



Medicare-Medicaid Plan (MMP) Transition Planning

April 2023

**RHODE
ISLAND**

Meeting Objectives

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1. **Review: Plan for MMP Transition** (Neighborhood Integrity)
2. **Discuss Important Member Considerations**
 - What elements of the MMP are most important to keep?
 - Are there any services you wish were covered in your current plan that are not?
 - What changes would you recommend to the Neighborhood MMP enrollment process?
3. **Outline next steps** and opportunities for stakeholder input
4. **Hear** your questions and anticipated challenges

Note that we will be recording today's meeting. We will be using the recording as a reference for compiling notes to ensure we have not missed any feedback provided.

Vision and Mission

OUR VISION

- **Resilient, equitable, and just communities nurturing the health, safety, wellbeing, and independence of all Rhode Islanders.**

OUR MISSION


- **To foster and strengthen a community-driven, equitable, comprehensive, responsive, and high-quality health and human services system in Rhode Island.**

Starting Point and Goals

In May 2022, the Centers for Medicare and Medicaid Services (CMS) announced that it would be sunsetting the MMP. Rhode Island is in the process of developing a replacement.

Starting Point: The Medicare-Medicaid Plan (MMP) Demonstration



You may know the MMP as Neighborhood INTEGRITY or the Integrated Care Initiative (ICI) in RI. **INTEGRITY** 



The MMP coordinates both Medicare and Medicaid benefits into **one, integrated delivery system** for eligible members.



The MMP began in July 2016 as a **demonstration program** in partnership with CMS, the state of Rhode Island and Neighborhood Health Plan of RI



MMPs promote **streamlined care for dual eligible members with one insurance ID card and better care coordination**. Providers only bill one insurance company for these members.

Goal: To Carry Forward the Success

- On a scale of 1 to 5, **95%** of focus group participants rated their experience in the MMP as a **4 or 5**
- Participants were generally satisfied with access to patient-centered care and patient engagement.
- Members mentioned a single member ID card, care coordination, quality, and array of services as specific benefits of the MMP.

“My care coordinator [is] my guardian angel. She’s there every second and every minute. I have a hard time getting to the things that I need for prescriptions and stuff...so she gets right on it. She’s just there. She’s my best friend.”

— Focus Group Participant (2018)

What is Changing About the MMP and Why

New Federal Rules

- In May, the Centers for Medicare and Medicaid Services (CMS) which has directed the MMP demonstration, announced that it would be **sunsetting the MMP/Neighborhood's Integrity Program**.
- CMS gave states the option to apply to extend the MMP program for two additional years and to build a new program that incorporates the benefits of the current MMP with some additional benefits by **submitting a transition plan by October 1, 2022**.

New Program: Integrated D-SNP

- The new program will be an integrated delivery system called a **Dual Eligible Special Needs Plan (D-SNP)** and, unlike the MMP, will be permanently authorized.

Rhode Island's Action Steps

- Rhode Island submitted the transition plan to CMS and **received approval to allow the current MMP to continue through December 31, 2025**.
- During the next several years, RI will take advantage of this time to design a new MMP like program, working with stakeholders throughout the process to provide input for how to build a successful program
- A copy of the Transition Plan can be found at [MMP Transition Plan | Executive Office of Health and Human Services \(ri.gov\)](#)

What is an Integrated D-SNP and What Benefits Does it Offer?

What is an Integrated D-SNP?

- A dual eligible special needs plan
- Created to coordinate benefits between Medicare and Medicaid
- *D-SNPs, including integrated D-SNPs, are permanently authorized to serve dual beneficiaries, unlike the MMP, which was a temporary demonstration to test benefits of financial alignment*

What benefits will the integrated D-SNP include?

- Single ID card for or both Medicare and Medicaid benefits
- Comprehensive, coordinated benefits package
- Unified, plan level appeals and grievances processes
- Streamlined and integrated member materials
- More seamless care coordination under the same parent organization
- One customer service number
- Simplified provider billing

Member Considerations

The most critical consideration is that members continue to receive the benefits realized in the MMP, with as seamless a transition as possible.

- In summer of 2022, EOHHS held stakeholder meetings to help to inform key considerations of the MMP transition plan
 - Stakeholders expressed support for continuing an “MMP like” program and a strong desire to see the benefits of the MMP continued in any future program.
- Specific benefits of the MMP that were emphasized by stakeholders included:
 - Integrated member materials and services
 - Integrated Care Coordination
 - The ICI (MMP) Member Council
 - The Medicare-Medicaid Enrollment (MME) Counseling program
 - A Medicaid Fee for Service (FFS) option – outside of managed care

These are all elements that the State intends to keep after the MMP ends

Discussion Questions:

- 1) What elements of the MMP are most important to maintain from a member perspective?
- 2) What elements of the demonstration should be changed to improve the member experience?
- 3) Does your Neighborhood Care Team and Care Manager help make sure you get the care you need? If you have a question about getting behavioral health services, transportation, or long-term services and supports, do you know who to call? Are they helpful?

Member Considerations: Covered Services

Rhode Island's intends that the services covered in the new Integrated D-SNP mirror the services covered by the MMP Program

Covered Services (In Plan)

Services provided & coordinated by the MMP

- Primary & Specialty Care
- Acute Care
- Pharmacy
- Behavioral Health
- Long term services & supports (LTSS) including:
 - coverage of 365 days of stay in a skilled nursing facility
 - home and community-based services

Covered Services (Out of Plan) *carved out of the MMP Contract*

Services carved out / provided fee-for-service

- Residential services for I/DD enrollees
- Non-emergency transportation services
- Dental services
- Home stabilization services

Discussion Questions:

What changes to the MMP covered benefits would you recommend for the new integrated D-SNPs? Are there supplemental benefits that you hope to keep (i.e., health food savings card, papa pals)?

Member Considerations: Plan Options and Member Choice

- RI intends to promote active member choice supported by default enrollment for new dually eligible members to ensure continuity of care

Member makes active choice	All Duals	<ul style="list-style-type: none"> State promotes active member choice through unbiased enrollment counseling Choice of Model: Integrated D-SNP/Aligned MLTSS, Medicaid FFS or PACE
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If Member **DOES NOT** make an Active Choice:

Current Dual Eligible Members	Group 1: NHPRI MMP Duals	<ul style="list-style-type: none"> Enrollment into NHPRI Integrated D-SNP/Aligned MLTSS (least disruptive) or a comparable Integrated D-SNP, should NHPRI not offer one Option to opt-out to an alternate Integrated D-SNP, Medicaid FFS or PACE (if eligible)
	Group 2: Medicaid FFS Duals	<ul style="list-style-type: none"> Remain in Medicaid FFS Option to opt-in to an Integrated D-SNP or PACE
New Dual Eligible Members	Group 3: Prior Medicaid Eligible, Newly Medicare Eligible	<ul style="list-style-type: none"> RI intends to pursue a default enrollment mechanism* through which eligible Medicaid beneficiaries who become newly eligible for Medicare (new FBDEs) are enrolled into the Integrated D-SNP that aligns with their existing Medicaid managed care plan Option to opt-out to an alternate Integrated D-SNP, alternate Medicare plan/Medicaid FFS or PACE
	Group 4: Prior Medicare Eligible, Newly Medicaid Eligible	<ul style="list-style-type: none"> Enrollment into Medicaid FFS Option to opt-in to an Integrated D-SNP or PACE

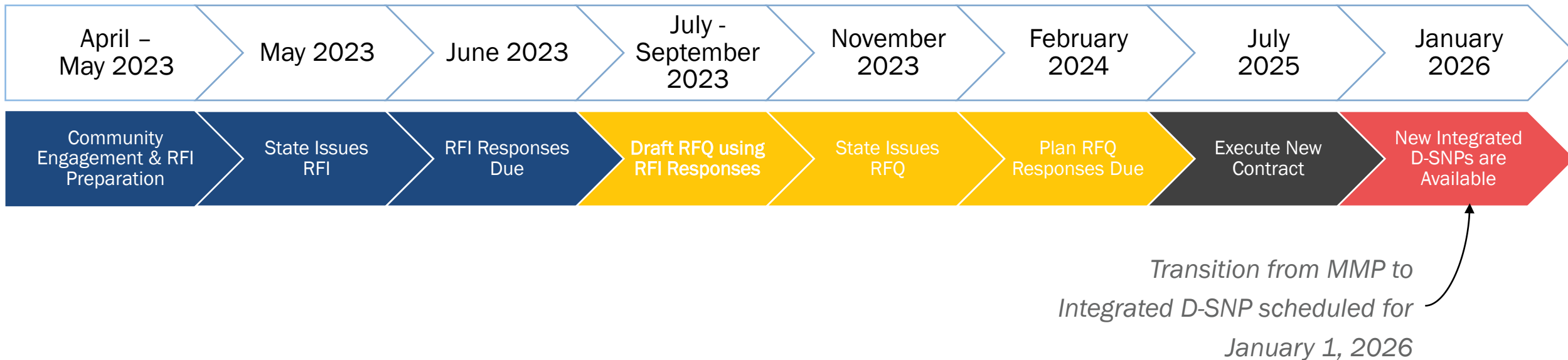
*With CMS Approval

Discussion Questions:

- What factors should EOHHS consider in educating and reaching out to members to encourage members to make an informed and active selection?
- Does the enrollment process for Neighborhood MMP members make sense (Group 1)? The enrollment process for new duals (Group 3)?

Next Steps: Request For Information (RFI)

- Once stakeholder sessions have concluded, the state will issue an RFI to hear feedback from Rhode Islanders regarding their needs and aims for the program
- The RFI will include high-level questions and detailed technical questions specific to content discussed today for feedback and consideration
- A tentative timeline of next steps is presented below





Questions?

Thank You

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Appendix

Core Values

VOICE



Consumer, Provider, and Community Voice

- Ensure that the voices of our communities are heard and respected without assuming we know what is best.
- Intentionally involve community members in programs and policies from the onset and purposefully ask “what is needed?” throughout the process.
- Create a new balance of power by committing to transparency, accountability, and partnerships.

CHOICE



Responsive to the Uniqueness of Every Individual

- The needs and aspirations of individuals, families, and community are heard, valued, and respected.
- The whole person, the family unit, and the community in which they live are recognized.
- Policies and systems have options that allow people to exercise choice and make healthy decisions.

EQUITY



Achieving Equity for All

- Ensuring that all Rhode Islanders have the resources and opportunity to achieve their full potential.
- Meeting the needs of all people regardless of gender, gender identity, sexual orientation, race/ethnicity, age, and disability status.
- Asking “what role, if any, is race, racial discrimination, and social injustice playing in our decision making?”

Health and Human Service Priorities

PRIORITY 1:

Focus on the root causes and the socioeconomic and environmental determinants of health that ensure individuals can achieve their full potential.

PRIORITY 2:

Promote continuums of care that deliver efficient, effective, and equitable services across the life course.

PRIORITY 3:

Address addiction, improve the behavioral health system, and combat stigma, bias, and discrimination.

PRIORITY 4:

Develop and support a robust and diverse health and human services workforce to meet the needs of every Rhode Islander.

PRIORITY 5:

Modernize, integrate, and transform health information technology and data systems to support value-based systems of care.

What Coverage Options are Available for Dual Eligibles?

EOHHS anticipates four possible comprehensive Medicare/Medicaid coverage options for dual eligible Rhode Islanders

		Medicare Coverage Options for FBDEs				
		PACE	Medicare Advantage Integrated D-SNP	Medicare Advantage Non-D-SNP	Medicare FFS/Other	
Medicaid Coverage Options for FBDEs	PACE*	Option 1				
	Integrated D-SNP/ Aligned MLTSS <i>(MMP Replacement Plan)</i>		Option 2 <i>(with choice of integrated Medicare/Medicaid plans A, B, C)</i>			
	Medicaid FFS			Option 3	Option 4	
			Integrated Options <i>strongly encouraged</i>		Non-Integrated Options	

*To qualify for PACE:

- must be 55 or older,
- need nursing home level of care, and
- be able to live safely in the community with help from PACE

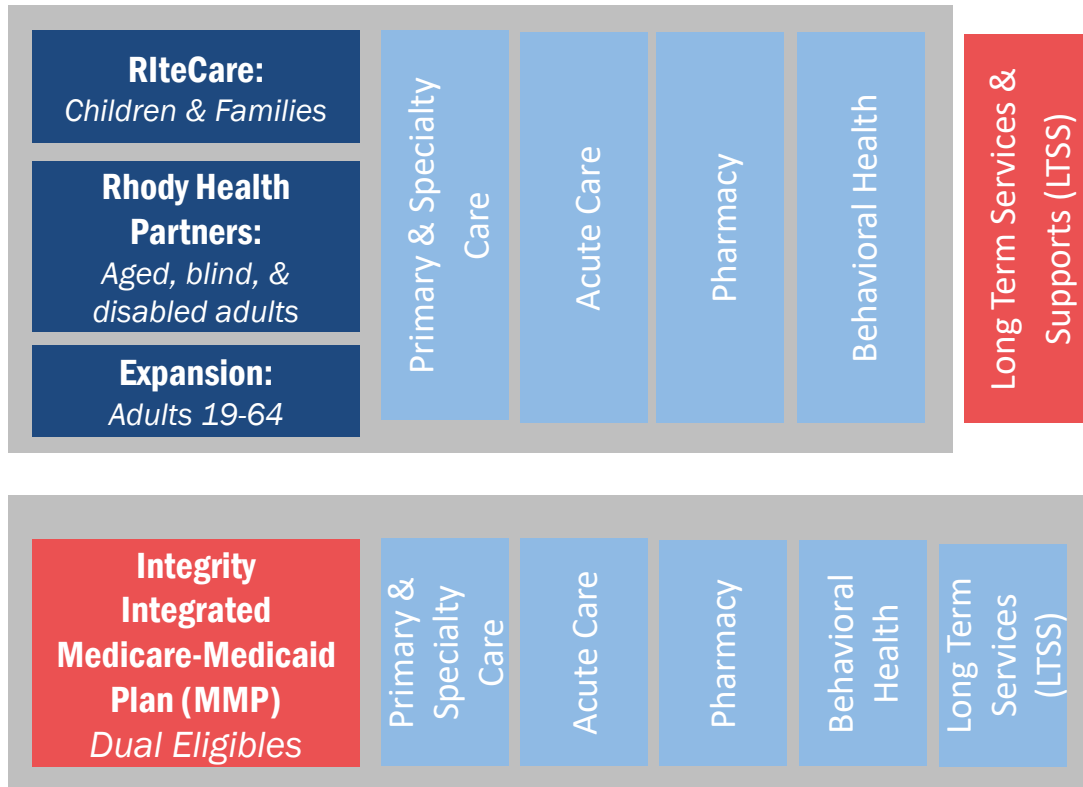
Discussion Questions:

- Are these the right choices? Are there others you would anticipate?
- Should there be fewer or more?

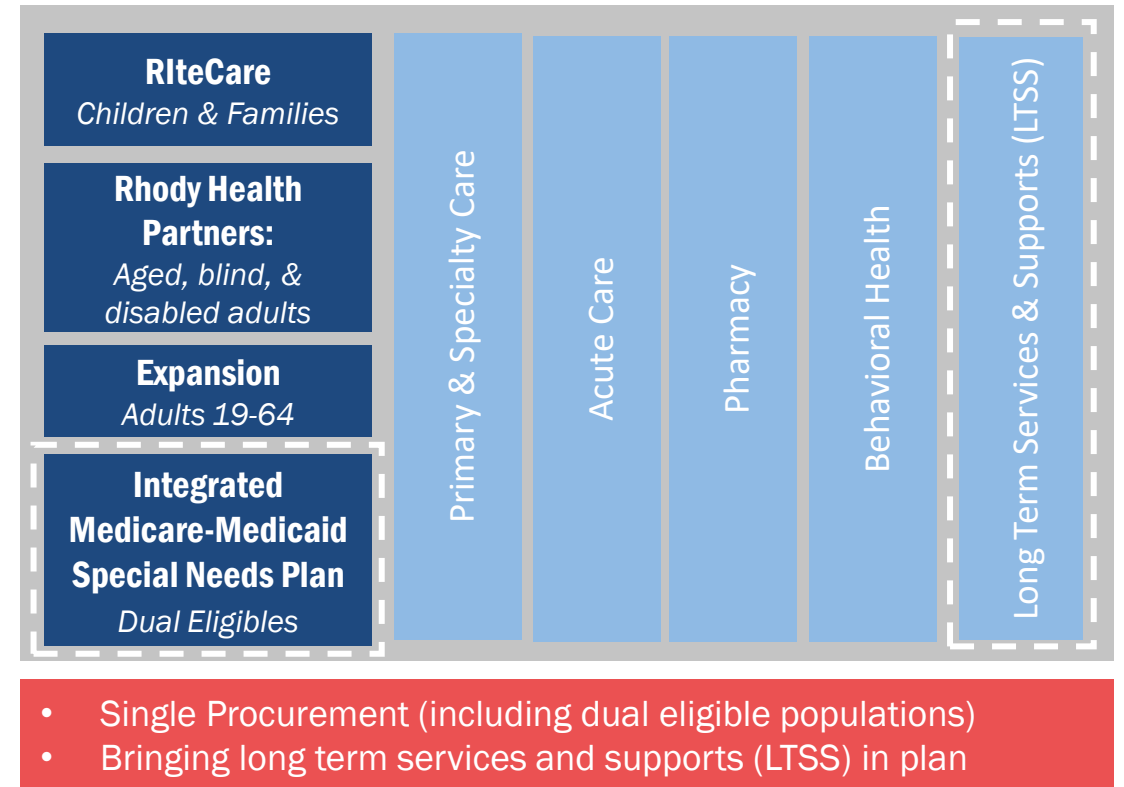
Where we are headed

— The purpose of this stakeholder engagement is to provide an opportunity for feedback on new elements of the 2023 managed care contract procurement.

Current RI Medicaid Managed Care Model

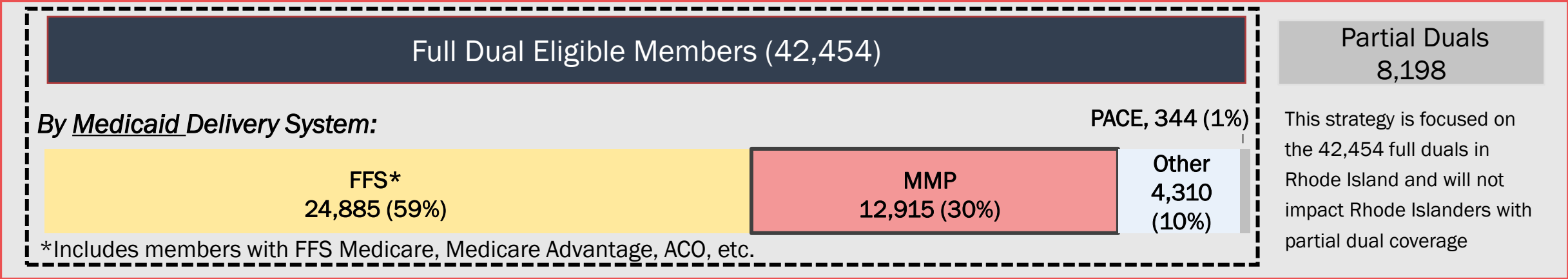


Future RI Medicaid Managed Care Model



Impacted Population: Rhode Island Duals

Currently about 42,000 Rhode Islanders are full duals, and only 30% of Rhode Islands duals are experiencing the advantages of an integrated Medicare-Medicaid model of care.



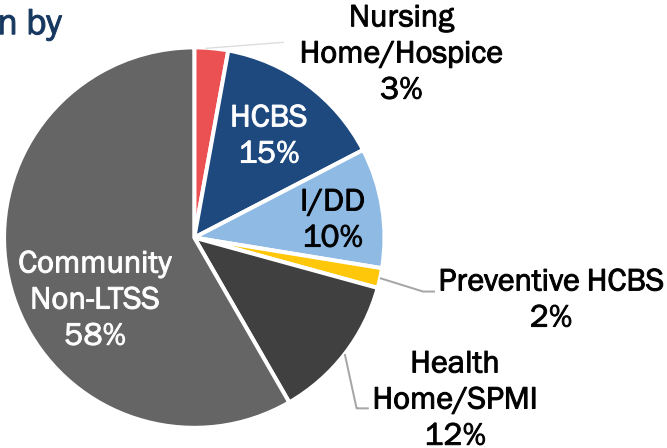
Who does the MMP serve?

- A dually eligible individual is someone who is jointly eligible for both Medicare and Medicaid
- Dually eligible individuals are a high, complex need group
- 18% of MMP population are eligible for LTSS NH/HCBS – the MMP is the only managed care plan in RI with LTSS in-plan

Glossary

LTSS – Long Term Services and Supports
 NH – Nursing Home
 FFS – Fee for Service
 HCBS – Home and Community Based Services
 I/DD – Intellectually and Developmentally Delayed
 SPMI – Severe and Persistent Mental Illness

MMP Composition by Sub-population (2022)



Population Data Source: June 30, 2022 Snapshot

Rhode Island's Vision & Goals for the MMP Transition

The most critical consideration is that members continue to receive the benefits realized in the MMP, with as seamless a transition as possible.

Vision

An integrated Medicare-Medicaid system that promotes person centered member choice and enables vulnerable populations to access and navigate high-quality, equitable care and services with ease.

Goals

- 1 Provide services in least restrictive, most comfortable, member preferred settings
- 2 Improve member experience by reducing duplication and fragmentation
- 3 Create the right financial incentives to deliver person-centered, efficient care
- 4 Equitably improve health outcomes and quality of life for older Rhode Islanders & people with disabilities
- 5 Enable members to seamlessly navigate continuous, coordinated care with fewer transitions