



# Managed Care Overview

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Managed Care Overview





### **MCO Program**

- Medallion II- Virginia's Mandatory Medicaid Managed Care Program
- Began in 1996 in Tidewater and has expanded to 114 cities and counties across the state
- Medicaid clients are enrolled into contracted Managed Care Organizations (MCOs)
- As of March 2014, there are approximately 422,084 children enrolled in Managed Care which accounts for 90.2% of children in Medicaid.
- The Focus: to provide access to preventive and coordinated care.





### **MCO Program**

- An MCO is a managed care organization. It is a managed care health plan in which a group of doctor and other health care providers work together to give the members health care services
- Each person in an MCO has a primary care provider (PCP) that you select from their network
- The PCP is a doctor or other health provider who will manage your or your child's health care and refer(send) you to other providers when necessary
- All family members do not need to be enrolled with the same MCO or PCP. For example, multiple family members have difference doctors, and those doctors do not participate in the same MCO





### Comparison of Member Services

#### **Medicaid Fee-For-Service (FFS)**

- Medicaid Fee-For-Service (FFS)
- Medicaid ID Card
- Recipient helpline (not toll-free)
- No co-payments for under 21

# Managed Care Organization (MCO)

- MCO member ID card, handbook, and provider directory
- Toll-free member helpline
- Access to translation services
- 24-hour nurse advice line
- Access to assistance with medical issues (case management)
- Member outreach and health education materials
- Access to credentialed providers
- No co-payments





# Eligibility

- Mandatory enrollment for eligible Medicaid and FAMIS clients into a MCO
- The majority of Medicaid clients are eligible for MCO enrollment
- Medicaid clients who are excluded from MCO enrollment receive services through fee-for-service (regular) Medicaid. Those excluded from MCO enrollment:
  - Other primary insurance, including Medicare
  - Hospitalized at the time of enrollment (not for FAMIS)
  - Individuals in nursing facilities
  - Individuals participating in the Technology Assisted Waivers
  - Individuals institutionalized in a state facility
  - Home and Community Based waiver prior to MCO enrollment





### **New Covered Group**

- Foster care and adoption assistance children are currently being phased into Managed Care Organizations.
- This particular population has phased into MCOs in the Tidewater, Northern, Central and Charlottesville regions
- The following regions will transition into MCOs:
  - Halifax region will phase into Managed Care on April 1<sup>st</sup>.
  - The Roanoke/Alleghany region will phase into Managed Care on May 1<sup>st</sup>
  - Southwest region will phase into Managed Care on June 1<sup>st</sup>.





### Sample Enrollment Timeline

- 3/18- MCO Pre-assignment occurs
- 3/20-03/31- Pre-assignment letters mailed
- 3/31-4/16- Call MC Helpline to make selection
- 4/18- MCO Assignment Processing Occurs
- 4/20-4/30- MCOs mail ID card, handbook and provider directory
- 5/1- Managed care enrollment begins- must go to a doctor that is part of the MCO network. If you do not call by 4/16 to make your selection, you are automatically enrolled in the pre-assigned MCO listed in your letter.





# Changing MCOs

- 90 days after effective date to change for any reason
- After 90 days, change allowed for good cause when approved by DMAS.
- Foster Care and Adoption Assistance children can change their MCO at any time. They do not have to wait for open enrollment.
- Contact Managed Care Helpline at 1-800-643-2273 to change
- Effective date of change, if requested:
  - Requested before the 18<sup>th</sup> of month, effective 1<sup>st</sup> of the following month(if 18<sup>th</sup> is weekend/holiday, call last business day prior)
  - Example- call January 16<sup>th</sup>, change effective February 1<sup>st</sup>
  - Requested after 18th of month, enrollment delayed another month
  - Example- call January 20<sup>th</sup>, change effective March 1st





### **60-day Re-enrollment**

- Member loses Medicaid eligibility MCO enrollment ends
- Re-gains Medicaid eligibility within 60 days
- Automatically re-enrolled in previous MCO





### **ID Cards**

- You will receive two ID cards
  - Medicaid plastic ID card
  - MCO ID card (mailed by your MCO)
  - Take both cards with you every time you go to an appointment





### **Transportation**

- MCOs provide pre-approved transportation if you need to take your child to a physician or a health care facility and you do not have any other means of transportation
- Call your MCO at least 5 business days before the scheduled medical appointment to arrange for transportation
- Trips must be for a Medicaid covered service and must be medically necessary
  - Examples: doctor appointments, counseling, dialysis, dental appointment, etc.
- MCO transportation cannot make stops for shopping except if you need to go to a pharmacy to pick up a prescription that is being filled
- \* FAMIS individuals are not eligible for routine transportation services.





#### **MCO Carved Out Services**

Carved-out services are paid through the Medicaid Fee-For-Service Programs. The MCO provides transportation to these services (not to waiver services)

- Community Mental Health Rehabilitative Services
- Intensive In-Home Services for Children and Adolescents
- Therapeutic Day Treatment for Children and Adolescents
- Day Treatment/Partial Hospitalization
- Psychosocial Rehabilitation
- Crisis Intervention
- Intensive Community Treatment
- Crisis Stabilization Services
- Mental Health Support Services
- Case Management
- Mental Retardation Community Services
- Case Management services
- Treatment Foster Care Case Management

- Private Duty Nursing for HCBS waiver enrollees
- Substance Abuse Treatment Services
- Substance Abuse Crisis Intervention
- Substance Abuse Intensive Outpatient
- Substance Abuse Day Treatment
- Opioid Treatment
- Substance Abuse Case Management
- Dental (Smiles for Children)
- School Health Services
- Specialized Infant Formula for Children under age 21
- Health Department Lead Investigations
- Early Intervention Services
- Personal Care services





# Dental (Smiles For Children)

- Dental services are provided through Smiles For Children program
- If you need help finding a dentist or making a dental appointment, call 1-888-912-3456 with a Smiles For Children representative
- There are no costs for dental care services in the Smiles For Children program
- There is no special Smiles For Children dental card. You may use either your child's Commonwealth of Virginia plastic ID card or MCO member ID card
- More information available at <u>http://dmasva.dmas.virginia.gov/Content\_pgs/dnt-enrollees.aspx</u>





#### Member Services Contact Information

Anthem HealthKeepers Plus 1-800-901-0020

CoventryCares of Virginia 1-800-279-1878

• INTotal Health 1-855-323-5588

• Kaiser Permanente 1-855-249-5025

MajestaCare 1-866-996-9140

• Optima Family Care 1-800-881-2166

Virginia Premier Health Plan 1-800-727-7536





### Managed Care HelpLine

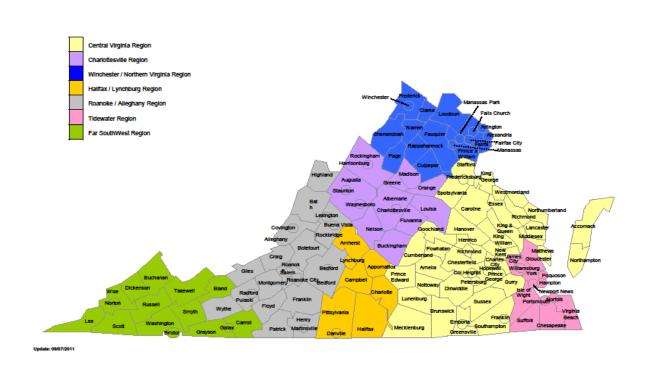
- Call Managed Care Helpline at 1-800-643-2273
  - To request information
  - To find out if providers participate in an MCO
  - To enroll in a health plan
  - To change a health plan





# Managed Care Regional Map

#### Managed Care Regions







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### Questions