

Managed Care Update:

Impacts to Persons with Developmental Disabilities

April 2015



Bayou Health Opt In

- Waiver recipients began Bayou Health opt-in in July 2014
- As of January 2015, point in time enrollment:
 - 152 people from NOW
 - 71 from Children's Choice
 - 62 from Supports Waiver
- Bayou Health opt in began for Chisholm Class February 1, 2015

Bayou Health Plans

- Aetna Better Health of Louisiana (new)
- Amerigroup Louisiana Inc.
- AmeriHealth Caritas of Louisiana
- Louisiana Healthcare Connections, Inc.
- United Healthcare of Louisiana, Inc.

Why persons should consider joining Bayou Health

- All plans offer care coordination, ranging from someone to help you locate a medical provider to more intensive support to manage chronic medical conditions, such as diabetes.
- Plans have the flexibility to pay for services not included in the Medicaid fee for service menu, including
 - Urgent care instead of going to an ER
 - Types of medical equipment or supplies not traditionally allowable

Why persons should consider joining Bayou Health, cont.

- Non-emergency medical transportation has been moved from a statewide program to one now handled by each Bayou plan. We anticipate more flexibility and improvement in service access and timeliness for Bayou plan members.
- Plans can use their private insurance provider network and pay non-Medicaid enrolled specialists to ensure folks have access to services.

Why persons should consider joining Bayou Health, cont.

- Each plan offers a set of value added services.
 - All plans are providing basic adult dental services. These services are not available in fee for service Medicaid.
 - All plans offer some type of adult vision services.
 - Additional items include weight loss support, cash incentives for participating in wellness programs, and even free cell phones.

Pharmacy in Bayou Health

- People have asked about pharmacy services in Bayou plans vs. fee for service Medicaid.
 - Details on pharmacy coverage are available online http://new.dhh.louisiana.gov/assets/docs/BayouHealth/Pharmacy/PDL_CoveredDrugs.pdf
 - Questions about specific medication coverage can be addressed in the enrollment counseling process

EPSDT PCS in Bayou Health

- Effective Feb 1, 2015, Bayou Health members receive EPSDT PCS through their plan
 - This does not impact LT-PCS, which is still through fee for service
- Providers must contract with plans. Providers are paid by plans, not by Molina.
- Authorizations carry over 30 days
- Plans have up to 90 days to complete the transition of planning and re-authorization

How to opt in to Bayou Health

- Call the toll free number 1-855-BAYOU-4U
(1-855-229-6848)
- Complete the enrollment process
 - Enrollment counseling is offered
 - Persons will be asked to confirm their primary care physician
 - Present names of specialists, therapists to ask the enrollment counselor if these professionals are in network or to learn how to confirm on your own

Bayou / LBHP Integration

- We have received many questions from stakeholders about timelines
 - Bayou/ LBHP Integration initiation schedule is late 2015
 - I/DD MLTSS initiation schedule is early 2016
- To date, the expectation is that I/DD members will participate in Bayou/LBHP Integration to maintain their behavioral health services

Bayou / LBHP Integration

- Medicaid / Program Offices are working together to ensure continuity of care and support clear communication with stakeholders and service recipients
- We are looking at all options to make these changes as consumer-friendly as possible

Bayou /LBHP Integration

- Behavioral health services that are a part of LBHP:
 - Psychiatrists, psychologists, social workers, and LPCs accepting Medicaid who are not a part of a rural health clinic
 - Emergency room services for acute behavioral crisis
 - Hospitalization for acute behavioral crisis
 - Substance abuse services

Bayou / LBHP Integration

- All persons in Medicaid will be sent a letter requesting them to choose a Bayou Health plan for their behavioral health management
- Persons can either choose to stay fee for service/legacy for acute care or can also choose to have their selected Bayou plan manage their acute care

Bayou / LBHP Integration

- This is a multi-step and potentially confusing process
 - Notification will come through the mail. Persons will need assistance to understand the changes
 - We need providers and support coordinators to assist persons to recognize the correspondence and to respond in a timely fashion
 - OCDD will continue to dialogue with providers, support coordinators, and LGEs on this process



I/DD MLTSS

Timeframes/ What to Expect

- Release of a waiver application
- Release of an RFP
- Contracting with MCOs
- Readiness period/ Pre-Implementation
- Enrollment (30 days prior to start up)
- Roll out statewide

Waiver Application: Public Notice Process

- 30 day public comment period
- The full waiver application will be posted, in addition to public notices
- Questions and comments will be accepted electronically or via mail
 - Information will be maintained on the website hosting the application
- At least two in-person statewide meetings will be held
- OCDD plans multiple statewide webinars

Who is included in I/DD MLTSS?

- Mandatory enrollment
- All Medicaid eligible persons with an OCDD statement of approval
 - No one with an OCDD SOA will enter the OAAS MLTSS system
 - All persons in Bayou Health will be transitioned over
 - All persons in Fee for Service will be enrolled per the roll out schedule

Who is Included in I/DD MLTSS?

- EarlySteps
 - EarlySteps eligible persons will enter I/DD MLTSS instead of Bayou Health
 - Enrollment will be mandatory

What services are included?

- Support coordination
- State plan acute/primary care
- EPSDT
- LT-PCS
- Behavioral Health services for children and adults
- Waiver Programs
 - Proposal to consolidate existing waivers
- Facilities
 - Public and private ICFs/DD
 - Nursing facilities

I/DD Waiver Development

- MLTSS proposals were developed from System transformation work
- OCDD System Transformation began in 2012
 - Consensus on five outcomes
 - Serving more persons in home and community-based services (HCBS),
 - Achieving cost effectiveness in HCBS,
 - Reducing institutional reliance in both private and public settings,
 - Providing access to appropriate services based upon need, and
 - Increasing appropriate utilization of natural and community supports.

You can expect to see

- Front-end support coordination
- Discovery, planning, and resource allocation applied to the comprehensive array (acute, behavioral health, and LTSS)
- New services
 - Intensive Behavioral Health services that are I/DD specific
 - New services in LTSS

10,000 FT Waiver Concept

MLTSS Members' Foundational Package	LTSS Waiver	LTSS Waiver +	Facility
All members access			
Acute/ Primary Care	New/Altered Services in key areas:	New/Altered Services in key areas:	Ongoing development of medical add on rate for ICF/DD
Behavioral Health	<ul style="list-style-type: none"> • Telecare • Home Delivered Meals 	<ul style="list-style-type: none"> • Shared Living Specialized 2, 3, 4 	
Crisis Services	<ul style="list-style-type: none"> • Respite 	<ul style="list-style-type: none"> • Host Home Specialized 	
Support Coordination	<ul style="list-style-type: none"> • Shared Living 2, 3, 4 		
Housing Supports	<ul style="list-style-type: none"> • Shared Living Conversion 6, 8 		

Additional improvements or alterations are pending.

Keep up with MLTSS

- Information is published on the DHH MLTSS web page

www.makingmedicaidbetter.com/longtermcare

Questions and Comments