Ohio’s Integrated Care Delivery System (ICDS) “MyCare Ohio”

Ohio Department of Medicaid
November 20, 2013

What is MyCare Ohio?
• MyCare Ohio is a demonstration project that integrates Medicare and Medicaid services into one program, operated by a Managed Care Plan.
• ICDS is a system of managed care plans selected to coordinate the physical, behavioral, and long-term care services
• Ohio’s ICDS program is called “MyCare Ohio.”

Why Integration?
• The current Medicare and Medicaid programs are confusing & function independently.
• No entity accountable for the whole person.
• Despite years of substantial investments, Ohio’s LTSS system remains in the third quartile of states. (35th in AARP 2011 Scorecard)
• The aging of Ohio’s population has arrived– and is accelerating rapidly. Current trends in spending are unsustainable.

What is Ohio trying to achieve?
• One point of contact for enrollees.
• Person-centered care, seamless across services & settings of care.
• Easy to navigate for enrollees & providers.
• Lower cost of care through wellness, prevention, coordination & community-based services.

Is MyCare Ohio similar to Medicaid Managed Care?
• Yes; both programs use a Managed Care model
• Plans were selected in competitive bid
• Providers must be contracted with the selected plans in the region, unless they are within the transition period.
• Providers and members can use the same state complaints process.
• Members are offered the same grievance and appeal process.
Major differences with MyCare Ohio vs. Medicaid Managed Care

- MyCare Ohio is only for dual eligible recipients.
- Individuals on HCBS waivers are enrolled.
- DD waivers are exempt from enrollment.
- Individuals who are long term NF residents are enrolled.
- Behavioral health services are provided by the MyCare Ohio plan.
- All enrollees receive care management.
- Recipients can opt out of the Medicare portion.
- MyCare Ohio is offered in 29 demonstration counties.

Waivers Included in Demo

- PASSPORT
- Choices
- Assisted Living
- Ohio Home Care
- Transitions Carve Out

Geographic Area

- MyCare Ohio will operate in seven geographic regions covering 29 counties & include approximately 114,000 beneficiaries.
- Anticipate approximately 37,000 will transition from existing Medicaid Waivers

County-to-MCP Crosswalk

<table>
<thead>
<tr>
<th>Northwest</th>
<th>Southwest</th>
<th>West Central</th>
<th>Central</th>
<th>East Central</th>
<th>Northwest</th>
<th>Northeast</th>
</tr>
</thead>
<tbody>
<tr>
<td>Athens</td>
<td>Athens</td>
<td>Butler</td>
<td>Martin</td>
<td>United</td>
<td>Martins</td>
<td>Lima</td>
</tr>
</tbody>
</table>

MyCare Ohio Plan Regions:

- Eligible for all parts of Medicare (Parts A, B and D) and be fully eligible for Medicaid; and
- Over the age of 18; and
- Reside in one of the demonstration counties.

Note: Individuals residing in NF’s, enrolled in a NF-level of care 1915 c waiver, and/or receiving behavioral health services are included in demonstration.
Exempt Groups

- The following groups are not eligible for enrollment into MyCare Ohio demo:
  - Individuals with an ICF-MR level of care served either in an ICF/IID facility or on a waiver administered by DODD
  - Individuals who are eligible for Medicaid through a delayed spend-down
  - Individuals who have third party insurance including retirement benefits.

Enrollee Protections

- Choice of at least two MyCare Ohio Plans in all Regions (three in Northeast)
- Ability to opt out of Medicare portion of MyCare Ohio
- MyCare Ohio Plan Member Advisory Groups
- A unified grievance & appeal process

Consumer Enrollment

- Individuals in all MyCare Ohio regions may begin to select a MyCare Ohio Plan beginning 2/1/14, for a voluntary 3/1/14 enrollment date.
- Individuals may voluntarily enroll starting March 1, 2014 up to the region’s mandatory enrollment date.
- Mandatory Enrollment Schedule
  - Northeast Region - April 2014
  - Northeast Central, Northwest, Southwest - May 2014
  - Central, East Central, West Central - June 2014

Consumer Enrollment Process

- Enrollment letter will be sent to inform individuals that they will be enrolled in approximately 60 days and may select a Plan

Consumer Enrollment Process cont.

- Individuals will have opportunities to make choices:
  - Over the phone with enrollment contractor
  - During regional education/enrollment forums
  - Through face-to-face individual enrollment counseling

Consumer Enrollment Process cont.

- Individuals who are eligible for MyCare Ohio, and receiving services in one of Medicaid waivers, will be transitioned into MyCare Ohio waiver.
- Not all individuals currently enrolled in these waivers are eligible for MyCare Ohio.
- This means: Some individuals that are currently served on a Medicaid waiver may be moved into MyCare Ohio, while others will not.
Benefits

- Benefit package includes all benefits available through the traditional Medicare & Medicaid programs, including LTSS & behavioral health (new to managed care).

- MyCare Ohio Plans may elect to include additional “value-added” benefits in their health care packages.

Transition Requirements

In order to minimize service disruption, the MyCare Ohio Plan will honor the individual’s existing service levels and providers for a pre-determined amount of time, depending upon the type of service.

Services required to be maintained include:
- Physician; DME; Scheduled Surgeries; Chemotherapy/Radiation; Organ, Bone Marrow, Hematopoietic Stem Cell Transplant; Dialysis; Vision & Dental, Medicaid NF; Medicaid Home Health & PDN; Assisted Living waiver services; NF-based waiver services; Medicaid Community Behavioral Health Organizations.

Transition Requirements cont.

...Exceptions:
During the transition period, change from the existing services or provider can occur in any of the following circumstances:

1. Consumer requests a change
2. Significant change in consumer’s status
3. Provider gives appropriate notice of intent to discontinue services to a consumer
4. Provider performance issues are identified that affect an individual’s health & welfare

Prior Authorization

- All Medicare and Medicaid medically necessary services will be provided by the MyCare Ohio plan.
- Plans will review for Medicare coverage first, and Medicaid coverage second, based on one service request.
- The MyCare Ohio plans will determine which services require Prior Authorization.
- Providers can find Prior Authorization requirements in the Provider Manual and the Plan’s website.

Care Management

Care Manager

- All individuals enrolled in MyCare Ohio will receive care management and be assigned a Care Manager from the Plan.

Waiver Service Coordinator

- Plans are required to contract for Waiver Service Coordination with the AAA’s for individuals over the age of 60 who are on the MyCare Ohio community based services waiver.
- They may contract with AAAs, other entities, or provide waiver service coordination themselves for individuals under the age of 60.

Care Management Team

- The team may consist of the individual, the primary care provider, the care manager, the waiver service coordinator, as appropriate, the individual’s family/caregiver/supports, & other providers based on the individual’s needs.
Service delivery methods in My Care Ohio

In existing NF-Level Medicaid Waivers:

- Most services are Provider-Managed
- Some services are Consumer-Managed
- MyCare Ohio will offer more opportunity for individuals to self-manage their care

Consumer-directed Services

Employer Authority:

Consumer is the employer of record and has authority to recruit, hire, train, direct, and terminate their worker from providing care for the following services:

- Individual Consumer-Directed Personal Care service; or
- Individual Choices Home Care Attendant service

Consumer may NOT hire a spouse, parent, nor step-parent as his or her service provider.

Consumer MAY hire Legal Guardian or Authorized Representative, HOWEVER, another person must be identified and serve as the Legal Guardian or Authorized Representative in their place.

Consumer-directed Services cont.

Budget Authority:

Consumer establishes the rate of pay with these providers (within a specified minimum and maximum range)

- Choices Home Care Attendant service
- Alternative Meals service
- Pest control
- Minor home modification, maintenance and repair
- Home Medical Equipment and Supplemental Adaptive and Assistive devices service

Appeal Process

- Appeals should be sent directly to the MyCare Ohio Plan for review.
  - The plan will review Medicare and Medicaid appeals.
  - MyCare Ohio members can also request a state hearing for Medicaid services.

ICDS Plan Contacts

Aetna
- www.aetnabetterhealth.com/ohio
- OH.ProviderServices@aetna.com

Buckeye
- Mike Ceballos - MCEBALLOS@CENTENE.COM

CareSource
- www.caresource.com
- Anthony Evans - Anthony.Evans@caresource.com

Molina
- www.molinahealthcare.com
- Molina.ICDS@MolinaHealthcare.com

United
- www.uhc.com
- Jeffrey.Cortine@uhc.com