

SUPPORTING COMMUNITY BASED ORGANIZATIONS IN THEIR MOVE TO MANAGED CARE.

ONE HEALTH PLAN'S EXPERIENCE

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Today's Speakers

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 **Amerigroup**
An Anthem Company

Learning Objectives

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- Learn about the implementation of MLTSS for people with I/DD from a managed care perspective
- Learn how Managed Care Entities (MCEs) can support CBOs to be successful in an MLTSS environment
- Understand how Anthem views the value of MLTSS for people with I/DD

Agenda



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- Brief Intro to Anthem and 'why' Managed Care
- Positioning your CBO for success
 - ▣ Be Engaged- Be Informed- Be Prepared- Be Open
 - ▣ Successes in MLTSS for I/DD
- Important information to know in preparation for transitioning into a Managed LTSS Delivery System
 - ▣ Credentialing & Claims
 - ▣ Avoiding Common Errors
 - Training
 - Referrals
 - Interfacing with Managed Care Case Managers/Support Coordinators
 - ▣ Additional opportunities for collaboration
- Q&A

Managed Long Term Services and Supports

More than 6.4 million people are served in a variety of state-sponsored health plans across 20 markets.

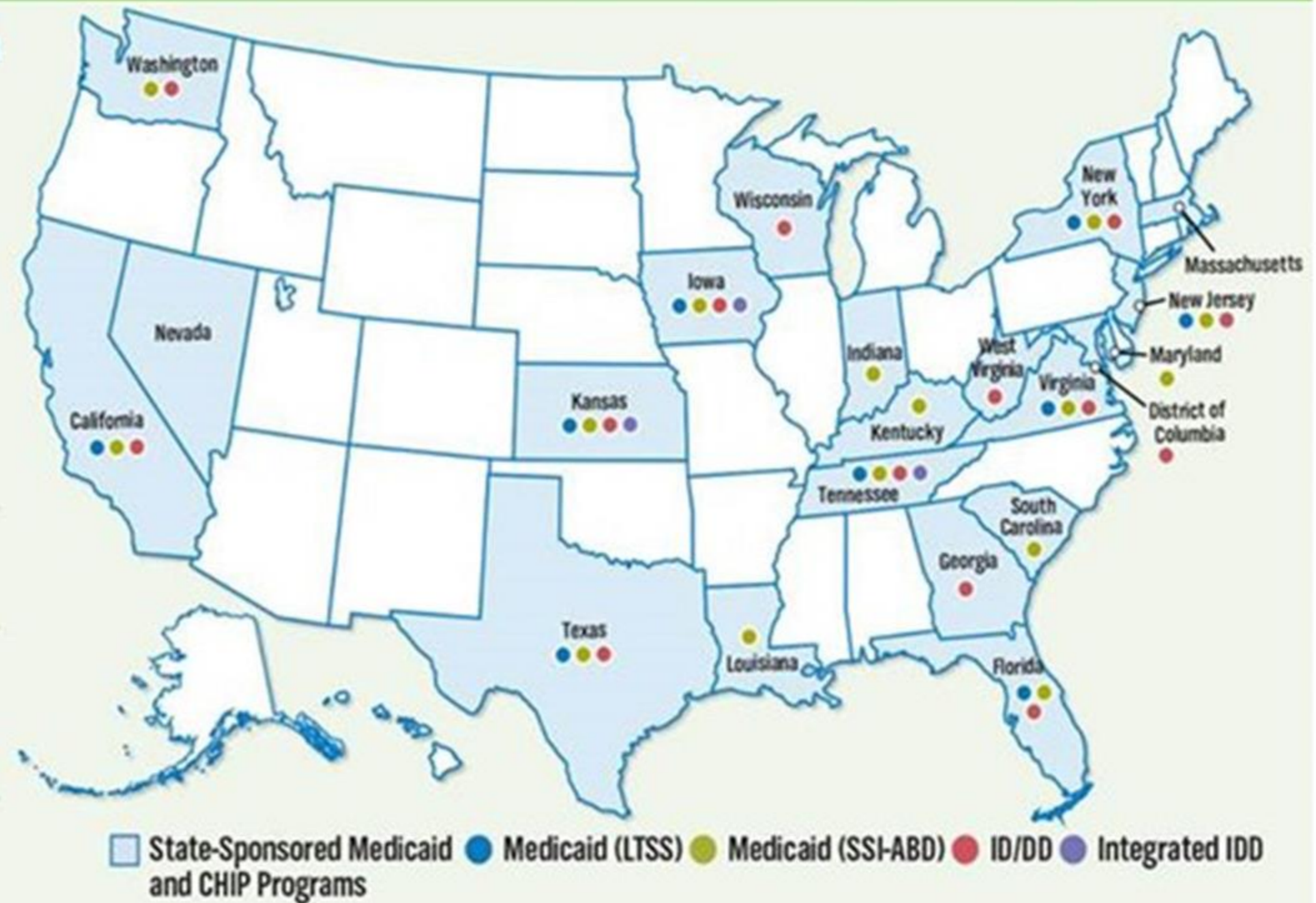
6.4 million members served in Medicaid and other state-sponsored programs

762,000+ members who are ABD in 16 states

75,000+ members with IDD for acute medical in 14 markets with integrated IDD in 3 states

414,000+ members who are dually eligible in 21 states (Includes Medicare and dual demonstrations)

361,000+ members in programs with integrated LTSS in 9 states



System Transformation Opportunities



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- Provide the innovative services people and their families say they need most
- Provide services more cost-effectively and reduce fragmentation
- Decrease waiting lists
- Align incentives toward employment, independent living, community integration and the things that people with disabilities and their families value most

Key Concepts for Managed LTSS for I/DD



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- Person-Centered Care Coordination Model
 - Reduce fragmentation through integration of Physical, Behavioral Health Services and LTSS
 - Support individuals in developing a comprehensive plan that outlines their goals and steps to achieving those goals
 - Act as a resource to identify and connect the individual and their families to paid and unpaid support available in the community
- Empower individuals and families toward independence and integration to ensure they are not just in the community, but part of the community
 - Support innovative methods of service delivery targeted toward meeting the individualized needs of people with I/DD
 - Align incentives toward employment, independent living, community integration and the things that people with disabilities and their families value most
 - Focus on achieving outcomes related to quality and support of full community integration
 - Emphasize and support Employment for individuals with I/DD
- Focus on innovative incentive models including value based purchasing linking payment to outcomes to support quality, cost-effectiveness, and sustainability.

Positioning your CBO for Success

Be Engaged

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- Participate in stakeholder engagement sessions and comment periods geared toward shaping policy around MLTSS
- Develop relationships with key stakeholders such as State Agencies, MCOs, Provider Groups and aligning on feedback/concerns
- Data is critical! Often providers can speak to key components of their operations that support success and profit, but they do not have data to support their message. Collecting data to inform Stakeholders and policy makers is vital.
- Lessons Learned on Engagement in TN

Be Informed

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- Don't just attend the stakeholder sessions- invest in reading and interpreting the policy.
- MCO processes- learning about claims and credentialing in Managed Care
- Understand the transformation goal and what is being required of the MCOs in your state to help inform your plans.
- Lessons Learned on being informed in TN



Be Prepared

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- Understand the impact to your agency. Make early predictions on areas in which your services currently align and where they do not.
- Don't wait for training! Proactively inform your team.
- Data is critical. Understand your timeframes for training, recruitment, job shadowing and compare that to the volume and timeframes expected in the managed care program design.
- Assessment of current staffing model. Does the skill set and experience of your current team meet the expectations of the managed care model?
 - Assess by Service Type
 - Employment providers
 - Personal Assistance
 - Residential
 - Community Integration

MLTSS for I/DD Profile of Services in TN



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- Array of employment services and supports
- Designed in consultation with experts from the Office on Disability Employment Policy
- Intended to create a “pathway” to employment
- Wrap-around services to support community integration
- No facility-based services
- Many new services, based on stakeholder input, intended to empower individuals and families toward independence and integration

MLTSS for I/DD Profile of Services in TN



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Employment Services

- Exploration
- Discovery
- Situational observation and assessment
- Job development plan or self-employment plan
- Job development or self-employment start up
- Job coaching for Individualized, integrated employment
- Job coaching for Individualized, integrated self-employment
- Coworker supports
- Supported employment – small group
- Career advancement
 - Outcome payment after written plan to achieve the person's career advancement objective
 - Second outcome payment after the person has achieved specific career advancement objective and has been in a new position/job for two weeks
- Integrated employment path services
- Benefits counseling

MLTSS for I/DD Profile of Services in TN



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Individual Supports

- Community integration support services
- Community transportation
- Independent living skills training
- Personal assistance
- Assistive technology, adaptive equipment and supplies
- Specialized consultation and training
- Minor home modifications
- Community living supports (CLS) and CLS – family model
- Individual education and training
- Peer-to-peer Support and Navigation (for Person Centered Planning, Self-Direction, Integrated Employment/Self-Employment and Independent Community Living)
- Specialized Consultation and Training

MLTSS for I/DD Profile of Services in TN



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- Supportive home care
- Family caregiver stipend
- Respite
- Family caregiver education and training
- Conservatorship and alternatives to conservatorship counseling and assistance
- Health insurance counseling/forms assistance
- Community support development, organization and navigation

- In Tennessee, the flexibility afforded through Managed Care has contributed to exciting new supports, approaches to Person-Centered Planning, dignity of risk, and promoting Competitive Employment and Community Integration as the first and preferred option for supporting people with I/DD.



Important to know...

Contracting and Credentialing



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- Get to know each state and MCOs specific contracting and credentialing requirements.
- Best practices for credentialing include an on-site visit from the MCOs to review policies, employee records, licensure and training and discuss the agency's vision for providing LTSS services.
- Information obtained from the site visit will be used to complete the MCO credentialing process and select the group of providers that will be contracted at implementation.
- Approved providers will be enrolled in the MCO internal systems and receive copies of the executed provider agreement.

Elements for Preferred Contracting in TN



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The criteria serves two primary purposes:

1. Benchmarks for MCOs in identifying providers who demonstrate commitment to community integration and person-centered support.
2. For providing informed choice to members in choosing their providers.

Preferred Contracting Examples



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Provider has high quality performance rating in existing waiver programs

The provider has or is actively seeking accreditation from a national recognized accrediting body such as Council on Quality and Leadership

The provider has a Letter of Agreement with Vocational Rehabilitation

The provider has completed Person-Centered Training

The provider has achieved documented success in helping individuals with I/DD achieve integrated employment opportunities

Network Adequacy

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- Each state differs, but often times in managed care delivery systems MCOs are not required to contract with all willing, qualified providers.
- Network adequacy is based on access and quality standards.

To initiate billing for the approved reimbursement, a claim must be submitted based on the specified service type. In TN, Claims are submitted in one of two ways: through the Electronic Visit Verification (EVV) database or through the MCO's claims portal system.

- EVV database
 - ▣ Amerigroup TN EVV vendor: Healthstar
- Non-electronic visit verification (Non-EVV)
 - ▣ Submit a CMS 1450 (UB04) claim form through the MCO's electronic claims portal or a third party electronic claims vendor
 - ▣ Bill using federally-assigned NPI and tax identification number

Electronic Visit Verification



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What is electronic visit verification?

- Web-based platform that uses GPS technology to record the time and location of a member's staff at check-in and check-out of an appointment.
- This method of verification has been proven to ensure the consistent care and safety of health plan members.
- EVV verifies that services are being performed within the individual's preferred schedule and approved location. It may also be used by the provider for submission of claims.
- Fraud and abuse for inappropriately claimed services is minimized with use of EVV.

Avoiding Common Errors

- Prepared and well trained staff are the most successful
 - Prior to accepting a referral assess your capacity to provide the service in accordance with the plan and develop a comprehensive back up plan
 - Accommodate any specific support needs and preferences
 - Prepare staff for success
 - Train and test competency on providing the service
 - Train and test competence on the staff's knowledge of the specific support needs of each person they are supporting
 - Develop a provider implementation plan
 - Provide in home staff with peer and managerial support
 - Be person centered. Don't only read the part of the plan related to the service you are providing, understand the role this service plays in the persons quality of life goals
 - Support the Managed Care Case Manager in being aware when the person has experienced a change in circumstances or goals

Additional Opportunities for Collaboration

- Collaboration with Managed Care Case Managers on Workforce Development Challenges
- Recruit staff who are linguistically competent in spoken languages other than English that may be the primary language of individuals supported and/or their primary caregivers.
- Assign staff that are trained in the use of auxiliary aids or services in order to achieve effective communication with individuals supported and/or their primary caregivers.
- Invest in staff retention and development
 - ▣ Reduce Turnover
 - ▣ Develop Career Paths
 - ▣ Provide comprehensive training and supports



Thank You!



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