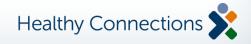
# Healthy Connections

Mountainview Prime Update January 20, 2015



- 89% of comprehensive assessments completed within 90 days of enrollment
- CICOs required to report serious reportable events including but not limited to:
  - Suspected abuse, neglect or exploitation;
  - Deaths (unexpected, homicide or suicide);
  - Falls (resulting in death, injury requiring hospitalization or permanent loss of function); and
  - Unstageable or Stage III and IV pressure ulcers.



- Implementation: February 2015
- September 2015: SCDHHS submits letter of intent to extend demonstration
- January 2016 enrollment: 1,809
- Waiver Participants: 231
- Nursing facility utilization (YTD): 118
  - Nursing Facility (December): 23
  - Medicaid Sponsored LTC (December): 4

\* Enrollment numbers only estimates to account for pending end of the month transactions.

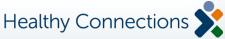


- Majority of disenrollment via loss of eligibility or via 1-800 Medicare
- Enrollment triggers disenrollment from existing comprehensive health insurance
  - Disenrollment notification may arrive before notification of new Healthy Connections Prime coverage

### Reasons for disenrollment

- Many believe they are still enrolled in program
- Fear losing benefits (i.e., Part D notification)
- Pending procedures
- Overall resistance to change

*Enrollment Choice Surveys.* (2015). Unpublished internal document, Center for Social Welfare Research and Assessment.



- Given the importance of health care for older adults, dual eligibles are naturally hesitant to make any changes
- Many are content with their current health care coverage
- Fear of change making care worse can override hope of getting better
- Some simply do not like change

*Enrollment Choice Surveys.* (2015). Unpublished internal document, Center for Social Welfare Research and Assessment.



# **Passive Enrollment**

#### ENROLLMENT

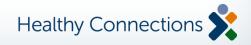
- Passive enrollment all in, opt-out
  - Eligible enrollees who do not make active choice to enroll will be automatically assigned
- "Intelligent assignment" will prioritize most frequently used providers, family relationships, and previous coverage
- Enrollees with existing comprehensive health insurance (i.e., Medicare Advantage, PACE or pension coverage) not eligible for passive enrollment
- 6-month continuity of care provision still applies
- Individuals residing in nursing facilities will not be passively enrolled



- Individuals residing in nursing facilities will not be passively enrolled
- SCDHHS will use eligibility data to identify individuals are with approved Medicaid sponsored long term care application
- Eligible beneficiaries will receive notice 60-days prior to enrollment effective date
- When possible, CICO will use available data to identify data to identify members who may have been enrolled in error (i.e., those who reside in nursing facilities)
- SCDHHS will cancel enrollments for beneficiaries erroneously enrolled due to inaccurate data in our system



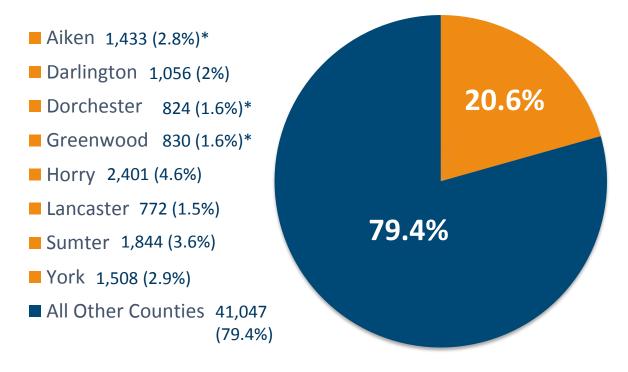
- Facilities should continue to use SCDHHS Webtool to verify eligibility
- Facilities that identify individuals who are believed to be not eligible, but enrolled should contact SCDHHS at <u>prime@scdhhs.gov</u>
  - Our team will verify eligibility and take action to cancel enrollment when appropriate



- Estimated 51,715 eligible enrollees
- Assignable Population: 12,600 eligible enrollees
- Unassignable Population: 39,115
  - Outside of Service Area: 10,668
  - Auto-Assigned LIS Population: ~10,000
  - Other Comprehensive Insurance: ~18,427



## **Percent of Eligible Passive Enrollees by Service Area**



\* Counties with only one CICO. These counties are eligible for choice only.



# **Passive Enrollment Timeline**



- Effective April 1, 2016
- Upstate
- Projected Eligibles = 5,100

- Effective July 1, 2016
- Coastal Region and CLTC Waiver Population
- Projected Eligibles = 7,500



