



MCE/AAA/ICM Roundtable Discussions

May 2023



Agenda



**WELCOME AND
INTRODUCTION**



**VISION FOR
PATHWAYS/
MLTSS BASICS**



STRETCH BREAK



Q&A



**PURPOSE AND
STRUCTURE OF
TODAY'S EVENT**



**MCE
INTRODUCTION**



**ROUNDTABLE
DISCUSSIONS**



Welcome

Indiana Pathways for Aging



Purpose and Structure of Roundtables

Purpose

To familiarize AAAs/ICMs with Indiana Pathways for Aging

To provide an opportunity for AAAs/ICMs and MCEs to meet face-to-face

For AAAs/ICMs and MCEs to share information about their organization's work

To exchange contact information

Structure

- AAA/ICM: stay where you are - MCEs will come to you!
- Each MCE will host a discussion at your table for 20 minutes.
- This is your time to share information, ask questions and learn about each entity's work.
- The MCE representatives will rotate tables until each MCE has visited with each group.
- Please try to keep voices down as much as possible to help with the noise level in the room.





Vision for Pathways and MLTSS Basics

Indiana Pathways for Aging



Program Quality Goals

- ❖ **Person-Centered Services and Supports** – Develop service plans and deliver services in a manner that is person-centered, member-driven, holistic, involves caregivers, and addresses SDOH.
- ❖ **Ensuring Smooth Transitions** – Ensure continuity of care and seamless experiences for members as they transition into the Pathways program or among providers, settings, or coverage types.
- ❖ **Access to Services (Member Choice)** – Assure timely access to appropriate services and supports to enable members to live in their setting of choice and promote their well-being and quality of life.

LTSS Reform Objectives



75% of new LTSS members will live and receive services in a home and community-based setting



50% of LTSS spend will be on home- and community-based services

Who will be enrolled in the Pathways program?

- Hoosiers 60 or older and eligible for Medicaid (exclusions apply)
- Older Hoosiers who also receive Medicare and live in a nursing home, assisted living, or in their own homes



Member Support



Enrollment Services Vendor: To help members choose a managed care entity

Care Coordinator: To support member health care needs

Service Coordinator: To support member waiver needs

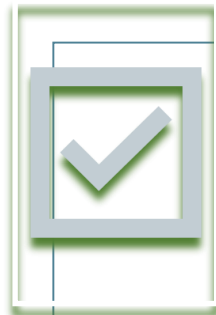
Care & Service Coordinators: Will assist with navigating both Medicaid and Medicare benefits

Ombudsman: To contact as an advocate for members and/or family members who may have a concern or complaint

MCE Care Coordination/Service Coordination



Will be responsible for coordinating full suite of member benefits – both Medicaid and Medicare



Provide a designated Service Coordinator (point of contact) for enrollees getting LTSS



Perform regular assessments, LTSS service planning, and medical care planning



Will have mandatory caseload sizes and requirements surrounding frequency of visits



Communicate regularly with member and providers



Will be required to have 50% of enrollees served by existing waiver care management entities

Service coordinators will offer the full range of HCBS services available based on preferences and needs

- *Adult Day Service*
- *Attendant Care*
- *Informal Caregiver Coaching and Behavioral Management*
- *Home and Community Assistance*
- *Respite Care*
- *Community Home Share Assisted Living*
- *Community Transition*
- *Home Delivered Meals*
- *Home Modification Assessment*
- *Home Modifications*
- *Integrated Health Care coordination*
- *Nutritional Supplements*
- *Participant Directed Attendant Care*
- *Personal Emergency Response System*
- *Pest Control*
- *Specialized Medical Equipment and Supplies*
- *Structured Family Caregiving*
- *Transportation*
- *Vehicle Modifications*



Indiana Pathways Additional Services

- Members will be given help to self-direct their services if they want.
- Members and caregivers will have access to a 24/7 nurse advice line.
- Access to a member services help line to understanding their benefits and assistance finding providers.





Compliance Team

The State maintains a formal compliance program to regulate internal processes and external partners to ensure consistency with state and federal requirements.

Source documents:

- ✓ **Federal and State Laws**
- ✓ **Scope of work for Indiana Pathways for Aging**
- ✓ **Bulletins**
- ✓ **Banners**
- ✓ **Providers Modules**
- ✓ **MCE Policy & Procedures Manual**
- ✓ **Subject Matter Experts**



MCE Introduction



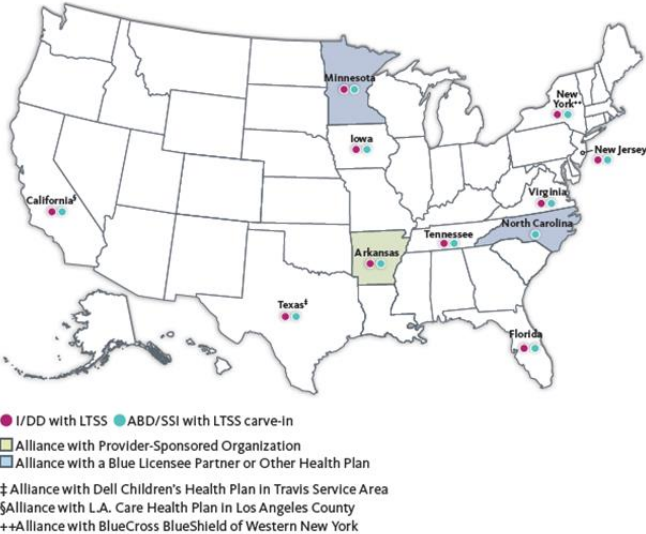
Indiana Pathways for Aging

Our commitment to you

- We will honor your experience.
- We will streamline and automate processes.
- We will foster open and ongoing communication.



Experience locally and nationally supporting older adults



Anthem Blue Cross and Blue Shield (Anthem) affiliates coordinate care for more than 11.1 million Medicaid member in 27 markets.

There are 416,000 members with managed long-term services and supports (MLTSS) in 10 states.

- Anthem has 24 years of experience, including extensive experience implementing MLTSS delivery models.
- 87% of the more than 416,000 individuals receiving MLTSS who live in a home- and community-based setting.
- More than 5,000 affiliates' associates are trained in person-centered thinking, including 19 person-centered trainers and mentors.

MORE THAN
78
YEARS
Serving Hoosiers

MORE THAN
15
YEARS
Serving
Indiana Medicaid

MORE THAN
61,000
HCC MEMBERS
Currently served

Valued partnerships with community organizations

- Anthem affiliates proudly partner with Area Agencies on Aging (AAA) and Independent Case Management (ICM) agencies to support older adults in MLTSS programs.
- Partnerships are local and are positioned to support the goals of individuals living in their community and improving outcomes in MLTSS.
- Anthem is seeking partnerships with AAAs and ICMs who have demonstrated experience in providing quality driven supports for older adults.

Anthem's vision for service coordination and care coordination in Indiana

MEMBER CHOICE AND CONTROL



MLTSS Provider Partnerships

Commitment to MLTSS Quality

Suite of Caregiver Supports

Technology First

Seamless Transitions and Continuity of Care

Comprehensive Training

Innovative Solutions

Person-centered Services and Supports

Specialized MLTSS Staffing

Contracting with Anthem is easy

Getting started:

- Anthem's contracting team will contact you to assess your interest in partnering with Anthem in the Pathways program.
- You will have an assigned contact to assist with any questions throughout the process.

Things to know:

- We will share the process for applying to subcontract with Anthem to provide service coordination in the Pathways program. Examples of documentation that may be reviewed during this process include policies and procedures, training materials, person-centered thinking, and quality.

Resources:

- Anthem contracting contact — Indiana Pathways for Aging
 - Contact name: Dawn Butler, Director GBD Special Programs
 - Phone: 317-739-2430
 - Email: INVendorManagement@anthem.com





Anthem Blue Cross and Blue Shield is the trade name of Anthem Insurance Companies, Inc., independent licensee of the Blue Cross and Blue Shield Association. Anthem is a registered trademark of Anthem Insurance Companies, Inc. Providers who are contracted with Anthem Blue Cross and Blue Shield to serve Hoosier Healthwise, Healthy Indiana Plan and Hoosier Care Connect through an accountable care organization (ACO), participating medical group (PMG) or Independent Physician Association (IPA) are to follow guidelines and practices of the group. This includes but is not limited to authorization, covered benefits and services, and claims submittal. If you have questions, please contact your group administrator or your Anthem network representative.

INBCBS-CD-025606-23 May 2023

Humana

Healthy Horizons[®]
in Indiana

Indiana Pathways for Aging Program

AAA / ICM Roundtables

May 2023

Humana[®]

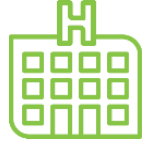


Humana Brings Over 60 Years of Experience Improving Health Outcomes.

Humana companies and their various businesses serve more than **17 million** members across the country.



Founded in 1961 as a **nursing home provider**



Evolved and grew into one of the nation's largest **Medicare providers**



Expanded into **managed care** leveraging our provider experiences



Continuously adapts to the needs of the **members and communities we serve**

1961



2023

Humana is honored to serve Hoosiers statewide for over 40 years and counting.



Today, Humana covers **more than 350,000 lives in Indiana** across all lines of business, including some of your current patients and residents eligible for both Medicare and Medicaid.



Humana has forged, and continues to build, innovative local community partnerships in Indiana focused on addressing priorities, such as **health equity and workforce development**.



Humana **employs 2,600 Indiana-based associates** with a deep understanding of the state's needs and long-standing relationships with Indiana providers and community-based organizations.



Humana works closely with **service coordination entities** in other Medicaid markets, giving us the experience to partner with you to develop an operational plan that makes it easy to get members the care they need.

Together, we will empower Hoosiers to age in place by maintaining independence and community engagement.

We are **committed** to developing, **in partnership with you**, service plans which are:

Inclusive



Person Centered

Sustainable and
Efficient



Effective and
Accountable

Culturally Competent



Coordinated and
Transparent

We will build upon the **strength of your experience** with members, providers, and the community. With our additional operational support, we will meet the new Pathways requirements together.

Our path to partnership begins with listening and learning from you today.

MCE ALIGNMENT
MCEs will collaborate to streamline the operational model where possible.


MCE + AAA/ICM ALIGNMENT
MCEs will work to collaborate with AAAs / ICMs on an operating model which makes it easy to get members the care they need.

AAA ROAD SHOW
Humana will listen and learn about current practices to inform operating model discussions.

PARTNERSHIP
Humana will contract with AAAs/ICMs to provide collaborative, person-centered supports to members allowing Hoosiers to live their best life.



We have a team dedicated to YOU to ensure mutual success and high-quality membership support.



Service coordination (SC) agencies are essential in delivering person-centered care to Hoosiers in their communities.



COLLABORATIVE CONTRACTING

- Humana will collaborate with MCEs and AAAs / ICMs to ensure contracting supports an operational model which supports **person-centered care coordination**.



DEDICATED LEADER

- Humana's dedicated team will provide **strategic leadership** and oversight.
- Humana's team will work to optimize the relationship to **improve member outcomes** and **drive innovation**.



TRAINING & SUPPORT

- Humana's training and support will promote **consistency** in delivery of service coordination by AAA / ICM and Humana Care and Service Coordinators.
- **Humana will provide ongoing person-centered collaboration** with you and other MCEs to align on best practices to ensure the best possible member outcomes.

Humana®



Ross Westreich
Plan President



Terry Williams
AVP,
Care and
Service
Coordination



Brandy Bailey
Compliance
Leader



Bryan Duke
Contracting
Leader

Introduction to Molina Healthcare of Indiana



Molina Healthcare of Indiana

Molina Company History



Molina was founded in 1980 in Long Beach, California by Dr. David Molina. Dr. Molina was an ER Physician who noticed that a fair number of indigent patients used the ER to treat conditions that could be more commonly treated in a physician's office.

To ensure this population received quality preventative care, he opened primary care clinics where the most vulnerable could receive the care they needed to stay healthy and live quality lives.

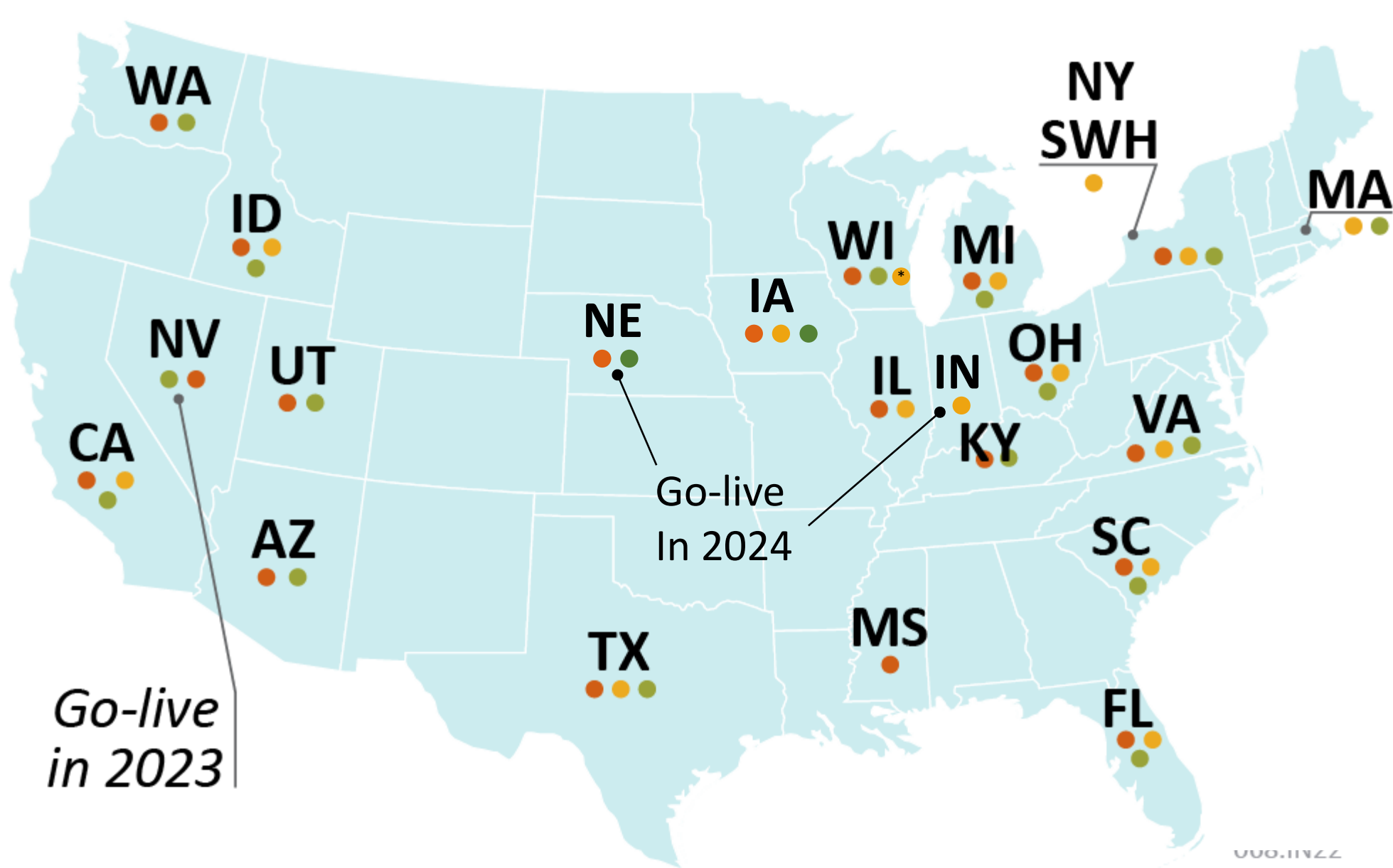
Fast forward 43 years, Molina Health Plans bring this mission to 22 states that serve over 5 million members across the Medicaid, Medicare, and Marketplace lines of business.

Which brings us to IndianaWe look forward to years of serving both you and our members!

LTSS Expertise



We currently serve more than 416,000 LTSS members across 12 markets. We have experience in on-the-ground engagement with providers, especially HCBS providers. From that experience, we know the most important thing we can do is make this transition as smooth as possible.



Molina National Reach

Serving
416k+ LTSS
members

- Medicaid Health Plans
- LTSS
- D-SNP

Our Partnership Experience with AAAs / ICMs

- Service Coordination Agreements with AAAs in Ohio and Massachusetts
- Provider agreements in several states with AAAs for HCBS
- Agreements with AAAs in multiple states to expand evidence-based programs
- Supporting AAAs with business acumen planning
- Collaborating with AAA and other service coordination entity leaders in Indiana for almost two years

Molina's Vision for Service and Care Coordination

What We Have Heard



- Challenges acquiring data and the right tools to do the job you need
- Concerns that differences in MCE processes and systems will be administratively burdensome
- Lack of visibility to members' non-LTSS needs and changes in condition
- Curiosity about effectively coordinating LTSS and non-LTSS with MCE care coordinators while avoiding duplication and complexity for members

Our Commitment



- Collaborate with AAAs and other MCEs to standardize processes where possible
- Meet members' needs through Person-Centered Thinking and Planning
- Establish a collaboration model to implement improvements based on regular reviews service outcomes, process efficiency, and effectiveness
- Demonstrate value through transparent reporting including member engagement, timely access to services, LTSS quality measures, and more

We want to partner with you!

In alignment with the Pathways Program, we are looking for meaningful and interactive partnerships that represent a high commitment to quality and reporting.

Lorie Palumbo, Indiana Contracting Lead – 614-273-9636

mhnewmarketsdevcontracting@molinahealthcare.com

Molina Direct Provider Contracting Line – 877-902-1207

Thank You





UnitedHealthcare Community Plan of Indiana

AAA/ICM Provider Roundtable

May 2023

United
Healthcare®

History of UnitedHealthcare

- UHC has delivered Medicaid services for 48 years nationally.
- In 1975, the first UHC program was implemented in Indiana.
- UnitedHealthcare refers to the UHC Medicaid and D-SNP plans as the UnitedHealthcare Community Plan.
- In 2021, UHC implemented the Indiana Medicaid Hoosier Care Connect Program which currently has 6,000 members.
- Our Indiana-based leadership team has robust knowledge of Managed Care for Medicaid with a combined 450 years of health care experience.

Helping Hoosiers thrive



BY IMPACTING

- Care centered on member choice
- Quality & equitable outcomes
- Provider & workforce support
- Member & caregiver experience

WITH SOLUTIONS THAT ARE

- Integrated
- Equitable
- Innovative
- Person-centered
- Cost-effective

Helping Hoosiers Thrive with Experience

UHC has partnered with states for over **35 years** to provide LTSS services.

Today, UHC provides managed care to almost **8 million** individuals in 31 states plus Washington DC.

UHC has LTSS programs in **10 states** and Washington DC serving **350,000** lives.

Our current Indiana D-SNP program serves **28,000** members.

Current UHC Footprint

	AZ	CA	CO	DC	DE	FL	GA	HI	IA	IN	KS	KY	LA	MA	MD	MI	MO	MS	NC	NE	NJ	NV	NY	OH	OK	PA	RI	TN	TX	VA	WA	WI
LTSS	✓			✓		✓		✓			✓			✓							✓			✓				✓	✓	✓		
ABD	✓	✓	✓			✓		✓		✓	✓	✓	✓		✓	✓		✓		✓	✓	✓	✓	✓		✓	✓	✓		✓	✓	✓
D-SNP	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓

Vision for Indiana: Care Coordination and Service Coordination

Helping Hoosiers thrive by focusing on caring for both the member and those who provide support for community living.

Delivering person-centered support which promotes a member-driven care planning process leading to the quality outcomes most important to the member.

Building a member-centric care and service coordination team focused on achieving quality outcomes for members and their families.

UHCCP AAA/ICM Partnership Experience

Strong partners



We seek strong partnerships with organizations that are:

- Focused on providing comprehensive, person-centered care to all members
- Accountable and collaborative
- Able to engage in rigorous review and reporting as required by the State contract
- Uphold conflict free service coordination



Strong outcomes



We strive for strong outcomes driving quality member care like:

- Tennessee: 95% compliance or better on service coordination plan goals matching member needs
- Hawaii: 87% overall satisfaction with LTSS care management program
- Ohio: 97% of LTSS members receiving services each month

Vision for Indiana: Quality and Training



4 weeks of onboarding training with ongoing learning opportunities such as learning circles, practice modules and skills testing



Required cultural awareness and health equity training



Willing to work with the State and stakeholders on any statewide service coordinator trainings the State may wish to offer



Quality assurance monitoring activities

Vision for Indiana: Contracting Process



Express interest!



Discuss current capabilities



Mutually determine the best path forward



Develop written agreements



Adopt FSSA quality metrics



Stay connected

We Are Here for Questions. Feel free to email us at IN_Service_Coordination@uhc.com

Helping Members Lead MLTSS Service Planning



Service Plan evolves
Continuous member, SC, ICT dialogue



**Service
Coordinator**



**Other ICT
Team Members**



Providers



**Care
Coordinator**

UnitedHealthcare MLTSS Facilitators

Bringing It All Together

- **Care Coordinators are clinical staff who:**
 - Conduct the CHAT assessment
 - Lead overall care plan development
 - Ensure clinical oversight of the member's care to meet quality standards and outcomes, ultimately achieving the member's goals, and if desired assisting them to age in place
- **Service Coordinators are non-clinical staff who:**
 - Conduct all ongoing assessments
 - Coordinate the services necessary to fulfill the person-centered service plan including:
 - Referrals for caregiver support and in home supports
 - Schedules DME/supplies, transportation and meals
 - Coordinate with care coordinators for any clinical issues that arise



Sally Johnson | 68

Member with dual-eligibility receiving Complex Care Coordination with HCBS services; Lives in Indianapolis.

- Living at home with her sister Cora; Struggles with mobility, mild dementia and independence
- Diabetic but wants better control and no ER visits
- Social isolation with the pandemic; Gets “the blues”
- Initially FFS Medicare with transition to UnitedHealthcare D-SNP 3 months later

Sally's Coordinators



Megan

Care Coordinator
Single Point of Contact



Katie

AAA Service
Coordinator



Jamie

Member Services
Navigator

Care & Service Coordination Support & Action

- Home delivered meals, homemaking services, personal care aide, home modification evaluation (Katie)
- Support for diabetes and medication management (Megan)
- Caregiver support (Katie)
- Socialization at local senior center and church engagement (Katie)

“I want to be safe at home, with my family. I want to be around people, maybe church or bingo. I know Cora is tired. I want support so we can enjoy life and be healthier.” – Sally



Thank you!

United
Healthcare®



Stretch Break



Roundtable Time

00 : 20 : 00

>

Change Clock Type

Digital

Duration: 00 20 00

TimeUp Reminder (Optional): -- 03 --

Choose Sound Effect None

Choose TimeUp Sound None

Enable Count Up Combine With Bar Clock

Start

Pause

Stop

Reset

Questions?
Send them to
backhome.indiana@fssa.IN.gov

Thank you for attending