

STAR+PLUS– NURSING HOMES

October 13, 2016

- Effective March 1, 2015: Nursing facility services began participating in STAR+PLUS which is designed to improve quality of care for current nursing facility residents and promote care in the least restrictive, most appropriate setting.
- The five plans are: United, Cigna Health Springs, Molina, Amerigroup and Superior. There are no more than three in a service delivery area.
- HHSC will set the minimum reimbursement rate including staffing enhancement and PL/GL.
- Clean claims are to be paid no later than 10 calendar days from submission.
- Hospice Services are paid out of traditional fee-for-service.
- PASRR is fee-for-service.
- Nursing facilities will have 1 year to file claims.
- Appeals go to MCO and/or a fair hearing can be filed with the state, if services are denied, reduced or terminated.
- TMHP continues to determine medical eligibility and HHSC continues to determine financial eligibility. Pending vendors are paid fee-for-service until qualified. Once approved, they go on the MCO plan on the 1st of the next month.
- No pre-authorization is required for admission. No prior authorization for Emergency admission to the hospital.
- Facilities are paid on RUGS, which was the same as fee for service.
- MCO case managers are to visit quarterly and stay involved with the Care plans for the residents.
- MCO contracts will run for 3 years. HHSC will set minimum performance standards and credentialing.
- Dual eligible pilot rolled out in August 2015.

Participating counties, with number of clients covered and health plans. Following are the numbers from 2015 rollout.

<u>COUNTY</u>	<u>NUMBER OF CLIENTS</u>	<u>HEALTH PLANS</u>
Bexar	26,452	Amerigroup, Molina, Superior
Dallas	27,941	Molina, Superior
El Paso	19,645	Amerigroup, Molina
Harris	47,160	Amerigroup, Molina, United
Hidalgo	27,090	Health Spring, Molina, Superior
Tarrant	16,986	Amerigroup, Health Spring