

December 1, 2014

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).

Please note that the tracker has been reformatted as of November 2014. In order to improve readability of the tracker, we are only including new updates for each state in the monthly publication. 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(i)
 - 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.

For more information, please contact **Damon Terzaghi** (dterzaghi@nasuad.org) or **Erin White** (ewhite@nasuad.org).

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Overview

<p>Managed LTSS:</p>	<p>AZ, CA, DE, FL, GA, HI, ID, IL, KS, LA, MA, MI, MN, MO, NE, NV, NH, NJ, NM, NY, NC, OH, OR, 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, MS*, MT*, NV*, OR*, 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>Arkansas</p>	<p>Section 1915(k) Community First Choice Option</p> <p>As of November 2014, the state has officially submitted a Section 1915(k) Community First Choice Option SPA to CMS for approval. (Source: Kaiser Community First Choice website, 10/2014)</p>
<p>California</p>	<p>Managed LTSS Program</p> <p>On December 1, 2014, the state will shift Medi-Cal seniors and persons with disabilities in 28 rural counties into Medi-Cal managed care plans, as a continuation of an extended effort by the state to expand Medi-Cal managed care to rural areas. (Source: CaliforniaHealthline.org, 11/10/2014)</p> <p>State Demonstration to Integrate Care for Dual Eligible Individuals</p> <p>On November 14, 2014, the Department of Health Care Services announced: Cal MediConnect will no longer move forward in Alameda County; passive enrollment in Orange County will now begin no sooner than August 2015; and opt-in enrollment in Orange County will now begin no sooner than July 2015. (Source: CalDuals.org, 11/14/2014)</p> <p>On November 18, 2014, California Healthline reported Cal MediConnect has enrolled about 50,000 individuals to date. Across seven counties, 33% of eligible individuals have chosen to opt-out of the program; however, this number is skewed by the 40% opt-out rate in Los Angeles county. (California Healthline.org/Capitol Desk, 11/18/2014)</p> <p>On November 21, 2014, the Department of Health Care Services (DHCS) published an updated list of Expert Stakeholder Workgroup Dates and Locations in connection with the Medi-Cal Bridge to Reform §1115 waiver renewal. The state also recently published an updated list of Expert Stakeholder Workgroup Participants and a Stakeholder Input Summary Log. The Bridge to Reform §1115 Waiver expires October 31, 2015; DHCS intends to submit a waiver renewal to CMS in early 2015. The expert stakeholder workgroups will provide feedback on the following waiver renewal concepts: Housing/Shelter Resources; MCO/Provider Incentives Resources; DSRIP 2.0 Resources; Workforce Resources; and Safety Net Financing Resources. (Source: State DHCS Waiver Renewal website) Expert Stakeholder Workgroup Dates and Locations (Updated 11/21/2014) Stakeholder Input Summary Log (11/17/2014) Expert Stakeholder Workgroup Participants (Updated 11/14/2014)</p>

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Connecticut	<p>Section 1915(k) Community First Choice Option</p> <p>The state is planning to participate in the Community First Choice Option in FY 2015. (Source: Kaiser Community First Choice website, 10/2014)</p>
Idaho	<p>Behavioral Health Managed Care</p> <p>On October 31, 2014, the Idaho Statesman reported that the state’s shift to Medicaid managed care has resulted in behavioral health service cuts for beneficiaries, including cuts to community-based mental health and rehabilitation services. Since September 2013, when Idaho Medicaid implemented the Idaho Behavioral Health Plan (IBHP) and selected Optum to administer the plan using a managed care approach, Optum has cut community-based rehabilitation services by ten percent to focus on the use of more evidence-based practices. The IBHP provides services for children with serious emotional disturbance and adults with serious mental illness or serious and persistent mental illness, as well as any adults or children who manifest symptoms indicative of behavioral health issues. (Idaho Behavioral Health Plan website; Idaho Statesman, 10/31/2014)</p>
Louisiana	<p>Managed LTSS Program</p> <p>On November 19, 2014, the Louisiana Department of Health and Hospitals (DHH) announced it will fully integrate specialized behavioral health services for Medicaid populations into Bayou Health effective December 1, 2015. Behavioral health services are currently provided by the Louisiana Behavioral Health Partnership (LBHP). The LBHP is also responsible for coordinating behavioral health services for certain non-Medicaid populations; DHH will work with stakeholders to develop a smaller scope management arrangement for these services.</p> <p>Additionally, the state is planning to implement MLTSS for individuals with age-related or developmental disabilities. Individuals who will receive supports and service through the planned MLTSS will also receive behavioral health services through their network of managed care providers and coordinators. (Source: Louisiana DHH website, 11/19/2014)</p>
Michigan	<p>State Demonstration to Integrate Care for Dual Eligible Individuals</p> <p>UnitedHealthcare Group in Michigan will close its Medicare Advantage dual special needs plan on January 1, 2015; UnitedHealthcare Group has also decided to withdraw from participating in a Medicaid-Medicare dual eligible pilot program in metro Detroit. (Source: HMA Weekly Roundup, 11/19/2014)</p> <p>On November 26, 2014, CMS published updated implementation dates for</p>

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Michigan	<p>Michigan’s duals demonstration. Opt-in enrollment is now scheduled to begin on March 1, 2015 in the Upper Peninsula and Southwest Michigan and May 1, 2015 in Macomb and Wayne Counties; passive enrollment is now scheduled to begin on July 1, 2015 in Macomb and Wayne Counties. (Source: CMS Michigan Financial Alignment Demonstration webpage, 11/26/2014)</p>
Minnesota	<p>Section 1915(k) Community First Choice Option</p> <p>As of November 2014, the state has officially submitted a Section 1915(k) Community First Choice Option SPA to CMS for approval. (Source: Kaiser Community First Choice website, 10/2014)</p>
Montana	<p>Section 1915(k) Community First Choice Option</p> <p>As of November 2014, CMS has approved the state’s Section 1915(k) Community First Choice Option SPA. (Source: Kaiser Community First Choice website, 10/2014)</p>
New Hampshire	<p>Managed LTSS Program</p> <p>On November 26, 2014, New Hampshire published an updated timeline for Step 2 of the state’s transition to managed care. Step 2 of the transition includes mandatory enrollment for medical care with one of the state’s MCOs for the following Medicaid recipients: children in foster care; Medicare dual eligibles; home care for children with severe disabilities; children with special health care needs enrolled in Special Medical Services/Partners in Health; and children with SSI. Step 2 also includes integration of LTSS such as Choices for Independence Waiver services and nursing facility services into the Medicaid Care Management program. According to the new timeline, stakeholder input on the Step 2 design considerations will continue through December 2014. Further, on July 1, 2015, all Step 2 mandatory populations will be required to select a health plan for medical services, Choices for Independence Waiver services and nursing facility stays. On September 1, 2015, health plan coverage will begin for medical services, Choices for Independence Waiver services, and nursing facility stays. (Source: New Hampshire DHHS Step 2 Update Slide Deck, 11/26/2014; State DHHS website) State DHHS Stakeholder Engagement Summary for Step 2 of the Medicaid Care Management Program (11/5/2014)</p>
New Jersey	<p>Managed LTSS Program</p> <p>The New Jersey Department of Human Services, Division of Medical Assistance and Health Services (DMAHS) has uploaded a copy of the July 1, 2014 Medicaid Managed Care Contract to its website, which incorporates</p>

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New Jersey	<p>the contract provisions for the state’s MLTSS program. (Source: HMA Weekly Roundup, 11/5/2014) Managed Care Contract (7/1/2014)</p>
New York	<p>§1115 Demonstration Waiver</p> <p>The New York Community Trust awarded a \$75,000 grant to the New York Integrated Network for Persons with Intellectual and Developmental Disabilities (NYIN). NYIN is a Brooklyn-based nonprofit planning a managed care network for Medicaid beneficiaries with I/DD; NYIN will use the grant to create a DD integrated support and care coordination organization, a network of agencies providing a full range of coordinated health and social services under a risk-based capitation arrangement. (Source: HMA Weekly Roundup, 11/5/2014)</p> <p>The New York State Department of Health (DOH) posted DSRIP Vital Access Provider (VAP) Exception Appeals for public review and comment; comments may be submitted via email through December 3, 2014. The DOH is currently reviewing the VAP Exceptions and making recommendations for inclusion in the DSRIP safety net process. Approval of these exception appeals is contingent upon obtaining approval from CMS. (Source: State DSRIP Program website)</p> <p>State Demonstration to Integrate Care for Dual Eligible Individuals</p> <p>As of November 19, 2014, New York has completed contracts with 22 managed long-term care plans to participate in the Fully Integrated Duals Advantage demonstration program (FIDA). A total of \$14.6 billion in contracts was awarded, covering the period from October 2014 through December 2017. Large contracts were awarded to VNS Choice (\$2.37 billion); GuildNet (\$1.8 billion); Elderplan (\$1.4 billion); and Managed Health (\$1.4 billion). (Source: HMA Weekly Roundup, 11/19/2014)</p> <p>Section 1915(k) Community First Choice Option</p> <p>As of November 2014, the state has officially submitted a Section 1915(k) Community First Choice Option SPA to CMS for approval. (Source: Kaiser Community First Choice website, 10/2014)</p>
Texas	<p>Section 1915(k) Community First Choice Option</p> <p>As of November 2014, the state has officially submitted a Section 1915(k) Community First Choice Option SPA to CMS for approval. (Source: Kaiser Community First Choice website, 10/2014)</p>

STATE TRACKER FOR DUALS DEMONSTRATION
(Updated as of: 12/1/2014)

	States	Proposed Financing Model	Submitted to CMS	Status	Target Implementation Date ¹
1	Arizona	Capitated	5/31/2012	Withdrawn	1/2014
2	California	Capitated	5/31/2012	MOU Signed 3/27/2013	4/2014 (opt-in); 8/2014, 10/2014, 1/2015, 7/2015 (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	Withdrawn	1/2014
6	Idaho	Capitated	5/2012	Withdrawn	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	Withdrawn	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)
11	Minnesota	Admin. Alignment Capitated	4/26/2012	Admin. Alignment MOU Signed (9/12/2013) Withdrawn Capit.	9/2013 (opt-in) 12/2012

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
12	Missouri	Managed FFS	5/31/2012	Withdrawn	10/2012
13	New Mexico	Capitated	5/31/2012	Withdrawn	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	Withdrawn	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	Withdrawn	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	Withdrawn	1/2014
22	Texas	Capitated	5/2012	MOU Signed	3/2015 (opt-in); 4/2015 (passive)
23	Vermont	Capitated	5/10/2012	Withdrawn	Jan 2014
24	Virginia	Capitated	5/31/2012	MOU Signed 5/21/2013	5/2014 (opt-in); 8/2014 (passive)
25	Washington	Both	4/26/2012	2 MOUs Signed MFFS (10/25/2012) Capit. (11/25/2013)	MFFS (7/2013) Capit. (7/2015)
26	Wisconsin	Both	4/26/2012	Withdrawn	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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