



Introduction to Medicaid Managed Care

Texas Health and Human Services
Commission
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Medicaid Managed Care Delivery Model

- Healthcare provided through a network of doctors, hospitals, and other healthcare providers responsible for managing and delivering quality, cost-effective care
- The State pays a managed care organization (MCO) a capitated rate for each member enrolled, rather than paying for each unit of service provided

Goals of Managed Care

- Emphasize preventive care
- Improve access to care
- Ensure appropriate utilization of services
- Improve client and provider satisfaction
- Establish a medical home for Medicaid clients through a primary care provider (PCP)
- Improve health outcomes, quality of care, and cost effectiveness
- Promote care in least restrictive, most appropriate setting

Providers and MCOs

- Providers must first be enrolled as a Texas Medicaid provider
- Providers must contract and be credentialed with an MCO to provide Medicaid managed care services
- Rates are negotiated between the provider and the MCO
- Processes such as authorization requirements and claims processing may be different between MCOs

Texas Medicaid MCOs

- 21 MCOs
- 2 Medicaid dental maintenance organizations (DMOs)
- MCOs and DMOs must provide benefits in the same amount, duration, and scope as specified in the Medicaid State Plan

Managed Care Organizations

- MCOs provide a medical home through a PCP and referrals for specialty providers, when needed
 - Exception: Clients who receive both Medicare and Medicaid (dual eligibles) get acute care services and a PCP through Medicare
- MCOs may offer value-added services (e.g., youth community or sports membership, pest control, respite care)

Medicaid Enrollment

- The majority of individuals receiving Texas Medicaid services are enrolled in managed care
 - **As of June 2015**
 - 4,030,139 clients in Medicaid
 - 3,531,587 members in managed care
 - STAR
 - STAR Health
 - STAR+PLUS
 - Dual Demonstration
 - 498,552 in Medicaid fee-for-service



Texas Medicaid Managed Care Programs

Current Medicaid Managed Care Programs

- STAR
- STAR+PLUS
- STAR Health
- Children's Medicaid Dental Services (CMDs)
- NorthSTAR
- Dual Eligible Integration Care Project (called the Dual Demonstration)
- STAR Kids
- New: Adoption Assistance/Permanency Care Assistance and Medicaid for Breast and Cervical Cancer Carve-in

TEXAS Managed Care Service Areas

(Effective Fall 2016)

STAR Health (statewide) – Superior
CHIP RSA (MRSA Service Areas + Hidalgo) – Molina, Superior

TARRANT
STAR - Aetna, Amerigroup, Cook Children's
STAR+PLUS - Amerigroup, Cigna-HealthSpring
STAR Kids - Aetna, Cook Children's
CHIP - Aetna, Amerigroup, Cook Children's

LUBBOCK

STAR - Amerigroup, FirstCare, Superior
STAR+PLUS - Amerigroup, Superior
STAR Kids - Amerigroup, Superior
CHIP - FirstCare, Superior

DALLAS

STAR - Amerigroup, Molina, Parkland
STAR+PLUS - Molina, Superior
STAR Kids - Amerigroup, Children's Medical Center
CHIP - Amerigroup, Molina, Parkland

MRSA WEST

STAR - Amerigroup, FirstCare, Superior
STAR+PLUS - Amerigroup, Superior
STAR Kids - Amerigroup, Superior

MRSA NORTHEAST

STAR - Amerigroup, Superior
STAR+PLUS - Cigna-HealthSpring, United
STAR Kids - Texas Children's, United

EL PASO

STAR - El Paso First, Molina, Superior
STAR+PLUS - Amerigroup, Molina
STAR Kids - Amerigroup, Superior
CHIP - El Paso First, Superior

MRSA CENTRAL

STAR - Amerigroup, Scott and White, Superior
STAR+PLUS - Superior, United
STAR Kids - Blue Cross and Blue Shield of Texas, United

JEFFERSON

STAR - Amerigroup, Community Health Choice, Molina, Texas Children's, United
STAR+PLUS - Amerigroup, Molina, United
STAR Kids - Texas Children's, United
CHIP - Amerigroup, Community Health Choice, Molina, Texas Children's, United

TRAVIS

STAR - Blue Cross and Blue Shield of Texas, Sendero, Seton, Superior
STAR+PLUS - Amerigroup, United
STAR Kids - Blue Cross and Blue Shield of Texas, Superior
CHIP - Blue Cross and Blue Shield of Texas, Sendero, Seton, Superior

HARRIS

STAR - Amerigroup, Community Health Choice, Molina, Texas Children's, United
STAR+PLUS - Amerigroup, Molina, United
STAR Kids - Amerigroup, Texas Children's, United
CHIP - Amerigroup, Community Health Choice, Molina, Texas Children's, United

BEXAR

STAR - Aetna, Amerigroup, Community First, Superior
STAR+PLUS - Amerigroup, Molina, Superior
STAR Kids - Community First, Superior
CHIP - Aetna, Amerigroup, Community First, Superior

NUECES

STAR - Christus, Driscoll, Superior
STAR+PLUS - Superior, United
STAR Kids - Driscoll, Superior
CHIP - Christus, Driscoll, Superior

HIDALGO

STAR - Driscoll, Molina, Superior, United
STAR+PLUS - Cigna-HealthSpring, Molina, Superior
STAR Kids - Driscoll, Superior, United



RSA: Rural Service Area
MRSA: Medicaid Rural Service Area

Map Prepared by: Strategic Decision Support Department,
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What is STAR?

- The State of Texas Access Reform (STAR) program provides Medicaid primary, acute care, and pharmacy services mostly for pregnant women, newborns, and children
- STAR operates statewide under the authority of the Transformation Waiver
- Services are delivered through MCOs under contract with HHSC

STAR Populations

- Mandatory participants include:

- Individuals receiving Temporary Assistance for Needy Families (TANF) benefits
- Pregnant women
- Newborns
- Most children (i.e., not receiving Social Security Income)
- Certain former foster care youth

- Excluded participants include:

- Individuals who reside in institutions
- Individuals who receive Medicare and Medicaid services (called dual eligibles)
- Medically needy
- Children in foster care
- Adults and children with disabilities
- Refugees

STAR Benefits

- Traditional Medicaid benefit package
- PCP
- Unlimited prescriptions
- Unlimited necessary days in a hospital
- Value-added services

What is STAR+PLUS?

- STAR+PLUS integrates the delivery of acute care plus long-term services and supports (LTSS) for individuals who have a disability or who are age 65 and older
- Main feature is service coordination, a specialized care management service available to all members
- STAR+PLUS operates statewide as of September 1, 2014, under the authority of the Transformation Waiver
- Services are delivered through MCOs under contract with HHSC

STAR+PLUS Populations

- **Mandatory participants include:**
 - Adults with a disability who qualify for Medicaid because of low income
 - Adults who qualify for Medicaid because they receive STAR+PLUS Home and Community-Based Services (HCBS)
 - Non-dual eligible adults receiving services through one of the five DADS waiver programs for individuals with intellectual and developmental disabilities (IDD) must enroll in STAR+PLUS for acute care only
- **Medicaid clients who may choose to participate include:**
 - Children and young adults age 20 or younger who receive SSI or SSI-related benefits (except those in the Medically Dependent Children Program or MDCP)

STAR+PLUS Benefits

- Traditional Medicaid benefits
- PCP
- Unlimited prescriptions
- Value-added services
- Long term services and supports
- Service coordination

STAR+PLUS LTSS

- Community-based and institutional LTSS available include:
 - Personal assistance services
 - Day activity and health services (DAHS)
 - Nursing facility services (became available March 1, 2015)
 - Community First Choice (became available June 1, 2015)
- HBCS available to adults who meet income, resource, and medical necessity requirements for nursing facility level of care, include:
 - Services unavailable under the State Plan, as a cost-effective alternative to living in a nursing facility

STAR+PLUS HCBS Service Array

- STAR+PLUS HCBS Waiver

- Adaptive aids
- Assisted living
- Adult foster care
- *Cognitive rehabilitation therapy*
- Dental
- Emergency response
- Financial management services
- Home delivered meals
- *Nursing services*
- Medical supplies
- Minor home modifications
- *Personal assistance services*
- *Respite care*
- *Therapies*
- *Supported employment and employment assistance*
- *Transition assistance services*

**Services in italics are available through the CDS option*

What is STAR Health?

- STAR Health is a statewide program designed to provide medical, dental, vision, and behavioral health benefits, including unlimited prescriptions, for children and youth in conservatorship of the Department of Family and Protective Services (DFPS)
- Services are delivered through a single MCO under contract with HHSC

STAR Health Populations

- Medicaid clients who participate in STAR Health include:
 - Children in state conservatorship, including those in foster care and kinship care
 - Young adults up to the month of their 22nd birthday who have voluntary foster care placement agreements
 - Young adults up to the month of their 21st birthday who were formerly in foster care and are receiving Medicaid services under Medicaid for Former Foster Care Children (FFCC)

What is CMDS?

- CMDS are provided statewide for most children and young adults enrolled in Medicaid
- Services are delivered through two DMOs under contract with HHSC

CMDS Populations

- Medicaid clients who participate in CMDS include:
 - Children and young adults ages 20 and younger, except those residing in a nursing facility or an intermediate care facility for individuals with intellectual disabilities or related conditions (ICF/IID)
 - Children and young adults in STAR Health do not receive dental services through CMDS, but through STAR Health

What is NorthSTAR?

- An integrated behavioral health system in the Dallas service area serving people who are eligible for Medicaid or meet other eligibility criteria
- Managed by the Department of State Health Services (DSHS), and services are delivered through a capitated contract with a licensed behavioral health organization
- Currently available in Dallas and six contiguous counties (Collin, Ellis, Hunt, Kaufman, Navarro, and Rockwall)
- Beginning January 1, 2017, behavioral health services in the Dallas service area will be provided through the MCOs

What is the Dual Demonstration?

- CMS and HHSC established a federal-state demonstration to serve dual eligibles
 - Requires one Medicare-Medicaid plan (MMP) to be responsible for covered services
 - Single point of accountability for delivery, coordination, and management of services
- Demonstration will run March 2015 through December 2018
- Available in six counties:
 - Bexar
 - Dallas
 - El Paso
 - Harris
 - Hidalgo
 - Tarrant

Dual Demonstration Population

- Individuals can participate in the demonstration if they meet these criteria:
 - Are age 21 and older
 - Get Medicare Part A, B and D, and are receiving full Medicaid benefits
 - Are eligible for or enrolled in the Medicaid STAR+PLUS program, which serves members who have disabilities and those who meet a nursing facility level of care, and receive STAR+PLUS home and community based waiver services

What is STAR Kids?

- STAR Kids integrates the delivery of acute care, behavioral health, and LTSS benefits for children and young adults 20 and younger with disabilities
- Main features include service coordination, a comprehensive needs assessment, client-centered planning and service design, and transition planning
- STAR Kids will operate statewide beginning November 1, 2016
- Services will be delivered through MCOs under contract with HHSC

STAR Kids Populations

- Mandatory participants include children and young adults aged 20 and younger:
 - Who receive SSI and SSI-related Medicaid
 - Who receive SSI and Medicare
 - Who receive MDCP waiver services
 - Who receive YES waiver services
 - State plan services and service coordination only: YES waiver services will be provided through the YES waiver providers
- Who receive IDD waiver services (e.g., CLASS, DBMD, HCS, TxHmL)
 - State plan services and service coordination only: LTSS services will be provided through the IDD waiver providers
- Who reside in a community-based ICF-IID or in an NF
 - State plan services and service coordination only: LTSS services will be provided through the appropriate institution

STAR Kids Benefits

- Traditional Medicaid benefits for children, such as:
 - Personal Care Services (PCS)
 - Private Duty Nursing (PDN)
 - Therapies
 - Medical supplies and equipment
 - Behavioral health services
 - LTSS
- PCP
- Unlimited prescriptions
- Unlimited necessary days in a hospital
- Value-added services
- Service coordination

STAR Kids LTSS

- LTSS available under the State Plan for STAR Kids members includes:
 - Private duty nursing (PDN)
 - Personal care services (PCS)
 - Community First Choice (CFC) services
- MDCP waiver services, available to members who meet income, resource, and medical necessity requirements for nursing facility level of care, include:
 - Services unavailable under the State Plan, as a cost-effective alternative to living in a nursing facility

STAR Kids MDCP Service Array

- STAR Kids MDCP Waiver
 - Adaptive aids
 - *Employment Assistance*
 - *Flexible family support services*
 - Minor home modifications
 - *Respite services*
 - *Supported employment*
 - Transition assistance services

Services Delivery Options

- In STAR+PLUS, STAR Health, and STAR Kids, individuals may select how they would like some LTSS delivered
 - Agency Option (AO): standard service delivery provided by an agency
 - Service Responsibility Option (SRO): individuals manage day-to-day activities while the provider agency manages business activities
 - Consumer Directed Services (CDS) option: individuals manage day-to-day and business activities
 - CDS individuals receive financial management services and may receive support consultation

New Managed Care Initiatives

- Adoption Assistance (AA)
 - There are about 44,500 children who are adopted from Department of Family and Protective Services (DFPS) conservatorship who are in the fee-for-service (FFS) Adoption Assistance Program
 - On March 1, 2017, these children will be transitioned to STAR managed care
 - To meet the needs of these children, STAR MCOs will be required provide additional oversight related to service management, continuity of care, medical history sharing, and psychotropic drug utilization review

New Managed Care Initiatives

- Medicaid for Breast and Cervical Cancer (MBCC)
 - MBCC provides full Medicaid coverage to women diagnosed with breast or cervical cancer
 - Services are not limited to the treatment of breast and cervical cancer, and will continue as long as the Medicaid provider certifies that active treatment is required for breast or cervical cancer
 - There are about 4,785 women receiving MBCC services
 - On March 1, 2017, these women will be transitioned to the STAR+PLUS program through which they will have service coordination to address this population's complex medical needs and to help with continuity of care

Questions
