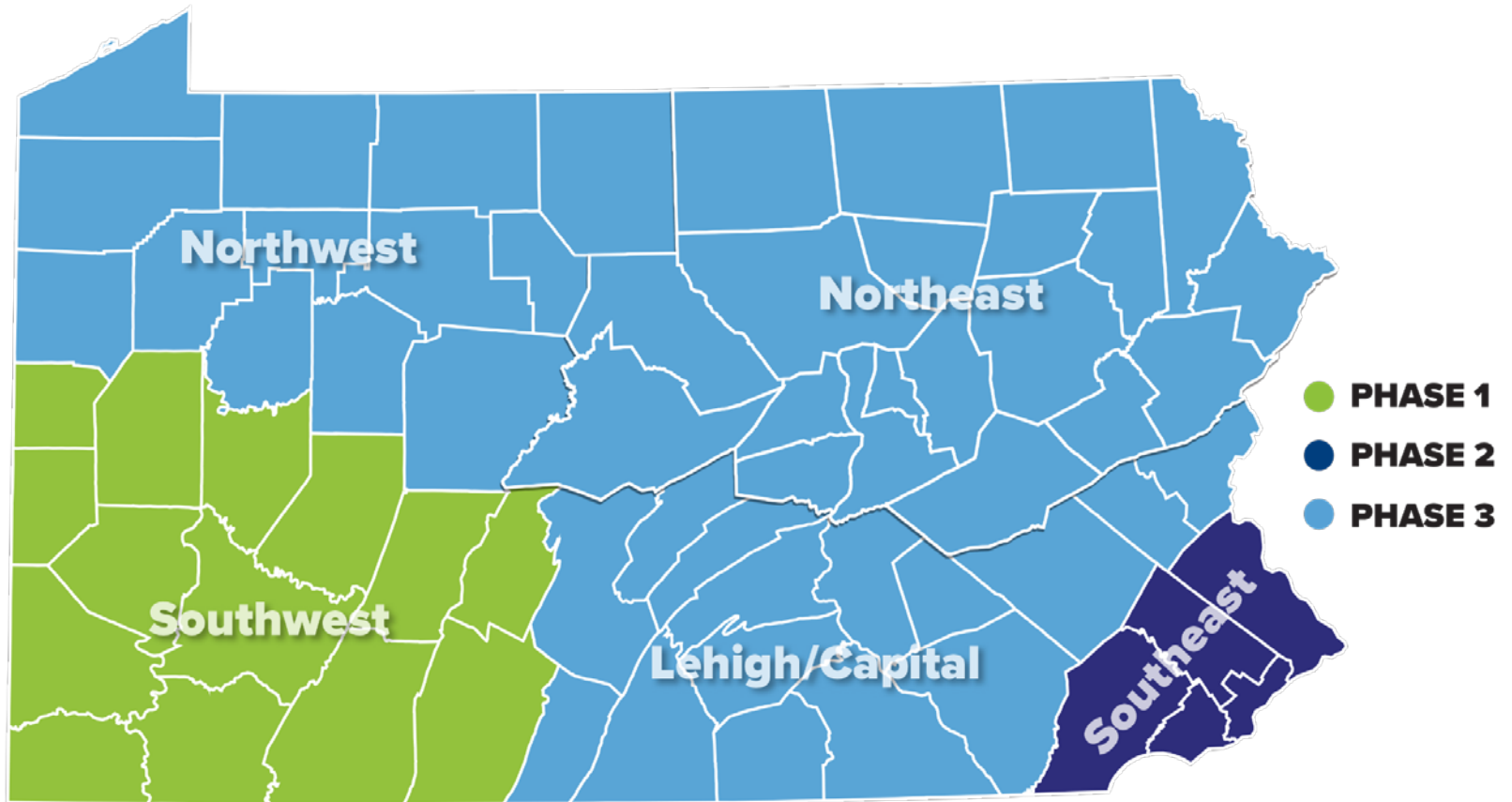
STAKEHOLDER COMMUNICATION

- Participants and caregivers
- Providers
- Public



DHS PREPAREDNESS

- General Information
- Training
- Coordination between offices
- Launch indicators



MANAGED CARE ORGANIZATIONS

- The selected offerors were announced on August 30, 2016.



Keystone First

➤ www.Keystonefirstchc.com



➤ www.PAHealthWellness.com

UPMC Community HealthChoices

➤ www.upmchealthplan.com/chc



RESOURCE INFORMATION

CHC LISTSERV // STAY INFORMED: <http://listserv.dpw.state.pa.us/oltl-community-healthchoices.html>

COMMUNITY HEALTHCHOICES WEBSITE: www.healthchoices.pa.gov

MLTSS SUBMAAC WEBSITE:

www.dhs.pa.gov/communitypartners/informationforadvocatesandstakeholders/mltss/

EMAIL COMMENTS TO: RA-PWCHC@pa.gov

OLTL PROVIDER LINE: 1-800-932-0939

OLTL PARTICIPANT LINE: 1-800-757-5042

INDEPENDENT ENROLLMENT BROKER: 1-844-824-3655 or (TTY 1-833-254-0690)

or visit www.enrollchc.com



QUESTIONS



Questions

Contact Information

- **Kimberly Austin-Oser** , VP of LTSS and Specialty Services, Optimetra, Inc.
kaustin-oser@optimetra.com
- **Dan Hart** , Chief Operating Officer, Liberty Resources, Inc.
danhart@libertyresources.org
- **Barbara Polzer**, Co-Executive Director, Liberty Community Connections, Inc.
BarbPolzer@lcconnections.org
- **Pam Auer**, Director, Living Well with a Disability, Center for Independent Living of Central PA; Organizer, Central PA ADAPT, pauer@cilcp.org
- **Germán Parodi**, President, Disabled in Action of Pennsylvania; Organizer, Pennsylvania ADAPT, germanparodi@msn.com
- **Kevin Hancock**, Deputy Secretary, Pennsylvania Department of Human Services, Office of Long-Term Living, or Designee, KEHANCOCK@pa.gov



we think. we guide. you thrive.

optimetra.com

Thank you!

 **optimetra**

800-758-9710 | [optimetra.com](https://www.optimetra.com)

