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State Medicaid Integration Tracker[©]

Welcome to the State Medicaid Integration Tracker®

The **State Medicaid Integration Tracker®** is published each month by the National Association of States United for Aging and Disabilities (NASUAD).

This tracker includes new updates for each state that occurred during the most recent month. For comprehensive information on each state, as well as archived versions of the tracker, please visit: <http://nasuad.org/initiatives/tracking-state-activity/state-medicaid-integration-tracker>

The **State Medicaid Integration Tracker®** focuses on the status of the following state actions:

1. Managed Long Term Services and Supports (MLTSS)
2. State Demonstrations to Integrate Care for Dual Eligible Individuals and other Medicare-Medicaid Coordination Initiatives
3. Other LTSS Reform Activities, including:
 - Balancing Incentive Program
 - Medicaid State Plan Amendments under §1915(j)
 - Community First Choice Option under §1915(k)
 - Medicaid Health Homes

NASUAD uses many information sources to learn what is happening across the country in these areas. NASUAD's sources include: the CMS website on Managed Long Term Services and Supports ([link](#)), the CMS website on State Demonstrations to Integrate Care for Dual Eligible Individuals ([link](#)), the CMS Balancing Incentive Program website ([link](#)), the CMS website on Health Homes ([link](#)), the CMS list of Medicaid waivers ([link](#)), state Medicaid Agency websites, interviews with state officials, and presentations by state agencies. NASUAD lists sources for each update, as well as hyperlinks to related CMS and state documents and materials.

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Overview

<p>Managed LTSS:</p>	<p>AZ, CA, DE, FL, GA, HI, ID, IL, KS, LA, MA, MI, MN, NE, NH, NJ, NM, NY, NC, OH, OK, PA, RI, TN, TX, WI</p>
<p>Medicare-Medicaid Care Coordination Initiatives:</p> <p>*: Financial Alignment (FA) demonstration proposal approved by CMS</p> <p>**: Pursuing alternative initiative</p>	<p>CA*, CO*, CT, FL**, IL*, MA*, MI*, MN**, NH**, NJ**, NY*, OH*, OK, RI, SC*, TX*, VA*, WA*</p>
<p>Other LTSS Reform Activities:</p> <p>*: Approved by CMS</p>	
<ul style="list-style-type: none"> Balancing Incentive Program: 	<p>AR*, CT*, DE, GA*, IL*, IN*, IA*, KY*, LA*, ME*, MD*, MA*, MS*, MO*, NE*, NV*, NH*, NJ*, NY*, OH*, PA*, RI, TX*</p>
<ul style="list-style-type: none"> Medicaid State Plan Amendments under §1915(i): <p>SPA withdrawn:</p>	<p>AR, CA*, CO*, CT*, DE, DC, FL*, ID*, IN*, IA*, LA*, MD*, MI*, MN, MS*, MT*, NV*, OR*, SC, WI*</p> <p>TX, WA</p>
<ul style="list-style-type: none"> Community First Choice option under §1915(k): <p>SPA withdrawn:</p>	<p>AR, CA*(2), CO, CT, MD*, MN, MT*, NY, OR*, TX, WA, WI</p> <p>AZ, LA</p>
<ul style="list-style-type: none"> Medicaid Health Homes: 	<p>AL*, AZ, AR, CA, CT, DE, DC, ID*, IL, IN, IA*(3), KS*, KY, ME*(2), MD*, MI*, MN, MS, MO*(2), NV, NH, NJ*, NM, NY*(3), NC*, OH*(2), OK*, OR*, RI*(3), SD*, VT*(2), WA*, WV, WI*(2)</p>

State Updates

State	State Updates
<p>California</p>	<p>Managed LTSS Program</p> <p>The California State Auditor released a report examining Medicaid managed care in California, also known as Medi-Cal. Roughly 9.3 million of the state’s 12.2 million Medicaid population are enrolled in managed care plans. The report identified network adequacy and inaccurate information on providers as the challenges in the Medi-Cal managed care program. (Source: Modern Healthcare, 6/17/2015; Kaiser Health News, 6/22/2015)</p>
<p>Massachusetts</p>	<p>Managed LTSS Program</p> <p>Massachusetts House Speaker Robert DeLeo announced plans to create a study committee, made up of seven House members and six members from the health care sector, to examine Medicaid managed care organizations (MCOs) that have recently struggled financially. The fiscal issues are largely thought to be linked to lower-than-expected reimbursement rates. (Source: Boston Globe, 6/10/2015)</p> <p>A recent report on Massachusetts’ Medicaid program, MassHealth, revealed that MassHealth had potentially spent \$521 million dollars in duplicative payments. The report also cited network adequacy issues, and a failure to take advantage of cost saving measures within MCOs. (Source: Modern Healthcare, 6/17/2015)</p> <p>State Demonstration to Integrate Care for Dual Eligible Individuals</p> <p>Fallon Community Health Plan will cease participating in Massachusetts state demonstration for dual eligibles, One Care, effective September 30, 2015. Fallon is the second most popular plan in the demonstration, serving 5,500 enrollees. (Source: Health IT Caucus , 6/19/2015)</p>
<p>Nevada</p>	<p>Managed LTSS Program</p> <p>On June 11, 2015, Governor Brian Sandoval signed into law Senate Bill 514, which includes provisions to contract with health plans to serve the state’s Aged, Blind and Disabled (ABD) populations. The state will need an additional recommendation from the governor and approval from the state’s Interim Finance Committee before submitting to CMS a request to amend the state’s Medicaid plan to modify the Medicaid delivery system. (Source: Las Vegas Review Journal, 6/11/2015)</p>

State	State Updates
<p>New Jersey</p>	<p>Managed LTSS Program</p> <p>On June 15, 2015, Deputy Commissioner Lowell Arye provided an update on New Jersey’s MLTSS program. As of spring 2015, roughly 39,000 New Jersey residents receive Medicaid long-term care: 14,460 are enrolled in MLTSS; and the remaining 25,449 remain under Medicaid fee-for-service. From August 2014 to June 2015, the state’s MLTSS population has grown from 11,229 to 14,460. (Source: New Jersey DHS website, 6/15/2015) Behavioral Health Update Presentation (6/15/2015)</p>
<p>New York</p>	<p>State Demonstration to Integrate Care for Dual Eligible Individuals</p> <p>On June 8, 2015, the New York Department of Health (DOH) announced plans to expand its duals demonstration to the state’s I/DD population. The new initiative will be known as the Fully Integrated Duals Advantage (FIDA-IDD) and will focus on individuals receiving LTSS and I/DD services. (Source: NYS DOH, 6/8/2015)</p>
<p>North Carolina</p>	<p>Managed LTSS Program</p> <p>On June 23, 2015, the News & Record reported that the North Carolina House passed a bill that reforms the states’ Medicaid system by instituting a capitated managed care payment mechanism that would be paid to provider-led MCOs. The bill differs greatly from the Senate’s Medicaid reform plans, which would require insurance companies to enter the managed care market as well. The two chambers will seek a compromise. (Source: News & Record, 6/23/2015)</p>
<p>Ohio</p>	<p>Managed LTSS Program</p> <p>On June 18, 2015, Ohio passed its biennial budget, which includes significant impacts for MCOs. The budget proposes: requiring MCOs to establish value-based payment arrangements, with 50 percent of payments value-based by July 1, 2020; forbidding managed care plans from implementing prior authorization requirements for individuals receiving alcohol, mental health, or drug addiction services other than those with a requirement under current law; and mandating Ohio Medicaid to improve upon the integrity of its managed care system by July 1, 2016. (Source: Gongwer News Service; The Daily Record, 6/19/2015)</p>
<p>Oklahoma</p>	<p>Managed LTSS Program</p> <p>On June 22, 2015, the Oklahoma Health Care Authority (OHCA) issued a Request for Information (RFI) from stakeholders regarding the development and requirements of a Request for Proposals (RFP) for a care coordination model for the state’s Aged, Blind and Disabled (ABD)</p>

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Oklahoma	populations. The deadline for comments is August 3, 2015. (Source: OHCA website , 6/2015) Request for Information (6/22/2015)
Virginia	Managed LTSS Program On June 2, 2015, the Virginia Department of Medical Assistance Services (DMAS) announced its intention to move most of the state’s remaining Medicaid fee-for-service (FFS) population into managed care in 2016 and 2017, including: dual eligibles not enrolled in the Commonwealth Coordinated Care Program (CCC); and individuals receiving full Medicaid and LTSS through an institution or HCBS waiver. Individuals on ID, DD, and DS waivers will continue to receive HCBS through Medicaid FFS. (Source: DMAS , 6/2/2015) DMAS Stakeholder Letter (5/18/15)

STATE TRACKER FOR DUALS DEMONSTRATION
(Updated as of: 7/1/2015)

	States	Proposed Financing Model	Submitted to CMS	Status	Target Implementation Date ¹
1	Arizona	Capitated	5/31/2012	Withdrew	1/2014
2	California	Capitated	5/31/2012	MOU Signed 3/27/2013	4/2014, 7/2015 (opt-in); 8/2014, 10/2014, 1/2015, 8/2015 (passive)
3	Colorado	Managed FFS	5/2012	MOU Signed 2/28/2014	9/2014 (passive)
4	Connecticut	Managed FFS	5/31/2012		N/A
5	Hawaii	Capitated	5/25/2012	Withdrew	1/2014
6	Idaho	Capitated	5/2012	Withdrew	1/2014
7	Illinois	Capitated	4/6/2012	MOU Signed 2/22/2013	3/2014 (opt-in); 6/2014 (passive)
8	Iowa	Managed FFS	5/29/2012	Withdrew	N/A
9	Massachusetts	Capitated	2/16/2012	MOU Signed 8/23/2012	10/2013 (opt-in); 1/2014, 4/2014, & 7/2014 (passive)
10	Michigan	Capitated	4/26/2012	MOU Signed 4/2014	3/2015 (opt-in); 7/2015 (passive)
	Minnesota	Admin.	4/26/2012	Admin. Alignment MOU Signed	9/2013 (opt-in)

¹ Implementation dates are based on demonstration proposals submitted to CMS, Memoranda of Understanding, and Financial and Administrative Alignment Demonstrations for Dual Eligible Beneficiaries Compared: States with Memoranda of Understanding Approved by CMS, 7/24/2014.

	States	Proposed Financing Model	Submitted to CMS	Status	Target Implementation Date ¹
11		Alignment Capitated		(9/12/2013) Withdrew Capit.	12/2012
12	Missouri	Managed FFS	5/31/2012	Withdrew	10/2012
13	New Mexico	Capitated	5/31/2012	Withdrew	1/2014
14	New York	Capitated ²	5/25/2012	MOU Signed 8/26/2013	1/2015 (opt-in); 4/2015 (passive)
15	North Carolina	Managed FFS	5/2/2012	Withdrew	1/2013
16	Ohio	Capitated	4/2/2012	MOU Signed 12/12/2012	5/2014 (opt-in); 1/2015 (passive)
17	Oklahoma	Both	5/31/2012		N/A
18	Oregon	Capitated	5/11/2012	Withdrew	1/2013
19	Rhode Island	Capitated	5/31/2012		N/A
20	S. Carolina	Capitated	5/25/2012	MOU Signed	1/2015 (opt-in); 4/2015 (passive)
21	Tennessee	Capitated	5/17/2012	Withdrew	1/2014
22	Texas	Capitated	5/2012	MOU Signed	3/2015 (opt-in); 4/2015 (passive)
23	Vermont	Capitated	5/10/2012	Withdrew	Jan 2014
24	Virginia	Capitated	5/31/2012	MOU Signed 5/21/2013	5/2014 (opt-in); 8/2014 (passive)
25	Washington	Both Managed FFS	4/26/2012	2 MOUs Signed MFFS (10/25/2012) Capit. (11/25/2013) Withdrew	MFFS (7/2013) Capit. (7/2015)
26	Wisconsin	Both	4/26/2012	Withdrew	1/2013

² New York initially submitted demonstration proposal for both financial models, but later withdrew Managed FFS model. Please refer to text in New York section.



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