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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).

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*, MI*, MS*, MT*, NV*, OR*, 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

State	State Updates
<p>California</p>	<p>State Demonstration to Integrate Care for Dual Eligible Individuals</p> <p>On February 20, 2015, California Healthline reported that the state is weeks away from completing the first draft of its Bridge to Reform §1115 waiver renewal proposal. According to the director of California’s Department of Health Care Services, the proposed waiver will center on payment reforms; and a final draft form should be available in the next few weeks for distribution to stakeholders and the public for discussion. (Source: CaliforniaHealthline.org/Capitol Desk, 2/20/2015)</p>
<p>Iowa</p>	<p>Medicaid Managed Care</p> <p>On February 16, 2015, the Iowa Department of Human Services posted the Iowa High Quality Healthcare Initiative Request for Proposals (RFP) on its website, inviting health plans to bid to manage the state’s Medicaid managed care program. DHS intends to award two to four statewide managed care contracts in order to expand Medicaid managed care enrollment to at least 550,000 individuals, beginning in January 2016.</p> <p>Contracts awarded under the RFP will cover nearly all Medicaid beneficiaries in Iowa, including LTSS recipients in nursing facilities and HCBS settings; dual eligibles; foster care populations; and the Iowa Health and Wellness Program expansion population. Individuals covered by the Health Insurance Premium Payment program; undocumented immigrants receiving temporary coverage; and voluntary PACE enrollees will be excluded from enrollment. Native Americans will have the option for voluntary enrollment.</p> <p>Proposals are due on May 8; a notice of intent to award is scheduled for July 31; and the go-live date is scheduled for January 1, 2016. (Source: American Journal of Managed Care, 2/17/2015; Iowa Department of Administrative Services website) Iowa High Quality Healthcare Initiative RFP (2/16/2015)</p>
<p>Louisiana</p>	<p>Bayou Health Reprourement</p> <p>On January 22, 2015, CMS approved Louisiana’s State Plan Amendment (effective July 20, 2014) to make non-excluded individuals receiving hospice services mandatory participants in Bayou Health and individuals receiving HCBS waivers voluntary participants in Bayou Health. (Source: Medicaid.gov)</p>

State	State Updates
Louisiana	<u>Approved State Plan Amendment</u> (Effective 7/20/2014)
Michigan	<p>State Demonstration to Integrate Care for Dual Eligible Individuals</p> <p>In February 2015, enrollment began for Phase 1 of MI Health Link, Michigan’s duals demonstration project; and Phase 1 services began on March 1, 2015. Passive enrollment in Phase 1 will be effective May 1, 2015. Enrollment for Phase 2 of the project will begin in April, with services starting on May 1, 2015. Phase 1 includes the entire Upper Peninsula and eight counties in southwest Michigan, including Barry, Berrien, Branch, Calhoun, Cass, Kalamazoo, St. Joseph, and Van Buren. Phase 2 includes Macomb and Wayne counties. (Source: <u>Michigan DCH website</u>)</p>
Minnesota	<p>State Demonstration to Integrate Care for Dual Eligible Individuals</p> <p>On February 25, 2015, CMS posted a Memorandum of Understanding Addendum for Minnesota’s duals demonstration. (Source: <u>CMS website</u>) <u>Memorandum of Understanding Addendum</u> (1/21/2015)</p>
New Hampshire	<p>Managed LTSS Program</p> <p>On February 13, 2015, the Concord Monitor reported on the updated timeline for Step 2 of New Hampshire’s transition to managed care, as presented during the February 12 meeting of the Governor’s Commission on Medicaid Care Management. Under the updated timeline, mandatory enrollment for individuals currently eligible to opt out of managed care will begin on July 1, 2015; and medical coverage for most populations will begin in September 2015. However, managed care coverage for people receiving Choices for Independence HCBS waiver services is delayed until January 1, 2016; and managed care coverage for nursing facilities is delayed until July 1, 2016. The state has not yet determined when coverage will begin for individuals with DD and acquired brain disorders, as well as individuals who require in-home services and supports. (Source: <u>Concord Monitor</u>, 2/13/2015)</p>
New York	<p>Managed LTSS Program</p> <p>As of February 2015, the behavioral health carve-in has been delayed several times; however, CMS has committed to work with the state to achieve waiver approval by the end of March. Outstanding issues include compliance with the HCBS settings rule; conflict-free care management; and payment rates for services, benefits, and premiums. Implementation is scheduled for July 2015 in New York City and approximately six months later throughout the rest of the state. (Source: <u>HMA Weekly Roundup</u>, 2/18/2015)</p>

State	State Updates
<p>North Carolina</p>	<p>Medicaid Reform</p> <p>The February 9, 2015 meeting of the North Carolina legislative Program Evaluation Oversight Committee did not include a vote on the Medicaid reform bill to establish an independent board within the Department of Health and Human Services to oversee the state’s Medicaid program. The proposal was omitted from the meeting agenda; and the panel is awaiting additional information. (Source: HMA Weekly Roundup, 2/11/2015)</p>
<p>Oklahoma</p>	<p>Health Homes</p> <p>On February 10, 2015, CMS approved Oklahoma’s first Health Home State Plan Amendment (effective January 1, 2015) to implement Health Homes statewide for individuals with one or more serious and persistent mental health conditions as defined by the state as a serious emotional disturbance (SED) in the population under the age of 18 years. (Source: Medicaid.gov) Approved Health Homes State Plan Amendment (Effective 1/1/2015)</p>
<p>Tennessee</p>	<p>Medicaid Expansion</p> <p>On February 4, 2015, the Hill reported that Governor Bill Haslam’s Insure Tennessee plan - a pilot program to expand Medicaid - died in the state Senate after it was voted down by the Health and Welfare Committee. (Source: Thehill.com)</p>
<p>West Virginia</p>	<p>Health Homes</p> <p>On January 27, 2015, CMS approved West Virginia’s Health Home State Plan Amendment (effective July 1, 2014) to implement Health Homes in Wayne, Cabell, Putnam, Kanawha, Raleigh, and Mercer Counties for individuals with Bipolar Disorder and at risk for developing Hepatitis B and/or C. (Source: Medicaid.gov) Approved State Plan Amendment (Effective 7/1/2014)</p>
<p>Wisconsin</p>	<p>Managed LTSS Program</p> <p>Governor Scott Walker’s budget proposal includes a plan to expand Wisconsin’s Family Care program to incorporate acute and primary care health services and community-based long-term supports by Jan. 1, 2017, at which point all other long-term care programs would be discontinued. The IRIS program, which benefits 11,000 adults with LTC needs, would be among the state’s discontinued LTC programs. Additionally, Walker has proposed cutting \$14 million in funding to the Family Care program over the next two years. Changes to the Family Care program and cuts to the personal care program could save the state \$33 million over the next two years. (Source: Twincities.com, 3/1/2015)</p>

STATE TRACKER FOR DUALS DEMONSTRATION
(Updated as of: 3/1/2015)

	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)
11	Minnesota	Admin. Alignment Capitated	4/26/2012	Admin. Alignment MOU Signed (9/12/2013) Withdrew 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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