Changes in MassHealth managed care begin March 1, 2018
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What you get with MassHealth

- Access to health care providers who accept MassHealth rates as payment in full less any allowed copayment
- Range of covered services that vary by coverage type
- Delivery system includes managed care and fee for service
MassHealth coverage types
130 CMR § 505 & 519 (eligibility) 450.105 (benefits)

5 Types of MassHealth

MassHealth Standard — the “good” MassHealth
MassHealth CarePlus — for childless adults 21-64 since 1-1-14 thanks to Affordable Care Act
MassHealth CommonHealth — for people with disabilities & income too high for Standard
MassHealth Family Assistance — includes CHIP for children in families with income too high for Standard
MassHealth Limited — emergency care for those not eligible for Standard/CarePlus due to immigration eligibility rules
SEVENTY PERCENT OF MASSHEALTH MEMBERS ARE ENROLLED IN MANAGED CARE

MASSHEALTH ENROLLMENT BY PAYER TYPE, MAY 2017

- MCO 581,819 (31%)
- CAREPLUS MCO 251,433 (13%)
- ONE CARE 16,909 (1%)
- SCO, PACE 52,225 (3%)
- FFS, PREMIUM ASSISTANCE AND LIMITED 556,407 (30%)
- PCC PLAN 414,162

*MassHealth Limited provides coverage for emergency medical services for 157,000 undocumented non-citizens.

SEPTEMBER 2017
Mandatory managed care

• MassHealth is your only coverage
  – No Medicare, employer-sponsored insurance or other coverage
• You are under age 65, living in community, and
• Eligible for MH Standard, CarePlus, CommonHealth, or Family Assistance
• See, 130 CMR 508.001 for info about voluntary managed care
MassHealth Delivery System until March 1, 2018

- **Fee for Service (FFS)** – MassHealth pays participating providers directly
- **Managed Care Organizations** – MH pays MCO & MCO pays providers in its network
- **Primary Care Clinician Plan** – for medical services, MassHealth pays participating providers directly, for behavioral health, MassHealth pays its contractor, the Mass. Behavioral Health Partnership (MBHP) and it pays providers in its network
MassHealth MCOs (2017)

- Tufts Health Together
- Neighborhood Health Plan (NHP)
- BMC Health Net
- Fallon Community Health
- Health New England (HNE)
- CeltiCare (CarePlus only)
How MCOs work

• MCO available to people who live in region that MCO has contract with MH to cover
• Use both MCO card and blue MassHealth card
  – MassHealth card for some services e.g. dental, PCA, nonemergency transportation
  – MCO card for all other services
• For MCO services, must see providers in MCO network
• If prior authorization needed for MCO services, MCO decides
• Complaints & appeals go first to MCO, then to MassHealth fair hearing
Primary Care Clinician (PCC) Plan

• Beneficiary chooses a primary care practice participating in PCCP w/i 25 mi. of home (with some exceptions)
• Medical benefits through MassHealth; if prior authorization (PA) needed, MH decides
• Behavioral health benefits through the MBHP; if PA needed, MBHP decides
• PCC referral needed to see certain specialists
• Complex care case management from MBHP
MassHealth Changes March 1, 2018

• Returning managed care options:
  – Tufts HealthTogether
  – BMC Health Net
  – PCC Plan (w. MBHP)

• MCOs returning only as an ACO Partnership Plan in 2018
  – Fallon
  – Health New England
  – Neighborhood Health Plan

• MCO not returning in 2018
  – CeltiCare

• New Accountable Care Organizations (ACOs):
  – ACO Partnership Plans (MCO in partnership with provider led ACO)
    • 13 (4 w. BMC, 4 w. Tufts, 3 w. Fallon, 1 w. Health New England, 1 w. Neighborhood Health Plan)
  – Primary Care ACOs
    • Community Care Cooperative (C3)
    • Partners HealthCare Choice
    • Steward Health Choice
  – MCO-contracted ACO
    • Lahey Health ACO (contracted with Tufts & BMC MCO)
Most MassHealth Members change to new ACOs on March 1, 2018
enrollment as of 2-3-18

ACOs, 814,000

MCOs, 143,000

PCC Plan, 130,000
# MassHealth Health Plan Options Effective March 1, 2018

## Accountable Care Partnership Plans (Model A)
- Be Healthy Partnership - Baystate Health Care Alliance with Health New England
- Berkshire Fallon Health Collaborative - Health Collaborative of the Berkshires with Fallon Health
- BMC HealthNet Plan Signature Alliance - Signature Healthcare with BMC HealthNet Plan
- BMC HealthNet Plan Community Alliance - Boston Accountable Care Organization with BMC HealthNet Plan
- BMC HealthNet Plan Mercy Alliance - Mercy Medical Center with BMC HealthNet Plan
- BMC HealthNet Plan Southcoast Alliance - Southcoast Health with BMC HealthNet Plan
- Fallon 365 Care - Reliant Medical Group with Fallon Health
- My Care Family - Merrimack Valley ACO with Neighborhood Health Plan (NHP)
- Tufts Health Together with Atrius Health - Atrius Health with Tufts Health Plan (THP)
- Tufts Health Together with BIDCO - Beth Israel Deaconess Care Organization (BIDCO) with Tufts Health Plan (THP)
- Tufts Health Together with Boston Children’s ACO - Boston Children’s ACO with Tufts Health Plan (THP)
- Tufts Health Together with cha - Cambridge Health Alliance (CHA) with Tufts Health Plan (THP)
- Wellforce Care Plan - Wellforce with Fallon Health

## MCOs
- Boston Medical Center (BMC) HealthNet Plan
- Tufts Health Together

## MCO-Administered ACO (Model C)
- Lahey Clinical Performance Network (Participating with Boston Medical Center HealthNet Plan and Tufts Health Together)

## PCC Plan
- Primary Care Providers in the MassHealth Network

## Primary Care ACO Plans (Model B)
- Community Care Cooperative (C3)
- Partners HealthCare Choice
- Steward Health Choice
Transitions for over 1 million people

- Of those in managed care on Oct 15, 2017
  - 800,000 had a PCP who joined an ACO & were specially assigned to that ACO on March 1
  - 200,000 had a PCP who did not join an ACO & can stay with same MCO (Tufts or BMC) or PCC Plan
  - 100,000 have to change plans by March 1 and were not specially assigned *
    * Some of these now able to follow PCP who joined PCC Plan
  - All sent green stripe letter in Nov-Dec

- Over 130,000 new members notified since then
Important News About Your MassHealth Health Plan

Dear [Member Name],

On March 1, 2018, MassHealth will introduce new health plans designed to keep you—and your providers—focused on your health goals. Your primary care provider (PCP), <PCC_NAME_PRO>, is joining one of these new health plans, <ACO_NAME_PRO>, an Accountable Care Organization (ACO) Partnership Plan. Starting March 1, 2018, we are enrolling you in this plan so that you can continue to receive care from your PCP. Please note, even though your health plan is changing, your MassHealth benefits will stay the same.

Important. If <PCC_NAME_PRO> is not your PCP, please call us at 1-800-841-2900 and let us know who your PCP is.

If you do not want to move to your new health plan

- Please let us know before March 1, 2018.
- After this date, you still have until May 31, 2018, to try out your new ACO health plan and change plans for any reason.

More information about ACOs and your health plan options can be found in this letter.
What is an ACO?

• An ACO is a type of managed care plan
  – ACO Partnership Plans are like MCOs
    • MCO is in partnership with providers that have formed an ACO
    • MassHealth pays ACO PP and it pays a network of providers
  – Primary Care ACOs are like the PCC Plan
    • Primary care providers have formed an ACO
    • MassHealth pays all PCP in ACO directly & pays other medical providers who participate in MassHealth; for behavioral health, MassHealth pays the Partnership and it pays behavioral health providers in its network
    • ACO makes referrals & coordinates care with added resources from MassHealth

• ACOs & MCOs have their own cards & websites
What is an ACO?

• ACOs are a new way of organizing and paying for health care services to try to reach better results at lower cost

• MassHealth is giving ACOs more resources and information to provide better coordinated care

• MassHealth is holding ACOs accountable by paying them more or less depending on how they perform on savings and quality
What is not changing in ACOs

• All MassHealth members have at least the same core benefits based on their coverage type as now
  – ACOs have flexibility to offer more

• Same services provided directly by MassHealth outside MCO/ACO as now: e.g. dental, PCA, nonemergency transportation
How are ACOs changing available providers?

• Service areas are smaller for the ACO Partnership Plans than the Regions that were covered by the MCOs
  – This means even if you were in an MCO in 2017 you may no longer live in a town covered by the same MCO in a new Partnership Plan in 2018

• PCP exclusivity: a primary care site can only belong to one ACO. In 2017, a PCP site could belong to several different MCOs and the PCC Plan.
  – This means to keep a PCP who joined an ACO, you must join that ACO, but that ACO may not cover your town or may not include your other providers.
Other features of ACOs coming soon

• June 1, 2018 Community Partners to help members access behavioral and long term services and supports
• June 1, 2018 an independent Ombudsman program to help members resolve problems
• 2019 ACO programs designed to address housing and nutrition issues affecting health
• Will also apply to MCOs
Concerns for Members

• What is my plan on March 1, 2018?
• Is there a plan available with my current primary care practice and the specialists I need?
• Will my new plan honor services that have been authorized or scheduled after March 1, 2018?
• Who will help me figure this out?
New plans but familiar decision-makers authorizing services

**Managed Care Organization**
- MCO
- Accountable Care Partnership Plans (MCO in partnership with provider-led ACO)

**MassHealth and MBHP**
- PCC Plan
- Primary Care ACOS
Enrollment changes among MassHealth MCO-involved plans

Plans not involving MCOs not shown
Increased enrollment in MassHealth plans not involving MCOs

- March 1, 2017: 377,000
- March 1, 2018 as of 2-3-18: 463,000

86,000 increase

PCCPlan/ Primary Care ACOs
Behavioral Health

• The PCC Plan, the 3 Primary Care ACOs and the HNE-involved plan (Be Healthy Partnership) will all use MBHP

• All BMC-involved plans, NHP-involved plan (My Care Family) & the 3 Fallon-involved plans are using Beacon Health

• Tufts-involved plans using Tufts Health Together BH network
Transition problems

• People unaware of change
• Difficulty finding out which plan a PCP joined or which plan a specialist or other provider accepts
• Some people will be unable to find a new plan that includes the same PCP and specialists they have in their current plan
• Receiving on-going or scheduled services authorized by old plan from new plan or from provider not in network of new plan
Unaware of change

- After Mar 1, you present Neighborhood Health Card at Pharmacy & told you don’t have NHP anymore
- What shouldn’t happen: you leave without medicine
- What should happen: Pharmacy checks EVS/MMIS to see where you are enrolled & bills appropriate plan or if refill or PA needed, pharmacy calls provider
Continuity of Care

• Continuity of care for 30 days from March 1
  – New plan will pay for previously scheduled service from current providers (including out of network)
  – Prior authorization info shared between plans
• ID of complex care members for individual assistance to avoid break in service during & after 30 days
• 90 days continuity for behavioral health
• Lines of communication clarified
  – Point of contact at plans & MassHealth
  – Escalation process if problems not addressed at Customer Service level by plan/MassHealth
Continuity of Care

• Prior authorizations (PA) will be honored thru PA period or continuity of care period, whichever comes first.

• Existing drug refills will be honored unless RX requires PA, then at least 72 hour supply while PA obtained

• If PA is modified/terminated by new plan, treated as an adverse action with appeal rights & aid pending
Continuity of Care

• Pregnant women can remain with out of network Ob/Gyn thru delivery & 6 weeks post-partum
• PCP exclusivity does not apply to Medication Assisted Treatment, MAT, like Suboxone from a primary care doc
• MassHealth Guidance 2/21/18

https://www.mass.gov/service-details/continuity-of-care
Problems: getting info needed to select a plan

• Which plan has my primary care doctor?
  – MassHealth info is by “practice”
    • E.g. Community Health Center or Physician Group
    • Individual Dr. shown only if not part of a larger practice
  – PC Practice in an ACO is exclusive to that ACO
  – PCP in ACOs/MCOs for 2018 are fixed for the year; but unaffiliated PCPs still joining PCC Plan

• In which plan are my other providers?
  – Hospitals shown in Enrollment Book
  – Specialists not fixed, being added on on-going basis
Problems: PCP joined ACO that doesn’t cover my town

• Options:
  – Change your PCP or
  – Apply to MassHealth for a waiver to join a Plan that does not cover your town & keep your PCP
    • Call customer service for the form
    • You must live in a service area next to one of the service areas covered by the Plan,
    • The travel time/distance to requested provider is not more than that to comparable provider in your service area, &
    • Medical benefit of care from provider in service area is outweighed by benefit of requested provider
    • 130 CMR 508.003(A)(2)
  – Should be more flexible if MH only has a mailing address for person who is homeless
13 ACO Partnership Plans cover 1 or more of 38 service areas in state

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Problems: Specialists & Primary Care Provider (PCP) not in same Plan

• Options:
  – Change your PCP but keep your specialists in a different Plan
    • E.g. the PCC Plan and 3 Primary Care ACOs will include all participating MassHealth hospitals and specialists for medical care and the MBHP network for behavioral health
  – Keep your PCP by joining your PCP’s MCO or ACO Partnership Plan and
    • Ask your specialists to try to join the MCO or ACO PP network, or
    • Ask your MCO or ACO PP to authorize out of network care/single case agreement with your specialists
  – Keep your PCP by joining PCC Plan or Primary Care ACO and
    • Ask your specialist to become a MassHealth provider or, for MBHP, join its network or single case agreement
Example

• I live in Brockton & have a child with a disability on MassHealth. His primary care doctor joined the BMC Signature Alliance ACO. He sees specialists at Boston Children’s Hospital.
  – The BMC Plans do not include Children’s in their hospital networks.
  – His doctor is only in BMC Signature Alliance ACO
11 Plan Options for Brockton Family

• BMC MCO & 2 BMC ACO PP
• 3 Primary Care ACOs: *C3, *Steward & *Partners
• PCC Plan*
• Wellforce (with Fallon) ACO PP
• 3 Tufts ACO PP with Atrius, BIDCO, & *Boston Children’s

*5 Plans that include Children’s Hospital. Will need to have a new PCP with open panel in one of these plans.
Problems: Out of Network Services

• After 30/90 day continuity of care period grounds to go out of network in MCO-led plan:
  – Provider Network is unable to provide an Enrollee with appropriate access to ACO Covered Services due to lack of a qualified Network Provider within reasonable travel time of the Enrollee’s residence
  Source: pp 139-140 of Model Contract

• MCO-led plan denial of out of network service subject to appeal and fair hearing
Other relief if no suitable managed care option

- If MassHealth agrees no managed care provider physically accessible to person with disability or
- No available & affordable transportation to managed care provider
- Then Medical fee for service & Partnership or MCO/ACO outside service area
- 130 CMR 508.003(B)
Changing plans (n/a PCC Plan)

• Plan selection period for 90 days from enrollment
  – For those enrolled on March 1—plan selection period ends May 31, 2018
• Fixed enrollment period for next 9 months
  – For those enrolled on March 1-fixed enrollment ends Feb 28, 2019
  – During fixed enrollment, can only change plans for cause per MassHealth rules; right to appeal if denied (130 CMR § 508.003(C)(3)
On line resources

• MassHealthChoices.com

• MassHealth Provider Directory
  https://masshealth.ehs.state.ma.us/providerdirectory/

• Info for Providers:
  https://www.mass.gov/payment-care-delivery-innovation-pcdi-for-providers

• Websites for each plan
  – Provider directory (MCO & ACO PP)
  – Evidence of Coverage/Summary of Benefits (MCO & ACO PP)
  – Info on Customer Service, Grievance & Appeal
Continuity of Care Resources

• MassHealth Guidance 2/21/18 (includes customer service info for each plan)
  https://www.mass.gov/service-details/continuity-of-care

• Pharmacy Facts 2018 (includes BIN ##s for new plans) https://www.mass.gov/service-details/pharmacy-facts-2018

• Provider alerts/bulletins sent out by MBHP and Beacon to providers in its Behavioral Health Network
Help In-Person or by Telephone

• MassHealth Customer Service: 800-841-2900
• Customer Service for each Plan
• MassHealth Enrollment Events thru May 2018
• Enrollment Assisters and Navigators
  https://my.mahealthconnector.org/enrollment-assisters
• Legal assistance
  https://www.masslegalservices.org/findlegalaid