

# Expansion of Medicaid Managed Care Information Session

April 2014

# Topics

- What is managed care?
  - Overview of STAR and STAR+PLUS
- New managed care projects
  - New service areas, populations, and services
- Next steps
  - What to expect and how to get ready
- Questions

Presentation available at:

<http://www.hhsc.state.tx.us/medicaid/MMC.shtml>

# What is Managed Care?

- Health care provided through a network of doctors, hospitals and other providers through a health plan you select
- Goals
  - Focus on preventive care
  - Improve access to care, health outcomes, quality of care and cost-effectiveness
  - Make sure services address the member's need
  - Provide each member a main doctor to help coordinate care

# Managed Care Programs in Texas

- STAR
- STAR+PLUS
- STAR Health
- Children's Health Insurance Program (CHIP)
- CHIP and Children's Medicaid Dental

# Health Plans

- Members choose a main doctor (primary care provider), through their health plan
  - Exception: Those who get both Medicare and Medicaid
- All kinds of providers (doctor, specialist, etc.) must sign up with a health plan to provide STAR or STAR+PLUS services
- Main doctor provides referrals to specialists
- To get certain services you need to get approval from your health plan
- Health plans can offer extra services such as extra dental services, extra vision services, health and wellness services

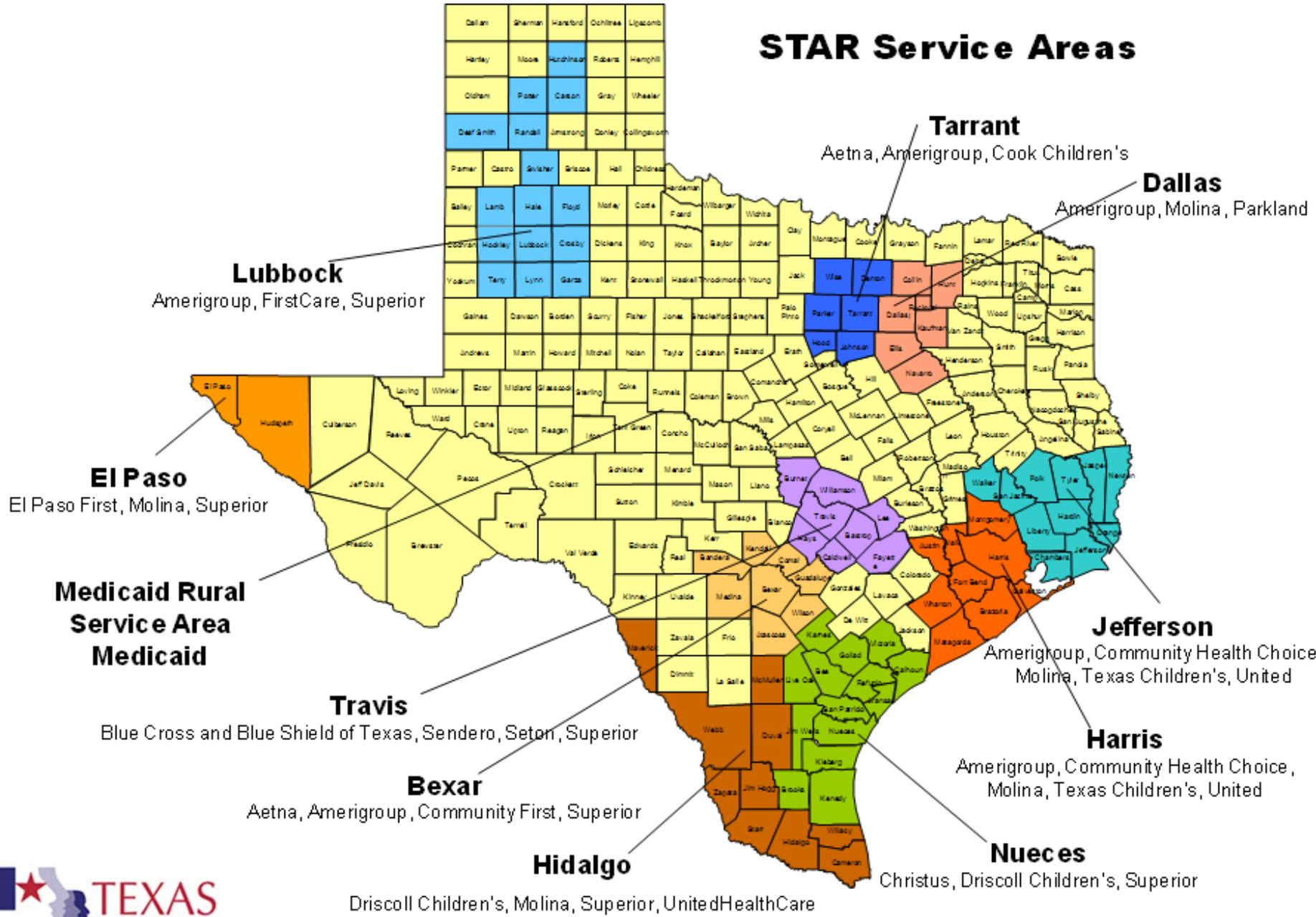
# Health Plan Identification (ID) Cards

- All who have Medicaid get a Your Texas Benefits Medicaid card from HHSC
- Members also get a health plan ID card that has:
  - Member's name and Medicaid ID number
  - Medicaid program (like STAR, STAR+PLUS)
  - Health plan name
  - Main doctor's name and phone number
  - Toll-free phone numbers for member services and behavioral health services hotline

# STAR

- Each member joins a health plan
- Health plan provides basic medical services (acute care) such as doctor visits, hospital visits, and prescriptions
- Focus on preventive services to keep people healthy
- Members have a main doctor who knows their health care needs and can refer them to specialists, when needed

# STAR Service Areas





# Who Gets STAR Medicaid?

- STAR serves 2.5 million people with Medicaid, including:
  - Persons who get TANF
  - Pregnant women
  - Newborns
  - Low-income families and children
  - Adults age 21 and older, living in rural areas:
    - Getting Supplemental Security Income (SSI), but not Medicare, or
    - Enrolled in certain DADS 1915(c) waiver programs

# Who Gets STAR Medicaid?

- Those who chose it - Children and young adults age 20 and younger living in rural areas who are:
  - Getting SSI benefits, but not Medicare, or
  - Enrolled in certain DADS 1915(c) waiver programs
- Does not include:
  - People with Medicaid who live in state living centers
  - People in the Medically Needy Program
  - Children in foster care
  - Refugees
  - People with both Medicaid and Medicare (dual eligibles)

# STAR Benefits

Same as traditional Medicaid benefits, plus:

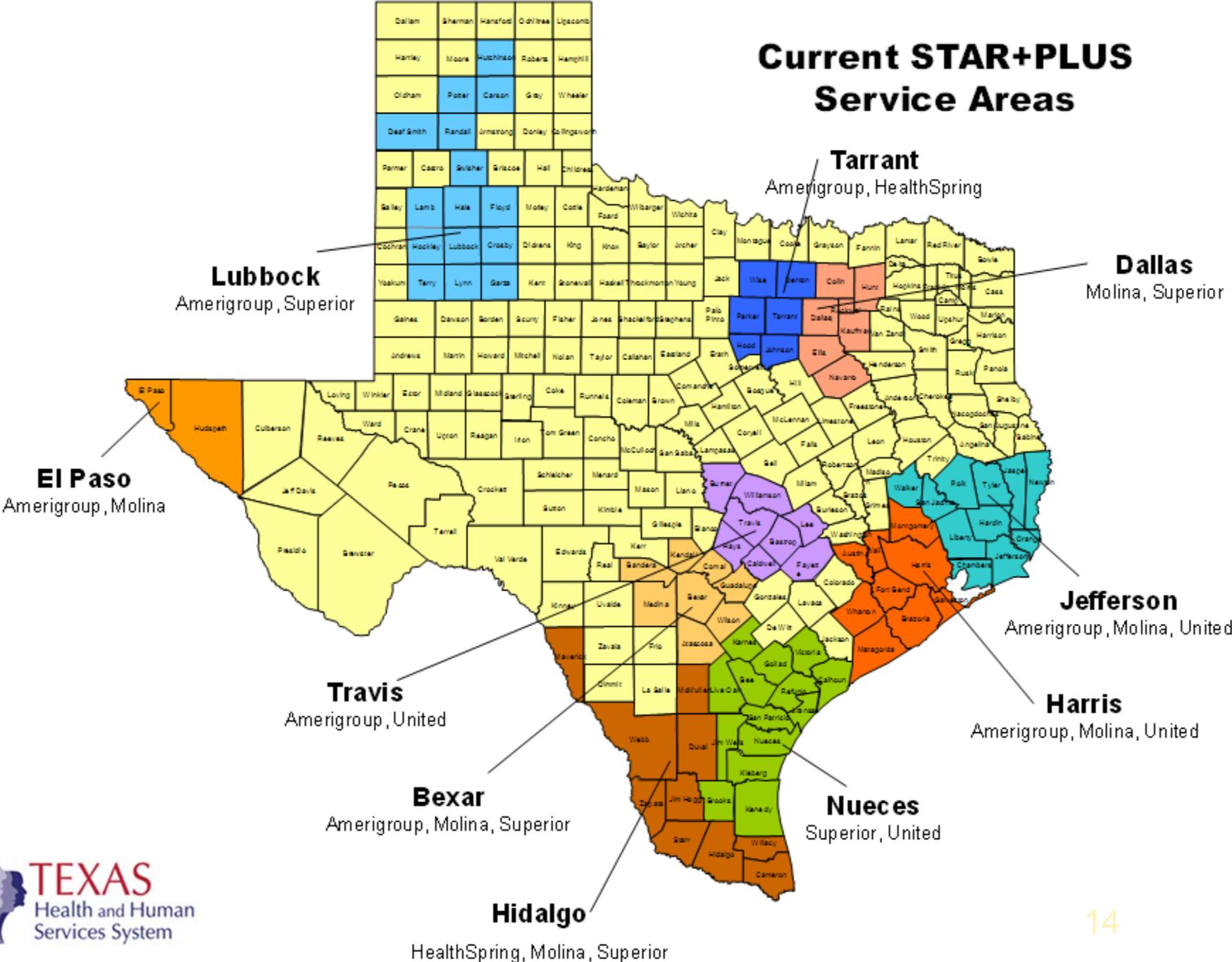
- Main doctor (primary care provider)
- Extra services (value-added services) such as sports physicals, extra vision services, health and wellness services

Like traditional Medicaid, children in STAR have no limits on prescription medicines or necessary days in the hospital.

# STAR+PLUS

- Each member joins a health plan
- Delivers basic medical services and long-term services and supports through a health plan the member chooses
- Includes service coordination
  - Health plan service coordinators make home visits to find out what a member needs
    - Coordinates with Medicaid and Medicare providers
    - Authorizes community-based long-term services and supports
    - Coordinates other services and supports like setting up rides to doctor visits, housing/utilities, legal help

# Current STAR+PLUS Service Areas



# Who Gets STAR+PLUS Medicaid?

- STAR+PLUS serves more than 400,000 people with Medicaid, including:
  - Adults age 21 and older who:
    - Have a physical or mental disability and are able to get Supplemental Security Income (SSI) benefits or Medicaid because of low income
    - Are able to get Medicaid because they get STAR+PLUS Home and Community Based Services (HCBS) waiver services
  - People who choose STAR+PLUS
    - Most children and young adults age 20 and younger who get SSI or SSI-related benefits may choose to join STAR+PLUS or remain in traditional Medicaid

# STAR+PLUS Benefits for Adults

- Medicaid Only
  - Traditional Medicaid benefits
  - Main doctor (primary care provider)
  - Community-based long-term services and supports
  - Service coordination
  - No limit on prescription medicines
  - Extra services offered by the health plan
- Dual eligibles get long-term services and supports through STAR+PLUS and basic medical services through Medicare

# STAR+PLUS Benefits for Children

- Same benefits children get now, plus:
  - Main doctor (primary care provider)
  - Community-based long-term services and supports
  - Service coordination
  - Extra services offered by the health plan

Like traditional Medicaid, children in STAR+PLUS have no limits on prescription medicines or necessary days in the hospital.

# STAR+PLUS: Long-term Services

- Personal Assistance Services
- Day Activity and Health Services
- STAR+PLUS HCBS Waiver – similar to CBA in traditional Medicaid:

Assisted living

Adaptive aids

Minor home modifications

Personal assistance services

Respite care

Emergency response

Transition assistance services

Home delivered meals

Nursing services

Medical supplies

Adult foster care

Dental

Therapies

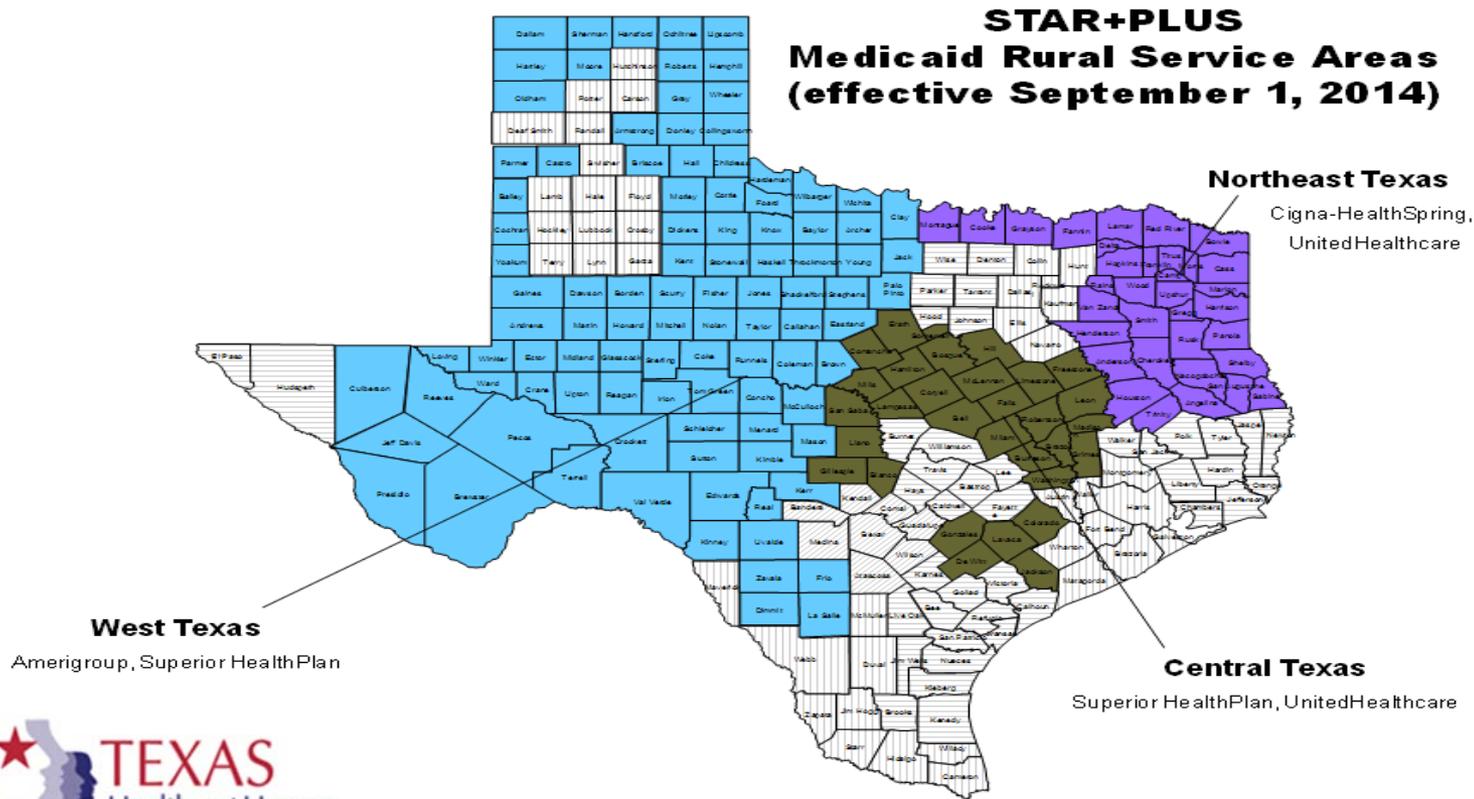
Financial management services

Cognitive Rehabilitation Therapy (March 1, 2014)

Supported Employment and Employment Assistance (September 1, 2014)

# STAR+PLUS Rural Expansion

- September 1, 2014
- Expands STAR+PLUS statewide



# Added Behavioral Health Services

- September 1, 2014
  - Mental health rehabilitative and mental health targeted case management services, now provided as fee-for-service and delivered through local mental health authorities, will be added to STAR and STAR+PLUS managed care
    - The NorthSTAR program area will not be affected
- HHSC must also:
  - Develop two health home pilots and a Behavioral Health Integration Advisory Committee
  - Bring together local groups to provide services for people who are homeless and have mental illness or a substance abuse problem
  - Develop a mental health and substance abuse treatment public reporting system

# Who Can Get These Services?

- The following people with Medicaid who are tested and found eligible:
  - Adults with a severe mental illness such as schizophrenia, major depression, bipolar disorder or other disabling mental disorders
  - Children ages 3 through 17 years with a diagnosis of a mental illness or show a serious emotional disturbance

# People with Intellectual and Developmental Disabilities (IDD)

- September 1, 2014, Medicaid basic medical services (acute care) will be delivered through STAR+PLUS for:
  - People in community-based Intermediate Care Facilities for Individuals with Intellectual Disabilities or Related Conditions (ICF-IID)
  - People served in certain DADS 1915(c) waivers
    - HCS, CLASS, TxHmL, DBMD
- People *not* included:
  - People in a state supported living center
  - People getting both Medicare and Medicaid (dual eligibles)
- Children and young adults age 20 and younger getting SSI or SSI-related benefits can choose whether to join STAR+PLUS

# Nursing Facility Services

- Starting March 1, 2015, STAR+PLUS will provide nursing facility services statewide
- Goals:
  - Better care for people with Medicaid living in nursing facilities
  - Promote care in the least restrictive, most appropriate setting
- People included, not included:
  - Adults age 21 and older who live in a nursing facility who are eligible for Medicaid and meet STAR+PLUS criteria will be included
  - Children and young adults age 20 and younger will not be included

# Providers Already Serving People with Medicaid

- Health plans must offer doctors and providers who have already been serving people with Medicaid the opportunity to be a part of their network.
- All kinds of providers that join must sign a contract with the health plan and follow health plan rules.

# Next Steps

- Get to know the STAR and STAR+PLUS health plans in counties where you get services
  - Compare plans and extra services
  - Find out if your doctors and specialists are in each health plan's network

# Timetable

- **May 2014**
  - HHSC mails introduction letters with health plan comparison chart, links to provider directories, and answers to common questions
- **June 2014**
  - HHSC mails enrollment packets with health plan comparison chart, provider directories, enrollment form, and answers to common questions

# Timetable

- Summer 2014
  - Enrollment events held across the state
- August 2014
  - Pick a health plan
    - You can change health plans at any time
- September 1, 2014
  - Begin getting services through your health plan

Enrollment for people with Medicaid who live in a nursing facility will begin in late 2014.

# Appeals and Fair Hearings

- Member may appeal to the health plan and file a fair hearing request with HHSC if services are denied, reduced, or ended
- Member can keep getting services during the review if the member asked for the appeal or fair hearing within the adverse action period and the member asks to keep getting services pending the appeal

# HHSC Ombudsman Office

**1-877-787-8999 (toll-free)**

People who have a speech or hearing disability can call any HHSC office by using the toll-free Texas Relay service at:

**7-1-1 or 1-800-735-2989**

Texas Health and Human Services Commission

Office of the Ombudsman, MC H-700

P O Box 13247

Austin, TX 78711-3247



# Questions?

Email

[Managed\\_Care\\_Initiatives@hhsc.state.tx.us](mailto:Managed_Care_Initiatives@hhsc.state.tx.us)

Managed Care Initiatives Webpage

[www.hhsc.state.tx.us/medicaid/MMC.shtml](http://www.hhsc.state.tx.us/medicaid/MMC.shtml)