The Dynamic Duo: Medicare and Medicaid

Healthy Connections Prime

February 22, 2017

Agenda

- Conflicting History

- Two Become One

- Marriage Snapshot

- The Extended Family

- When Conflicts Arise

- Open Lines of Communication

- Questions

Conflicting Beginning

History

- Medicare and Medicaid signed into law **July 30, 1965**

- **1965 "three-layer cake":**
  - Medicare Part A hospital services
  - Medicare Part B physician and other outpatient services
  - Medicaid extended federal support for health care services for poor elderly, disabled, and families with dependent children

- **Not initially designed for individuals served by both programs**. These individuals are known as Medicare-Medicaid enrollees or dual eligibles.

Without Integrated Care

WITHOUT INTEGRATED CARE:

- **Three ID cards:** Medicare, Medicaid, and prescription drugs

- **Three different sets of benefits**

- **Poor communication among providers**

- Health care that is neither **coordinated nor person-centered**

- **Incomplete knowledge** of patient's condition, medical records, medications and care plan

- **Limited time, staff resources or incentives** to coordinate services

- **Lack of appropriate incentives** to provide care at the right time and in the least restrictive setting

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Disproportionate Share of Expenditures

South Carolina Medicare-Medicaid Enrollee Percentage of Enrollment and Relative Share of Program Expenditures (CY2016)

Chart:
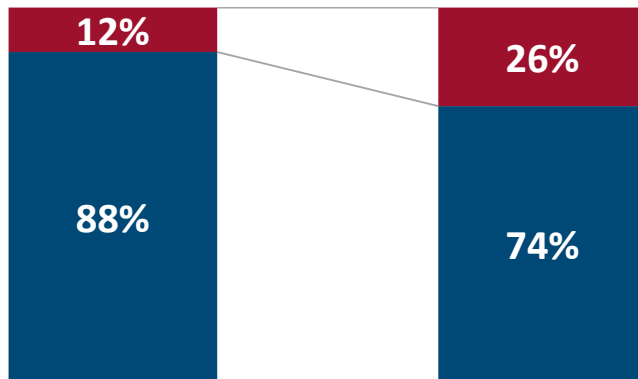
	Medicaid Enrollment	Medicaid Expenditures
Medicare-Medicaid Enrollees	12%	26%
Medicaid-Only Enrollees	88%	74%
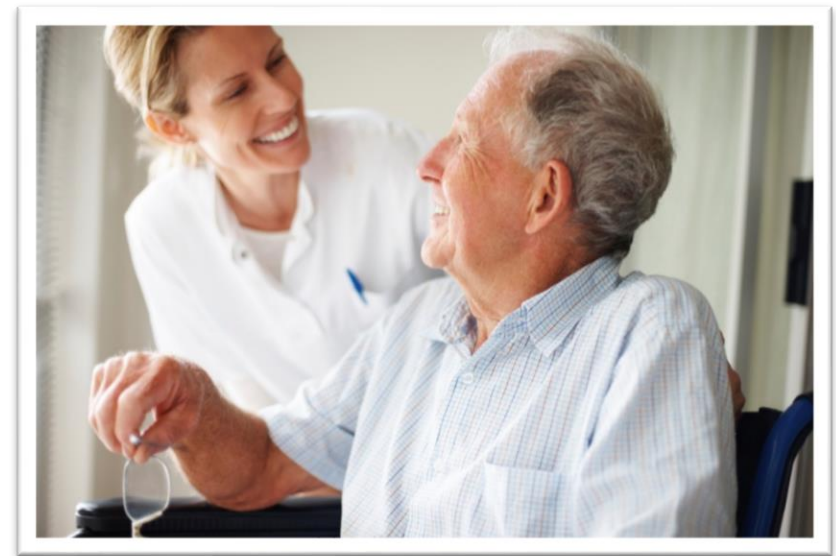
■ Medicare-Medicaid Enrollees ■ Medicaid-Only Enrollees

Source: South Carolina Department of Health and Human Services, Office Reporting

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Increased Rate Chronic Conditions

Compared to Medicare-only individuals 65+, South Carolina seniors with both Medicare and Medicaid experience a higher rate of:

- Diabetes, ESRD and other Endocrine/Renal disorders
- Heart Disease/Failure and other Cardiovascular diseases
- Mental Health conditions

- Arthritis, Osteoporosis and other joint related conditions
- Asthma and COPD
- Alzheimer's and Dementia
- Health conditions associated with physical disability

➢ **Twice as likely to have Alzheimer's and Dementia**
➢ **Three times as likely to have a health condition associated with a physical disability**

Source: Centers for Medicare & Medicaid Services, Centers for Medicaid and CHIP Services. (2016, September 29). Medicare-Medicaid Enrollee Information South Carolina, 2011. Retrieved February 22, 2017, from https://www.cms.gov/Medicare-Medicaid-Coordination/Medicare-and-Medicaid-Coordination/Medicare-Medicaid-Coordination-Office/Downloads/2011StateProfilesSC.pdf
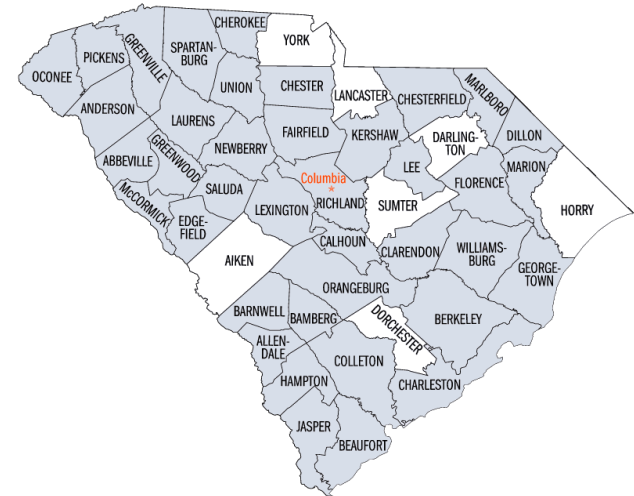
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Two Become One

National Integrated Care Initiative

WITHOUT INTEGRATED CARE:	WITH INTEGRATED CARE
• **Three ID cards:** Medicare, Medicaid, and prescription drugs	• **One ID card**
• **Three different sets of benefits**	• **Single set of benefits**
• **Poor communication among providers**	• **Intentional communications**, including hospital transition planning
• Health care that is neither **coordinated nor person-centered**	• **Person-centered care model** featuring a multi-disciplinary team; new palliative care benefit
• **Incomplete knowledge** of patient's condition, medical records, medications and care plan	• **Provider access to individualized care plan; medication reconciliation**
• **Limited time, staff resources or incentives** to coordinate services	• Model of care promotes and incentivizes **coordination; value-based purchasing**
• **Lack of appropriate incentives** to provide care at the right time and in the least restrictive setting	• **Rate structure and quality incentives address right time and right place for care**

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Healthy Connections Prime

South Carolina's Initiative

- Healthy Connections Prime Implemented: February 2015

- Demographic: Medicare-Medicaid Enrollees 65 years and older

- Medicare-Medicaid Plans (MMP):

☐ Healthy Connections Prime is available

☐ Healthy Connections Prime is not yet available

Program Design

Healthy Connections Prime is designed to promote:

- Better care through a **single set of benefits** representing all services under Medicare, Medicare Part D and Medicaid

- Better value through a **care team and care manager** that works with the individual and his/her providers

- Better health through flexible benefits that **help seniors stay at home as long as possible**

Services for Medicare-Medicaid Enrollees

Services*	Healthy Connections Prime	Original Medicare	Medicare Part D	Healthy Connections Medicaid
Doctor Visits and Lab Tests/X-rays	★	★		
Urgent and Hospital Care	★	★		
Nursing Facility Care	★	★		★
Medical Equipment	★	★		★
Prescription Drugs	★		★	★ (OTCs)
Community Long Term Care (CLTC)	★			★
Right to hire, fire, and manage your home care attendant	★			★
Support for family caregivers	★			★
Transportation to medical appointments	★			★
Dental Services	★			★
Vision Benefits (offered by some plans)	★			

Plus...

- ✓ One plan
- ✓ One card
- ✓ One member services number to call
- ✓ No insurance premiums
- ✓ No costs for doctor visits, hospital stays
- ✓ A personal care coordinator
- ✓ A care team of the member's choosing
- ✓ 6-month continuity of care

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South Carolina Specific Benefits

- **No copays** for prescription drugs

- **HCBS-like services** if medically necessary

- **Mileage reimbursement transportation benefit** – trip scheduled via Reservation Line, reimbursement form must be signed by doctor or counselor

- **Palliative care**

Comprehensive Assessment

Comprehensive Assessment

- Conducted within 90 days of enrollment

- Assess non-medical related needs including:
  - Cognitive Impairment
  - Fall risk
  - Caregiver wellbeing

- Average 1:144 care coordinator to member ratio

Member Story
'Lillian,' 75 years old, had not visited a doctor for four years and didn't have a phone where she lived. When Latonia, her MMP's Community Health Navigator, was unable to reach Lillian by phone, she drove nearly 70 miles to Lillian's home to check on her. Lillian welcomed Latonia and accepted her offer to help. Lillian said her knees hurt so Latonia helped Lillian select a PCP and schedule an appointment. At Lillian's request, Latonia visited the doctor with her.

During her visit, Latonia learned Lillian had other concerns - more than $1,000 in overdue electric utility bills and her water heater was not functioning properly. Latonia contacted a social worker for assistance. As a result, the electricity bill was paid, and the landlord said he would install a new water heater.
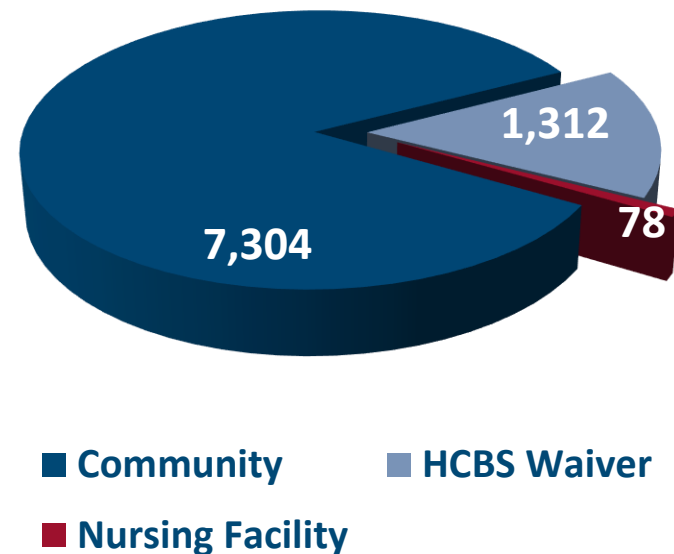
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Marriage Snapshot

Enrollment

February 2017 Active Enrollment:

8,694 members, active in 39 counties

Enrollment Percentage By Plan

- Molina Dual Options 24%
- Absolute Total Care 29%
- First Choice VIP Care Plus 47%

Care Setting

- 7,304
- 1,312
- 78

■ Community   ■ HCBS Waiver

■ Nursing Facility

* Contracted with at least one plan
Source: Phoenix data as of January 19, 2017
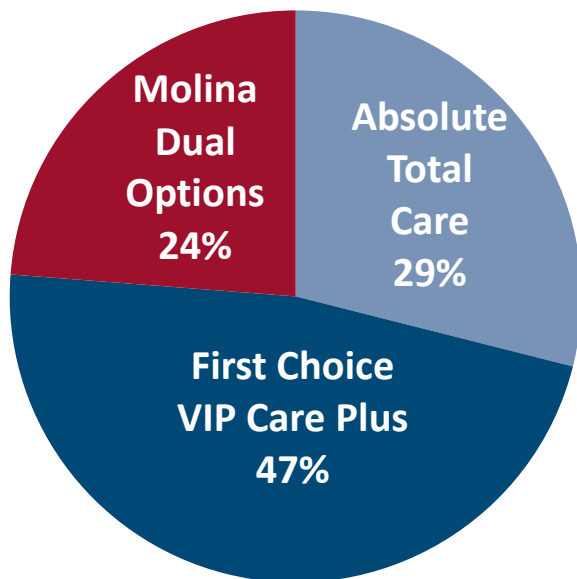
Member Profile

Female

Black (or African American)

65-74 (53% of the population)

3-4 Chronic Conditions

15% with a behavioral health diagnosis

> "I like everything about my health plan. I like that my representative picks up my prescriptions and helps me with food."

> "I am satisfied with my plan and like the personal touches. I feel like I joined a family and not an insurance plan. I feel that my plan cares about its members."

Source: South Carolina Revenue and Fiscal Affairs Office, Health and Demographics. 2015 Medicare and 2016 Medicaid data linked to Healthy Connections Prime members as of December 2016.

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Member Profile

Number of Chronic Conditions

- None 13%
- <3 23%
- 3-4 28%
- 5-6 21%
- 7+ 15%
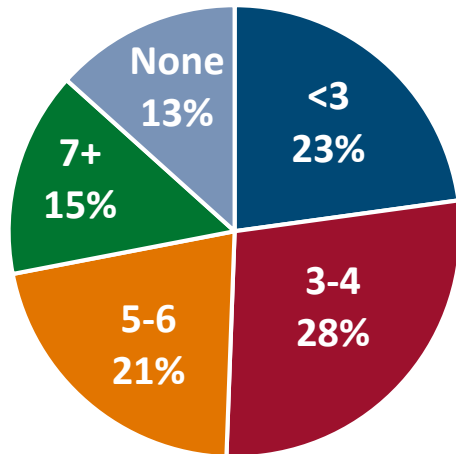
64% of members have 3+ chronic conditions

Top Chronic Conditions

Hypertension	68.25%
Hyperlipidemia	45.15%
Diabetes	35.25%
Rheumatoid Arthritis / Osteoarthritis	28.88%
Ischemic Heart Disease	25.34%
Chronic Kidney Disease	22.20%
Anemia	20.37%
Heart Failure	16.29%
Chronic Obstructive Pulmonary Disease	15.74%
Depression	13.55%

Source: South Carolina Revenue and Fiscal Affairs Office, Health and Demographics. 2015 Medicare and 2016 Medicaid data linked to Healthy Connections Prime members as of December 2016.

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The Extended Family

Support for Caregivers

- Identified caregivers are **assessed for overall well-being** and are included in care planning

- Special MMP-based caregiver projects focused on:

  - **Fall Risk Prevention**

  - **Caregiver Education (i.e., caregiver toolkits)**

  - **Respite**

- MMP sponsored **Dementia Dialogues** community session

Member Story

Our member has chronic kidney disease and Alzheimer's dementia. The Care Coordinator assisted the member and her caregiver in obtaining community support services and education in care for adults with mental health disorders. The Care Coordinator also assisted the family in creating a disaster plan before the October 2015 torrential rain and floods.

A member's spouse (who was also her caregiver) suddenly passed away. Her Care Coordinator helped the family arrange adult day-care and home health service, and arranged for legal assistance to help create a Power of Attorney for medical and financial needs, grief counseling, home utility assistance and DME services. Family was very appreciative of the MMP's assistance.

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Alzheimer's and Dementia Training

10% of all Healthy Connections Prime members have a diagnosis of Alzheimer's or related dementias (Medicare claims data).

Alzheimer's Association, South Carolina Chapter

Advanced Dementia Training
Topics include:
- Diagnosis, Prognosis, Treatment
- Communication and Feelings
- Intimacy and Sexuality
- Wandering
- Dementia and Driving
- Staff and Family Support
- Spiritual Care and End of Life Issues
- Alzheimer's Association Resources

University of South Carolina Office for the Study of Aging

Dementia Dialogues Certification Program
5-part series, Continuing Education Units

Dementia Dialogues T.I.P.S.
Talking Points, Interventions, Problem Solving Strategies, and Solutions

Elder Abuse Identification and Reporting
Types of abuse, mandated reporting, Adult Protective Services

End-of-Life Care
Advanced Care Planning, Hospice, Palliative Care

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When Conflicts Arise

Beneficiary Rights
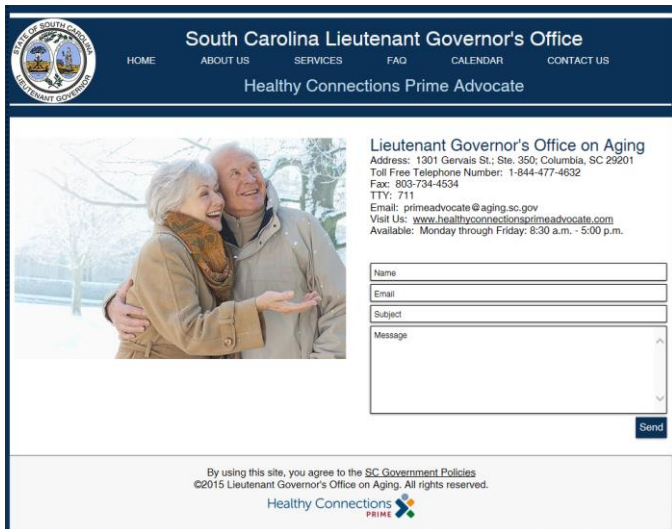
Grievances

Internal plan grievance process	• Plan-specific grievance process based on State/CMS requirements
Healthy Connections Prime Advocate	• Provides support and advocacy • Information session with MMPs • To date, **157 referrals addressed**
Complaints Tracking Module (CTM)	• Formal complaint tracking tool for Medicare • **24 CTMs** in 2015-2016

Appeals

Level 1	• Plan-specific appeals process based on State/CMS requirements
Level 2	• **Independent Review Entity (IRE) appeals (Medicare)** – 2015: 1 Part C, 10 Part D – 2016: 31 Part C, Part D data TBD • **1 State Fair Hearing** in 2015-2016

Beneficiary Advocacy

Healthy Connections Prime Advocate

- Serves as the demonstration's ombudsman and serves as a consumer advocate

- Offers services such as:

  – Member assistance with billing and service related issues

  – Member education

  – Member support on appeals and grievances, including the State Fair Hear process

Lt. Governor's Office on Aging
844-477-4632 (TTY/TDD: 711)
Monday to Friday, 8:30am – 5pm
http://www.healthyconnectionsprimeadvocate.com/

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Beneficiary Protection

- **MMP reporting of critical incidents** including suspected abuse, neglect and exploitation

- **Balance billing** targeted communication to providers

  – New Member ID Card (eff. 1/1/17)

  – Website announcement
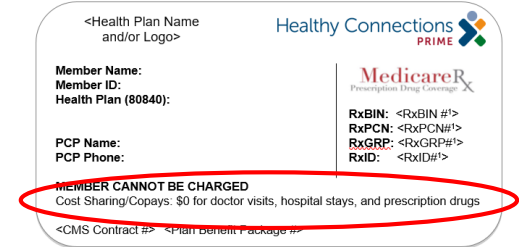
2017 Member ID Card

Member Story

"Millie," is diabetic with high blood pressure and other issues. Latonia, her MMP's Community Health Navigator (CHN), had been unsuccessful in her efforts to engage Millie and drove 40 miles to visit Millie in her home. Millie accepted Latonia's offer to help. Latonia discovered Millie was charged the full fee for a recent visit to her orthopedic surgeon, causing Millie some distress. Latonia contacted the practice and they agreed to reimburse Millie for the charges and co-pay, as well as contract with the MMP to provide services to Millie. Latonia and Millie's care coordinator are helping Millie with other areas as well to improve her health and well being (e.g., shower rail).

* See Feb 2017 Justice in Aging presentation: http://www.justiceinaging.org/wp-content/uploads/2017/02/Improper-Billing-Joint-Webinar-2.7.2017.pdf

Open Lines of Communication

Educational Opportunities

Beneficiaries & Caregivers

- SC Thrive in-person events, webinars, call-ins. In 2016 alone: 4,800+ attendees, 12,000+ mailers
- Notification letters and more available on our website
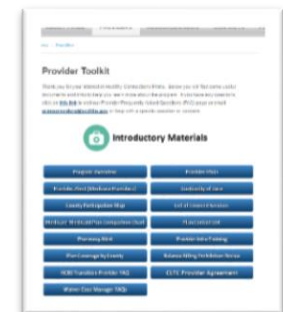

SC Thrive member event

Advocates

- SCDHHS sponsored trainings
- Member/Advocate Toolkit
- Monthly updates

Member/Advocate Toolkit

Providers

- Trainings/presentations to provider groups
- E-Learning Module
- Monthly updates
- Provider Toolkit

Provider Toolkit

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Learn More

Please visit our website at:
www.scdhhs.gov/prime

- Simple direct messaging
- Upcoming Events
- Member stories
- Communication Toolkits for Members/Advocates and Providers
- Interactive Scenarios
- Stakeholder Updates

Questions

Thank You!