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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, 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*, MI*, MN, MS*, MT*, NV*, OR*, SC, TX, 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

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<p>Alabama</p>	<p>Managed LTSS Program</p> <p>On May 28, 2015, the Alabama House passed a major Medicaid reform bill to establish Integrated Care Networks (ICN) to contract with Medicaid to administer long-term care under a capitated system. The bill also allows the current ratio of nursing homes to home-based care to rise from 75/25 to 50/50. The reform is estimated to save the state \$1.5 billion through the next decade, assuming 3 percent annual growth in the state Medicaid program. The bill will now head to the governor for signing. (Source: Miami Herald, 5/28/2015; yellowhammernews.com, 5/20/2015)</p>
<p>California</p>	<p>Managed LTSS Program</p> <p>On May 11, 2015, California Healthline reported that California is negotiating with CMS regarding the state’s 1115 Medicaid Waiver renewal; the current waiver expires October 1, 2015. The state’s proposed changes include expanding the current DSRIP program, as well as making significant payment reforms to its managed care plans. Under the proposed waiver, managed care plans and providers would be able to form partnerships similar to accountable care organizations (ACOs) and receive shared savings incentives by meeting quality and cost thresholds. Additionally, managed care plans could participate in a pay-for-performance program. Finally, the proposal encourages managed care plans to engage in regional and local partnerships to assist the state’s highest needs patients. (Source: California HealthLine.org/Capitol Desk, 5/11/2015)</p>
<p>Georgia</p>	<p>Medicaid §1115 Demonstration Waiver</p> <p>On May 7, 2015, Kaiser Health News reported that Georgia officials are considering utilizing a §1115 waiver to increase the state’s Medicaid spending flexibility, in order to then look at different ways to provide and manage health care coverage for more uninsured residents. (Source: KaiserHealthNews, 5/7/2015; GeorgiaHealthNews, 5/14/2015)</p>
<p>Illinois</p>	<p>Managed LTSS Program and State Demonstration to Integrate Care for Dual Eligible Individuals</p> <p>As of April 2015, roughly 2 million individuals are enrolled in managed care programs, up from 75,000 in April 2014. The Family Health Program serves 1.8 million individuals; 120,000 non-dual eligible seniors or disabled are enrolled in the state’s Integrated Care Program (ICP); and 58,000 dual eligibles are enrolled in the state’s Medicare-Medicaid Alignment Initiative (MMAI). (Source: HMA Weekly Roundup, 5/13/2015)</p>

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<p>Iowa</p>	<p>Managed LTSS Program</p> <p>On May 8, 2015, the Iowa State Senate passed a budget placing limits on transitions to managed care. If adopted, the budget will cap profits for managed care contractors; create a commission to oversee transitions to managed care; and ban reductions in provider rates. The budget will now move to the Iowa House for debate. (Source: AJMC, 5/8/2015)</p>
<p>Louisiana</p>	<p>Managed LTSS Program</p> <p>On May 6, 2015, the New Orleans Advocate reported that an April 2015 Louisiana Legislative Auditor found the state’s wait time for HCBS (ranging from 2.5 to 10 years) to be significantly longer than the national average (which ranges from 10 to 13 months). The audit was published as Louisiana is moving toward privatizing much of its long-term care services. (Source: The New Orleans Advocate, 5/6/2015) Louisiana Legislative Auditor Informational Report (4/29/2015)</p>
<p>Maryland</p>	<p>State Demonstration to Integrate Care for Dual Eligible Individuals</p> <p>On May 15, 2015, the State of Maryland issued a Request for Proposals for the development of a Medicaid Integrated Delivery Network for Dually-Eligible Individuals. The deadline for submissions is June 18, 2015. (Source: dhmh.maryland.gov, 5/15/2015)</p>
<p>Michigan</p>	<p>State Demonstration to Integrate Care for Dual Eligible Individuals</p> <p>On May 28, 2015, Atlantic Information Services, Inc. reported that enrollment in Michigan’s duals demonstration has grown to 9,369 individuals. This is in contrast to other states that have seen losses in duals enrollment. (Source: AIS Health, 5/28/2015)</p>
<p>New Jersey</p>	<p>Managed LTSS Program</p> <p>On May 5, 2015, New Jersey Acting DHS Commissioner, Elizabeth Connolly, testified before the Senate Budget and Appropriations Committee that an estimated 21,000 New Jersey residents will receive managed LTSS in 2016, a 64 percent increase from 2015 enrollment. (Source: NJ.gov, 5/5/2015)</p>
<p>New York</p>	<p>State Demonstration to Integrate Care for Dual Eligible Individuals</p> <p>As of May 1, 2015, New York’s FIDA program enrollment is 7,215; roughly 45,000 individuals have opted out of the program. (Source: HMA Roundup, 5/20/2015)</p> <p>On April 28, 2015, New York DOH announced significant adjustments to</p>

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<p>New York</p>	<p>Fully Integrated Duals Advantage (FIDA) and Managed Long Term Care (MLTC) payments. DOH estimates a 4.5 to 5.6 percent increase in FIDA rates to bring them in line with MLTC rates. DOH is coordinating with CMS to implement these adjustments for FY 2015-2016. (Source: Leading Age New York, 5/2015)</p> <p>Managed LTSS Program</p> <p>On April 24, 2015, the state released an updated timeline for its adult and children’s behavioral health Medicaid managed care transition. The adult behavioral health transition will begin in New York City on October 1, 2015, with passive enrollment for individuals eligible to enroll in a Health and Recovery Plan (HARP). HCBS will become available as part of the HARP benefit in January 2016. (Source: HMA Roundup, 4/29/2015) Behavioral Health Managed Care Transition Timeline (Updated 4/24/2015)</p>
<p>Pennsylvania</p>	<p>Managed LTSS Program</p> <p>On June 1, 2015, Pennsylvania DHS and Pennsylvania DOA released a joint MLTSS Discussion Document detailing the state’s plan to move into MLTSS over a 3-year period. The proposed initiative aims to promote better access to care and improve service coordination, enabling more individuals to remain in their homes. The initiative will impact an estimated 130,000 Pennsylvania residents. Initial public comments are due by July 15, 2015. (Source: State DHS website, 6/1/2015) MLTSS Discussion Document (6/2015)</p>
<p>Texas</p>	<p>State Demonstration to Integrate Care for Dual Eligible Individuals</p> <p>On May 28, 2015, Atlantic Information Services, Inc. reported that enrollment in Texas’ duals demonstration has reached 27,616 participants, primarily as a result of the state’s passive enrollment program. (Source: AIS Health, 5/28/2015)</p>
<p>Virginia</p>	<p>State Demonstration to Integrate Care for Dual Eligible Individuals</p> <p>On May 17, 2015, the Daily Press Media Group reported that Virginia’s Commonwealth Coordinated Care (CCC) program, a pilot program to provide managed care for dual eligible Virginia residents, has experienced a larger than expected drop in enrollments, threatening the program’s projected \$44 million in savings. More than 40 percent of the 66,000 residents eligible for CCC have opted out of the program. Virginia health officials expect the program to become mandatory in the next few years. (Source: dailypress.com, 5/17/2015)</p>

STATE TRACKER FOR DUALS DEMONSTRATION
(Updated as of: 6/1/2015)

	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, 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	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	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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