Partnering with SHIPs to Improve Care for Dually Eligible Beneficiaries

March 29, 2018
1:00-2:00 pm Eastern Time
Agenda

• Overview of State Health Insurance Assistance Program (SHIP) Partnership Opportunities
• Community HealthChoices: Working with SHIP Partners before and after Program Launch
• Healthy Connections Prime & SHIP Program Training
• Questions
• Concluding Remarks
Presenters

• Alexandra Kruse, ICRC
• Kevin Hancock, Acting Deputy Secretary, Office of Long Term Living, Pennsylvania Department of Human Services
• Darlene Sampson, APPRISE Director, Pennsylvania Department of Aging
• Dustin Welch, Program Coordinator II, South Carolina Department of Health and Human Services
Overview of SHIP Partnership Opportunities
About SHIPs

• State Health Insurance Assistance Programs (SHIPs) provide local, in-depth, and objective insurance counseling and assistance to Medicare-eligible individuals, their families, and caregivers.

• **Local Names:** The SHIP in your area may use a different name and acronym, such as APPRISE, HICAP, or SHINE, to name a few. In spite of differing names, all SHIPs provide the same Medicare counseling and assistance services to the public.

• **Locations:** SHIPs operate in all 50 states, the District of Columbia, Guam, Puerto Rico, and the U.S. Virgin Islands.

• **Funding:** SHIPs are grant-funded projects of the federal U.S. Department of Health & Human Services (HHS), U.S. Administration for Community Living (ACL).


SHIP National Technical Assistance Center [www.shiptacenter.org](http://www.shiptacenter.org)
Potential Medicaid and SHIP Program Linkages

• Potential SHIP roles in states with MLTSS and/or integrated care:
  • Counsel beneficiaries on new enrollment options
  • Understand MLTSS/D-SNP enrollment process and potential for alignment
  • Offer feedback on enrollment materials as requested

• Other linkage opportunities between Medicaid agencies/SHIPs:
  • Medicaid agency and SHIP work closely together prior to program launch
    • Educational presentations
    • Clarify roles and responsibilities between SHIP, plans, and enrollment broker
    • Development of counselor tip sheets
  • Medicaid agencies provide on-going program updates to SHIPs
  • Cross-training on Medicare/Medicaid topics
  • Medicaid agencies can ask plans for dedicated telephone lines for SHIP use
  • Medicaid agencies promote SHIPs as trusted resource for information
Community HealthChoices: Working with SHIP Partners before and after Program Launch
Partnering with SHIPs to Improve Care

APPRIZE Support of CHC Rollout

Kevin Hancock
Acting Deputy Secretary
OFFICE OF LONG-TERM LIVING
DEPARTMENT OF HUMAN SERVICES

Darlene Sampson
APPRIZE Director
PENNSYLVANIA APPRISE PROGRAM
DEPARTMENT OF AGING

March 29, 2018
WHAT IS COMMUNITY HEALTHCHOICES (CHC)?

A Medicaid managed care program that includes physical health benefits and long-term services and supports (LTSS). The program is referenced to nationally as a managed long-term services and supports program (MLTSS).

WHO IS PART OF CHC?

• Individuals who are 21 years of age or older and dually eligible for Medicare and Medicaid.
  ✔ Individuals with intellectual or developmental disabilities who are eligible for services through the Office of Developmental Program will not be enrolled in CHC.

• Individuals who are 21 years of age or older and eligible for Medicaid (LTSS) because they need the level of care provided by a nursing facility.
  ✔ This care may be provided in the home, community, or nursing facility.
  ✔ Individuals currently enrolled in the LIFE Program will not be enrolled in CHC unless they expressly select to transition from LIFE to a CHC managed care organization (MCO).

WHO IS NOT PART OF CHC?

• People receiving long-term services & supports in the OBRA waiver & are not nursing facility clinically eligible (NFCE)

• A person with an intellectual or developmental disability receiving services through the Department of Human Services’ Office of Developmental Programs

• A resident in a state-operated nursing facility, including the state veterans’ homes
420,618
CHC POPULATION

94%
DUAL-ELIGIBLE

12% 49,759
Duals in Waivers

64% 270,114
Healthy Duals

18% 77,610
Duals in Nursing Facilities

4% 15,821
Non-duals in Waivers

2% 7,314
Non-duals in Nursing Facilities
WHAT ARE THE GOALS OF CHC?

**GOAL 1**
Enhance opportunities for community-based living.

**GOAL 2**
Strengthen coordination of LTSS and other types of health care, including all Medicare and Medicaid services for dual eligibles.

**GOAL 3**
Enhance quality and accountability.

**GOAL 4**
Advance program innovation.

**GOAL 5**
Increase efficiency and effectiveness.
Regional Phase In

Five Geographic Zones

Phase One
January 1, 2018: Southwest Zone

Phase Two
January 1, 2019: Southeast Zone

Phase Three
January 1, 2020: Lehigh/Capital Zone Northwest Zone; and Northeast Zone

Three managed care organizations supporting all five CHC zones:

- Amerihealth Caritas
- UPMC Community HealthChoices
- Pennsylvania Health and Wellness (Centene)
APPRISE Program in Pennsylvania
The APPRISE program is designed to help older Pennsylvanians with Medicare.

Counselors are specially trained staff and volunteers who can answer questions about Medicare and provide objective, easy-to-understand information about Medicare, Medicare Supplemental Insurance, Medicaid, and Long-Term Care Insurance.

APPRISE counselors support:
- Understanding Medicare benefits by explaining what services are covered under Medicare Parts A and B and Medicare Summary Notice
- Understanding Medicare Prescription Drug (Part D) benefit
- Making informed choices about Medicare coverage options, Medigap policies and Medicare Advantage Plans
- Understanding Medicare eligibility and enrollment
- Understanding financial assistance programs that may be available to help pay for Medicare premiums, deductible and co-pays, as well as prescription drug needs (Extra Help and Medicare Savings Plan)
- Understanding and assisting with the Medicare appeal process
- Understanding benefits under Long Term Care policies
- Making presentations on Medicare to groups or organizations
- Understanding of Medicare coordination with other insurances, such as Medicaid
APPRISE SUPPORT OF CHC ROLLOUT
Stakeholder Engagement

- Early engagement (2015) of the APPRISE Program and APPRISE counselors to discuss CHC
- Incorporation of APPRISE counselor and program staff comments into the CHC Agreement for health plans and overall program design
  - MIPPA agreement
  - Request for Proposal
  - Participant/Provider educational materials
  - Waiver application to CMS
- Use of APPRISE counselors in CHC participant education and outreach efforts
  - Community forums hosted by state contractor
  - Open Enrollment Period
- APPRISE-counselor specific training on CHC
  - Overview Training
  - Updates
  - Counseling script sheets
- Medicare training by APPRISE counselors for CHC operations staff
Ongoing Operations

• Participation in Dual Eligible Special Needs Plan coordination efforts with CHC
• Supporting efforts for Medicare education with CHC-MCOs and CHC participants
Healthy Connections Prime and SHIP Program Training
Healthy Connections Prime

Healthy Connections Prime & SHIP Counselor Interactions
March 29, 2017
Agenda

• Overview of Healthy Connections Prime
• SHIP, SC Thrive, and SCDHHS Roles
• Training and Lessons learned
• Recommendations
Overview of Healthy Connections Prime
Healthy Connections Prime is available

Overview

- **Enhanced program** for seniors age 65 and older with Medicare and Medicaid

- **Healthy Connections Prime** is part of a **national initiative** jointly administered by CMS and South Carolina Department of Health and Human Services (SCDHHS), designed to integrate all the services of Medicare, Medicare Part D, and Medicaid under a **single Medicare-Medicaid plan** (MMP)

- **39 counties** participating

- **3 MMPs** participating:
  - Absolute Total Care
  - FirstChoice VIP Care Plus
  - Molina Healthcare

Healthy Connections Prime is available
Healthy Connections Prime is not yet available
SHIP, SC Thrive, and SCDHHS Roles

• SHIP counselors serve as a key point of contact for dually eligible members often being a trusted ‘first point of contact’ for members.

• SCDHHS partners with SC Thrive to conduct ‘grass roots’ education and outreach for Healthy Connections Prime members throughout South Carolina.

• SC Thrive is a nonprofit partnering with SCDHHS to provide resources for Medicaid and Medicare eligible populations (https://scthrive.org/prime) along with offering support for tax assistance, SNAP benefits, Military and Veteran support, and TANF assistance.

• SC Thrive conducts educational activities for:
  • Beneficiaries (enrolled and not yet enrolled)
  • Advocates (includes SHIP Counselors)
  • Caregivers
  • Providers
Training and Lessons Learned

• SCDHHS has conducted in person trainings on Healthy Connections Prime early in the demonstration while SC Thrive continues ongoing educational efforts in different counties throughout the state at the county level.

• SC Thrive maintains an in-person training schedule with SHIP and has completed 26 trainings in 2017, and aims for 39 by June 30, 2018.

• SHIP counselors are genuinely interested in Healthy Connections Prime and express need for real-time information; these individuals have as much impact as primary care providers when it comes to member contact and influence.

• Experience thus far shows that counselors want to ensure they are providing clear information for beneficiaries; they are neutral in their discussions regarding demonstration duration.

• Once the ‘new program’ is explained, member and counselors are more engaged but want clear direction of what happens at the end of a demonstration.
Recommendations

• Based on first hand experience, South Carolina recommends clear and constant communication with key partners to ensure informational ‘static’ is reduced.
• Repository – We maintain a member and advocate toolkit on our website www.scdhhs.gov/prime where information is always up to date for various target audiences.
• Reinforce – Partnerships with non-profits such as SC Thrive allow us to have ‘boots on the ground’ in the communities to provide ongoing education with SHIP counselors who are then ready to work directly with our dually eligible population.
About ICRC

• Established by CMS to advance integrated care models for dually eligible beneficiaries

• ICRC provides technical assistance (TA) to states, coordinated by Mathematica Policy Research and the Center for Health Care Strategies

• Visit http://www.integratedcareresourcecenter.com to submit a TA request and/or download resources, including briefs and practical tools to help address implementation, design, and policy challenges

• Send other ICRC questions to: integratedcareresourcecenter@chcs.org