Low Income Health Program Initial Transition Plan

Department of Health Care Services UCLA Center for Health Policy Research UC Berkeley Center for Labor Research and Education

June 28, 2012





Webinar Agenda

- Transition Plan Development
- Eligibility Determination
- Medi-Cal Managed Care Plan Assignment
- Transition Assistance
- Rate Setting, Provider Supply & Information Systems





Plan Development

- Special Terms and Conditions
- Short timeline for transition plan implementation
- Stakeholder feedback

• Experience with previous transitions





STC 23.a:

Affordable Care Act Transition Plan

- (a)(i and ii) Determine eligibility for all groups and develop a plan to manage the transition to new Medicaid eligibility levels by preliminarily determining new applications for Medicaid eligibility beginning July 2013
- (a)(iii) Criteria for provider participation in and means of securing provider agreements for the transition
- (a)(iv) Schedule of implementation activities for the transition plan
- (a)(v) Assurance of adequate primary and specialty care providers





STC 23.e: Implementation

 By July 1, 2013, the State must begin implementation of a simplified, streamlined process for transitioning eligible enrollees from the Demonstration to Medicaid or the Exchange in 2014 without need for additional determinations of enrollees' eligibility.





Eligibility Determination for ACA Programs

Preparation for Medi-Cal and Exchange eligibility determinations begins in 2013

- DHCS will issue written instructions to the LIHPs for the 2013 redetermination process to promote statewide consistency in the transition preparation
- DHCS will use enrollee information collected during LIHP redetermination and enrollment for Medi-Cal and Exchange eligibility determination





Eligibility Determination Procedures

DHCS will work with LIHPs to collect enrollee information

• A plan for collecting necessary data will be developed by DHCS in collaboration with LIHPs

LIHP enrollees will receive information regarding their eligibility for Affordable Care Act programs

 All individuals will be informed of their eligibility for Medi-Cal or Advance Payments of the Premium Tax Credit and/or Cost-sharing reductions from the Exchange





LIHP to Medi-Cal Managed Care Transition

Procedure developed to promote:

- Continuity of care
- Choice, if available in local county
- Seamless coverage





Procedures for Medi-Cal Managed Care Plan (MMCP) Assignment

If LIHP medical home is in one MMCP:

- Assigned to that one plan containing their medical home If LIHP medical home is within multiple MMCPs:
- Assignment will be made using an established DHCS algorithm* to a plan that includes the medical home

If LIHP medical home is not within a MMCP network:

 Default plan assignment will be made using an established DHCS algorithm*



*DHCS algorithm includes measures for quality and availability of traditional and safety net providers. See website for more info. <u>http://www.dhcs.ca.gov/provgovpart/Pages/M</u> <u>MCDAAPerfIncentive.aspx</u>



Continuity Of Care Promoted Through Plan Assignment Procedures

LIHP medical homes retained wherever possible

 Medical home information provided to DHCS to guide plan and medical home assignments with MMCP

LIHP vs. MMCP network comparison will be performed

• Results will guide outreach to LIHP providers not participating in MMCP to encourage their participation

Continuity of care agreements

• For enrollees who will experience a change in provider as a result of the transition





Communication of MMCP Assignment

No earlier than 90 days before January 1, 2014, notices will be sent to Medi-Cal eligible LIHP enrollees and will include:

- Notification of transition
- Enrollee's current LIHP medical home and resulting Managed Care Plan assignment
- Enrollment effective date of January 1, 2014 and that no action needs be taken by enrollee
- Information on the right to change plans after Jan 1, 2014 and procedure for the change





Transition Assistance

DHCS will make transition information available:

• Transition activities, timeline, contact information for transition assistance

Information will be available to:

• LIHP enrollees, health plans, advocacy groups, communitybased organizations, navigators

Managed Care Plan telephone support for members

- Written material is available in the 12 threshold languages
- Telephone support is available in all languages by calling Health Care Options (HCO)





Rate Setting

Available data on utilization patterns will be used

Gathered through UCLA's evaluation data collection

Gap analysis

• DHCS will evaluate available LIHP data from UCLA and determine if Medi-Cal FFS or additional demographic data is needed to set rates.

Rates will be developed consistent with Welfare and Institutions Code section §14301.1





Primary and Specialty Provider Supply

DHCS will ensure adequate provider supply to maintain or exceed compliance with access to care standards

- Utilize LIHP vs. Medi-Cal network comparison to guide outreach to non-Medi-Cal managed care providers
- Perform assessment of network adequacy based on LIHP enrollment information and past service utilization
- DHCS will inform MMCPs of anticipated enrollment to allow plan the opportunity to undertake efforts to maintain access to care standards after the transition





Information Systems & Data Collection

Five data sources required for transition

- 1. LIHP provider listings for LIHP vs. MMCP network analysis
- 2. Medi-Cal Eligibility Data System (MEDS) records
- 3. LIHP medical home assignment records
- 4. Claims/Encounter history for plan assignment and care coordination
- 5. LIHP enrollee ID, MEDS CIN, SSN to match LIHP claims and medical home records to MEDS, if needed

DHCS is responsible for receiving data transmissions and finalizing all legal considerations related to data transfer





Transition Schedule: Overview of activities

January – June 2013

- General transition notification to LIHP enrollees
- County-specific assessment of network differences between LIHP and MMCP
- Outreach to providers not in MMCP network begins

July – December 2013

- MAGI-based eligibility determinations of HCCI enrollees
- Exchange outreach to those potentially-eligible for subsidies
- Medi-Cal eligibility and enrollment notification
- Medi-Cal Managed Care Plan assignments

January – March 2014

• Post-transition support





Webinar On-Hold Reviewing Questions





Question and Answer Session





Comment Submission

Please send comments on the Initial LIHP Transition Plan by: **COB, Monday, July 9, 2012** to: LIHPTransitionProject@dhcs.ca.gov



