Health Homes Program

The Health Homes Program & Dual Eligibles: Information for Health Plans and CB-CMEs

The Health Homes Program (HHP) helps manage and coordinate care for Medi-Cal managed care members with certain chronic health and/ or mental health conditions who have high care needs or experience chronic homelessness.

Who is a Dual Eligible?

A dual eligible member is an individual who has both Medicare and Medi-Cal coverage. Dual eligibles are also known as Medi-Medis.

Do Dual Eligibles Qualify for the HHP?

Dual eligibles may qualify for HHP services if they meet the eligibility criteria and choose to join. For eligibility information, see the HHP Program Guide at bit.ly/HealthHomes.

However, the HHP works best for people who <u>only</u> have Medi-Cal coverage. It will help coordinate and manage all their Medi-Cal providers and services.

Joining the HHP does not take away the member's Medi-Cal or Medicare benefits.



Does the HHP Work with Medicare Providers & Services?

The HHP will coordinate all of a member's Medi-Cal services and it can try to coordinate with their Medicare services. But Medicare providers are not required to coordinate with HHP, which can limit how well HHP can work for dual eligibles.

The HHP payment rates for full dual eligibles are lower than for members with only Medi-Cal. This reflects the limited care coordination benefit that Medi-Cal managed care plans (MCPs) and Community-Based Care Management Entities (CB-CMEs) can provide to this population. It also reflects that additional care management services are paid for by Medicare.

Are Dual Eligibles Targeted for HHP Services?

The MCPs receive a Targeted Engagement List (TEL) from the Department of Health Care Services (DHCS), which lists MCP members who may qualify for the HHP. Dual eligibles are not on the TEL, but they can be referred to the MCP to have their eligibility evaluated.



MCPs use the TEL and their own member data to create HHP

outreach lists for CB-CMEs. The MCPs prioritize the list to make sure that outreach is targeted at Medi-Cal members with the highest level of care needs and who are most likely to benefit from the HHP.

MCPs should work with CB-CMEs and providers to explain outreach priorities and which members are best served by the HHP. This will help ensure that any referrals made to the HHP align with these priorities.

What Services are Covered by Medi-Cal & Medicare?

The table below shows the main services covered by Medi-Cal and Medicare if members have both.

Medi-Cal Services	Medicare Services		
 Nursing Facility (once Medicare Skilled Nursing benefit exhausted) Medicare Copays Over the Counter Drugs Long-Term Services and Supports (including Custodial Long-Term Care and incontinence supplies) Transportation In-Home Support Services 	 Doctors Home Health Services Urgent & Hospice Restorative Therapies Prescription Drugs Medical Supplies & Equipment X-Rays and Labs Home Health Services Restorative Therapies Skilled Nursing Management* 		

*For more information: see bit.ly/MedicareCareManagement



What Happens if Dual Eligibles Want HHP Services?

Dual eligible members may ask to join the HHP. In these situations, MCPs, CB-CMEs, and other providers should:

- Educate members on the services the HHP provides for dual eligibles and that the program can help connect their Medi-Cal providers and services;
- Explain that the member's MCP may contact their Medicare providers to coordinate their care if the provider is willing to participate; and
- Identify other care coordination programs in their county that may provide more comprehensive support for them.

If a dual eligible is still interested in the HHP, they should be referred to the HHP through their MCP. Their eligibility for the program should be evaluated and if they qualify, they can choose to join. MCPs should work with CB-CMEs to ensure they understand the policies and procedures for referring members to the HHP.

Can Dual Eligibles Join HHP and Other Duals Programs?

Members can only access HHP services through a Medi-Cal managed care plan. Dual eligibles <u>cannot</u> receive HHP services if they are in the Program of All-Inclusive Care for the Elderly (PACE), a Fully Integrated Dual Eligible Special Needs Plan (FIDE-SNP), or the Cal MediConnect (CMC) program. These programs already provide intensive care management services that are similar to the HHP.

If a dual eligible has a Dual Eligible Special Needs Plan (D-SNP) or a Medicare Advantage (MA) plan, they <u>may</u> also be able to enroll in an MCP to access HHP benefits.

Members cannot receive HHP services if they are enrolled in certain Medi-Cal care coordination programs such as the Multipurpose Senior Services Program (MSSP) and other waiver programs. Hospice services recipients and Skilled Nursing Facility (SNF) Medi-Cal members with a duration longer than the month of admission and the following month do <u>not</u> qualify for the HHP.

For more information about specific excluded programs, see the HHP Program Guide at bit.ly/HealthHomes.

Which Program is Best for Dual Eligibles?

There are several health plan options that can coordinate both Medicare and Medi-Cal providers and services for dual eligibles, as well as some extra benefits:

- The Program of All-Inclusive Care for the Elderly (PACE)
- Fully Integrated Dual Eligible Special Needs Plans (FIDE SNP)
- Cal MediConnect (CMC)
- Dual Eligible Special Needs Plans (D-SNP)



Health Plan Type	Benefits
PACE FIDE SNP CMC	Includes all Medicare and Medi-Cal benefits, including care coordination
DSNP	 Includes Medicare benefits and some Medi-Cal benefits Coordinates with Medi-Cal, including MCPs

For more information on these programs see: bit.ly/DualsBrief

What are the Options for Dual Eligibles?

The table below shows the care coordination options for dual eligibles in HHP counties.

If dual eligibles have questions about the options in their county, they should contact the Health Insurance Counseling and Advocacy Program at 1-800-434-0222.

Care Coordination Options for Dual Eligibles in HHP Counties					
County	PACE	D-SNP	FIDE SNP	СМС	
Alameda	X	X			
Imperial		X			
Kern		X			
Los Angeles	X	X	Χ	X	
Orange	X	X		Χ	
Riverside	X	X	Χ	X	
Sacramento	X	X			
San Bernadino	X	X	Χ	X	
San Diego	X	X		X	
San Francisco	X	X			
Santa Clara	X	X		Χ	
Tulare		X			

Source: The Scan Foundation, June 2017 - see <u>bit.ly/DualsBrief</u>. <u>Centers for Medicare & Medicaid Services SNP Comprehensive Report</u>, December 2018.

For More Information: Visit the DHCS Health Homes webpage at bit.ly/HealthHomes. CB-CMEs should contact their Medi-Cal Managed Care Plan(s) for additional information.

Members can call HICAP (the Health Insurance Counseling & Advocacy Program) at **1-800-434-0222** for free, neutral information and counseling about Medicare and Medi-Cal.

Members can also go to MyCareMyChoice.org to learn about their local health care choices.

